



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 21-853-CJ

Version Type: ORIGINAL
VERSION

Report Date: 7/14/2021 9:39 AM

Status: Submitted

Agency/Facility Information

Agency Name: San Jacinto County
Sheriff's Dept.

Agency Address: 75 West Cedar Ave

Agency City: Coldspring

Agency State: TX

Agency Zip: 77331

Director Information

Director Salutation: Chief Deputy

Director First Name: Tim

Director Middle Name:

Director Last Name: Kean

Reporter Name: Rosa Bass

Reporter Email: lisa.jones@co.san-jacinto.tx.us

Decedent Information

Identity of Deceased

First Name: Tasha

Middle Name:

Last Name: Lavergne

Suffix:

Date of Birth: 11/6/1988

Sex: Female

Race: Anglo or White

Age At Time Of Death: 32

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

Date/Time of Custody or
Incident: 7/6/2021 5:45 PM

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

Death Date and Time: 7/13/2021 8:00 AM

Manner / Cause of Death

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

Medical Examiner/Coroner Yes, results
Evaluation?: pending

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

Manner of Death: Suicide

Medical Cause of Death:

Medical Cause of Death:

Hung herself

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?: Other Weapon, specify:

Other weapon, specify:

phone cord

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

Means of Death Other: Strangulation

Location / Custody Information

Where did the event causing the death occur?

Street Address: 75 W CEDAR AVE

City: COLDSRING

County: San Jacinto

Zip: 77331

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 - holding 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: 7/6/2021 9:59 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:

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: Other, specify

Type of Offense, Other:

Public Intoxication

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
Exhibit any mental health problems?: Yes

Make suicidal statements?: 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?:	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:

Offender was on suicide watch in Holding cell 270A for observation awaiting a Burke Center Mental Health evaluation. The offender wrapped the phone cord around her neck two times, but when someone would be in the area of the cell she would take it off and go lay down. The third time she wrapped it around her neck and leaned to put pressure on her neck. After she was found, she was laid down on the floor and CPR was started and EMS was notified. EMS was able to get a pulse on her after administering medications, and she was transported to Livingston CHI Emergency Hospital. A few days later, unsure of date due to not being in our custody, she was transferred to Lufkin CHI where she succumbed to her injuries on 07/13/2021.