

BJS 2011 Arrest Related Deaths Program Solicitation

Example of an Arrest-Related Death Status Report (All names, dates, and details provided here are fictional)

Name of State Reporting Coordinator

Name of Agency

ARREST-RELATED DEATHS, 2010
STATUS REPORT

2010 TOTAL: 17 Deaths recorded, 3 additional deaths in need of a CJ-11A

Quarter 1

1. Summers, Buffy (January 31st)

- File Incomplete:
 - Item 7 – What was the deceased’s race/ethnic origin? *Response left blank.*
 - Item A4 – Please specify the weapon used to threaten or assault the officer(s).

Harris, Xander L. (February 1st)

- *File EXCLUDED from the “Arrest-Related Deaths” collection for subsequent transfer to the “Deaths in Custody – Jails” collection.*

2. Rosenberg, Willow R. (March 3rd)

- File Incomplete
 - Item 3 – Where did the event causing the death occur? *Response left blank.*
 - Item 8 – Has a medical examiner or coroner conducted an evaluation to determine a cause of death? *Response left blank.*
 - Item 9 – What was the manner of death? *Response left blank.*
 - Item 10 – What was the medical cause of death? *Response left blank.*

3. Kendall, Harmony L. (March 6th)

- File Incomplete:
 - Item 4 – What law enforcement agency was involved? *The response indicates the US Marshalls were involved, but were there any state or local law enforcement agencies involved in this death? The ARD program excludes death resulting from interactions with Federal law enforcement officers unless either a state or local law enforcement agency was also present.*

4. Giles, Rupert Q. (March 17th)

- File complete.

Quarter 2

5. Marsters, Spike D. (April 10th)
 - File complete.
6. Caulfield, Anya K. (May 6th)
 - File complete.
7. Chase, Cordelia (June 5th)
 - File Incomplete:
 - Item 8 – Has a medical examiner or coroner conducted an evaluation to determine a cause of death? *Response pending autopsy report.*
 - Item 9 – What was the manner of death? *Pending the autopsy report please either confirm the manner of death as “homicide by law enforcement officers” or revise the response.*
 - Item 10 – What was the medical cause of death? *Response pending autopsy report.*
 - Item A5 – What type of weapon caused the death? *Response pending autopsy report. Please either confirm that a taser was the weapon that caused the death or revise the response*
8. Finn, Riley (June 11th)
 - File Incomplete:
 - Item 8 – Has a medical examiner or coroner conducted an evaluation to determine a cause of death? *Response marked as “pending.”*
 - Item 9 – What was the manner of death? *Pending autopsy results please either confirm the manner of death as “justifiable homicide” or revise the response.*
 - Item 10 – What was the medical cause of death? *Pending autopsy results please either confirm the medical cause of death as “GSW to chest” or revise the response.*
 - Item A1 – Did the deceased die from a medical condition or from injuries sustained at the crime/arrest scene? *Pending autopsy results please confirm the death as a result of “injuries only.”*
 - Item A4 – At any time during the arrest/incident, did the deceased-mark all that apply. *Please specify the type of weapon use to threaten or assault the officer(s).*
9. West, Percy (June 25th)
 - File incomplete:
 - Item A4 – At any time during the arrest/incident, did the deceased-. *Both the answers “try to escape/flee from custody” and “none of the above” are marked. Please verify if the deceased did try to escape or flee from custody.*
10. Levinson, Jonathan (July 12th)
 - File complete.

Quarter 3

11. Wells, Andrew N. (August 4th)
- File complete.
12. Meers, Warren A. (August 16th)
- File Incomplete:
 - Item 12 – What were the most serious offense with which the deceased was being charged at the time of death? *The response “no charges filed or intended” appears to be inconsistent with the response to item A4. Item A4 indicates that a handgun was used to threaten or assault the officers involved. If the decedent survived, would he have been charged with assault/assault with a deadly weapon?*
13. Miller, Graham (August 16th)
- File Incomplete:
 - Item 3 – Where did the event causing the death occur? *Response left blank. Online report indicates that the incident occurred on “U.S. Highway 30 near junction State Highway 50,” please either confirm or revise this address.*
 - Item 5 – What was the deceased’s date of birth? *Response left blank.*
 - Item 7 – What was the deceased’s race/ethnic origin? *Response left blank.*
 - Item 8 – Has a medical examiner or coroner conducted an evaluation to determine a cause of death? *Response left blank.*
 - Item 10 – What was the cause of death? *Response left blank. Online report indicates that the deceased was fatally shot by law enforcement officers, please either confirm or revise a cause of death of “gunshot wounds.”*
 - Item A3 – Was the deceased under restraint in the time leading up to the death or the events causing the death? *A response of “no” was provided, although the attached news articles indicate that the deceased was handcuffed and pepper sprayed prior to being shot. This item has been modified to reflect that “handcuffs” and “pepper spray, mace” were used in the time leading up to the death. Please refute these changes if the attached media reports are inaccurate and the appropriate response should be the initial submission of “no.”*
14. Calendar, Ben (August 30th)
- File complete.

Quarter 4

15. Wilkins, Richard B. (October 2nd)
 - File Incomplete
 - Item 8 – Has a medical examiner or coroner conducted an evaluation to determine a cause of death? *Response left blank.*
 - Item 9 – What was the manner of death? *Response left blank.*
 - Item 10 – What was the medical cause of death? *Response left blank.*

16. Wood, Robin L. (November 19th)
 - File incomplete.
 - Item A1 – Did the deceased die from a medical condition or from injuries sustained at the crime scene? *Response left blank. Based on the response of “gunshot wound” to Item 10, “What was the medical cause of death,” a response of “Injuries only” was added to the form. Please either verify or refute this addition.*

17. Wyndam-Pryce, Wesley W. (November 24rd)
 - File Incomplete:
 - Item 2 – What was the time and date of death? *The month of death is listed as “0” on the report; please verify that it should be “November.”*
 - Item 10 – What was the medical cause of death? *There is no cause of death listed on the report; please indicate if it should be listed as “gunshot wound.”*

CASES IDENTIFIED BY BJS BUT NOT CURRENTLY IN THE COLLECTION

1. Finch, Allen D. (March 16th)
2. Flutie, Bob M. (May 29th)
3. Gates, Forrest (December 26th)