KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	22-1820-UF	Version Type:	AMENDED
Report Date:	7/18/2023 12:28 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Weatherford Police Dept.	Agency Address:	PO BOX 255
Agency City:	Weatherford	Agency State:	TX
Agency Zip:	76086		

Director Information

Director Salutation:	Chief	Director First Name:	Lance
Director Middle Name:	C		
Director Last Name:	Arnold		
Reporter Name:	Lance Arnold	Reporter Email:	larnold@weatherfordtx.gov

Decedent Information

Identity of Deceased

First Name: Michael

Middle Name: Lee

Last Name: Delaney

Suffix: Jr.

Date of Birth: 1/18/1990

Sex: Male

Race: Black or African American

Age At Time Of Death: 32

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

Date/Time of Custody or Incident: 12/24/2022 8:50 AM

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

Death Date and Time: 12/24/2022 9:00 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 are available

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

Homicide (includes

Manner of Death:	Justifiable Homicide)

Medical Cause of Death:

Medical Cause of Death:
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:	Not Applicable

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; Rifle/shotgun

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:	2082 Mineral Wells Highway	City:	Weatherford
County:	Parker	Zip:	76088

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

Location Category: Roadway/highway/street/sidewalk

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:

Murder

Offense 2:

Agg Assault Against Public Servant

Offense 3:

Agg Robbery

Were the Charges::	Not filed at time of death

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

Type of Offense:	Violent Crime Against Persons

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:	Discharged firearm

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; Injured civilian(s) or other inmate(s)

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

Appear intoxicated (alcohol or drugs):	Unknown	Make suicidal statements?:	Unknown
Exhibit any mental health problems?:	Unknown	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?:	No	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:	Unknown	Escape or attempt to escape/flee custody:	Yes
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:

The decedent fled from officers while driving a vehicle stolen in an armed carjacking in Georgia. While fleeing, the decedent crashed into a vehicle driven by an uninvolved party disabling both vehicles. As pursuing officers arrived, the decedent exited the vehicle and began firing a handgun with an extended magazine at

officers before the officers exited their marked patrol vehicles. Officers exited their vehicles and fired their firearms striking the decedent. The decedent continued firing at officers while attempting to flee and after being shot. When the decedent stopped firing, officers placed handcuffs on him and immediately began first aid. Emergency Medical responders attempted to treat the decedent before he died on the scene.