

Peace Officer Involved Injuries or Death Report

Agency/Facility Information

Date Received: 4/10/2018

Date Uploaded: 4/11/2018

Date of Report: 4/10/2018 Amended Date:

Version Type: ORIGINAL

Name of Agency/Facility: Austin Police Department Street Address: P.O. Box 689001

City: Austin Zip Code: 78768

Agency Phone Number: 512-974-5338 Director Salutation: Chief

Director First Name: Brian Director Middle Name:

Director Last Name: Manley

Name of Person Filling Out Form:

Lt. Kurt Thomas

Email of Person Filling Out Form:

kurt.thomas@austintexas.gov

Injured or Deceased Information

1. What was the injured or deceased's gender?:

2. What was the injured or deceased's age at time of 23

incident?:

3. What was the injured or deceased's race/ethnicity? Anglo or White (Mark only one):

Incident Details

4. Date of Incident: 3/20/2018 7:00 PM

5. Location of Incident

Street Address: 1730 N IH 35 SB

Frontage

City: Round Rock

County: Williamson

State: TX

Zip: 78681

6. Incident Resulted In: Death

7. Injured or Deceased Person::

Carried, exhibited, or used a deadly

weapon

Peace Officer Information

PLEASE CLICK THE **ADD PEACE OFFICER** BUTTON TO ENTER INFORMATION ABOUT **EACH PEACE OFFICER INVOLVED**.

Peace Officer's Gender	Peace Officer's Age	Peace Officer's Race/Ethnicity	Peace Officer On Duty?
Male	36	Hispanic or Latino	On Duty

Response/Incident Result Information

12. Peace Officer was responding to call or request Yes with one or more officers::

13. Incident occurred during or as a result of a (hold down CTRL on your keyboard to select more than one value)::

Specify type of call:

High risk vehicle take down during attempt to arrest local bombing suspect