

U.S. DEPARTMENT OF JUSTICE  
BUREAU OF JUSTICE STATISTICS  
AND ACTING AS COLLECTION AGENT:  
RTI INTERNATIONAL

## ARREST-RELATED DEATHS SUMMARY OF INCIDENTS, 2013



### DATA SUPPLIED BY

<b>Name:</b>	<b>Title:</b>
<b>Agency:</b>	<b>Telephone:</b> ( )
	<b>Fax:</b> ( )
<b>State:</b>	<b>E-mail Address:</b>

### GENERAL INFORMATION

- Arrest-Related Deaths (ARD) data may be submitted quarterly or annually.
- For each arrest-related death, please ensure that you have submitted an ARREST-RELATED DEATHS INCIDENT REPORT (CJ-11A).
- IF NO DEATHS OCCURRED during the reporting period, it is still important that you complete and return this form.
- Please return your completed form (and corresponding CJ-11A forms) within 60 days of the end of the reporting period.

### WHAT DEATHS SHOULD BE REPORTED?

Report all civilian deaths that occur while their freedom to leave is restricted by state or local law enforcement personnel, such as:

- All deaths attributed to **any use of force** by law enforcement personnel (e.g., officer-involved shootings, accidental deaths caused by weapons or tactics)
- Any death that occurs in the presence of law enforcement **prior to, during, or following an arrest**, including deaths that occur:
  - While detained for questioning or investigation (i.e., Terry stop)
  - During the process of apprehension (i.e., pursuit of criminal suspect, standoff with law enforcement)
  - While in the custody of, or shortly after restraint by, law enforcement (even if the decedent was not formally under arrest)
  - During transport to or from law enforcement or medical facilities
  - While confined in lockups or booking centers (i.e., facilities from which arrestees are usually transferred within 72 hours and not held beyond arraignment)
- Any death that occurs during an interaction with law enforcement personnel during **response to medical or mental health assistance** (e.g., response to suicidal persons)

### NUMBER OF DEATHS

- Reporting Period** (please specify):
- Quarter 1 (January 1 – March 31)
- Quarter 2 (April 1 – June 30)
- Quarter 3 (July 1 – September 30)
- Quarter 4 (October 1 – December 31)
- Annual (January 1 – December 31)

**During the specified reporting period, how many arrest-related deaths occurred in your state?** Number of deaths:

Please enter the number of arrest-related deaths that occurred during the specified reporting period and submit this form and corresponding CJ-11A forms to RTI International. There are several ways to submit these data:

**FAX (TOLL-FREE):** 1-877-262-7654  
**E-MAIL:** [ARDHelpDesk@rti.org](mailto:ARDHelpDesk@rti.org)

**MAIL:** RTI International  
Attn: Kevin Strom  
3040 Cornwallis Road, P.O. Box 12194  
Research Triangle Park, NC 27709-2194

If you need assistance with the completion of the CJ-11 or CJ-11A, contact the ARD Help Desk at [ARDHelpDesk@rti.org](mailto:ARDHelpDesk@rti.org) or toll-free at 1-877-475-7039.

#### Burden Statement

Under the Paperwork Reduction Act, we cannot ask you to respond to a collection of information unless it displays a currently valid OMB control number. The burden of this collection is estimated to average 5 minutes per response, including reviewing instructions, searching existing data sources, gathering necessary data, and completing and reviewing this form. Send comments regarding this burden estimate or any aspect of this survey, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, N.W., Washington, DC 20531.

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BUREAU OF JUSTICE STATISTICS

AND ACTING AS COLLECTION AGENT:  
RTI INTERNATIONAL

## ARREST-RELATED DEATHS INCIDENT REPORT, 2013



### DATA SUPPLIED BY

Name:

Title:

Agency:

Telephone:

Fax:

State:

E-mail Address:

### INSTRUCTIONS FOR COMPLETION

- Complete an Incident Report (CJ-11A) for all civilian deaths that occur while the decedent's freedom to leave is restricted by state or local law enforcement personnel – including deaths that occur prior to, during, or following an arrest.
- Complete questions 1 through 22 for each arrest-related death in your jurisdiction. Any additional information or a short narrative of the incident may be provided in the "Notes" section at the end of the CJ-11A.
- Include the decedent's name on both pages 3 and 4 of the CJ-11A.
- Send the completed CJ-11A by **FAX** or **MAIL** to your State Reporting Coordinator (SRC) within 60 days of the arrest-related death. A national listing of SRCs is located on page 2 of this form. If needed, please contact SRCs directly for a mailing address.
- If no arrest-related deaths occurred in your jurisdiction, you will not need to complete a CJ-11A.
- If you need assistance completing the CJ-11A, please refer to the CJ-11A Question-by-Question Guide or contact the Arrest-Related Deaths (ARD) Help Desk at [ARDHelpDesk@rti.org](mailto:ARDHelpDesk@rti.org) or toll-free at 1-877-475-7039.

### WHAT DEATHS SHOULD BE REPORTED?

#### INCLUDE

- All deaths resulting from any use of force by state or local law enforcement personnel.
- All deaths caused by injuries sustained while attempting to elude state or local law enforcement personnel or injuries incurred after custody had been established.
- All deaths attributed to suicide, alcohol or other drug intoxications, or medical conditions (i.e., cardiac arrest) that occur during the process of arrest by or in the custody of state or local law enforcement personnel.
- All deaths occurring in the custody of state or local law enforcement personnel responding to a medical/mental health assistance or welfare call.
- All deaths that occur while confined in lockups or booking centers (i.e., facilities from which arrestees are usually transferred within 72 hours and not held beyond arraignment).

#### EXCLUDE

- Deaths attributed to federal law enforcement personnel (i.e., FBI, DEA).
- Any inmate death that occurred in the custody of local jails, state prisons, state juvenile correctional facilities, or private correctional facilities. These types of deaths should be reported to the Jails and Prisons data collection component of the Deaths in Custody Reporting Program (visit [www.bjsdcrp.org](http://www.bjsdcrp.org)).
- Law enforcement personnel killed in the line of duty or in the course of law enforcement activities.
- Any death of a criminal suspect that occurred before the decedent came into contact with law enforcement (e.g., a decedent with an active arrest warrant who died before law enforcement personnel attempted to apprehend him or her).

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## National Listing of State Reporting Coordinators

**Alabama:** Lynn Childs  
Alabama Criminal Justice Information Center  
PH: (334) 517-2415 FX: (334) 517-2740

**Alaska:** Alan McKelvie  
Alaska Statistical Analysis Center  
PH: (907) 786-1809 FX: (907) 786-7777

**Arizona:** Phillip Stevenson  
Arizona Criminal Justice Commission  
PH: (602) 364-1157 FX: (602) 364-1175

**Arkansas:** Crystal Daye  
Arrest-Related Deaths Program Staff  
PH: (919) 541-7321 FX: (877) 262-7654

**California:** Amber Lozano  
Criminal Justice Statistics Center  
PH: (916) 227-3545 FX: (916) 227-0427

**Colorado:** Laurence Lucerno  
Colorado Department of Public Safety  
PH: (303) 239-4663 FX: (303) 239-4491

**Connecticut:** Ivan Kuzyk  
Connecticut Office of Policy & Management  
PH: (860) 418-6238 FX: (860) 418-6496

**Delaware:** Julia Cahill  
Delaware Statistical Analysis Center  
PH: (302) 739-2589 FX: (302) 739-4630

**District of Columbia:** Sgt. Harry Hill  
Office of the Assistant Chief of Police  
PH: (202) 576-3394 FX: (202) 727-3307

**Florida:** Susan Burton  
Florida Department of Law Enforcement  
PH: (850) 410-7140 FX: (850) 410-7150

**Georgia:** Erin Kennedy  
Arrest-Related Deaths Program Staff  
PH: (919) 485-5736 FX: (877) 262-7654

**Hawaii:** Daniel Kauleinamoku  
Hawaii Department of Public Safety  
PH: (808) 587-1211 FX: (808) 587-1244

**Idaho:** Natalie Warner  
Idaho Department of Corrections  
PH: (208) 658-2127 FX: (208) 327-7480

**Illinois:** Mark Powers  
Illinois Criminal Justice Information Authority  
PH: (312) 793-8550 FX: (312) 793-8422

**Indiana:** Stephanie Rosenberg  
Indiana Department of Corrections  
PH: (317) 234-4417 FX: (317) 233-1474

**Iowa:** Paul Stageberg  
Iowa Division of Criminal & Juvenile Justice Planning  
PH: (515) 242-6122 FX: (515) 242-6119

**Kansas:** Fengfang Lu  
Kansas Sentencing Commission  
PH: (785) 296-0923 FX: (785) 296-0927

**Kentucky:** Marjorie Stanek  
Kentucky Justice & Public Safety Cabinet  
PH: (502) 564-8295 FX: (502) 564-6686

**Louisiana:** Kim Eiland  
Louisiana Department of Corrections  
PH: (225) 342-6630 FX: (225) 342-3095

**Maine:** Mark Belserene  
Office of the Chief Medical Examiner  
PH: (207) 624-7180 FX: (207) 624-7178

**Maryland:** Jeffrey Zuback  
Governor's Office of Crime Control & Prevention  
PH: (410) 821-2855 FX: (410) 321-3116

**Massachusetts:** Lisa Sampson  
Executive Office of Public Safety and Security  
PH: (617) 725-3361 FX: (617) 725-0260

**Michigan:** Elizabeth Arritt  
Michigan State Police  
PH: (517) 241-1907 FX: (517) 241-1904

**Minnesota:** Carolyn Robinson  
Minnesota Bureau of Criminal Apprehension  
PH: (651) 793-1054 FX: (651) 793-1001

**Mississippi:** Alan Thompson  
University of Southern Mississippi  
PH: (601) 266-6172 FX: (601) 266-4391

**Missouri:** Ronald Beck  
Missouri State Highway Patrol  
PH: (573) 751-9000 FX: (573) 526-6274

**Montana:** Sarah Price  
Montana Department of Justice  
PH: (406) 444-3651 FX: (406) 444-4722

**Nebraska:** Mike Overton  
Nebraska Crime Commission  
PH: (402) 471-2194 FX: (402) 471-2837

**Nevada:** Timothy Hart  
Center for the Analysis of Crime Statistics  
PH: (702) 895-0233 FX: (702) 895-0252

**New Hampshire:** Timothy Brackett  
Office of the Attorney General  
PH: (603) 271-8090 FX: (603) 271-6290

**New Jersey:** Jean Petherbridge  
Division of Criminal Justice  
PH: (609) 984-5693 FX: (609) 984-3381

**New Mexico:** Lisa Broidy  
New Mexico Statistical Analysis Center  
PH: 505-277-6247 FX: (505) 277-4215

**New York:** Adam Dean  
Division of Criminal Justice Services  
PH: (518) 457-1149 FX: (518) 485-8039

**North Carolina:** Patricia Barnes  
Office of the Chief Medical Examiner  
PH: (800) 672-7024 FX: (919) 962-6263

**North Dakota:** Colleen Weltz  
Office of Attorney General  
PH: (701) 328-5527 FX: (701) 328-5510

**Ohio:** Lisa Shoaf  
Office of Criminal Justice Services  
PH: (614) 466-5997 FX: (614) 466-0308

**Oklahoma:** Angie Baker  
Office of Criminal Justice Statistics  
PH: (405) 858-5271 FX: (405) 879-2301

**Oregon:** Lee Anna Bennett-Ashworth  
Office of Public Health  
PH: (971) 673-0129 FX: (971) 673-0990

**Pennsylvania:** Darlene Hurley  
Office of Criminal Justice Systems Improvement  
PH: (717) 265-8522 FX: (717) 772-0550

**Rhode Island:** Thomas Mongeau  
Rhode Island Department of Public Safety  
PH: (401) 222-2620 FX: (401) 222-1294

**South Carolina:** Robert McManus  
South Carolina Department of Public Safety  
PH: (803) 896-8717 FX: (803) 896-8393

**South Dakota:** Brenda Manning  
Division of Criminal Investigation  
PH: (605) 773-6312 FX: (605) 773-6471

**Tennessee:** Jackie Vandercook  
Tennessee Bureau of Investigation  
PH: (615) 744-4014 FX: (615) 744-4662

**Texas:** Renee Gray  
Office of the Attorney General  
PH: (512) 305-8882 FX: (512) 494-8283

**Utah:** Ben Peterson  
Commission on Criminal & Juvenile Justice  
PH: (801) 538-1047 FX: (801) 538-9609

**Vermont:** Patricia Fischer  
Vermont Crime Information Center  
PH: (802) 244-8727 FX: (802) 241-5552

**Virginia:** James McDonough  
Department of Criminal Justice Services  
PH: (804) 786-4612 FX: (804) 225-3853

**Washington:** Tonya Todd  
Association of Sheriffs & Chiefs of Police  
PH: (360) 486-2380 FX: (360) 486-2381

**West Virginia:** Monika Sterling  
Division of Justice and Community Services  
PH: (304) 558-8814 FX: (304) 558-0391

**Wisconsin:** Erin Kennedy  
Arrest-Related Deaths Program Staff  
PH: (919) 485-5736 FX: (877) 262-7654

**Wyoming:** Burke Grandjean  
Wyoming Survey & Analysis Center  
PH: (307) 760-5913 FX: (307) 766-2759

### ARREST-RELATED DEATHS INCIDENT REPORT, 2013



1. What was the decedent's name?

Last First M.I.

2. What was the time and date of death?

\_\_\_:\_\_\_ AM PM Month: \_\_\_ Day: \_\_\_, 2013

3. What law enforcement agency was involved with the death?

Agency name: \_\_\_\_\_  
 Check if multiple law enforcement agencies responded  
Agency ORI: \_\_\_\_\_  
 Agency ORI unknown

4. Where did the event causing the death occur?

Street Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_

5. What location category best describes where the event causing the death occurred? (Mark only one)

- Residence/Home
- Law enforcement facility
- Business, specify type \_\_\_\_\_
- Roadway/Highway/Street/Sidewalk
- Parking Lot/Garage
- Field/Woods/Lake/Waterway/Beach
- Other, specify \_\_\_\_\_
- Unknown

6. What was the decedent's sex? (Mark only one)

- Male
- Female

7. What was the decedent's date of birth (DOB)?

\_\_\_/\_\_\_/\_\_\_ or age at death if DOB unknown \_\_\_

8. What was the decedent's ethnic origin? (Mark only one)

- Hispanic or Latino
- Not Hispanic or Latino
- Unknown

9. What was the decedent's race? (Mark only one)

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White
- Two or more races
- Unknown

10. What was the reason for the initial contact between the decedent and law enforcement personnel? (Mark only one)

- Civilian request for response to criminal or suspicious activity, specify reason for request: \_\_\_\_\_
- Civilian request for medical, mental health, or welfare assistance, specify reason for request: \_\_\_\_\_
- Routine patrol/on-view (other than traffic stop), specify observed behavior: \_\_\_\_\_
- Traffic/vehicle stop, specify reason for stop: \_\_\_\_\_
- Warrant service, specify charge: \_\_\_\_\_
- Other reason for contact, specify reason: \_\_\_\_\_
- Unknown

11. At any time during the incident, did the decedent -

	No	Yes	Unknown
Make suicidal statements	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Barricade self or initiate standoff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Verbally threaten other(s)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Resist being handcuffed or arrested	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Attempt to escape/flee from custody	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Attempt to grab, hit, or kick officer(s)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Attempt to gain possession of officer's weapon	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12. At any time during the incident, did the decedent display or use a weapon?

- Yes, mark all that apply:
  - Displayed firearm without discharge
  - Discharged firearm
  - Displayed other weapon, specify weapon displayed: \_\_\_\_\_
  - Used other weapon, specify weapon used: \_\_\_\_\_
  - Used vehicle as a weapon
- No
- Unknown

13. At any time during the incident, did the decedent attempt to injure or injure others?

- Yes, mark all that apply:
  - Fatally injured law enforcement personnel
  - Non-fatally injured law enforcement personnel
  - Attempted to injure law enforcement personnel
  - Fatally injured civilian(s)
  - Non-fatally injured civilian(s)
  - Attempted to injure civilian(s)
- No
- Unknown

**14. At any time during the incident, did law enforcement personnel**

	No	Yes	Unknown
Fight or struggle with decedent.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physically restrain decedent (e.g., control hold, body compression).....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Restrain decedent with equipment (e.g., handcuffs, leg shackles).....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Place decedent in prone position.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Engage in motor vehicle pursuit.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Engage in foot pursuit.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other, specify.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**15. At any time during the incident, did law enforcement personnel use any of the following weapons?**

	No	Yes	Unknown
Firearm discharge.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Conducted energy device (Taser) contact.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pepper/OC spray, mace dispersion.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Baton/blunt instrument impact.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other, specify.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**16. If the decedent sustained fatal injuries during the incident, how were these injuries sustained?**

	No	Yes	Unknown
Law enforcement at scene.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Law enforcement during transit or booking.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Self-inflicted.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other civilian.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**17. If a weapon caused the death, what type of weapon caused the death? (Mark only one)**

- Handgun
- Rifle/shotgun
- Firearm, unspecified.
- Conducted energy device (e.g., Taser)
- Knife/edged instrument
- Baton/blunt instrument
- Other weapon, specify \_\_\_\_\_
- Vehicle-involved death (i.e., vehicle accident)
- Not applicable, weapon or vehicle did not cause death
- Unknown

**18. Where did the death occur? (Mark only one)**

- Law enforcement facility/booking center
- Scene of incident
- Dead on arrival at medical facility
- Medical facility following clinical intervention
- Other, specify \_\_\_\_\_
- Unknown

**19. What was the manner of death? (Mark only one)**

- Natural
- Homicide
- Accident
- Suicide
- Could not be determined
- Unknown

**20. What was the cause of death?**

Immediate cause

Secondary causes (if applicable)

Unknown (Skip Item 21 if cause of death is unknown)

**21. How was information provided for cause of death (Item 20) determined? (Mark only one)**

- Death certificate
- Autopsy report or medical evaluation
- Other source; specify \_\_\_\_\_

**22. Did the autopsy report or medical evaluation indicate the presence of alcohol or of drugs other than alcohol?**

- Yes, mark all that apply:
  - Alcohol
  - Drug(s) other than alcohol, specify \_\_\_\_\_

- No
- Unknown, did not obtain autopsy report or medical evaluation

**Notes:**

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