KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	23-971-UF	Version Type:	ORIGINAL VERSION
Report Date:	8/2/2023 1:56 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Groves Police Dept.	Agency Address:	4201 Main Ave.
Agency City:	Groves	Agency State:	TX
Agency Zip:	77619		

Director Information

Director Salutation:	Marshal	Director First Name:	Norman
Director Middle Name:	P.		
Director Last Name:	Reynolds		
Reporter Name:	Norman Reynolds	Reporter Email:	nreynolds@cigrovestx.com

Decedent Information

Identity of Deceased

First Name: David

Middle Name: Wilson

Last Name: Guilbeau

Suffix:

Date of Birth: 8/28/1962 Sex: Male

Race: Anglo or White

Age At Time Of Death: 60

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

Date/Time of Custody or Incident: 7/27/2023 1:40 PM

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

Death Date and Time: 7/27/2023 1:45 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 pending

What was the manner of death? (select only one)

Manner of Death: Pending autopsy results

Medical Cause of Death:

Medical Cause of Death:

Pending Results of Autopsy

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:	2820 Main Avenue	City:	Groves
County:	Jefferson	Zip:	77619

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:

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: 7/27/2023 1:40 PM

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?: 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:

Aggravated Assault of a Police Officer

Offense 2:

Aggravated Assault with a Deadly Weapon

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:	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:	Yes, mark all that apply
Decedent Display or Use Weapon Details:	Displayed firearm without discharge

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):	Yes	Make suicidal statements?:	Yes
Exhibit any mental health problems?:	Yes	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):	Yes	Gain possession of officer's weapon:	No
Verbally threaten other(s) including law:	Yes	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:

The preliminary investigation indicates that on Thursday, July 27, 2023 at approximately 1:55p.m., law enforcement officers responded to an emergency call relating to an individual behaving erratically and in possession of a handgun. When law enforcement arrived on scene, the suspect pulled the weapon from a holster and pointed it in the direction of the officers. At this time, the officers engaged and struck the suspect.

The suspect was transported to the Southeast Texas Medical Center in Port Arthur, Texas where he was pronounced dead. This is currently a pending investigation.