KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	18-522-UF	Version Type:	AMENDED
Report Date:	12/12/2018 12:27 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Grand Prairie Police Dept.	Agency Address:	1525 Arkansas Ln
Agency City:	Grand Prairie	Agency State:	TX
Agency Zip:	75052		

Director Information

Director Salutation:	Chief	Director First Name:	Steve
Director Middle Name:			
Director Last Name:	Dye		
Reporter Name:	Gary Newton	Reporter Email:	gnewton@gptx.org

Decedent Information

Identity of Deceased

First Name: Carlos

Middle Name: Deon

Last Name: High

Suffix:

Date of Birth: 3/1/1981 Sex: Male

Race: Black or African American

Age At Time Of Death: 37

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

Date/Time of Custody or Incident: 4/23/2018 1:00 PM

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

Death Date and Time: 4/23/2018 2:00 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:

Based on case history and autopsy findings, the Dallas County Medical Examiner's opinion is that Carlos High died as a result of gunshot wounds.

Had the decedent been receiving treatment for the medical condition that caused the death after admission to your jail's jurisdiction?

Medical Treatment: Unknown

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?: Firearm, unspecified

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:	1000 IKEA Way	City:	Grand Prairie
County:	Dallas	Zip:	75052

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

Location Category: Roadway/highway/street/sidewalk

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:

Custody of Law Enforcement Personnel subsequent to arrest

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: 4/23/2018 2:00 PM

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?: No

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:

Aggravated Assault on a Police Officer

Offense 2:

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: Other, specify

Type of Offense, Other:

Welfare check on the Decedent

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: Displayed firearm without discharge

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Attempt to Injure Others?: Unknown

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?:	Yes	Resist being handcuffed or arrested?:	N/A
Physically attempt/assault officer(s):	No	Gain possession of officer's weapon:	No
Verbally threaten other(s) including law:	Yes	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:

Officers responded to 1000 IKEA Way on a check welfare call. A vehicle was sitting parked in the middle of the road with the emergency flashers activated on the east side of IKEA. As officers spoke to the driver they noticed a firearm, AK-47 Assault rifle, lying across the drivers lap. The driver began talking in a loud and aggressive manner to the officers. Officers un-holstered lethal and non-lethal weapons and began to negotiate with the driver ordering him to put his hands in the air and not touch his weapon. The driver would not comply and reached for his rifle and pointed it out the driver door window in the direction of the officers. Fearing for their lives the officers fired into the vehicle while giving continuous commands to comply. The officers backed off with the driver still moving in the vehicle. The stand off and negotiations continued as the driver continued to refuse to comply with the negotiators request to surrender. The driver made subsequent movements displaying his weapon. As a result, officers returned additional fire into the vehicle. When there was no more additional movement inside the vehicle for several minutes officers approached the vehicle and observed the driver was determined to be deceased.

The report has been supplemented with the Medical Examiner's results.