

1/11/05

COLORADO DEPARTMENT OF CORRECTIONS
CANON EXTERNAL SECURITY
EMPLOYEE CONSOLIDATED REPORT FORM

- ☐ Incident/Complaint ☐ Use of Force/Discharge of Firearm ☐ Escape ☐ Vehicle Accident
☒ Informational ☐ Security Inspection Report ☐ Other: _____

Type of Incident (Assault, Fire, Threats, etc.) _____

Reporter's Name: Joel Strickler Title/Assignment: COTII/LI

Date of Incident: 1/11/05 Day of the Week: M T W TH F S S Time: 1430

Incident Facility: ☐ CCF, ☐ CSP, ☒ FCF, ☐ ACC, ☐ FMCC, ☐ SCC, ☐ PRC ☐ OTHER

Specific Location: DOC Range #3

Who is/was the victim? #1 N/A #2 N/A

Who committed the act? #1 N/A #2 N/A

Who are the witnesses? #1 N/A #2 N/A

Type of weapon used: Remington 308^{SW} F622395 Was it intentional? ☐ YES ☒ NO ☐ UNKNOWN

List physical description of subject(s) (ie. Sober, drunk, under influence, angry) and type of injury, if any:

N/A

Details of incident: During the .308 Qualification Course, I Lt. Joel Strickler moved the fire/safe switch to fire when the weapon discharged without pulling the trigger. The weapon was pointed down range and went into the berm. The round did not leave the range. End of Report.

This rifle was tagged and secured pending evaluation by DOC Armorer, Lt. Ben Perez. *[Signature]*

Employee Signature: *[Signature]* Date: 1/11/05

Supervisors Signature: _____ Date: _____