



# KEN PAXTON

## ATTORNEY GENERAL *of* TEXAS

### CUSTODIAL DEATH REPORT

## Agency Information

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CDR Number: 24-123-C

Version Type: AMENDED

Report Date: 9/3/2024 6:39 AM

Status: Submitted

## Agency/Facility Information

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Agency Name: Irving Police Dept.

Agency Address: 305 N. O'Connor Rd.

Agency City: Irving

Agency State: TX

Agency Zip: 75061

## Director Information

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Director Salutation: Chief

Director First Name: Derick

Director Middle Name:

Director Last Name: Miller

Reporter Name: Tim Hilton

Reporter Email: thilton@cityofirving.org

## Decedent Information

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### Identity of Deceased

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First Name: Amari

Middle Name: Thomas

Last Name: Graham

Suffix:

Date of Birth: 2/8/1998

Sex: Male

Race: Black or African  
American

Age At Time Of Death: 25

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

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Date/Time of Custody or  
Incident: 2/4/2024 1:12 AM

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

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Death Date and Time: 2/4/2024 2:19 AM

## Manner / Cause of Death

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

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Medical Examiner/Coroner  
Evaluation?: Yes, results are  
available

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

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Manner of Death: Other - specify

Manner of Death Description:

Undetermined

Medical Cause of Death:

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Medical Cause of Death:

Acute psychosis of unknown etiology, in conjunction with morbid obesity and cannabis usage.

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

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Medical Treatment: Not Applicable

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

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Who caused the death?: Not applicable

If a weapon caused the death, what type of weapon caused the death? (Hold CTRL to select all that apply)

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Type of weapon that caused death?: Not Applicable

Was the cause of death the result of a pre-existing medical condition or did the decedent develop the condition after admission?

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Pre existing medical condition?: Could not be determined

If death was an accident, homicide or suicide, what was the means of death?

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Means of Death: Unknown

## Location / Custody Information

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Where did the event causing the death occur?

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Street Address: 10421 North  
MacArthur Blvd  
#345

City: Irving

County: Dallas

Zip: 75063

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

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Location Category: Residence/Home

What type of custody/facility was the Decedent in at the time of death:

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Type of Custody: Police Custody  
(pre-booking)

Specific type of custody/facility:

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Specific Type of Custody/Facility:

Custody of Law Enforcement Personnel subsequent to 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):

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Entry Date Time:

Entry Date Time N/A: ☒

Where did the death occur?

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Death Location: Medical facility

## General Information

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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:

Assault Causing Bodily Injury

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;  
Alcohol / drug  
offense; Medical /  
Mental Health  
assistance call

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?: Yes (select all that apply)

Ways Decedent Attempted To Injure Others: Injured civilian(s) or other inmate(s)

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

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Appear intoxicated (alcohol or drugs): Yes

Make suicidal statements?: No

Exhibit any mental health problems?: Yes

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?: Yes

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?

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Under Restraint: Yes, mark which restraint devices were used

Type of restraint

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Type of Restraint: Handcuffs

## Summary of Incident

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Summary of How the Death Occurred: (max. 30,000 characters)

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Summary:

On 02/04/2024 at 1:01 AM, Officers were dispatched to 10421 N. MacArthur Bl #345, Irving, Dallas County, Texas, on a domestic in progress. The 911 caller advised a female was screaming that a male (Amari Graham) is going crazy and she needed help. The 911 caller also advised a male was screaming an eye for eye, jumping up and down and appeared to be on narcotics. The male suspect (Amari Graham) also assaulted one of the neighbors, causing visible injury, who was attempting to assist the female screaming for help. When Officers arrived at the apartment, they confronted Amari Graham, who threw a laundry basket at

officers, and began to resist the officers. They were able to get Graham to his knees, where he lunged at officers. One officer deployed a Taser device, and Graham was placed into custody. The Irving Fire Department (IFD) was already on scene and evaluated Graham in the apartment. IFD cleared Graham and left the apartment. Shortly thereafter, Graham became unresponsive and IFD came back to the apartment. Graham was transported to Medical City Las Colinas located at 6800 North MacArthur Blvd, Irving, Dallas County, Texas, where he was pronounced deceased. The cause of death was determined to be acute psychosis of unknown etiology, in conjunction with morbid obesity and cannabis usage. The manner of death was undetermined.