KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	24-1686-UF	Version Type:	ORIGINAL VERSION
Report Date:	1/6/2025 11:01 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Walker County Sheriff's Dept.	Agency Address:	717 FM 2821, Suite 500
Agency City:	Huntsville	Agency State:	TX
Agency Zip:	77320		

Director Information

Director Salutation:	Sheriff	Director First Name:	Clint
Director Middle Name:	R		
Director Last Name:	McRae		
Reporter Name:	THOMAS BEAN	Reporter Email:	tbean@co.walker.tx.us

Decedent Information

Identity of Deceased

First Name: Tylor

Middle Name: Troy

Last Name: Turner

Suffix:

Date of Birth: 5/26/1992 Sex: Male

Race: Anglo or White

Age At Time Of Death: 32

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

Date/Time of Custody or Incident: 10/9/2024 9:28 PM

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

Death Date and Time: 10/9/2024 9:28 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:

Multiple Gunshot wounds

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?: 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:	132 Twin Creek Dr	City:	HUNTSVILLE
County:	Walker	Zip:	77320

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:	10/9/2024 9:28 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?: 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:

Agg Assault on 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: Medical / Mental Health assistance 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?: Unknown

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Appear intoxicated (alcohol or drugs): Unknown

Make suicidal statements?: Yes

Exhibit any mental health problems?: Yes

Exhibit any medical problems?: Unknown

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?:	N/A
Physically attempt/assault officer(s):	Unknown	Gain possession of officer's weapon:	No
Verbally threaten other(s) including law:	Unknown	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 9, 2024, deputies responded to a welfare concern call where a male had called 911 wanting to talk to someone about suicidal thoughts. Deputies arrived on scene and made contact with the male subject in the front yard of the residence. Upon making contact with the male subject, deputies observed a revolver resting in his lap. Deputies communicated with the male subject for almost an hour trying to get him to leave the revolver on the bench where he was sitting and get mental health assistance. After over an hour of speaking with the subject, he quickly reached for the pistol. Believing their lives were in danger at that time, both deputies fired and struck the male. When the male was down, the deputies administered life saving measures but were not successful in bringing him back to life. Texas Rangers were then called and conducted an investigation.