# Agency/Facility Information

Date Received: 3/29/2019

Date Uploaded: 3/29/2019

Date of Report: 3/29/2019 Amended Date:

Version Type: ORIGINAL

Name of Agency/Facility: San Antonio Police Street Address: 315 S. Santa Rosa

Dept.

City: San Antonio Zip Code: 78207

Agency Phone Number: (210) 207-7360 Director Salutation: Chief

Director First Name: William Director Middle Name: P.

Director Last Name: McManus

Name of Person Filling Robert Bunnell E

Out Form: Robert Bunnell

Email of Person Filling Out

Form: robert.bunnell@sanantonio.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 26 incident?:

3. What was the injured or

deceased's race/ethnicity? Anglo or White

(Mark only one):

### **Incident Details**

4. Date of Incident: 3/20/2019 5:20 PM

#### 5. Location of Incident

Street Address: 11703 Huebner Rd City: San Antonio

State: TX County: Bexar

Zip: 78207

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**.

8. What was the peace officer's gender?	9. What was the peace officer's age at the time of the incident?	10. What was the peace officer's race/ethnicity? (Mark only one)	11. During the incident, peace officer was:
Male	49	Black or African American	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)::

Other

Specify type of call:

Disturbance with a gun