KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

PA Number:	PA16320CJ	Report Date:	7/25/2016 3:40 PM
Status:	Submitted		

Agency/Facility Information

Department ID:	904	Department Type:	SHERIFF
Agency Name:	Washington County Sheriff's Dept.	Agency Number:	TX2390000
Agency Phone:	9792776251	Agency Address:	1206 Old Independence Rd.
Agency City:	Brenham	Agency County:	Washington
Agency State:	TX	Agency Zip:	77833

Director Information

Director Salutation:

Sheriff

Director First Name:

Otto

Director Middle Name:

H.

Director Last Name:

Hanak

Reporter Name: Jay Petrash Reporter Email: jpetrash@wacounty.com

Location / Custody Information

Where did the event causing the death occur?

Street Address: 1206 Old Independence Rd

City: Brenham

County: Washington

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:

Custody of Peace Officer during/fleeing arrest

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:

Entry Date Time N/A: ☑

Where did the death occur?

Death Location: At medical facility

Death Location Elsewhere:

Decedent Information

Identity of Deceased

First Name: Alvin

Middle Name: Lamar

Last Name: Ray

Suffix:

Date of Birth: 10/7/1967 Sex: Male

Ethnicity: African-American

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

Death Date and Time: 7/25/2016 12:27 PM

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

Date/Time of Custody or Incident:

7/25/2016 10:21 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 are available

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

Manner of Death:

Natural Causes/Illness

Manner of Death Description:

Heart Attack

Death Reason:

Medical condition only (e.g. heart attack)

Medical Cause of Death:

Medical Cause of Death:

Atherosclerotic Cardiovascular Disease

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

Medical Treatment:

Not Applicable

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:

Not applicable, cause of death was illness/natural cause

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:

Aggravated Sexual Assault Child Parole Violation

Offense 2:

Fail to comply as a sex Offender Warrant Harris Co.

Offense 3:

Were the Charges::

Probation/Parole

What were the types of charges or reason for contact?

Type of Offense:

Injuries of Decedent

Injured By: Injured by NA

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:	Yes	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:

Yes

Summary of Incident

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

Summary:

Suspect was stopped for a traffic violation, Deputy issued the suspect a Warning ticket (was a bicycle violation), Deputy then offered to give suspect ride to his house, when suspect was searched before entering

the police vehicle, Officer found his wallet, then asked to look at his ID. Suspect lied about who's the ID was and claimed it was his son. During more questioning, the suspects true ID was made and a TCIC/NCIC check was completed, a parole warrant was discovered, when Deputy advised suspect he was under arrest, suspect fled on foot. Deputy gave chase, overtaking the suspect placing him in custody on the patrol warrant. Once arriving at the County Jail Sally Post, the suspect told the Deputy that he was not feeling good, Deputy got him out of vehicle and sit him down and called for EMS, Ems arrived and started treatment, EMS advised suspect was having a heart attack and transported to St. Joe's Hospital in Bryan Texas. Transport Deputy followed EMS to hospital. St. Joe's Emergency Room Doctor Gray pronounced suspect dead at 12:27pm (7/25/2016). According to thye ER doctor suspect died of a "Massive MI"(Hear attack) Autopsy pending as ordered by Brazos Co JP#2 Tommy Munoz.