



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 20-577-MJ

Version Type: ORIGINAL
VERSION

Report Date: 6/30/2020 10:09
AM

Status: Submitted

Agency/Facility Information

Agency Name: Port Isabel Police
Dept.

Agency Address: 110 W. Hickman

Agency City: Port Isabel

Agency State: TX

Agency Zip: 78578

Director Information

Director Salutation: Chief

Director First Name: Robert

Director Middle Name:

Director Last Name: Lopez

Reporter Name: Jose Cadengo

Reporter Email: jcadengo@copitx.com

Decedent Information

Identity of Deceased

First Name: Sharla

Middle Name: Jean

Last Name: Williams

Suffix:

Date of Birth: 11/17/1971

Sex: Female

Race: Anglo or White

Age At Time Of Death: 48

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

Date/Time of Custody or
Incident: 6/24/2020 6:30 PM

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

Death Date and Time: 6/25/2020 11:03
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

Medical Cause of Death:

Medical Cause of Death:

Natural cause pre-existing medical condition

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?: 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: 110 W. Hickman St.

City: Port Isabel

County: Cameron

Zip: 78578

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: Municipal Jail

Specific type of custody/facility:

Specific Type of Custody/Facility:

Jail - single 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: 6/24/2020 6:40 PM

Where did the death occur?

Death Location: Law enforcement
facility/booking
center

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:

Assault Family Violence

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: 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: 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?: Unknown

Exhibit any medical problems?: Unknown

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 Thursday, June 25, 2020 at approximately 11:04 A.M., I was in the office when I then heard Laguna Vista Officer James Hernandez #881 say on the radio, "Call EMS, unresponsive female!" I then ran to the booking area and observed Officer Hernandez #881 standing by cell #3. I entered cell #3 and observed a female laying on the concrete bed, on her back with her left arm over her head. I immediately checked for a pulse but there was not one. Female subject, later identified as, Sharla Jean Williams was stiff and cold to the touch.

At approximately 11:04 A.M., Port Isabel EMS arrived.

Texas Rangers were contacted by Captain Jose Cadengo #202. Texas Rangers advised to secure the scene and for no one to go in there.

Laguna Vista Chief Tony David and Commander Ricky Gonzalez arrived at approximately 11:17 P.M.

Texas Ranger, Antonio "Tony" Rocha arrived at the scene at approximately 12:11 P.M and took over the investigation.