KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	18-253-UF	Version Type:	ORIGINAL VERSION
Report Date:	4/6/2018 5:28 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Abilene Police Dept.	Agency Address:	450 Pecan St.
Agency City:	Abilene	Agency State:	TX
Agency Zip:	79602		

Director Information

Director Salutation:	Chief	Director First Name:	Stan
Director Middle Name:			
Director Last Name:	Standridge		
Reporter Name:	Sgt. Mike Moschetto	Reporter Email:	mike.moschetto@abilenetx.gov

Decedent Information

Identity of Deceased

First Name: Michael

Middle Name: LeRoy

Last Name: McGinnis

Suffix:

Date of Birth: 1/2/1989 Sex: Male

Race: Anglo or White

Age At Time Of Death: 29

Date/Time of Custody (arrest, incarceration) (mm/dd/yyyy hh:mm AM/PM):

Date/Time of Custody or Incident: 3/23/2018 8:51 AM

Date/Time of Death (mm/dd/yyyy hh:mm AM/PM):

Death Date and Time: 3/23/2018 9:41 AM

Manner / Cause of Death

Has a medical examiner or coroner conducted an evaluation to determine a cause of death?

Medical Examiner/Coroner Evaluation?: Yes, results pending

What was the manner of death? (select only one)

Manner of Death: Homicide (includes Justifiable

Homicide)

Medical Cause of Death:

Medical Cause of Death:

Multiple gunshot wounds

Had the decedent been receiving treatment for the medical condition that caused the death after admission to your jail's jurisdiction?

Medical Treatment: No

If death was an accident, homicide or suicide, who caused the death?

Who caused the death?: Law enforcement/correctional personnel

If a weapon caused the death, what type of weapon caused the death? (Hold CTRL to select all that apply)

Type of weapon that caused death?: Handgun

Was the cause of death the result of a pre-existing medical condition or did the decedent develop the condition after admission?

Pre existing medical condition?: Not Applicable; cause of death was accidental injury, intoxication, suicide or homicide

If death was an accident, homicide or suicide, what was the means of death?

Means of Death: Firearm

Location / Custody Information

Where did the event causing the death occur?

Street Address:	4044 South 7th, #3	City:	Abiliene
County:	Taylor	Zip:	79605

What location category best describes where the event causing the death occurred?

Location Category: Residence/Home

What type of custody/facility was the Decedent in at the time of death:

Type of Custody: Pre-Custodial Use of Force

Specific type of custody/facility:

Specific Type of Custody/Facility:

Custody of Law Enforcement Personnel during/fleeing arrest

What was the time and date of the deceased's entry into the law enforcement facility where the death occurred (mm/dd/yyyy hh:mm AM/PM):

Entry Date Time:

Entry Date Time N/A: ☑

Where did the death occur?

Death Location: Scene of incident

General Information

Did any other law enforcement agencies respond to calls for service related to this incident?

Other Agencies Respond?: Yes

What were the most serious offense(s) with which the deceased was (or would have been) charged with at the time of death?

Offense 1:

PC 22.02, Aggravated Assault Peace Officer, F1

Offense 2:

PC 21.11, Indecency With a Child, Warrant

Offense 3:

PC 28.02, Arson MTR - Warrant No Bond

Were the Charges:: Filed

What were the types of charges or reason for contact? (Hold CTRL to select all that apply)

Type of Offense: Crimes Against Child(ren); Crime Against Property

At any time during the incident and/or entry into the law enforcement facility, did the decedent display or use a weapon?

Decedent display/use of weapons: Yes, mark all that apply

Decedent Display or Use Weapon Details: Displayed firearm without discharge

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Attempt to Injure Others?:	Yes (select all that apply)
Ways Decedent Attempted To Injure Others:	Attempted to injure law enforcement personnel

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Appear intoxicated (alcohol or drugs):	No	Make suicidal statements?:	No
Exhibit any mental health problems?:	No	Exhibit any medical problems?:	Unknown

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Barricade self or initiate standoff?:	Yes	Resist being handcuffed or arrested?:	Yes
Physically attempt/assault officer(s):	Yes	Gain possession of officer's weapon:	No
Verbally threaten other(s) including law:	No	Escape or attempt to escape/flee custody:	No
Attempt gain possession officer's weapon:	No		

Was the deceased under restraint in the time leading up to the death or the events causing the death?

Under Restraint:	No

Summary of Incident

Summary of How the Death Occurred: (max. 30,000 characters)

Summary:

On 03/23/2018 Officers of the Abilene Police Department's, Patrol Division attempted to make contact with the deceased at his residence to arrest him for outstanding felony warrants. During the contact officers made entry into the decedent's residence after confirming with his common law spouse that he was inside. During the initial contact, the deceased barricaded himself in a bedroom inside the residence. Officers began negotiating with the deceased to surrender. The officers were just outside of the bedroom door in a small

hallway leading to a living room which was in close proximity to the bedroom door. As negotiations went on, the bedroom door opened inadvertently, possibly due to air flow. Officers were aware that the deceased may have a handgun in his possession and he kept his hand behind his back as they spoke. As negotiations deteriorated the deceased presented the handgun in a threatening manner. A patrol officer discharged his handgun three times into the deceased in an attempt to defend himself and other officers on scene. After the deceased was shot, officers transitioned into life saving efforts. Abilene Fire Department and MetroCare EMT's were summoned to the scene and provided medical care however, the deceased subsequently expired inside the residence.