KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	25-519-PF	Version Type:	ORIGINAL VERSION
Report Date:	7/9/2025 9:25 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Corpus Christi Police Dept.	Agency Address:	PO Box 9277
Agency City:	Corpus Christi	Agency State:	TX
Agency Zip:	78469		

Director Information

Director Salutation:	Chief	Director First Name:	Mike
Director Middle Name:			
Director Last Name:	Markle		
Reporter Name:	Weldon Weber	Reporter Email:	weldonw@corpuschristitx.gov

Decedent Information

Identity of Deceased

First Name: Richard

Middle Name: Anthony

Last Name: Estrella

Suffix:

Date of Birth: 9/9/1981 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 43

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

Date/Time of Custody or Incident: 6/10/2025 1:35 AM

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

Death Date and Time: 6/10/2025 2:26 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: Accidental

Medical Cause of Death:

Medical Cause of Death:

"...died as the result of cocaine toxicity with a terminal physical struggle. Cardiomyopathy is considered contributory."

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?: Decedent

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?: 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: Drug overdose

Location / Custody Information

Where did the event causing the death occur?

Street Address: 6901 Saratoga Blvd
City: Corpus Christi
County: Nueces
Zip: 78414

What location category best describes where the event causing the death occurred?

Location Category: Parking lot/garage

What type of custody/facility was the Decedent in at the time of death:

Type of Custody: Private Facility

Specific type of custody/facility:

Specific Type of Custody/Facility:

Hospital/Infirmary

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?: No

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:

Public Intoxication

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: Alcohol / drug 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: 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?: Yes

Exhibit any medical problems?: Yes

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:	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:	Yes, mark which restraint devices were used

Type of restraint

Type of Restraint:	Handcuffs

Summary of Incident

Summary of How the Death Occurred: (max. 30,000 characters)

Summary:

On 06/10/2025 at approximately 0135hrs, several uniformed police officers from the Corpus Christi Police Department responded to 6901 Saratoga Blvd, the Icon Apartments, in reference to a disturbance call. Comments on the call advised that the decedent was walking through the parking lot of the complex screaming erratically and calling out for help. Upon arrival, officers discovered the decedent in the parking lot at the front gate to the complex. The decedent was contacted by officers, and he showed signs of being under the influence of a narcotic substance. As officers attempted to assess the situation and identify the decedent, he continued to be uncooperative and then attempted to run away. Officers detained him with handcuffs for safety reasons. Emergency Medical Personnel were immediately requested and arrived a short time thereafter. Recognizing the decedent was having a medical episode, the paramedics and officers prepared the decedent for transportation by an ambulance to a local medical facility, where he passed away.