



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 17-631-C

Version Type: AMENDED

Report Date: 12/1/2017 1:51 PM

Status: Submitted

Agency/Facility Information

Agency Name: Harris County
Sheriff's Dept.

Agency Address: 1200 Baker Street

Agency City: Houston

Agency State: TX

Agency Zip: 77002

Director Information

Director Salutation: Sheriff

Director First Name: Ed

Director Middle Name:

Director Last Name: Gonzalez

Reporter Name: Jeffery Vickery

Reporter Email: jeffery.vickery@sheriff.hctx.net

Decedent Information

Identity of Deceased

First Name: Claudia

Middle Name: Abigail

Last Name: Garcia-Miranda

Suffix:

Date of Birth: 2/12/2000

Sex: Female

Race: Hispanic or Latino

Age At Time Of Death: 17

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

Date/Time of Custody or
Incident: 9/5/2017 2:48 AM

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

Death Date and Time: 9/5/2017 3:15 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: Homicide (includes
Justifiable
Homicide)

Medical Cause of Death:

Medical Cause of Death:

Multiple gunshot wounds

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?: Law
enforcement/correctional
personnel

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?: Handgun

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?: Not Applicable;
cause of death was
accidental injury,
intoxication, suicide
or homicide

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

Means of Death: Firearm

Location / Custody Information

Where did the event causing the death occur?

Street Address: 16909 Rolling
Creek Dr

City: Houston

County: Harris

Zip: 77090

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

Location Category: Parking lot/garage

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

Type of Custody: Police Custody
(pre-booking)

Specific type of custody/facility:

Specific Type of Custody/Facility:

Custody of Law Enforcement Personnel during/fleeing arrest

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: Scene of incident

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:

Evading Arrest/Detention

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:

Road Rage Incident

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?: 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:	Yes
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 5, 2017, Harris County Sheriff's Office deputies responded to a request made by US Deputy Marshals for assistance in conducting a traffic stop. Deputies located the moving vehicle and attempted to conduct a traffic stop. The vehicle evaded from deputies and entered a motel parking lot. The driver of the suspect vehicle struck the marshal's vehicle and marshals fired their weapons at the suspect vehicle. The suspect vehicle drove towards a deputy, who had exited his patrol car, and the deputy fired his weapon at the suspect vehicle. The suspect vehicle continued evading and entered an apartment complex, followed by deputies and marshals. The truck attempted to force the gate open by ramming into it. The suspect vehicle reversed towards deputies and marshals, and additional shots were fired at the suspect vehicle. The suspect vehicle broke the gate and entered the complex. The suspect vehicle stopped inside the complex and occupants fled. A female (decedent) was found in the front seat of the suspect vehicle, and EMS responded. EMS personnel arrived and found no signs of life on the female.

* The date of birth (required data) of the decedent is unknown at this time. The report will be amended upon determination of the decedent's date of birth. The decedent was advised to be 17 years of age.

* Amendment- (12-06-2017) Decedent's Date of Birth was obtained.

* Amendment- (01-11-2018) Autopsy Results entered