KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	22-1816-C	Version Type:	ORIGINAL VERSION
Report Date:	1/17/2023 6:26 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Galveston County Sheriff's Dept.	Agency Address:	601 54th St., Ste 2100
Agency City:	Galveston	Agency State:	TX
Agency Zip:	77551		

Director Information

Director Salutation:	Sheriff	Director First Name:	Henry
Director Middle Name:			
Director Last Name:	Trochesset		
Reporter Name:	James Nolen	Reporter Email:	ray.nolen@galvestoncountytx.gov

Decedent Information

Identity of Deceased

First Name: Cesar

Middle Name: Sadam

Last Name: Carballo

Suffix:

Date of Birth: 8/12/1996 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 25

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

Date/Time of Custody or Incident: 1/12/2022 5:20 PM

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

Death Date and Time: 1/12/2022 6:05 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 to 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: 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:	RR 674 / MM 508	City:	Bracketville
County:	Kinney	Zip:	78832

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: Police Custody (pre-booking)

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:

5 counts of Human Smuggling

Offense 2:

Felony Evading Arrest

Offense 3:

Possession of Firearm - Bond Violation

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:	Other, specify

Type of Offense, Other:

Human Smuggling, Evading

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	Attempted to injure civilian(s) or other

Injure Others:	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?:	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:	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 the operator of a motor vehicle actively evading law enforcement units in an area of the Texas Southern Border that is well known for suspected human smuggling. As the decedents vehicle was being pursued at high rates of speed, several (5) occupants of the fleeing vehicle were observed at various intervals, jumping from the moving vehicle and getting up and running. The decedent then later at speeds of 85 - 90 mph, exited the roadway, drove through a barbwire fence and struck a tree. As law enforcement deputies approached the decedents vehicle, they observed the decedent slumped forward with his face on the steering wheel. Access was then immediately gained into the driver's compartment of the vehicle where it was then discovered that the decent had a large laceration on the front region of his forehead and a large segment of what appeared to be the decedents brain was found resting on the dash of the vehicle. A firearm

was found near the emergency brake of the vehicle and a spent shell casing on the passenger side floorboard. It was later determined by the Medical Examiner that the decedent had suffered a self-inflicted gunshot wound to the head.