**Record of Death**

Provided by South Carolina Department of Corrections, February 1, 2022

**Name:** COMPTON, JAMES MADISON

**SCDC#:** 89618

**Sex:** M

**Race/ethnicity:** White, not of Hispanic origin

**Date of birth:** 10/13/1951

**Date of commitment:** 10/7/1977

**Date of death:** 7/16/2016

**Cause of death:** Natural Cause

**Assigned institution:** LEE

**Death location:** OUTSIDE MEDICAL

(Sections 24-9-35 and 17-7-10, South Carolina Code of Laws)
(Standards 1047 and 1049, Minimum Standards for Local Detention Facilities in South Carolina)
(SCDC Policies Procedures HS-18.04 and PS-10.05)

1. FACILITY: Lee Correctional Institution [redacted] Hospital)
2. NAME OF DECEASED: James Compton SCDC# 089618
3. HOME ADDRESS: _____
4. DESCRIPTION: DOB [redacted] HEIGHT 06 WEIGHT 217 HAIR Brov
   EYES Brown SEX Male RACE White SOC SEC # _____
5. ARRESTING OFFENSE(S): Burglary
   _____ SENTENCED ☑ PRETRI
6. DATE AND TIME OF COMMITMENT: October 07, 1977
7. NAME AND ADDRESS OF RELATIVE(S) OF THE DECEASED CONTACTED: [redacted]
8. RECORD OF DECEASED INMATE'S PHYSICAL CONDITION UPON ADMISSION: _____
9. CAUSE OF DEATH: Cancer
10. TIME AND DATE OF DEATH: ____ a.m. 8:16 p.m. 15 day July month
11. NAME OF DOCTOR WHO PRONOUNCED DEATH: Shannon Rougeax (RN)
12. NAME OF CORONER WHO ORDERED AUTOPSY Jane Powell (RICHLAND COUNTY)
13. AUTOPSY PERFORMED BY: _____
14. NAME OF PERSON DISCOVERING DECEASED, TIME DISCOVERED, AND LOCATION WITHIN FA
    Ofc. India Johnson and Ofc. Lashawn Haynes was unresponsive at 8:16 pm in [redacted]
15. AT THE TIME OF DEATH: 11 (Actual Count) 22 (# of Officers on Duty)
16. WHEN INMATE WAS LAST SEEN ALIVE: 8:15 p.m

NOTIFY BY TELEPHONE AT: (803) 896-8502

MAIL OR DELIVER REPORT TO:

SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
DIVISION OF COMPLIANCE, STANDARDS, AND INSPECTIONS
POST OFFICE BOX 21787
COLUMBIA, SOUTH CAROLINA 29221

SIGNATURE OF OFFIC MAKING REPORT

TYPED OR PRINTED TITLE OF

8/22/16
DATE OF REPORT

SCDC 8-2 (Revised July 1, 2011)