

*W. W. Sommers*

P-4 Revised 6-54

# NOTICE OF INJURY SUSTAINED WHILE ON DUTY

Send original and one copy to  
Parkland Memorial Hospital  
5201 Harry Hines Blvd.  
Telephone LO-7611

### TO BE FILLED IN BY IMMEDIATE SUPERIOR:

Name of injured employee J. D. Tippit

Address 1919 Glenfield Sex M Age 31 Race W

Dept. Police Div. Radio Patrol Classification Patrolman

Date of accident April 28, 1956 Time 8:50PM 7:00 PM ( )

Location 731 North Edgfield

Describe in full how accident occurred Attempting to subdue demanted person. Stabbed in  
stomach and right knee with ice pick.

Name witnesses Daniel H. Smith, Police Dept.

Disposition of case Returned to duty.

*JMB*

Signature of superior

I sustained injury to myself in the manner described above and while on duty with the City of Dallas. I hereby authorize Parkland Hospital to release any and all information regarding this disability to the Personnel Department of the City of Dallas upon their request.

*J. D. Tippit*  
Signature of injured employee

### TO BE FILLED IN BY PARKLAND HOSPITAL:

Authorization of emergency treatment taken by \_\_\_\_\_

Date entered Emergency \_\_\_\_\_ Time \_\_\_\_\_ AM ( ) PM ( )

Examination and treatment administered by Doctor \_\_\_\_\_

Extent of injury \_\_\_\_\_

Disposition of case \_\_\_\_\_

### TO BE FILLED IN BY DEPARTMENT PERSONNEL CLERK:

First date off duty 4-29-56 Date back on duty Has not returned 5-1-56

Payment of salary amounting to \$23.06 far period from 4-29-56 to 5-1-56

involving 2 working days due to this injury. Expense chargeable to Acct. 12 Code F-13

APPROVED: *C. H. Hansen*  
By C. H. Hansen Department Head Acting

*C. C. Rutherford*  
Personnel Director

*Rel. 5-3-56*

The above described injury under normal circumstances will necessitate a total of \_\_\_\_\_ absence from the job. This file should be returned for my further attention on \_\_\_\_\_

Director of Public Health