



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 25-507-UF

Version Type: AMENDED

Report Date: 7/3/2025 1:19 PM

Status: Submitted

Agency/Facility Information

Agency Name: Angelina County
Sheriff's Office

Agency Address: 2311 E. Lufkin Ave.

Agency City: Lufkin

Agency State: TX

Agency Zip: 75901

Director Information

Director Salutation: Sheriff

Director First Name: Thomas

Director Middle Name: L

Director Last Name: Selman

Reporter Name: Thomas Selman

Reporter Email: tselman@angelinacounty.net

Decedent Information

Identity of Deceased

First Name: John

Middle Name: Franklin

Last Name: Carter

Suffix:

Date of Birth: 11/12/1974

Sex: Male

Race: Anglo or White

Age At Time Of Death: 50

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

Date/Time of Custody or
Incident: 7/2/2025 7:59 AM

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

Death Date and Time: 7/2/2025 7:59 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: Homicide (includes
Justifiable
Homicide)

Medical Cause of Death:

Medical Cause of Death:

Gunshot wounds

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

Medical Treatment: No

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: 1396 Stubblefield
Dr.

City: Lufkin

County: Angelina

Zip: 75901

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: 7/2/2025 7:59 AM

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:

Assault (Strangulation)

Offense 2:

Federal Drug Offences

Offense 3:

Were the Charges:: Filed

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 other weapon, specify:

Specify Weapon Displayed:

Air soft gun designed to appear to be a Sig Sauer 1911 handgun

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?: Yes

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?:	Yes
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:

Deputies were attempting to locate a wanted felon in regards to an active Assault Family Violence (Strangulation) Felony warrant. Deputies were travelling on a county road when they observed the suspect (John Carter) in a passenger seat of a vehicle which was leaving a residence. Deputies stopped their patrol vehicle approximately 30 yards past the suspect vehicle in the county road and exited there vehicle. Deputies began walking towards the suspect vehicle when the female driver exited the vehicle and began walking away. The suspect then aggressively exited the passenger side of the vehicle displaying what appeared to be a black handgun. Deputies made several commands for the suspect to drop the gun although the suspect refused to drop the weapon and one deputy fired their weapon to eliminate the threat. The deputy that shot is a Patrol Sergeant and the other deputy on scene is in Field Training. The Texas Rangers were contacted and Ranger Seymore and Hicks travelled to the scene to begin their investigation. The item that the suspect had which was believed to be a handgun was found to be an air soft gun that was made to appear to be a Sig Sauer 1911 handgun.