KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	26-538-CJ	Version Type:	ORIGINAL VERSION
Report Date:	7/15/2026 3:03 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Hardin County Sheriff's Dept.	Agency Address:	PO BOX 1990
Agency City:	Kountze	Agency State:	TX
Agency Zip:	77625		

Director Information

Director Salutation:	Sheriff	Director First Name:	Mark
Director Middle Name:	L		
Director Last Name:	Davis		
Reporter Name:	Mark Davis	Reporter Email:	mark.davis@co.hardin.tx.us

Decedent Information

Identity of Deceased

First Name: William

Middle Name: Roby

Last Name: Ingle

Suffix: Jr

Date of Birth: 6/22/1967 Sex: Male

Race: Anglo or White

Age At Time Of Death: 59

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

Date/Time of Custody or Incident: 6/6/2026 10:30 PM

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

Death Date and Time: 6/27/2026 8:01 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:

pending histology

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

Location / Custody Information

Where did the event causing the death occur?

Street Address:	2830 Calder Avenue	City:	Beaumont
County:	Jefferson	Zip:	77702

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

Location Category: Other, specify

Other Location Category:

Hospital

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: 6/26/2026 10:30 PM

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:

Tamper with Electronic Monitoring Device (SJF)

Offense 2:

Parole Violation Administrative Blue Warrant

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: Other, specify

Type of Offense, Other:

Tampering with Electronic Monitoring Device

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 26, 2026, the inmate was transported to Christus St. Elizabeth Hospital from the county jail. He appeared lethargic and displayed labored breathing. He refused to eat and refused to take his medicine. He was admitted into the hospital whereby the hospital staff began an examination. On June 27, 2026, he suffered a medical episode. The medical staff attempted life-saving procedures but was unsuccessful. He was pronounced deceased at 8:01 am. The Justice of the Peace ordered an autopsy be performed. The preliminary autopsy findings are Hypertensive heart disease, pulmonary edema and congestion, and post mortem toxicology pending.