KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	24-1063-UF	Version Type:	ORIGINAL VERSION
Report Date:	7/24/2024 10:29 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Hood County Sheriff's Dept.	Agency Address:	400 Deputy Larry Miller Dr.
Agency City:	Granbury	Agency State:	TX
Agency Zip:	76048		

Director Information

Director Salutation:	Sheriff	Director First Name:	Roger
Director Middle Name:	E		
Director Last Name:	Deeds		
Reporter Name:	Gary Roberts	Reporter Email:	groberts@co.hood.tx.us

Decedent Information

Identity of Deceased

First Name: Garret

Middle Name:

Last Name: Tillery

Suffix:

Date of Birth: 3/20/1986 Sex: Male

Race: Anglo or White

Age At Time Of Death: 38

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

Date/Time of Custody or Incident: 6/24/2024 8:55 AM

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

Death Date and Time: 6/24/2024 8:55 AM

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

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?:	Rifle/shotgun

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:	4322 Peak Rd	City:	Granbury
County:	Hood	Zip:	76048

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:

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: Medical facility

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:

Cruelty to Non-Livestock Animals

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: Alcohol / drug offense; Medical / Mental Health assistance call; Other, specify

Type of Offense, Other:

Subject was abusing his dog

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:	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):	Yes	Make suicidal statements?:	No
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:	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:

Deputies responded to call for assistance from suspects mother, who stated suspect was beating his dog and appeared to be under the influence of narcotics. Upon arrival, deputies made contact with the suspect in an RV outside the residence. Shortly after making contact the suspect produced a revolver and fired several times at deputies. The suspect then retrieved a rifle and attempted to again fire at deputies. Deputies returned fire killing the suspect.