KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	26-733-CJ	Version Type:	ORIGINAL VERSION
Report Date:	9/16/2026 2:32 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Polk County Sheriff's Dept.	Agency Address:	1733 N. Washington
Agency City:	Livingston	Agency State:	TX
Agency Zip:	77351		

Director Information

Director Salutation:	Sheriff	Director First Name:	Byron
Director Middle Name:	A		
Director Last Name:	Lyons		
Reporter Name:	DAVID SOTTOSANTI	Reporter Email:	dsottosanti@polkcountyso.net

Decedent Information

Identity of Deceased

First Name: JOHNNY

Middle Name: BERNARD

Last Name: MILES

Suffix:

Date of Birth: 5/19/1960 Sex: Male

Race: Black or African American

Age At Time Of Death: 66

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

Date/Time of Custody or Incident: 6/26/2026 11:11 PM

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

Death Date and Time: 9/13/2026 11:44 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: Natural

Medical Cause of Death:

Medical Cause of Death:

PRELIMINARY AUTOPSY FINDING:

Hypertensive and atherosclerotic cardiovascular disease.
** (Awaiting toxicology results for completion of the final autopsy report. This report will be amended upon receipt of the final autopsy report.).

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:	1733 N Washington Ave	City:	Livingston
County:	Polk	Zip:	77351

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:	6/26/2026 11:11 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:

DRIVING WHILE INTOXICATED 3RD OR MORE

Offense 2:

ASSAULT BY PHYSICAL CONTACT (CLASS C)

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):	Yes	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:

On September 13, 2026, at approximately 10:19 a.m., Mr. Miles suffered a medical emergency in the shower area of Dormitory 233. Jail staff responded and found Mr. Miles breathing but unresponsive and EMS was immediately requested.

When Mr. Miles subsequently stopped breathing, jail staff immediately initiated chest compressions and continued lifesaving measures until EMS arrival.

EMS arrived, assumed lifesaving measures, and transported Mr. Miles to St. Luke's Health - Memorial Hospital, in Livingston, Texas.

Despite continued lifesaving efforts, Mr. Miles was pronounced deceased by Dr. Deonza Tymes, at approximately 11:44 a.m.