KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	26-545-CJ	Version Type:	ORIGINAL VERSION
Report Date:	7/20/2026 10:33 AM	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:	Albert
Director Middle Name:			
Director Last Name:	Corbell		
Reporter Name:	Tiffany Ryals	Reporter Email:	tiffany.ryals@co.shelby.tx.us

Decedent Information

Identity of Deceased

First Name: James

Middle Name: Elliot

Last Name: Perry

Suffix: JR

Date of Birth: 7/2/1977 Sex: Male

Race: Anglo or White

Age At Time Of Death: 49

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

Date/Time of Custody or Incident: 7/18/2026 10:11 PM

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

Death Date and Time: 7/19/2026 7:19 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:

Unknown

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?: Unknown

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:	7/18/2026 10:11 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:

Disorderly Conduct (Indecent Exposure)

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: Other, specify

Type of Offense, Other:

Welfare check to check on male that was running around naked, showing his genitals to an eleven year old female

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?: 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:	Yes, mark which restraint devices were used

Type of restraint

Type of Restraint:	Other device, specify
Other device, specify:	Restraint Chair

Summary of Incident

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

Summary:

Inmate was brought into Shelby County Jail on July 18, 2026 @ approximately 2211 hours. Initial call of service was to go check on a male subject that appeared to be intoxicated and mental. Upon deputies arriving they found James Elliot Perry in the front yard completely exposed. Witness told deputies he was showing is genitals to an eleven year old female. Deputy call chief deputy to get approved to bring in Perry on a disorderly conduct charge so that the inmate could be evaluated by Burke center for Mental Health Evaluation. Subject was brought into jail and subject was mentally altered. Inmate as placed into Holding Cell on ten minute observation and mental health checks and also placed in a suicide smock for his safety until cleared by the Burke Center. Inmate was all over the floor, hitting the partition in the cell. To keep from the inmate injuring himself while obvious intoxication and mental health signs were being shown, jailers made the decision to place Inmate in restraint chair to keep from him physically harming himself. Inmate after being placed in restraint chair there was still visible signs of intoxication. At approximately 0651 hours jailer was conducting a face to face check on inmate, at that time, inmate was found unresponsive.