JOSH GREEN, M.D. GOVERNOR KE KIA'ĀINA



## STATE OF HAWAII | KA MOKU'ĀINA O HAWAI'I 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

Vacant
Deputy Director
Correctional Institutions

Sanna Muñoz Deputy Director Rehabilitation Services and Programs

September 26, 2025

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:

## 

NAME	MICHAELEDES, DAVID
EMPLOYEE OF INMATE	Inmate
GENDER	Male
AGE	60 to 70 age range.
STATE EITHER FACILITY OR	Halawa Correctional Facility
HOSPITAL FOR LOCATION OF	Honolulu, Hawaii
DEATH/INJURY THAT CAUSED	
DEATH	
UNOFFICIAL OR PRONOUNCED	Thursday, September 25, 2025, at
DATE, AND TIME AS REPORTED BY	approximately 18:18 hours.
EMS, HOSPITAL OR HOSPICE.	
CAUSE OF DEATH AS REPORTED	Cause of death - inmate found
BY EMS, HOSPITAL OR HOSPICE	unresponsive and currently under
	investigation.
ANY INDICATION OF SEXUAL	None.
ASSAULT LEADING TO DEATH	

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## **⊠** Thirty (30) day reporting (date).

WAS A CLINICAL MORTALITY REVIEW CONDUCTED?	□ Yes	□ No
ANY CORRECTIVE ACTION BASED ON CMR?		

## ☐ Report Upon Receipt.

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(	etermined by the Departm

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