



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 26-770-CJ

Version Type: ORIGINAL
VERSION

Report Date: 9/30/2026 9:18 AM

Status: Submitted

Agency/Facility Information

Agency Name: Dallas County
Sheriff's Dept.

Agency Address: 133 N. Riverfront
Blvd.

Agency City: Dallas

Agency State: TX

Agency Zip: 75207

Director Information

Director Salutation: Sheriff

Director First Name: Marian

Director Middle Name:

Director Last Name: Brown

Reporter Name: Youashavion
Williams

Reporter Email: youashavion.williams@dallascounty.org

Decedent Information

Identity of Deceased

First Name: Kristian

Middle Name: Brandon McLemore

Last Name: McCoy

Suffix:

Date of Birth: 6/25/1970

Sex: Male

Race: Black or African
American

Age At Time Of Death: 56

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

Date/Time of Custody or
Incident: 9/30/2026 5:08 AM

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

Death Date and Time: 9/16/2026 10:23
PM

Manner / Cause of Death

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

Medical Examiner/Coroner Yes, results
Evaluation?: pending

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

Manner of Death: Pending autopsy
results

Medical Cause of Death:

Medical Cause of Death:

Pending Autopsy Results

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

Medical Treatment: Unknown

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

Who caused the death?: Unknown whether
decedent sustained
a fatal injury

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?: Not Applicable

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?: Could not be
determined

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

Means of Death: Other, specify

Means of Death Other: Pending Autopsy
Report

Location / Custody Information

Where did the event causing the death occur?

Street Address: 5200 Harry Hines
Blvd.

City: Dallas

County: Dallas

Zip: 75235

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

Location Category: Other, specify

Other Location Category:

Parkland Memorial Hospital

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

Type of Custody: County Jail

Specific type of custody/facility:

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):

Entry Date Time: 5/20/2026 5:08 PM

Where did the death occur?

Death Location: Medical facility

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:

Criminal Trespass

Offense 2:

Probation Violation: Poss of Controlled Substance PG1

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: Alcohol / drug
offense

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?: Unknown

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?: Unknown

Resist being handcuffed or arrested?: Yes

Physically attempt/assault officer(s): Unknown

Gain possession of officer's weapon: Unknown

Verbally threaten other(s) including law: Unknown

Escape or attempt to escape/flee custody: Unknown

Attempt gain possession officer's weapon: Unknown

Was the deceased under restraint in the time leading up to the death or the events causing the death?

Under Restraint: Yes, mark which restraint devices were used

Type of restraint

Type of Restraint: Handcuffs

Summary of Incident

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

Summary:

On May 20, 2026, at approximately 5:08 p.m., Kristian Brandon McLemore McCoy B/M 06/25/1970 (Decedent) was booked into Dallas County Jail Lew Sterrett Justice Center by the City of Dallas Police Department on charges of Criminal Trespass on warrant number M2655941 and Probation Violation Possession of Controlled Substance PG1/1-B<1G on warrant number F2554971
On September 16, 2026, at approximately 9:20pm, Dallas County Sheriff's Office Detention staff were conducting face-to-face observation rounds at the West Tower Detention Facility 9P03, when the detention staff noticed that inmate in "C" cell was unresponsive. Inmate in "C" cell was identified as the Decedent. Detention staff notified Parkland Jail Medical Staff and jail supervision of the situation. Parkland Jail Medical Staff and jail supervision responded to the location.

Parkland Jail Medical staff began to administer Cardiopulmonary Resuscitation (CPR). AT approximately 9:34pm, Dallas Fire and Rescue (DFR) was requested and transported the Decedent to Parkland Memorial Hospital. Decedent was taken to emergency room L-4.

At Approximately 10:23 p.m., Mr. McCoy was pronounced deceased by Williams and Dr. Graham.

An autopsy was conducted on September 18, 2026. Results are pending.

This case is logged under the following service numbers:

Dallas County Sheriff's Office: 26-063210

Dallas County Medical Examiner's Office: IFS-26-15329