KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	21-1249-UF	Version Type:	AMENDED
Report Date:	3/31/2022 3:39 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Lufkin Police Dept.	Agency Address:	PO Drawer 190
Agency City:	Lufkin	Agency State:	TX
Agency Zip:	75902		

Director Information

Director Salutation:	Chief	Director First Name:	David
Director Middle Name:			
Director Last Name:	Thomas		
Reporter Name:	David Thomas	Reporter Email:	dthomas@lufkinpolice.com

Decedent Information

Identity of Deceased

First Name: Anthony

Middle Name:

Last Name: Cravo

Suffix:

Date of Birth: 11/4/1968 Sex: Male

Race: Anglo or White

Age At Time Of Death: 52

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

Date/Time of Custody or Incident: 9/7/2021 12:13 AM

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

Death Date and Time: 9/7/2021 3:25 AM

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:

Penetrating gunshot wound of the head.

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

Medical Treatment:	Not Applicable

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:	908 N. Chestnut Dr	City:	Lufkin
County:	Angelina	Zip:	75901

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: Medical facility

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:

Aggravated Kidnapping

Offense 2:

Aggravated Robbery

Offense 3:

Felon in Possession of a Firearm

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:	Violent Crime Against Persons

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?:	Yes (select all that apply)
Ways Decedent Attempted To Injure Others:	Attempted to injure law enforcement personnel; Injured civilian(s) or other inmate(s); Attempted to injure

civilian(s) or other inmate(s)	

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

Appear intoxicated (alcohol or drugs):	N/A	Make suicidal statements?:	N/A
Exhibit any mental health problems?:	N/A	Exhibit any medical problems?:	N/A

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

Barricade self or initiate standoff?:	N/A	Resist being handcuffed or arrested?:	N/A
Physically attempt/assault officer(s):	N/A	Gain possession of officer's weapon:	N/A
Verbally threaten other(s) including law:	N/A	Escape or attempt to escape/flee custody:	N/A
Attempt gain possession officer's weapon:	N/A		

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:

One of our uniformed patrol officers was involved in an on duty shooting. The preliminary information is that officers were dispatched to a call of a person with a gun and another person lying on the ground in the 900 block of north Chestnut Street. Patrol Officers were flagged down and told that an armed person had ordered them to the ground and hit one of them with the butt of a rifle. Two uniformed officers attempted to locate any involved persons or suspects and were directed to a mobile home where some of the persons may be located. The uniformed officers were met at the door of the home by the suspect armed with a long gun, who was holding two people without their consent, and failed to comply with orders to put it down. The armed suspect raised the rifle and aimed it at the officer who fired approximately 2 times. The suspect was transported for medical attention and died at an out of town hospital.