KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	19-1160-UF	Version Type:	AMENDED
Report Date:	7/26/2021 2:17 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: Christopher

Middle Name: Alan

Last Name: Noe

Suffix:

Date of Birth: 1/4/1974 Sex: Male

Race: Anglo or White

Age At Time Of Death: 45

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

Date/Time of Custody or Incident: 11/5/2019 9:30 PM

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

Death Date and Time: 11/5/2019 10:50 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:

Multiple gunshot wounds to head and torso

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?: 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?: 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:	14493 ENCHANTED WATERS DR	City:	Willis
County:	Montgomery	Zip:	77318

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: Pre-Custodial Use of Force

Specific type of custody/facility:

Specific Type of Custody/Facility:

Custody of Law Enforcement Personnel during/fleeing 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:

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:

Felony Evading (motor vehicle)

Offense 2:

Felony Warrant (Illegal Dumping)

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: Other, specify; Crime Against Property

Type of Offense, Other:

Fleeing in motor vehicle

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: Used other weapon, specify:

Specify Weapon Used:

Kitchen knife

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

Attempt to Injure Others?:	Yes (select all that apply)
Ways Decedent Attempted To Injure Others:	Attempted to injure law enforcement personnel

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):	Yes	Gain possession of officer's weapon:	No
Verbally threaten other(s) including law:	No	Escape or attempt to escape/flee custody:	Yes
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:

Decedent was observed travelling 70 mph in a marked 55 mph speed zone. Montgomery County Sheriff's Office Deputies attempted to affect a traffic stop and Decedent fled to his residence, where he resides with his mother. Deputies attempted to make contact with the Decedent at the residence due to learning of an outstanding felony warrant and did not find him there. After Deputies departed the residence, they received information from the Decedent's girlfriend that the Decedent was using the residence land-line to call her. Deputies attempted to make contact with him at his residence a second time, and he was observed (through an un-obscured window) crawling on the floor of the residence toward his bedroom. Deputies made entry into the residence to effect the arrest and the Decedent displayed a kitchen knife and began advancing toward the deputies with the knife held in a threatening manner. Deputies deployed Tasers, but they were ineffective and the Decedent ran toward the Deputies with the knife in his hand. Three peace officers fired multiple rounds, striking the Decedent in the head and torso, stopping him immediately.