JOSH GREEN, M.D. GOVERNOR KE KIA'ĀINA



## STATE OF HAWAII | KA MOKUʻĀINA O HAWAIʻI DEPARTMENT OF CORRECTIONS

AND REHABILITATION
Ka 'Oihana Ho'omalu Kalaima
a Ho'oponopono Ola

1177 Alakea Street Honolulu, Hawaii 96813 808-587-1288 TOMMY JOHNSON DIRECTOR

Melanie Martin Deputy Director Administration

Pamela J. Sturz
Deputy Director
Correctional Institutions

Sanna Muñoz Deputy Director Rehabilitation Services and Programs

No.	
140.	

August 22, 2024

The Honorable Josh Green, M.D. Office of the Governor Executive Chambers State Capitol, Fifth Floor 415 S. Beretania Street Honolulu, Hawai'i 96813

Dear Governor Green:

Pursuant to Act 234, SLH 2019 (HB 336, HD2, SD2), DCR provides the mandated "reporting of a death" as follows:

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NAME	ESTEBAN. Reynaldo
EMPLOYEE OF INMATE	Inmate
GENDER	Male
AGE	70 - 80 age range
STATE EITHER FACILITY OR	Banner Casa Grande Medical Center,
HOSPITAL FOR LOCATION OF	Arizona
DEATH/INJURY THAT CAUSED	
DEATH	
UNOFFICIAL OR PRONOUNCED	Thursday, August 22, 2024 at
DATE, AND TIME AS REPORTED BY	approximately 06:33 hours, AZ Time.
EMS, HOSPITAL OR HOSPICE.	
CAUSE OF DEATH AS REPORTED	Cause of death – inmate found
BY EMS, HOSPITAL OR HOSPICE	unresponsive and undetermined.
ANY INDICATION OF SEXUAL	None.
ASSAULT LEADING TO DEATH	

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	Thirty	(30)	day	reporting	(date)	
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WAS A CLINICAL MORTALITY REVIEW CONDUCTED?	□ Yes	□ No
ANY CORRECTIVE ACTION BASED ON CMR?		

☐ Report Upon Receipt.

MEDICAL EXAMINER REPORT RECEIVED, DATE AND THE OFFICIAL CAUSE OF DEATH	DCR received on, the report as determined by the Department of the Medical Examiner, STATE INFO.

According to Act 234, SLH 2019, the DCR Director has the discretion to withhold the disclosure of any information protected from disclosure by state or federal laws.

If you require additional information, please do not hesitate to contact my office at 587-1350.

Sincerely,

Tommy Johnson

Director