



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 19-1005-UF

Version Type: AMENDED

Report Date: 4/2/2020 2:24 PM

Status: Submitted

Agency/Facility Information

Agency Name: Denton County
Sheriff's Office.

Agency Address: 127 N. Woodrow
Ln. Suite 300

Agency City: Denton

Agency State: TX

Agency Zip: 76205

Director Information

Director Salutation: Sheriff

Director First Name: Tracy

Director Middle Name:

Director Last Name: Murphree

Reporter Name: Ronald Pettigrew

Reporter Email: ron.pettigrew@dentoncounty.gov

Decedent Information

Identity of Deceased

First Name: Kristopher

Middle Name: Scott

Last Name: Adams

Suffix:

Date of Birth: 1/5/1982

Sex: Male

Race: Anglo or White

Age At Time Of Death: 37

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

Date/Time of Custody or
Incident: 9/16/2019 5:45 PM

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

Death Date and Time: 9/16/2019 6:41 PM

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:

- I) Gunshot wound of back
- II) Recent Methamphetamine use

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?: 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: 4395 View Road

City: Sanger

County: Denton

Zip: 76266

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

Location Category: Residence/Home

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

Type of Custody: Pre-Custodial Use
of Force

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?: No

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:

Unlawful Possession of Firearm-Felon

Offense 2:

PAROLE WARRANT

Offense 3:

POSSESSION OF PG 1

Were the Charges:: A probation/parole violation

What were the types of charges or reason for contact? (Hold CTRL to select all that apply)

Type of Offense: Violent Crime
Against Persons

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: Yes, mark all that apply

Decedent Display or Use Weapon Details: Displayed firearm without discharge

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

Attempt to Injure Others?: Yes (select all that apply)

Ways Decedent Attempted To Injure Others: Attempted to injure law enforcement personnel

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

Appear intoxicated (alcohol or drugs):	Unknown	Make suicidal statements?:	Yes
Exhibit any mental health problems?:	Unknown	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?:	Yes
Physically attempt/assault officer(s):	No	Gain possession of officer's weapon:	No
Verbally threaten other(s) including law:	Yes	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:

Follow up investigation that the subject was in possession of a stolen pickup and active warrants from the State of Florida. Contact was made at an associate's residence where the subject was hiding. Officers began to search residence when the subject fled out of a window. As the foot pursuit began the subject fell and dropped a gun. The subject recovered the weapon in his right hand and continued to flee from officers in an open field. The subject refused to comply with officer's commands. The subject was observed pointing the weapon towards police officers as he fled. The subject approached a shed, the only cover in the area, and began to run behind it. The subject was shot by pursuing deputy before he could reach an area of cover.