KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	24-723-UF	Version Type:	AMENDED
Report Date:	5/28/2024 9:29 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Texas Department Of Public Safety	Agency Address:	PO BOX 4087
Agency City:	Austin	Agency State:	TX
Agency Zip:	78773		

Director Information

Director Salutation:	Director	Director First Name:	Freeman
Director Middle Name:			
Director Last Name:	Martin		
Reporter Name:	Joanne Scarbrough	Reporter Email:	joanne.scarbrough@dps.texas.gov

Decedent Information

Identity of Deceased

First Name: Luis

Middle Name: Miguel

Last Name: Navarro

Suffix:

Date of Birth: 5/11/1986 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 37

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

Date/Time of Custody or Incident: 4/29/2024 12:44 PM

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

Death Date and Time: 4/29/2024 1:46 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:

Gunshot wound

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:	SL 1604 @ FM 78	City:	Converse
County:	Bexar	Zip:	78109

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:

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:

Aggravated Assault with a Deadly Weapon

Offense 2:

Aggravated Assault with a Deadly Weapon-Warrant

Offense 3:

Evading Arrest with a Motor Vehicle

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:

Evading Arrest with a Motor Vehicle

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:	Used vehicle as weapon

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; Injured civilian(s) or other inmate(s)

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?:	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?:	Yes
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:

A DPS Trooper was involved in a lengthy pursuit with the suspect. The pursuit ended when the suspect crashed his car into an innocent motorist. As the suspect exited his vehicle, the Trooper gave him verbal commands to get on the ground. The suspect started to get down before beginning to evade on foot. The Trooper twice deployed his Department issued Taser, which had little to no effect on the suspect. The suspect then approached the Trooper while making threatening statements. The Trooper continued giving

verbal commands, which the suspect ignored. The Trooper shot the suspect once in the chest. The Trooper then provided the suspect first aid until emergency medical services arrived. The suspect later died at the hospital.