



TEXAS COMMISSION ON LAW ENFORCEMENT

Texas Peace Officers' Memorial Monument Nomination

Commission Rule §229.3

NOMINEE'S INFORMATION

First Name	Middle Name	Last Name	Suffix
Rank/Title	PID	Date of Death	
Last Agency			
Was officer on duty at the time of incident? ☐ Yes ☐ No ☐ Unknown			
Cause of death was ☐ Felonious Assault ☐ Accidental Situation ☐ Medical Event			

NOMINATOR'S INFORMATION

Name	Position/Title		PID (if applicable)	
Address	City	State	Zip	
Phone	Email			
Department/Association/Organization				

ATTACHED SUPPORTING DOCUMENTATION

☐ Incident Report	☐ Autopsy Report	☐ Witness Statements	☐ Affidavit
☐ News Articles	☐ Death Certificate	☐ Other	