KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	24-617-C	Version Type:	ORIGINAL VERSION
Report Date:	5/2/2024 12:51 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:	Richard Garcia	Reporter Email:	richard.garcia@arlingtontx.gov

Decedent Information

Identity of Deceased

First Name:	Michael
Middle Name:	
Last Name:	Bassey
Suffix:	
Date of Birth:	7/9/1994
Sex:	Male
Race:	Black or African American
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:	4/25/2024 4:50 PM

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

Death Date and Time:	4/25/2024 5:26 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)

Manner of Death:	Homicide (includes Justifiable

Homicide)

Medical Cause of Death:

Medical Cause of Death:

Gunshot wound to the abdomen.

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

Medical Treatment: Yes

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: 2703 Lawrence Rd
City: Arlington
County: Tarrant
Zip: 76006

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

Location Category: Field/woods/lake/waterway/beach

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

Type of Custody: Police Custody (pre-booking)

Specific type of custody/facility:

Specific Type of Custody/Facility:

Hospital/Infirmary

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: 4/25/2024 5:26 PM

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:

Aggravated Assault

Offense 2:

Evading

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: Displayed other weapon, specify:

Specify Weapon Displayed:

Knife

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):	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?:	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:	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:	Yes, mark which restraint devices were used

Type of restraint

Type of Restraint:	Handcuffs

Summary of Incident

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

Summary:

Officers were dispatched to 2703 Lawrence Rd in Arlington to a caller who called 911 and stated they had a knife and were going to kill someone. The caller then stated he killed someone by stabbing them. As officers arrived they began to call out the suspect from the apartment. The suspect came out of the apartment and charged at officers with a knife in hand. Officers fired a handgun and taser at the suspect. Suspect got up and began to evade on foot. The suspect ran towards a wooded area and as officers were close to the suspect, he again ran at them with a knife in hand. Officers utilized deadly and non-deadly force. The suspect would be taken into custody shortly after. The suspect was transported to the hospital where he was pronounced deceased.