KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	22-1466-UF	Version Type:	AMENDED
Report Date:	6/26/2023 11:17 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Milam County Sheriff's Office	Agency Address:	512 N. Jefferson, Suite A
Agency City:	Cameron	Agency State:	TX
Agency Zip:	76520		

Director Information

Director Salutation:	Sheriff	Director First Name:	Michael
Director Middle Name:			
Director Last Name:	Clore		
Reporter Name:	Michael Clore	Reporter Email:	mclore@milamcounty.net

Decedent Information

Identity of Deceased

First Name: Mark

Middle Name: Edward

Last Name: Evers

Suffix:

Date of Birth: 12/12/1957 Sex: Male

Race: Anglo or White

Age At Time Of Death: 64

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

Date/Time of Custody or Incident: 10/19/2022 2:08 PM

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

Death Date and Time: 10/19/2022 2:08 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:

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: 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: 155 Inwood
City: Rockdale
County: Milam
Zip: 76567

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:

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:

Aggravated Assault on a Public Servant (as a result of a mental health assessment and emergency order of detention)

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:	Medical / Mental Health assistance call

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?:	Yes (select all that apply)
Ways Decedent Attempted To Injure Others:	Injured law enforcement personnel; 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?:	Unknown
Exhibit any mental health problems?:	Yes	Exhibit any medical problems?:	Unknown

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?:	Yes
Physically attempt/assault officer(s):	Yes	Gain possession of officer's weapon:	No
Verbally threaten other(s) including law:	Unknown	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:

Deputy was with a mobile crisis outreach team following up on a mental health evaluation. After discussing the decedents behavior with two MCOT employees, it was determined that the deputy would take the mental

health client for an emergency order of detention. While speaking to the mental health client, the mental health client refused to cooperate and removed himself from the room that the deputy and he were in. The mental health client returned with a firearm, aiming at the deputy. The deputy attempted to verbally disarm the mental health meeting with negative results. The deputy removed his firearm from his holster and aimed it at the mental health client. The mental health client approached and attempted to flank the deputy who was forced to fire at the mental health client, striking him. The mental health client fired back at the deputy, who was shot in the mouth and the side, which grazed him. The mental health client died. The deputy was life flighted to a local hospital with injuries. Texas Rangers were contacted and are the primary investigators.

Autopsy completed and is on file with this agency.