



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 20-671-C

Version Type: AMENDED

Report Date: 2/25/2021 8:33 AM

Status: Submitted

Agency/Facility Information

Agency Name: Caddo Mills Police
Dept.

Agency Address: PO BOX 490

Agency City: Caddo Mills

Agency State: TX

Agency Zip: 75135

Director Information

Director Salutation: Chief

Director First Name: Kimbre

Director Middle Name:

Director Last Name: Collier

Reporter Name: Kimbre Collier

Reporter Email: kcollier@caddomillspd.com

Decedent Information

Identity of Deceased

First Name: Sharon

Middle Name: Theresa

Last Name: Ervin

Suffix:

Date of Birth: 6/20/1961

Sex: Female

Race: Anglo or White

Age At Time Of Death: 59

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

Date/Time of Custody or Incident: 7/17/2020 11:53 PM

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

Death Date and Time: 7/17/2020 11:53 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: Suicide

Medical Cause of Death:

Medical Cause of Death:

Gunshot wound to the head

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

Medical Treatment: Unknown

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?: 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: 1615 FM 1777

City: Royse City

County: Collin

Zip: 75189

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: Police Custody
(pre-booking)

Specific type of custody/facility:

Specific Type of Custody/Facility:

Custody of Law Enforcement Personnel subsequent to 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: 7/17/2020 11:30
PM

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:

Violation of a protective order

Offense 2:

Offense 3:

Were the Charges:: Filed

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: Discharged firearm

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): Unknown

Make suicidal statements?: No

Exhibit any mental health problems?: No

Exhibit any medical problems?: Yes

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: Yes, mark which
restraint devices
were used

Type of restraint

Type of Restraint: Handcuffs

Summary of Incident

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

Summary:

The suspect was taken into custody, suspect was handcuffed in the front. The suspect was allowed entry back into the residence with the officer escorting her. The suspect and home owner were able to distract the officers. the suspect while sitting in a large chair was able to retrieve a handgun that was in the cushion. Suspect then shot herself in the head.