KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	24-1123-UF	Version Type:	AMENDED
Report Date:	8/13/2024 8:15 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Corpus Christi Police Dept.	Agency Address:	PO Box 9277
Agency City:	Corpus Christi	Agency State:	TX
Agency Zip:	78469		

Director Information

Director Salutation:	Chief	Director First Name:	Mike
Director Middle Name:			
Director Last Name:	Markle		
Reporter Name:	Weldon Weber	Reporter Email:	weldonw@corpuschristitx.gov

Decedent Information

Identity of Deceased

First Name:	Preston
Middle Name:	Larue
Last Name:	Graham
Suffix:	
Date of Birth:	7/16/1995
Sex:	Male
Race:	Black or African American
Age At Time Of Death:	29

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

Date/Time of Custody or Incident:	7/22/2024 9:44 PM

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

Death Date and Time:	7/22/2024 11:29 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:	Homicide (includes Justifiable

Homicide)

Medical Cause of Death:

Medical Cause of Death:

"...died as a result of gunshot wound of lower extremity."

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:	4101 Brett Street Apt. Q05	City:	Corpus Christi
County:	Nueces	Zip:	78411

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:

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:

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:

Aggravated Assault On A Peace Officer

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: Other, specify

Type of Offense, Other:

Suspicious Circumstances Call

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?:	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):	No	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?:	Yes	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:	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:

On 07/22/2024 at approximately 2144pm, several on-duty uniformed police officers responded to 4101 Brett Street Apt. Q05 in response to a call for service involving suspicious circumstances. Officers located the upstairs residence and attempted to make contact with the occupant(s). A male occupant (decedent)

responded by making verbal threats to the officers from inside his apartment. Officers retreated and established a perimeter, while requesting additional assistance. After a short period of time, the decedent opened the apartment front door and stepped out while displaying a firearm and pointing it at officers. Two officers responded by discharging their firearms, striking the decedent, who retreated back inside his apartment. Upon clearing the apartment, officers discovered the decedent had expired at the scene. No other persons were injured.