



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 25-802-UF

Version Type: AMENDED

Report Date: 10/6/2025 12:55
PM

Status: Submitted

Agency/Facility Information

Agency Name: Texas Department
Of Public Safety

Agency Address: PO BOX 4087

Agency City: Austin

Agency State: TX

Agency Zip: 78773

Director Information

Director Salutation: Director

Director First Name: Freeman

Director Middle Name:

Director Last Name: Martin

Reporter Name: Melinda Grieves

Reporter Email: melinda.grieves@dps.texas.gov

Decedent Information

Identity of Deceased

First Name: Justin

Middle Name: Reed

Last Name: Bankston

Suffix:

Date of Birth: 8/21/1986

Sex: Male

Race: Anglo or White

Age At Time Of Death: 39

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

Date/Time of Custody or 9/18/2025 12:30
Incident: PM

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

Death Date and Time: 9/18/2025 2:33 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: Suicide

Medical Cause of Death:

Medical Cause of Death:

Self-inflicted Gun Shot Wound to Head

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

Medical Treatment: Not Applicable

If death was an accident, homicide or suicide, who caused the death?

Who caused the death?: Decedent

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: 27017
Huffman-Cleveland
Road

City: Huffman

County: Harris

Zip: 77336

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

Location Category: Roadway/highway/street/sidewalk

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:

N/A

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?: 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:

Unlawful Possession of a Firearm by a Felon

Offense 2:

Possession of Controlled Substance PG1

Offense 3:

Resisting Arrest - Warrant

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: Other, specify

Type of Offense, Other:

Active Warrants

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?: Unknown

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 September 18, 2025, law enforcement officers conducted surveillance and directed traffic stop operations targeting suspects associated with a motor vehicle theft and narcotics trafficking ring within a high gang activity area. Officers observed Mr. Bankston who had several active warrants for Resisting Arrest, Unlawful Possession of a Firearm by a Felon, and Possession of a Controlled Substance in Penalty Group 1. Officers initiated a traffic stop on Mr. Bankston's vehicle. Mr. Bankston exited the vehicle, fled on foot, grabbed a 9mm handgun from his front waistband, and shot himself in the head. Officers began lifesaving measures. Ms. Bankston was transported to a local hospital, where he later succumbed to his injuries.