KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	19-1078-C	Version Type:	AMENDED
Report Date:	7/26/2021 2:10 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Montgomery County Sheriff's Dept.	Agency Address:	#1 Criminal Justice Drive
Agency City:	Conroe	Agency State:	TX
Agency Zip:	77301		

Director Information

Director Salutation:	Sheriff	Director First Name:	Rand
Director Middle Name:			
Director Last Name:	Henderson		
Reporter Name:	Paul Hahs	Reporter Email:	paul.hahs@mctx.org

Decedent Information

Identity of Deceased

First Name: Daniel

Middle Name: Eugene

Last Name: Lively

Suffix:

Date of Birth: 12/8/1960 Sex: Male

Race: Anglo or White

Age At Time Of Death: 58

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

Date/Time of Custody or Incident: 10/16/2019 7:11 PM

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

Death Date and Time: 10/16/2019 9:06 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: Suicide

Medical Cause of Death:

Medical Cause of Death:

Self-inflicted Gunshot Wound

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?: Decedent

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?: Handgun

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:	15796 OAK DRIVE	City:	Montgomery
County:	Montgomery	Zip:	77356

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

Location Category: Residence/Home

What type of custody/facility was the Decedent in at the time of death:

Type of Custody: Police Custody (pre-booking)

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:

Super-Aggravated Sexual Assault of a Child

Offense 2:

Offense 3:

Were the Charges:: Filed

What were the types of charges or reason for contact? (Hold CTRL to select all that apply)

Type of Offense: Crimes Against Child(ren)

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?: No

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?: Yes

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:	No	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:

The Montgomery County Sheriff's Office obtained an arrest warrant for the decedent and were conducting surveillance on the residence to effect the arrest upon the decedent's return to the house. The Montgomery County Sheriff's Office received a welfare check call at 1911 hours from the decedent's mother indicating that he was threatening to kill himself. SWAT Operators observed a male fitting the decedent's description arrive in a vehicle similar to the decedent's. The male exited the vehicle and ran into the residence as SWAT Operators approached to make the arrest. The male entered the residence before SWAT could apprehend him and shortly the male entered the residence, the SWAT Operators advised they heard what sounded like a single gunshot from inside the residence. The SWAT team made entry into the residence and observed what the decedent, later identified as Daniel Eugene Lively (the subject of the arrest warrant), near the entryway of the residence. The decedent had a single gunshot wound to the head and was pronounced deceased at 2106 hrs by EMS.