KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	17-709-UF	Version Type:	AMENDED
Report Date:	1/12/2018 4:25 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Foard County Sheriff's Dept.	Agency Address:	110 South 1st. Street
Agency City:	Crowell	Agency State:	TX
Agency Zip:	79227		

Director Information

Director Salutation:	Sheriff	Director First Name:	Mike
Director Middle Name:			
Director Last Name:	Brown		
Reporter Name:	Sheriff Mike Brown	Reporter Email:	sheriff@foardcounty.texas.gov

Decedent Information

Identity of Deceased

First Name: Heath

Middle Name: Wayne

Last Name: Hodges

Suffix:

Date of Birth: 9/23/1982 Sex: Male

Race: Anglo or White

Age At Time Of Death: 35

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

Date/Time of Custody or Incident: 12/30/2017 9:50 PM

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

Death Date and Time: 12/30/2017 9:50 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 pending

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

Manner of Death: Homicide (includes Justifiable

Homicide)

Medical Cause of Death:

Medical Cause of Death:

Results pending

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?:	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?:	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: 407 North 1st Street
City: Crowell
County: Foard
Zip: 79227

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: 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: 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:

Aggravated Assault on Public Servant

Offense 2:

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:	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:	Displayed firearm without discharge

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):	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):	Yes	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 December 30, 2017 at approximately 9:48 pm, Hardeman County dispatch received a 911 call stating there was a man holding someone at gun point at 407 North Main in Crowell, Foard County. The call was transferred to the Foard County Sheriff's Office and Sheriff Brown answered the call. Sheriff Brown contacted Deputy Shaw and Shaw had received a call requesting assistance at 407 North 1st Street in Crowell, Foard County. Both Brown and Shaw responded to the residence on North 1st Street. Shaw arrived first and made contact with a female outside the residence. She stated if Shaw could just get the gun and get him in the pickup, she would take him away. Shaw entered the residence and found the home owner and the deceased.

Shaw introduced himself and shook the deceased's hand. Shaw then asked if he had a weapon and deceased raised his shirt and showed him a holstered revolver. Shaw said "I need that" and the deceased told Shaw he could not have it, and placed his hand on the weapon attempting to draw it from the holster. Shaw attempted to keep the deceased' weapon in the holster with his left while beginning to draw his own weapon. The deceased jerked his weapon out of the holster through Shaw's hand. Shaw fired two shots from his weapon striking the deceased in the chest twice. Emergency medical was requested and deceased was dead before he could be transported.