DATE	OAG	RECEIVED	Management street,



PEACE OFFICER INVOLVED INJURIES OR DEATH REPORT

As required by Art. 2.139 of the Texas Code of Criminal Procedure, law enforcement agencies shall report all officer-involved injuries or deaths caused by the discharge of a firearm. Pursuant to the requirements of Art. 2.139, the following reporting form has been created for reporting such incidents.

"Officer-involved injury or death" means an incident during which a peace officer discharges a firearm causing injury or death to another." Art. 2.139 Code of Criminal Procedure.

Email completed form to: officershootingreport@texasattorneygeneral.gov

DATE OF REPORT 06/08/2016			
AGENCY/FACILITY INFORMATION			
Name of Agency/Facility Mesquite	Police Department		
Address 777 North Galloway			
_{City} Mesquite		Zip Code 75149	
Telephone Number (972) 216-66	325	2	
Signature of Director of Agency/Facilit		1. 1500	
Name of Person Filling Out Form Sgt	t. Mike Parker	0	
Email of Person Filling Out Form mp	arker@mesquitepolice.	org	
1. WHAT WAS THE INJURED OR DECEAS	ED'S GENDER?	8. WHAT WAS THE PEACE OFFICER'S GENDER?	
		Male □ Female	
2. WHAT WAS THE INJURED OR DECEAS	ED'S AGE AT TIME OF INCIDENT?	9. WHAT WAS THE PEACE OFFICER'S AGE AT THE TIME OF THE INCIDENT?	
30 years, 7 months	☐ Not Available	31 years, 5 months	
3. WHAT WAS THE INJURED OR DECEAS (Mark one based on information reported on identification card application, or other government	state driver license application, state nent reported identification if available	10. WHAT WAS THE PEACE O	
	nd known. If not available, mark not available.)		☐ Black or African American
	ack or African American	or Alaska Native	☐ Hispanic or Latino
	spanic or Latino	Anglo or White	□ Other
☐ Anglo or White ☐ Oth		Asian or Pacific Islander	
☐ Asian or Pacific Islander ☐ Not	t Available	11. DURING THE INCIDENT, F	PEACE OFFICER WAS:
4. DATE OF INCIDENT	2016	☑ On Duty ☐ Off Duty	
Month June Day 5 TIME: Hour 7 Min	12 AM Ø PM	12. PEACE OFFICER WAS RES OR MORE OFFICERS:	SPONDING TO CALL OR REQUEST WITH ONE
5. LOCATION OF INCIDENT		☑Yes □ No	
Street address 8032 Ferguson F	₹d.	13 INCIDENT OCCUPATA DU	DING OD AG A DEGUAT OF A
_{City} Dallas		13. INCIDENT OCCURRED DURING OR AS A RESULT OF A:	
County Dallas	_{Zip} 75228	✓ Emergency Call or Request for Assistance ☐ Traffic stop	
		- 23	
6. INCIDENT RESULTED IN: Injur	y Death	☐ Execution of a warrant	
7. INJURED OR DECEASED PERSON:		☐ Hostage, barricade, or other emergency situation ☐ Other — Specify type of call	
☑ Carried, exhibited or used a deadly w	veapon	Li other – specity type of ca	
☐ Did not carry, exhibit or use a deadly	weapon		