



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 23-549-UF

Version Type: AMENDED

Report Date: 12/13/2023 10:38
AM

Status: Submitted

Agency/Facility Information

Agency Name: Allen Police Dept.

Agency Address: 205 W. McDermott
Drive

Agency City: Allen

Agency State: TX

Agency Zip: 75013

Director Information

Director Salutation: Chief

Director First Name: Brian

Director Middle Name:

Director Last Name: Harvey

Reporter Name: James Foust

Reporter Email: jfoust@cityofallen.org

Decedent Information

Identity of Deceased

First Name: Mauricio

Middle Name:

Last Name: Garcia

Suffix:

Date of Birth: 10/24/1989

Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 33

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

Date/Time of Custody or
Incident: 5/6/2023 3:36 PM

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

Death Date and Time: 5/6/2023 3:39 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:

Mauricio Garcia (armed mass shooter suspect) was shot and killed by responding officer. ME report reflects cause of death as a 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: No

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?: 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: 820 W. Stacy Road

City: Allen

County: Collin

Zip: 75013

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

Location Category: Business

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: 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:

Capital Murder of Multiple Persons

Offense 2:

Aggravated Assault with Deadly Weapon

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:

Attempt to Injure Others?: Yes (select all that apply)

Ways Decedent Attempted To Killed civilian(s) or other inmate(s);
Injured civilian(s) or other inmate(s);

Injure Others: Attempted to injure
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):	No	Make suicidal statements?:	No
Exhibit any mental health problems?:	No	Exhibit any medical problems?:	No

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):	No	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:

Decedent / Suspect, who was wearing a ballistic vest and heavily armed, exited his personal vehicle with a rifle and began shooting individuals he encountered as he walked around the interior businesses of the Allen Premium Outlet mall. Allen PD Officer, who was on an unrelated call at the mall, heard gunfire and responded on foot to the area of the shots. Officer located the armed suspect and utilized his department issued rifle to stop the threat by shooting and killing the suspect.

