KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	24-1483-CJ	Version Type:	AMENDED
Report Date:	10/25/2024 3:34 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Polk County Sheriff's Dept.	Agency Address:	1733 N. Washington
Agency City:	Livingston	Agency State:	TX
Agency Zip:	77351		

Director Information

Director Salutation:	Sheriff	Director First Name:	Byron
Director Middle Name:	A		
Director Last Name:	Lyons		
Reporter Name:	DAVID SOTTOSANTI	Reporter Email:	dsottosanti@polkcountyso.net

Decedent Information

Identity of Deceased

First Name: JAMES

Middle Name: EUGENE

Last Name: WILLARD

Suffix:

Date of Birth: 5/16/1964 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: 9/7/2024 9:59 PM

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

Death Date and Time: 10/19/2024 12:31 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 are available

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

Manner of Death: Natural

Medical Cause of Death:

Medical Cause of Death:

CAUSE OF DEATH: Hypertensive and atherosclerotic cardiovascular disease, valvular heart disease (mitral valve prolapse), and anomalous coronary artery origin.

OTHER CONDITION: Chronic obstructive pulmonary disease.

MANER OF DEATH: Natural.

Had the decedent been receiving treatment for the medical condition that caused the death after admission to your jail's jurisdiction?

Medical Treatment: No

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?: Could not be determined

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:	1733 N. WASHINGTON AVENUE	City:	LIVINGSTON
County:	Polk	Zip:	77351

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 - multiple occupancy 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:	9/7/2024 9:59 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:

Possession of Controlled Substance PG1/1G>=4G<200G

Offense 2:

Possession of Marijuana<2oz

Offense 3:

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?:	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):	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 October 18, 2024, at approximately 2347 hours, Polk County Jail staff responded to Dorm 201, due to an unresponsive Inmate. Jail staff arrived and observed Inmate James Willard, laying on his side and appeared to be having a seizure.

Jail staff assessed Mr. Willard, placed him in a wheelchair and escorted him to the Booking Area. Once at the Booking Area, Jail staff observed that Mr. Willard was not breathing and they immediately began life saving measures, to include the use of the AED. Local Emergency Medical Services were dispatched to the Jail and they assumed lifesaving measures upon their arrival.

On October 19, 2024, at 0031 hours, Inmate Willard was pronounced deceased, by Dr. Alicia Hart, MD, of St. Luke's Health-Memorial Hospital, of Livingston, TX.

This report has been updated with Autopsy results that are now available..