



CUSTODIAL DEATH REPORT

Agency Information

Report Date: 8/2/2019 2:37 PM

Version Type: ORIGINAL VERSION Status: Submitted

Agency/Facility Information

Agency Name:	Cameron County Sheriff's Dept.
Agency City:	Olmito
Agency Zip:	78575

Agency Address:	7300 Old Alice Rd

Agency State: TX

Director Information

Director Salutation: Captain

Director First Name: Javier

Director Middle Name:

Director Last Name: Reyna

Reporter Name: LAURA TREVINO

Reporter Email: latrevino@co.cameron.tx.us

Decedent Information

First Name:
CARLOS

Middle Name:
ESTRADA
MERCADO

Last Name:
JR.

Suffix:
JR.

Date of Birth:
1/16/1978

Race:
Hispanic or Latino

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

Date/Time of Custody or Incident: 6/30/2019 6:48 PM

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

Death Date and Time: 7/4/2019 11:38 AM

Manner / Cause of Death

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

Medical Examinor/Coroner Yes, results Evalution?: pending

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

Homicide (includes Manner of Death: Justifiable

Homicide)

Medical Cause of Death:

Medical Cause of Death:

UNKNOWN

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?: Other detainee(s)

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 Other Weapon, death?: specify:

Other weapon, specify:

FISTS, FEET AND KNEES

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: Other, specify

ATTACKED BY OTHER INMATE Means of Death Other: (SOSA, JOSHUA JAMES)

Location / Custody Information

Where did the event causing the death occur?

Street Address: 7100 OLD ALICE ROAD

County: Cameron

City: OLMITO Zip: 78575

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

Location Category: Other, specify

Other Location Category:

CAMERON COUNTY - CARRIZALEZ-RUCKER DETENTION CENTER

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

Type of Custody: Private Facility

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:

Entry Date Time N/A:

Death Location: Medical facility

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: BURGLARY OF HABITATION \$100,000 BOND Offense 2:

ASSAULT/C/BOD/INJ/F/V \$10,000 BOND

Offense 3:

Were the Charges:: Filed

What were the types of charges or reason for contact? (Hold CTRL to select all that apply)

Violent Crime
Against Persons;Type of Offense:Other, specify;
Crime Against
Property

Type of Offense, Other:

AND A MAGISTRATE COMMITTED ESTRADA TO JAIL.

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?:	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:	Unknown	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:

"ESTRADA arrived to the CRDC facility on June 30, 2019 at around 6:48pm by Harlingen Police under the strength of a Commitment Order. After being properly classified he was placed in Charlie 4 cell on July 1, 2019 at around 3:11pm. On this same date around one (1) hour later he was found lying on the floor in the shower area of the cell facility. Medical staff administered medical attention and an ambulance was immediately dispatched to have ESTRADA taken to the hospital because of his injuries. EMS personnel arrived at around 4:33pm and transported ESTRADA to Valley Regional Medical Center. On July 3, 2019 ESTRADA was released on a personal recognizance bond. On July 4, 2019 CRDC personnel learned that ESTRADA had died at around 11:38am. Fellow inmate Joshua SOSA was charged with murder for causing the death of ESTRADA and also charged for Engaging in Organized Criminal Activity."