KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	24-1434-UF	Version Type:	AMENDED
Report Date:	10/8/2024 12:42 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Arlington Police Dept.	Agency Address:	620 W. Division St.
Agency City:	Arlington	Agency State:	TX
Agency Zip:	76011		

Director Information

Director Salutation:	Chief	Director First Name:	Alexander
Director Middle Name:			
Director Last Name:	Jones		
Reporter Name:	Paul Long	Reporter Email:	paul.long@arlingtontx.gov

Decedent Information

Identity of Deceased

First Name: Tony

Middle Name: Dupree

Last Name: Coward

Suffix:

Date of Birth: 11/23/1989

Sex: Male

Race: Black or African American

Age At Time Of Death: 34

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

Date/Time of Custody or Incident: 10/7/2024 9:15 PM

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

Death Date and Time: 10/7/2024 11:42 PM

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:
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:	Unknown

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:	1400 Summer Brook Circle	City:	ARLINGTON
County:	Tarrant	Zip:	76011

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

Location Category: Parking lot/garage

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:

N/A

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: Medical facility

General Information

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

Other Agencies Respond?:	No

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:

Attempted Capital Murder

Offense 2:

Aggravated Assault on a Peace Officer

Offense 3:

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:

Yes (select all that

Attempt to Injure Others?:	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):	Yes	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?:	No
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:	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:

Officers were dispatched to a suspicious person call where the suspect was reported to be armed with a handgun in the parking lot of an apartment complex. When officers arrived, they located the suspect lying on the hood of a parked vehicle. As officers approached, they identified themselves and saw that the suspect had a handgun in his right front pocket. Officers announced themselves louder at which time the suspect raised up and looked at the officers. Officers gave the suspect loud commands to put his hands up. The suspect looked at officers, grabbed his handgun with his right hand, pointed the handgun at officers, and fired

at least one round in the direction of officers. The officers fired several rounds at the suspect and he fell to the ground. The suspect was transported to the hospital where he later died while in surgery. No officers or civilians were injured.