KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

PA Number:	PA16221PF	Report Date:	5/31/2016 1:57 PM
Status:	Submitted		

Agency/Facility Information

Department ID:	567	Department Type:	SHERIFF
Agency Name:	McLennan County Sheriff\'s Dept.	Agency Number:	TX1550000
Agency Phone:	2547575156	Agency Address:	901 Washington
Agency City:	Waco	Agency County:	McLennan
Agency State:	TX	Agency Zip:	76701

Director Information

Director Salutation:

Sheriff

Director First Name:

Larry

Director Middle Name:

Director Last Name:

Lynch

Reporter Name:	Lt. Robert Fulmer	Reporter Email:	robert.fulmer@co.mclennan.tx.us

Location / Custody Information

Where did the event causing the death occur?

Street Address: 3101 E. Hwy 6

City: Waco

County: McLennan

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

Type of Custody:

Private Correctional Facility

Specific type of custody/facility:

Specific Type of Custody/Facility:

Jail - single cell

Custody Type Facility:

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: 5/30/2016 7:27 PM

Where did the death occur?

Death Location: At law enforcement facility

Death Location Elsewhere:

Decedent Information

Identity of Deceased

First Name: Kristian

Middle Name: Jesse

Last Name: Culver

Suffix: Mr.

Date of Birth: 3/1/1984 Sex: Male

Ethnicity: Other

Ethnicity Other: White

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

Death Date and Time: 5/30/2016 7:27 PM

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

Date/Time of Custody or Incident:

4/11/2016 8:25 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:

Suicide

Manner of Death Description:

Death Reason:

Not applicable

Medical Cause of Death:

Medical Cause of Death:

Pending

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

Medical Treatment:

Yes

Medical Treatment Description:

Injury to left hand

If death was an accident, homicide or suicide, who caused the death?

Who caused the death?:

Not applicable; cause of death was suicide, intoxication or illness/natural causes

Death Causer Other:

If a weapon caused the death, what type of weapon caused the death? (mark all that apply)

Type of Death Weapon:

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?:

Don\'t know

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

Means of Death:

Hanging, strangulation

General Information

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:

Assault Public Servant

Offense 2:

Impersonate Public Servant

Offense 3:

Weapon Offense

Were the Charges::

Not filed at time of death

What were the types of charges or reason for contact?

Type of Offense:

Injuries of Decedent

Injured By: Injured by Suicide

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Appear intoxicated (alcohol or drugs): No

Exhibit any mental health problems?:

Exhibit any medical problems?:

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Threaten the officer(s) involved: No

Resist being handcuffed or arrested?: No

Try to escape/flee from custody: No

Grab, hit or fight with the officer(s): No

Other Behavior:

Specify Other Behavior:

Use weapon threaten/assault officer(s): 0

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 5-30-16 USM Inmate Kristian Jesse Culver W/M DOB 3/1/84 was housed in a single segregation cell at the Jack Harwell Detention Center located at 3101 E. Hwy6 a location in McLennan County. An Officer employed with JHDC was conducting cell checks at6:38pm whenit was discovered that Inmate Culver was hangingin the back right corner of the single cell by a noose made from jail issue sheet. The Jack Harwell Detention Officer radioed for assistance and the JHDC Officer was able to pull Inmate Culver down to the ground. Medical assistance arrived at 6:40pm where CPR was started. Inmate Culver was pronounced deceased at 7:27pm by East Texas Medical Center.