KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	24-91-CJ	Version Type:	ORIGINAL VERSION
Report Date:	1/29/2024 1:35 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Shelby County Sheriff's Dept.	Agency Address:	100 Hurst St.
Agency City:	Center	Agency State:	TX
Agency Zip:	75935		

Director Information

Director Salutation:	Sheriff	Director First Name:	Kevin
Director Middle Name:			
Director Last Name:	Windham		
Reporter Name:	Ruth Gonzales	Reporter Email:	ruth.gonzales@co.shelby.tx.us

Decedent Information

Identity of Deceased

First Name: James

Middle Name: Ray

Last Name: Jackson

Suffix:

Date of Birth: 9/2/1963

Sex: Male

Race: Black or African American

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: 1/12/2024 10:15 PM

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

Death Date and Time: 1/17/2024 5:34 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:

Waiting for autopsy results.

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: Unknown

Location / Custody Information

Where did the event causing the death occur?

Street Address:	100 Hurst St	City:	Center
County:	Shelby	Zip:	75935

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 - holding 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:	1/12/2024 10:15 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:

Aggravated Assault with a Deadly Weapon (Family member) - F1

Offense 2:

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: Violent Crime Against Persons

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):	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?:	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 Wednesday, January 17, 2024, at approximately 5:00am Jail staff discovered the inmate in Holding cell unresponsive. Correctional Officer Jimmy Reed contacted Senior Correctional Officer Richard Sims for assistance. Mr. Sims determined that inmate was unresponsive and ambulance services were requested to transport the inmate to the hospital.

Upon EMT’s arrival, it was determined the inmate was deceased. The decedent was identified as Jackson, James, B/M, DOB 09/02/1963. Mr. Jackson was arrested by Center Police Department on January 12, 2024 for Aggravated Assault with Deadly Weapon (F1).

Ranger James Hicks was contacted to conduct an investigation on the death inquest. Justice of the Peace Donna Hughes pronounced Mr. Jackson deceased at 05:34am.