KEN PAXTON
ATTORNEY GENERAL of TEXAS

# CUSTODIAL DEATH REPORT

## Agency Information

| | | | |
|---|---|---|---|
| CDR Number: | 25-487-CJ | Version Type: | AMENDED |
| Report Date: | 6/30/2025 8:41 AM | Status: | Submitted |

### Agency/Facility Information

| | | | |
|---|---|---|---|
| Agency Name: | Bexar County Sheriff's Office | Agency Address: | 200 N. Comal |
| Agency City: | San Antonio | Agency State: | TX |
| Agency Zip: | 78207 | | |

### Director Information

| | | | |
|---|---|---|---|
| Director Salutation: | Sheriff | Director First Name: | Javier |
| Director Middle Name: | | | |
| Director Last Name: | Salazar | | |
| Reporter Name: | gary wigal | Reporter Email: | gary.wigal@bexar.org |

## Decedent Information

### Identity of Deceased

First Name: WAYNE

Middle Name:

Last Name: PARKER

Suffix:

Date of Birth: 3/25/1977 Sex: Male

Race: Anglo or White

Age At Time Of Death: 48

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

Date/Time of Custody or Incident: 3/27/2025 3:28 PM

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

Death Date and Time: 6/18/2025 9:55 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:

Complications of Blunt Force Trauma of Head

## 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?

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|---|---|
| Who caused the death?: | Other detainee(s) |

## 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?: | Deceased developed condition after admission |

## If death was an accident, homicide or suicide, what was the means of death?

| | |
|---|---|
| Means of Death: | Other, specify |
| Means of Death Other: | Complications of Blunt Force Trauma of Head |

# Location / Custody Information

### Where did the event causing the death occur?

| | | | |
|---|---|---|---|
| Street Address: | 200 N. COMAL | City: | SAN ANTONIO |
| County: | Bexar | Zip: | 78252 |

### 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: | 3/27/2025 3:28 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:

ASSAULT PUBLIC SERVANT

Offense 2:

Offense 3:

Were the Charges:: Convicted

## 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): No

Make suicidal statements?: No

Exhibit any mental health problems?: Yes

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 June 2, 2025, at approximately 1659 hours Inmate Parker was involved in a code 2 (physical disturbance in his cell with his cellmate, Lucero, Tommy #1209093. A code two/code one (physical disturbance/medical emergency) due to observing inmate Lucero assaulting Inmate Parker inside their assigned cell. A code one blue (life threatening emergency) was initiated due to Inmate Parker being unresponsive. Medical staff arrived and initiated emergency medical treatment to Inmate Parker. Inmate parker was stabilized and subsequently transported Inmate to Brook Army Medical Center (BAMC) for treatment.

Inmate Parker was released from the custody of Bexar County Sheriff's Office on 06/02/2025; however, he remained hospitalized at BAMC. Inmate Parker succumbed to his injuries on 06/18/25 at approximately 2155 hours. The investigating agency (Texas Rangers) and Medical Examiner were notified on 06/18/2025, at approximately 2200 hours. The BCSO was notified of the death on 06/19/2025, at approximately 0920 hours.