



# KEN PAXTON

## ATTORNEY GENERAL *of* TEXAS

### CUSTODIAL DEATH REPORT

## Agency Information

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CDR Number: 25-294-CJ

Version Type: AMENDED

Report Date: 4/20/2025 1:53 PM

Status: Submitted

## Agency/Facility Information

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Agency Name: Tarrant County  
Sheriff's Office

Agency Address: 200 Taylor St.,  
Plaza Bldg. 7th  
Floor

Agency City: Fort Worth

Agency State: TX

Agency Zip: 76196

## Director Information

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Director Salutation: Sheriff

Director First Name: Bill

Director Middle Name:

Director Last Name: Waybourn

Reporter Name: Carrol Morris

Reporter Email: cemorris@tarrantcountytexas.gov

## Decedent Information

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## Identity of Deceased

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First Name: Lizza

Middle Name: Elizabeth

Last Name: Gadlin

Suffix:

Date of Birth: 3/16/1968

Sex: Female

Race: Black or African  
American

Age At Time Of Death: 57

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

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Date/Time of Custody or  
Incident: 4/19/2025 7:39 PM

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

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Death Date and Time: 4/19/2025 9:14 PM

## 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: Natural

Medical Cause of Death:

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Medical Cause of Death:

Coronary Thrombus due to Atherosclerotic and Hypertensive Cardiovascular Disease.

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: Unknown

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?: Pre-existing medical condition

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

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Means of Death: Not applicable, cause of death was illness/natural cause

## Location / Custody Information

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Where did the event causing the death occur?

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Street Address: 600 W. Weatherford

City: Fort Worth

County: Tarrant

Zip: 76196

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

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Location Category: Law Enforcement  
Facility

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

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Type of Custody: County Jail

Specific type of custody/facility:

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Specific Type of Custody/Facility:

Jail - single cell

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: 4/15/2025 3:24 PM

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?

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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?

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Offense 1:

Theft \$100 <-\$750

Offense 2:

Offense 3:

Were the Charges:: Filed

What were the types of charges or reason for contact? (Hold CTRL to select all that apply)

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Type of Offense: Crime Against  
Property

At any time during the incident and/or entry into the law enforcement facility, did the decedent display or use a weapon?

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Decedent display/use of  
weapons: No

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

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Attempt to Injure Others?: No

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): Unknown

Make suicidal statements?: Unknown

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?: 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?

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Under Restraint: No

## Summary of Incident

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

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### Summary:

In-custody death of Tarrant County Inmate Gadlin, Lizza Elizabeth, black female, DOB: 03/16/1968 CID: 1052144, who had been housed at the Lon Evans Corrections Center at 600 W. Weatherford St, Fort Worth, Tarrant County, Texas 76196. Inmate Gadlin had been in TCSO custody since 04/15/2025 on Theft \$100 < \$750 Class B misdemeanor. Inmate Gadlin was transported to John Peter Smith Hospital on 04/19/2025 via MedStar ambulance and was pronounced deceased on 04/19/2025 at approximately 2114 hours at John Peter Smith Hospital.

The Tarrant County Medical Examiner's Office (TCME) was notified and took possession of Inmate Gadlin. The autopsy reports are pending. Tarrant County Sheriff's Office Detective Charles Brogdon III ([cgbrogdon1@tarrantcountytx.gov](mailto:cgbrogdon1@tarrantcountytx.gov)) has been assigned the death investigation (TCSO report 2025-04963). The Parker County Sheriff's Office will perform an independent investigation of the case. Further documentation and reports will follow the investigation as they become available.

Autopsy report received; TCME declared the manner of death as natural.