KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	20-1229-MJ	Version Type:	AMENDED
Report Date:	10/9/2020 3:47 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Killeen Police Dept.	Agency Address:	3304 Community Blvd.
Agency City:	Killeen	Agency State:	TX
Agency Zip:	76542		

Director Information

Director Salutation:	Chief	Director First Name:	Charles
Director Middle Name:	F		
Director Last Name:	Kimble		
Reporter Name:	Frank Plowick	Reporter Email:	fplowick@killeentexas.gov

Decedent Information

Identity of Deceased

First Name: Heather

Middle Name: Kaloni

Last Name: Myers

Suffix:

Date of Birth: 11/24/1989 Sex: Female

Race: Anglo or White

Age At Time Of Death: 30

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

Date/Time of Custody or Incident: 8/13/2020 11:34 PM

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

Death Date and Time: 8/14/2020 3:50 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: Alcohol/Drug Intoxication

Medical Cause of Death:

Medical Cause of Death:

Unknown, Suspected overdose, autopsy report pending as of 9/14/20

Final Autopsy findings received, indicating cause of death to be the toxic effects of methamphetamine and cocaine. - Amended 10/9/20

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?: 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: Drug overdose

Location / Custody Information

Where did the event causing the death occur?

Street Address:	3304 Community Blvd	City:	Killeen
County:	Bell	Zip:	76542

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:	Municipal 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:	8/13/2020 11:54 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:

Public Intoxication

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: 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?: No

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

Appear intoxicated (alcohol or drugs):	Yes	Make suicidal statements?:	No
Exhibit any mental health problems?:	Unknown	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?:	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:	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:

On 8/13/20 at about 11:23pm Killeen Police Officer were dispatched to a report of a suspicious person near a closed business. Officers located the suspect, who was found to be intoxicated. The suspect was eventually arrested and taken to the Killeen City Jail.

The suspect was booked into the jail and was placed in a cell alone. A short time later the suspect was found to be experiencing a medical event, and jail staff began to administer first aid. An ambulance was called and the suspect was taken to the hospital emergency room, where she later passed away.

As of 9/14/20 autopsy results are pending, initial investigation indicates the probable cause of death to be intoxication (drug overdose) related.

AMENDED 10/9/20

Final autopsy results received from Southwestern Institute of Forensic Science at Dallas. Findings (Case IFS-20-14907) indicate suspect Myers died as the result of the toxic effects of methamphetamine and cocaine. Manner of death listed as accidental.