



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 23-1657-CJ

Version Type: AMENDED

Report Date: 1/31/2024 8:56 AM

Status: Submitted

Agency/Facility Information

Agency Name: Bowie County
Sheriff's Office

Agency Address: 100 North State
Line, BOX 18

Agency City: Texarkana

Agency State: TX

Agency Zip: 75501

Director Information

Director Salutation: Sheriff

Director First Name: JEFF

Director Middle Name:

Director Last Name: NEAL

Reporter Name: Robby McCarver

Reporter Email: robby.mccarver@bowiecounty.org

Decedent Information

Identity of Deceased

First Name: Bobby

Middle Name:

Last Name: Edwards

Suffix:

Date of Birth: 2/17/1967

Sex: Male

Race: Black or African
American

Age At Time Of Death: 56

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

Date/Time of Custody or 12/8/2023 12:17
Incident: PM

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

Death Date and Time: 12/8/2023 12:43
PM

Manner / Cause of Death

Has a medical examiner or coroner conducted an evaluation to determine a cause of death?

Medical Examiner/Coroner Yes, results are
Evaluation?: available

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

Manner of Death: Natural

Medical Cause of Death:

Medical Cause of Death:

Complications of diabetes mellitus

Part II (other significant contributing factors) Hypertensive 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: Yes

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: 105 West Front
Street

City: Texarkana

County: Bowie

Zip: 75501

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: County Jail

Specific type of custody/facility:

Specific Type of Custody/Facility:

Jail - multiple occupancy 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: 11/30/2023 11:55
AM

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:

Possession of a Controlled Substance PG1/1-B Under 1 Gram (commitment sentence)

Offense 2:

Offense 3:

Were the Charges:: Convicted

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

Type of Offense: Alcohol / drug
offense

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?: Yes

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: No

Summary of Incident

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

Summary:

Inmate Bobby Edwards b/m DOB 2-17-1967 entered our jail facility after receiving a Commitment Sentence for Possession of Controlled Substance PG1/1-B U-1Gram. That sentence was issued by the 202nd District Court. Edwards was booked into our facility on 11-30-2023 and presented to medical that he is prescribed a drug for mental health. He also suffered from diabetes that required monitoring. On 12-8-2023 (approximately 12:17pm), Edwards was found unresponsive in his cell. On duty medical staff responded to the cell to aid the inmate. Life Net ambulance service was contacted and responded to the jail but life saving efforts were not successful and he was pronounced dead at 12:43pm by Justice of the Peace Todd Fore. TX Ranger David Stewart responded to investigate the death as required by Statute. Bowie County Sheriff's Office Investigator Brent Caudle assisted him with photographs and scene collection. There were no visible injuries or indicators of foul play. The deceased was sent to the Southwestern Institute of Forensic Science at Dallas for autopsy. Cause and manner of death will be determined by the medical examiner.

On 1-29-2024, our agency received the final autopsy report from the medical examiner with Southwestern Institute of Forensic Sciences at Dallas. Their findings are as follows:

Cause of death: Complications of diabetes mellitus

Part II (Other Significant Contributing Factors): Hypertensive cardiovascular disease

Manner of Death: Natural