KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	23-475-CJ	Version Type:	AMENDED
Report Date:	10/25/2023 8:09 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Taylor County Sheriff's Office	Agency Address:	450 Pecan
Agency City:	Abilene	Agency State:	TX
Agency Zip:	79602		

Director Information

Director Salutation:	Sheriff	Director First Name:	Ricky
Director Middle Name:			
Director Last Name:	Bishop		
Reporter Name:	Ricky Bishop	Reporter Email:	ricky.bishop@taylorcounty.texas.gov

Decedent Information

Identity of Deceased

First Name: Kevin

Middle Name: Marlon

Last Name: Myers

Suffix:

Date of Birth: 6/20/1985

Sex: Male

Race: Black or African American

Age At Time Of Death: 37

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

Date/Time of Custody or Incident: 4/29/2023 2:33 PM

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

Death Date and Time: 4/29/2023 3:14 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:

Pulmonary Thromboembolism, deep venous thrombosis, hypertensive cardiovascular disease and morbid obesity

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:	910 S.27th	City:	Abilene
County:	Taylor	Zip:	79602

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 - single 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:	4/11/2023 3:40 PM

Where did the death occur?

Death Location:	Law enforcement facility/booking center

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:

MAN DEL of Meth 1F

Offense 2:

MAN DEL THC 1F

Offense 3:

MTR 3F PSMJ

Were the Charges:: Filed

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: 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?:	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:

On Saturday April 29, 2023 inmate Myers was found in his single cell alone at approx. 1433 hrs. laying on the floor. When officers checked on him, he was unresponsive with no pulse. CPR and AED were administered by our staff. Fire and EMS arrived and continued the life saving efforts, but were not successful. EMS stopped all efforts at 1514 hrs. JP was notified and an autopsy was ordered. Time of death was pronounced at 1514 hours. Texas Ranger Josh Burson is conducting the investigation.

Inmate Myers had a fourth charge not listed above. SJF UNAUTH ABS COMM CORR FAC