



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 17-638-C

Version Type: ORIGINAL
VERSION

Report Date: 12/6/2017 9:16 AM

Status: Submitted

Agency/Facility Information

Agency Name: Fort Worth Police
Dept.

Agency Address: 350 W. Belknap

Agency City: Fort Worth

Agency State: TX

Agency Zip: 76102

Director Information

Director Salutation: Chief

Director First Name: Joel

Director Middle Name:

Director Last Name: Fitzgerald

Reporter Name: Laurie
Harrington

Reporter Email: laurie.harrington@fortworthtexas.gov

Decedent Information

Identity of Deceased

First Name: Billy

Middle Name: Ray

Last Name: Williams

Suffix:

Date of Birth: 12/19/1994

Sex: Male

Race: Anglo or White

Age At Time Of Death: 22

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

Date/Time of Custody or 11/4/2017 10:00
Incident: PM

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

Death Date and Time: 11/6/2017 8:00 AM

Manner / Cause of Death

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

Medical Examiner/Coroner Yes, results
Evaluation?: pending

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

Manner of Death: Suicide

Medical Cause of Death:

Medical Cause of Death:

Gunshot Wound of Head. Death at ICU, 1301 Pennsylvania Avenue. (Harris Methodist Hospital)

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?: 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: 6421 Calmont
Avenue

City: Fort Worth

County: Tarrant

Zip: 76116

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: Police Custody
(pre-booking)

Specific type of custody/facility:

Specific Type of Custody/Facility:

Custody of Law Enforcement Personnel during/fleeing 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:

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:

Evading Arrest/Detention Vehicle

Offense 2:

Driving While Intoxicated

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: Alcohol / drug offense; Other, specify

Type of Offense, Other:

Evading in vehicle

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?: N/A

Physically attempt/assault officer(s): N/A

Gain possession of officer's weapon: N/A

Verbally threaten other(s) including law: N/A

Escape or attempt to escape/flee custody: Yes

Attempt gain possession officer's weapon: N/A

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 11/04/17, Fort Worth Police Department officers were involved in a police vehicle pursuit. The deceased failed to yield to the officer and fled for approximately 10 miles at a high rate of speed and recklessly passed vehicles on the inside and outside shoulders of the road and swerved around vehicles. The pursuit ended when the deceased exited the freeway and hit the left guardrail and then came to a stop. The officers approached the vehicle and the deceased was slumped over and was bleeding profusely from the head. A gun was found in the driver floorboard where he was sitting and the driver window was shattered and there was a projectile found on the driver floor board. Officers believed that the deceased had a self-inflicted gunshot wound to the head. The deceased was transported by ambulance to the hospital where he was placed on life support and was pronounced deceased on 11/06/17. On 12/4/17 the medical examiner ruled the manner of death as a suicide; Cause of Death: Gunshot Wound of Head.