



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 or Fax completed form to: officershootingreport@texasattorneygeneral.gov **or** Fax (512)463-9912

DATE OF REPORT 12/09/2015

AGENCY/FACILITY INFORMATION

Name of Agency/Facility JAL POLICE DEPARTMENT
Address 3421 STATE ROAD 18 JAL NM P.O. DRAWER W
City JAL , NEW MEXICO Zip Code 88252
Telephone Number (575) 395-2501
Signature of Director of Agency/Facility (Required) [Signature]
Name of Person Filling Out Form MAURICIO VALERIANO
Email of Person Filling Out Form m.valeriano@cityofjal.us

1. WHAT WAS THE INJURED OR DECEASED'S GENDER?

Male Female

8. WHAT WAS THE PEACE OFFICER'S GENDER?

Male Female

2. WHAT WAS THE INJURED OR DECEASED'S AGE AT TIME OF INCIDENT?

31 Not Available

9. WHAT WAS THE PEACE OFFICER'S AGE AT THE TIME OF THE INCIDENT?

36

3. WHAT WAS THE INJURED OR DECEASED'S RACE/ETHNICITY?

(Mark one based on information reported on state driver license application, state identification card application, or other government reported identification if available and known. If not available, mark not available.)

American Indian Black or African American
or Alaska Native Hispanic or Latino
 Anglo or White Other
 Asian or Pacific Islander Not Available

10. WHAT WAS THE PEACE OFFICER'S RACE/ETHNICITY?

(Mark only one)

American Indian Black or African American
or Alaska Native Hispanic or Latino
 Anglo or White Other
 Asian or Pacific Islander

4. DATE OF INCIDENT

Month November Day 30 Year 2015

11. DURING THE INCIDENT, PEACE OFFICER WAS:

On Duty Off Duty

5. LOCATION OF INCIDENT

Street address HWY 115
City _____
County Winkler County Zip 79745

12. PEACE OFFICER WAS RESPONDING TO CALL OR REQUEST WITH ONE OR MORE OFFICERS:

Yes No

6. INCIDENT RESULTED IN:

Injury Death

13. INCIDENT OCCURRED DURING OR AS A RESULT OF A:

Emergency Call or Request for Assistance
 Traffic stop
 Execution of a warrant
 Hostage, barricade, or other emergency situation
 Other – Specify type of call _____

7. INJURED OR DECEASED PERSON:

Carried, exhibited or used a deadly weapon
 Did not carry, exhibit or use a deadly weapon