KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	26-243-CJ	Version Type:	ORIGINAL VERSION
Report Date:	3/30/2026 8:44 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Henderson County Sheriff's Dept.	Agency Address:	206-A N. Murchison
Agency City:	Athens	Agency State:	TX
Agency Zip:	75751		

Director Information

Director Salutation:	Sheriff	Director First Name:	Botie
Director Middle Name:			
Director Last Name:	Hillhouse		
Reporter Name:	David Faught	Reporter Email:	dfaught@henderson-county.com

Decedent Information

Identity of Deceased

First Name: Karl

Middle Name: Tremayne

Last Name: Dora

Suffix:

Date of Birth: 8/8/1983

Sex: Male

Race: Black or African American

Age At Time Of Death: 42

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

Date/Time of Custody or Incident: 7/31/2025 11:45 AM

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

Death Date and Time: 1/30/2026 12:50 AM

Manner / Cause of Death

Has a medical examiner or coroner conducted an evaluation to determine a cause of death?

Medical Examiner/Coroner Evaluation?: No, evaluation not planned

What was the manner of death? (select only one)

Manner of Death: Natural

Medical Cause of Death:

Medical Cause of Death:

Heart Attack

Had the decedent been receiving treatment for the medical condition that caused the death after admission to your jail's jurisdiction?

Medical Treatment: Yes

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?: Pre-existing medical condition

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

Means of Death: Not applicable, cause of death was illness/natural cause

Location / Custody Information

Where did the event causing the death occur?

Street Address:	206 A North Murchison	City:	Athens
County:	Henderson	Zip:	75751

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:
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:	7/31/2025 11:45 AM

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:

Manufacture/Delivery of Controlled Substance PG1 >400G

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: Alcohol / drug offense

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?: 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:

Inmate was housed in multiple occupancy cell. Inmate stated he wasn't feeling good after eating and went to cell. Inmates notified staff of unresponsive inmate in the dorm. Detention and medical staff responded and began life saving measures. Inmate was transported to local emergency room by ambulance and later transferred to UT Health hospital in Tyler. Inmate was housed in ICU and was placed on life support. Inmates family decided to remove the inmate from life support and the inmate passed. Justice of the Peace conducted autopsy at the hospital and did not order an autopsy of the inmate. Texas Ranger Joshua Jenkins was called to conduct an in custody death investigation.