KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	18-538-CJ	Version Type:	AMENDED
Report Date:	7/23/2018 3:30 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Bowie County Sheriff's Office	Agency Address:	100 North State Line, BOX 18
Agency City:	Texarkana	Agency State:	TX
Agency Zip:	75501		

Director Information

Director Salutation:	Sheriff	Director First Name:	JAMES
Director Middle Name:			
Director Last Name:	PRINCE		
Reporter Name:	JEFF NEAL	Reporter Email:	jeff.neal@bowiecounty.org

Decedent Information

Identity of Deceased

First Name: Troy

Middle Name: Donovan

Last Name: Pree

Suffix:

Date of Birth: 11/4/1963 Sex: Male

Race: Black or African American

Age At Time Of Death: 54

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

Date/Time of Custody or Incident: 2/9/2018 4:47 AM

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

Death Date and Time: 6/7/2018 9:08 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:

Acute necrotizing and organizing bronchopneumonia. Human Immunodeficiency Virus (HIV)/Acquired Immunodeficiency Syndrome (AIDS) is a contributing factor to his death

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?: 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?: Could not be determined

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

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

Location / Custody Information

Where did the event causing the death occur?

Street Address:	100 North State Line	City:	Texarkana
County:	Bowie	Zip:	75501

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

Location Category:	Law Enforcement Facility

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:	2/9/2018 5:19 AM

Where did the death occur?

Death Location:	Law enforcement facility/booking center

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:

Criminal Trespass

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)

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?

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?: No

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?:	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?

Under Restraint:	No

Summary of Incident

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

Summary:

Troy Pree was arrested by the Texarkana Texas Police Department on 02-09-18 and booked in the Bi-State Jail for Criminal Trespass. On 06-09-18 Pree was being housed in a single person cell where he was checked on every thirty minutes. Correctional Officer Ricky Leakes found Pree unresponsive during his check around 9:08 am on this date. Medical personnel were called and found that Mr. Pree has passed away. Mr. Pree had no obvious signs of trauma and was alone at the time of his death. Texas Ranger John Vance responded to conduct an investigation of Mr. Pree's death. Mr. Pree's body was sent to the Southwest Institute of Forensic Science for an autopsy. The results of his autopsy were pending toxicology at the time of this report.

Mr. Pree's autopsy reported was received on 07/20/2018. This report shows his manner of death as natural, and cause of death as being the result of acute necrotizing and organizing bronchopneumonia with a contributing factor of Human Immunodeficiency Virus (HIV)/Acquired Immunodeficiency Syndrome (AIDS).