



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 24-1217-C

Version Type: AMENDED

Report Date: 8/19/2024 11:08
AM

Status: Submitted

Agency/Facility Information

Agency Name: Pasadena Police
Dept.

Agency Address: 1201 Davis Street

Agency City: Pasadena

Agency State: TX

Agency Zip: 77506

Director Information

Director Salutation: Chief

Director First Name: Jerry

Director Middle Name:

Director Last Name: Wright

Reporter Name: Raul Granados

Reporter Email: rgranados@pasadenatx.gov

Decedent Information

Identity of Deceased

First Name: Ritchie

Middle Name:

Last Name: William

Suffix:

Date of Birth: 7/30/1957

Sex: Male

Race: Anglo or White

Age At Time Of Death: 67

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

Date/Time of Custody or
Incident: 8/2/2024 12:26 AM

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

Death Date and Time: 8/4/2024 3:25 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:

Gunshot wound of the torso (Harris County Institute of Forensic Sciences #ML24-3144)

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?: Rifle/shotgun

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: 4407 Cypress pond
Court

City: Houston

County: Harris

Zip: 77059

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:

Hospital/Infirmary

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: Medical facility

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:

Aggravated assault-Family Member

Offense 2:

Assault Family/House Member Impeding Breath/Circulation

Offense 3:

Aggravated Assault on Peace Officer (Shot at officers)

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?: 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): Yes

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?: Yes

Resist being handcuffed or arrested?: No

Physically attempt/assault officer(s): Yes

Gain possession of officer's weapon: No

Verbally threaten other(s) including law: Yes

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:

Officers were called to the residence by the decedent's spouse due to his intoxication and physically assaulting her. The decedent impeded the breath of his spouse by choking her, struck her multiple times with a closed fist, pulled her hair, and struck her with a firearm in the back of the head. When officers arrived on scene they contacted the spouse and observed her visible injuries. Officers attempted to make contact with the decedent by calling out to him but were met with negative results. Officers made entry into the home, and continued to call out to the decedent. When officers located the decedent, he presented a firearm and fired at them three times. Officers retreated out of the home and to the street, where they held cover behind a marked police vehicle. The decedent then entered the front doorway of the residence and presented his firearm once more, pointing it at officers. One officer, equipped with an AR-15, fired upon the decedent, striking him in the abdomen. The decedent was still conscious on scene and was transported to the hospital via ambulance. He was treated at the hospital for 2 days prior to succumbing to his injuries.

