KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

PA Number:	PA16091C	Report Date:	3/9/2016 12:10 PM
Status:	Submitted		

Agency/Facility Information

Department ID:	199	Department Type:	SHERIFF
Agency Name:	Dallas County Sheriff's Dept.	Agency Number:	TX0570000
Agency Phone:	2146533450	Agency Address:	133 N. Riverfront Blvd.
Agency City:	Dallas	Agency County:	Dallas
Agency State:	TX	Agency Zip:	75207

Director Information

Director Salutation:

Sheriff

Director First Name:

Lupe

Director Middle Name:

Director Last Name:

Valdez

Reporter Name: Det. B. Fetter #629 Reporter Email: bfetter@dallascounty.org

Location / Custody Information

Where did the event causing the death occur?

Street Address: 9184 Forest Ln #211

City: Dallas, TX

County: Dallas

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:

Custody of Peace Officer subsequent to arrest

Custody Type Facility:

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: At the crime/arrest scene

Death Location Elsewhere:

Decedent Information

Identity of Deceased

First Name: Robert

Middle Name: James

Last Name: Covington

Suffix:

Date of Birth: 2/13/1984 Sex: Male

Ethnicity: African-American

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

Death Date and Time: 3/3/2016 9:08 AM

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

Date/Time of Custody or Incident:

3/3/2016 6:15 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)

Manner of Death:

Suicide

Manner of Death Description:

Contact gunshot wound of the head

Death Reason:

Not applicable

Medical Cause of Death:

Medical Cause of Death:

Contact gunshot wound of the head

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?:

Not applicable; cause of death was suicide, intoxication or illness/natural causes

Death Causer Other:

Suicide

If a weapon caused the death, what type of weapon caused the death? (mark all that apply)

Type of Death Weapon:

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

General Information

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 F-1

Offense 2:

Use of a Weapon to Commit a Felony

Offense 3:

Were the Charges::

Filed

What were the types of charges or reason for contact?

Type of Offense:

Injuries of Decedent

Injured By: Injured by Suicide

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

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

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

Threaten the officer(s) involved:	No	Resist being handcuffed or arrested?:	No
Try to escape/flee from custody:	No	Grab, hit or fight with the officer(s):	No

Other Behavior:

Specify Other Behavior:

Use weapon threaten/assault officer(s): 0

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:

Custodial Death Report: Decedent Robert James Covington (B/M 02-13-1984)

On thursday, March 3, 2016, at approximately 6:15a.m., Officers with the U.S. Marshall's Officer Federal Fugitive Task Force and an Officer with the Dallas County Sheriff's Department went to 9184 Forest Lane, Apt #211, City of Dallas, Dallas County, TX in attempt to serve a felony arrest warrant on an individual there. The Task Force received a lead that the wanted person, Robert James Covington (B/M 02-13-1984), was staying at this location.

Upon their arrival, the Officers knocked on the door and an individual later identified as the decedent's cousin answered the door. Seconds later, officers heard what they believed was gunshot. Officers retreated, along with the cousin, and a perimeter was set-up around the apartment. Several officers with the Dallas Police Department, along with Dallas County Sheriff's Dept. Tactical Unit were dispatched to the scene. After several unsuccessful attempts to have the wanted person come out of the apartment, personnel with the DSO Tactical Unit made entry into Apt. #211. The officers located the wanted person, Robert Covington, lying on the floor with what appeared to be a self-inflicted gunshot wound to his head. No other individuals were found inside the apartment. Paramedics with the Dallas Fire and Rescue responded to the scene and pronounced Covington deceased at 9:08 a.m. Personnel with the Dallas County Southwestern Institute of Forensic Sciences (Medical Examiner) were dispatched to the scene. The decedent was transported to the Medical Examiner's office pending aforensic autopsy.