



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 18-324-CJ

Version Type: AMENDED

Report Date: 12/31/2018 10:34
AM

Status: Submitted

Agency/Facility Information

Agency Name: Taylor County
Sheriff's Office

Agency Address: 450 Pecan

Agency City: Abilene

Agency State: TX

Agency Zip: 79602

Director Information

Director Salutation: Sheriff

Director First Name: RICKY

Director Middle Name:

Director Last Name: BISHOP

Reporter Name: RICKY BISHOP

Reporter Email: bishopr@taylorcountytexas.org

Decedent Information

Identity of Deceased

First Name: CLIFTON

Middle Name: BRADLEY

Last Name: CURTIS

Suffix:

Date of Birth: 4/28/1976

Sex: Male

Race: Anglo or White

Age At Time Of Death: 42

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

Date/Time of Custody or
Incident: 4/24/2018 4:47 PM

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

Death Date and Time: 5/3/2018 1:00 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: Natural

Medical Cause of Death:

Medical Cause of Death:

KNOWN MEDICAL CONDITIONS ARE: CIRRHOSIS OF THE LIVER, ASTHMA, GASTRO ESOPHAGEAL REFLUX, HYPOTENSION, AND ABNORMAL WEIGHT LOSS. RULED NATURAL CAUSES.

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

Medical Treatment: Yes

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

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)

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?: Pre-existing medical condition

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

Means of Death: Other, specify

Means of Death Other:

THE DOCTOR AT
HENDRICK
MEDICAL CENTER
BELIEVES THE
DEATH WILL BE
OF NATURAL
CAUSES. AN
AUTOPSY WAS
ORDERED BY THE
JUSTICE OF THE
PEACE AND
RESULTS ARE
PENDING.

Location / Custody Information

Where did the event causing the death occur?

Street Address: 1900 PINE
STREET

City: ABILENE

County: Taylor

Zip: 79601

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

Location Category: Other, specify

Other Location Category:

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:

Hospital/Infirmary

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: 5/1/2018 10:30 AM

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:

SJF THEFT (ENHANCED)

Offense 2:

1F-POSSESSION OF METHAMPHETAMINE WITH INTENT TO DELIVER

Offense 3:

BENCH WARRANT-SERVING TDC TIME

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; 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?

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): No

Make suicidal statements?: No

Exhibit any mental health problems?: No

Exhibit any medical problems?: Yes

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

Barricade self or initiate standoff?: N/A

Resist being handcuffed or arrested?: No

Physically attempt/assault officer(s): No

Gain possession of officer's weapon: N/A

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?

Under Restraint: Yes, mark which restraint devices were used

Type of restraint

Type of Restraint: Handcuffs; Leg Shackles

Summary of Incident

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

Summary:

SUBJECT WAS BROUGHT TO THE TAYLOR COUNTY JAIL FROM THE SANCHEZ UNIT IN EL PASO TEXAS ON 4/24/2018 FOR A BENCH WARRANT. ALL MEDICATIONS SUBJECT CAME TO JAIL WITH

WERE STARTED AT 8AM ON 4/25/2018. AT THAT TIME SUBJECTS WEIGHT WAS 122 LBS. ALSO ON 4/25/2018, SUBJECT WAS GIVEN ENSURE BY THE MEDICAL STAFF. ON 4/27/2018, SUBJECT WAS PLACED ON A SPECIAL DIET BY THE MEDICAL STAFF DUE TO WEIGHT DROPPING TO 112 LBS. SUBJECT WAS RE-EVALUATED ON 5/1/2018 AND WEIGHED 106 LBS. SUBJECT WAS THEN SENT TO HENDRICK MEDICAL CENTER WHERE HE WAS ADMITTED. SUBJECT PASSED AWAY ON 5/3/2018 AT 1:00 AM. THE JUSTICE OF THE PEACE ORDERED AN AUTOPSY WITH RESULTS STILL PENDING. TEXAS RANGER JOSH BURSON (ABILENE) IS CONDUCTING THE INVESTIGATION.