



# KEN PAXTON

## ATTORNEY GENERAL *of* TEXAS

### CUSTODIAL DEATH REPORT

## Agency Information

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CDR Number: 20-453-UF

Version Type: AMENDED

Report Date: 6/11/2020 1:16 PM

Status: Submitted

## Agency/Facility Information

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Agency Name: Houston Police  
Dept.

Agency Address: 1200 Travis, 16th  
Floor

Agency City: Houston

Agency State: TX

Agency Zip: 77002

## Director Information

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Director Salutation: Lieutenant

Director First Name: Melissa

Director Middle Name:

Director Last Name: Countryman

Reporter Name: Kimberly Fowler

Reporter Email: kimberly.fowler@houstonpolice.org

## Decedent Information

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### Identity of Deceased

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First Name: Rayshard

Middle Name: Obrien

Last Name: Scales

Suffix:

Date of Birth: 12/4/1989

Sex: Male

Race: Black or African  
American

Age At Time Of Death: 30

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

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Date/Time of Custody or  
Incident: 5/14/2020 6:32 PM

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

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Death Date and Time: 5/14/2020 6:43 PM

## Manner / Cause of Death

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

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Medical Examiner/Coroner  
Evaluation?: Yes, results are  
available

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

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Manner of Death: Homicide (includes  
Justifiable  
Homicide)

## Medical Cause of Death:

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Medical Cause of Death:

Multiple Gunshot Wounds

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

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Medical Treatment: Not Applicable

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

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Who caused the death?: Law  
enforcement/correctional  
personnel

If a weapon caused the death, what type of weapon caused the death? (Hold CTRL to select all that apply)

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Type of weapon that caused  
death?: Handgun

Was the cause of death the result of a pre-existing medical condition or did the decedent develop the condition after admission?

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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?

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Means of Death: Firearm

## Location / Custody Information

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Where did the event causing the death occur?

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Street Address: 7400 Scott St.

City: Houston

County: Harris

Zip: 77021

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

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Location Category: Roadway/highway/street/sidewalk

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

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Type of Custody: Pre-Custodial Use  
of Force

Specific type of custody/facility:

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Specific Type of Custody/Facility:

N/A

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):

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Entry Date Time:

Entry Date Time N/A: ☒

Where did the death occur?

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Death Location: Scene of incident

## General Information

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Did any other law enforcement agencies respond to calls for service related to this incident?

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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?

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Offense 1:

Aggravated Assault/Peace Officer

Offense 2:

Offense 3:

Were the Charges:: Not filed at time of death

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

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Type of Offense: Violent Crime  
Against Persons

At any time during the incident and/or entry into the law enforcement facility, did the decedent display or use a weapon?

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Decedent display/use of weapons: Yes, mark all that apply

Decedent Display or Use Weapon Details: Displayed other weapon, specify:

Specify Weapon Displayed:

C02 Pistol Beretta Replica

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

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Attempt to Injure Others?: No

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

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Appear intoxicated (alcohol or drugs): Unknown

Make suicidal statements?: Unknown

Exhibit any mental health problems?: Unknown

Exhibit any medical problems?: N/A

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

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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?

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Under Restraint: No

## Summary of Incident

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

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### Summary:

On May 14, 2020 at approximately 6:30 p.m. the officer arrived on a call for service at 7400 Scott St. in regard to a suspicious person with a weapon (gun) call. The suspect became aggressive toward the officer by refusing his commands and walking toward him with his hands clinched and yelling at the officer, challenging him to do something. The officer observed a black pistol in the front pocket of the suspect's "hoodie". After several minutes of trying to get the suspect to cooperate, the suspect reached into the front pocket in an attempt to retrieve the pistol. The officer fearing for his life, fired four rounds striking the suspect 4 times. The suspect was pronounced deceased at the scene. The pistol was later identified as an Airsoft C02 Beretta Replica pistol.