KEN PAXTON
ATTORNEY GENERAL of TEXAS

# CUSTODIAL DEATH REPORT

## Agency Information

| | | | |
|---|---|---|---|
| CDR Number: | 23-1751-CJ | Version Type: | AMENDED |
| Report Date: | 8/26/2024 11:11 AM | Status: | Submitted |

### Agency/Facility Information

| | | | |
|---|---|---|---|
| Agency Name: | Willacy County Sheriff | Agency Address: | 1371 Industrial Drive |
| Agency City: | Raymondville | Agency State: | TX |
| Agency Zip: | 78580 | | |

### Director Information

| | | | |
|---|---|---|---|
| Director Salutation: | Sheriff | Director First Name: | JOSE |
| Director Middle Name: | | | |
| Director Last Name: | SALAZAR | | |
| Reporter Name: | Dionicio Cortez | Reporter Email: | dionicio.cortez@co.willacy.tx.us |

## Decedent Information

### Identity of Deceased

First Name: James

Middle Name: Owen

Last Name: Shultz

Suffix:

Date of Birth: 1/21/1956 Sex: Male

Race: Anglo or White

Age At Time Of Death: 67

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

Date/Time of Custody or Incident: 12/29/2021 8:28 PM

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

Death Date and Time: 10/2/2023 10:19 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: Natural

## Medical Cause of Death:

Medical Cause of Death:

As per Preleminary Autopsy report No Significant Trauma, Toxicology Pending. Decedent had significant Cardiovascular disease.

## 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?: Not applicable

## 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?: Not Applicable

## 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?: Pre-existing medical condition

## If death was an accident, homicide or suicide, what was the means of death?

Means of Death: Not applicable, cause of death was illness/natural cause

# Location / Custody Information

## Where did the event causing the death occur?

| | | | |
|---|---|---|---|
| Street Address: | 1371 Industrial Drive | City: | Raymondville |
| County: | Willacy | Zip: | 78558 |

## What location category best describes where the event causing the death occurred?

| | |
|---|---|
| Location Category: | Law Enforcement Facility |

## What type of custody/facility was the Decedent in at the time of death:

| | |
|---|---|
| Type of Custody: | County Jail |

## Specific type of custody/facility:

| Specific Type of Custody/Facility: |
|---|
| Jail - holding cell |

## 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: | 12/29/2021 8:28 PM |

## 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?: No

## 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:

22.011(a)(2) Sexual Assault Child Felony 2

Offense 2:

22.011(a)(2) Sexual Assault Child Felony 2

Offense 3:

22.011(a)(2) Sexual Assault Child Felony 2

Were the Charges:: Filed

## 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: No

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

Attempt to Injure Others?: No

## 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?: No

Exhibit any mental health problems?: No

Exhibit any medical problems?: Yes

## 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: | No |
| 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:

On December 1st. At approximately 7:00 P.M. James Shultz had reported to officers that he had been involved in an altercation with another inmate at the Willacy County Jail in Raymondville, Texas. Officers removed James Owen Shultz from his Dorm and took him to medical and he was visually checked for any visible injuries which they did not see any. They made contact with the other inmates who stated they did not see or hear any altercation with him or the inmate he was accusing. Inmate Shultz requested to file charges on the inmate who had apparently assaulted him and Dispatch was notified and Deputy Smith responded and made contact with Shultz and took his statement along with the other inmates in the dorm. Photographs were taken of Mr. Shultz and he was placed in booking pending reclassification and housing.

On December 2nd. at approximately 7:45 P.M. Jailers responded to cell 194 and contacted Mr. Shultz regarding him complaining of throwing up and not feeling good. Officers continued monitoring Mr. Shultz on a 1-1 and Officers notified Medical who advised them to notify EMS and have Mr. Shultz taken to the Hospital. At 8:21 P.M. EMS arrived and transported him to Harlingen Medical Center for evaluation. At 10:01 the hospital called a Code Blue on Mr. Shultz and at 10:21 the doctor pronounced Mr. Shultz deceased. The Texas Rangers along with our Criminal Investigation Division were notified and they took over the investigation. An Autopsy was ordered on Mr. Shultz .

We received the final autopsy report on Mr. Shultz and as per the Medical Doctor of the Autopsy it was based on her opinion in the investigative information received and the autopsy findings, that James Shultz , a 67 year old male died as a result of an acute myocardial infarction due to atherosclerotic and hypertensive cardiovascular disease and dilated cardiomyopathy.