KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	22-1180-UF	Version Type:	AMENDED
Report Date:	3/17/2023 9:16 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Pflugerville Police Dept.	Agency Address:	PO BOX 589
Agency City:	Pflugerville	Agency State:	TX
Agency Zip:	78691		

Director Information

Director Salutation:	Chief	Director First Name:	Jason
Director Middle Name:			
Director Last Name:	O'Malley		
Reporter Name:	Stewart Welch	Reporter Email:	swelch@pflugervilletx.gov

Decedent Information

Identity of Deceased

First Name: Joshua

Middle Name: Cane

Last Name: Butler

Suffix:

Date of Birth: 5/26/1978 Sex: Male

Race: Anglo or White

Age At Time Of Death: 44

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

Date/Time of Custody or Incident: 9/2/2022 5:31 PM

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

Death Date and Time: 9/4/2022 5:38 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:

Blunt trauma

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

Medical Treatment:	Yes

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?:	Vehicle-involved death

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:	Other, specify
Means of Death Other:	Suspect was struck with a vehicle operated by law enforcement.

Location / Custody Information

Where did the event causing the death occur?

Street Address:	12600 Blk McCallen Pass	City:	Austin
County:	Travis	Zip:	78753

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 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:

Attempted Capitol Murder

Offense 2:

Aggravated Robbery

Offense 3:

Evading in a Motor Vehicle

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: Alcohol / drug offense

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; Discharged firearm

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; 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):	Unknown	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?:	No	Resist being handcuffed or arrested?:	Yes
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:	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:

Officers were conducting a narcotics investigation and probable cause to initiate a traffic stop was met. Suspect evaded in a motor vehicle and a pursuit ensued. Suspect vehicle became inoperable and the

suspect fled on foot firing shots at officers. Suspect entered into a convenience store and pointed a firearm directly at the store clerk. Suspect exited the store on the east side and attempted to carjack a truck. Suspect fired a shot at this vehicle and continued to run south. Suspect attempted to carjack another vehicle and continued to fire shots. Officers returned fire and the suspect was struck with the vehicle being operated by law enforcement.