Record of Death

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

Name: VANDEROSS, JAMES

SCDC#: 122064

Sex: M

Race/ethnicity: Black or African American, not of Hispanic origin

Date of birth: 12/11/1943

Date of commitment: 3/20/1984

Date of death: 8/25/2017

Cause of death: Natural Cause

Assigned institution: MCCORMICK

Death location: MCCORMICK

SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
Division of Detention and Correctional Inspections

DEATH OF ANY INMATE IN JAIL OR PRISON

(Section 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)

1. Facility: McCormick Correctional Institution
   Address: 386 Redemption Way, McCormick, South Carolina 29899
2. Name of deceased: James Vandross SCDC #: 122064 122064
3. Home Address: [redacted]
4. Description: DOB [redacted] Height 6'0" Weight 166 Hair Black
   Eyes Brown Sex Male Race Black SOC SEC # [redacted]
5. Arresting Offense(s): Murder
6. Date and time of commitment: 03/12/84 Tried _____ Untried _____
7. Name and address of relative(s) of the deceased contacted: [redacted]
8. Record of deceased inmate's physical condition upon admission: N/A
9. Cause of death: Natural
10. Time and date of death: 5:15 a.m. _____ p.m. 08/25 19 2017
11. Name of doctor who pronounced death: Dr. John McRee
12. Name of coroner who ordered autopsy: Faye Puckett, McCormick County Coroner
13. Autopsy performed by: Newberry Pathology
14. Name of person discovering deceased, time discovered, and location within facility: Paula Hatfield, RN, 08/25/17 @ 5:08 am, in McCormick Correctional Institution [redacted]
15. At the time of death: 1051 (Actual Count) 13 (# of Officers on Duty)
16. When inmate was last seen alive: 08/25/17 @ 4:00 am

NOTIFY BY TELEPHONE: 896-8506

MAIL OR DELIVER REPORT TO:

SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
DIVISION OF DETENTION AND CORRECTIONAL INSPECTIONS
Post Office Box 21787
Columbia, South Carolina 29221

[signature]
SIGNATURE OF OFFICIAL MAKING REPORT

Associate Warden
TYPED OR PRINTED TITLE OF OFFICIAL

8/28/17
DATE OF REPORT

SCDC 8-2 (Revised May, 1997)