KEN PAXTON
ATTORNEY GENERAL of TEXAS

**CUSTODIAL DEATH REPORT**

# Agency Information

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|---|---|---|---|
| CDR Number: | 23-437-UF | Version Type: | AMENDED |
| Report Date: | 4/25/2023 11:58 AM | Status: | Submitted |

## Agency/Facility Information

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|---|---|---|---|
| Agency Name: | Houston Police Dept. | Agency Address: | 1200 Travis, 16th Floor |
| Agency City: | Houston | Agency State: | TX |
| Agency Zip: | 77002 | | |

## Director Information

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|---|---|---|---|
| Director Salutation: | Chief | Director First Name: | Troy |
| Director Middle Name: | | | |
| Director Last Name: | Finner | | |
| Reporter Name: | Kimberly Fowler | Reporter Email: | kimberly.fowler@houstonpolice.org |

# Decedent Information

### Identity of Deceased

First Name: Orlando

Middle Name: Francoise

Last Name: Gross

Suffix:

Date of Birth: 9/7/1998 Sex: Male

Race: Black or African American

Age At Time Of Death: 24

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

Date/Time of Custody or Incident: 4/4/2023 1:05 AM

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

Death Date and Time: 4/4/2023 1:29 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: Accidental

## Medical Cause of Death:

Medical Cause of Death:

Multiple blunt force injuries

## 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?: Vehicle-involved death

## 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: Vehicle accident

# Location / Custody Information

## Where did the event causing the death occur?

Street Address: 6100 Bellfort
City: Houston
County: Harris
Zip: 77033

## 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:

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: Scene of incident

# 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 in a Motor Vehicle

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: Other, specify

Type of Offense, Other:

Traffic Violation

## 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): | 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:

| | | | |
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| 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: | Yes |
| 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 04/04/2023 Officers with the Houston Police Department's Patrol Division, observed a vehicle run a red light. Officers caught up the vehicle and activated their emergency lights to signal the vehicle to stop. The suspect initially stopped but then drove away and began to actively evade officers. The suspect accelerated away from the officers at a high rate of speed to the point where a faint glow of the taillights was visible. Officers then came upon a cloud of smoke and a vehicle flipped upside down. The vehicle was determined to be the suspect's vehicle and officers found him ejected from the vehicle in a ditch. Officers attempted first aid on the suspect until HFD arrived however, the suspect succumbed to his injuries on scene.