DIVISION OF COMPLIANCE, STANDARDS, AND INSPECTIONS
SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
REPORT OF INMATE DEATH
(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: Greenville County Detention Center

2. NAME OF DECEASED: Allan Lindsey Zack SCDC# N/A

3. HOME ADDRESS: [redacted] Greenville, SC 29611

4. DESCRIPTION: DOB [redacted] 1986 HEIGHT WEIGHT 5' 10" / 206 HAIR Brown

   EYES: Brown SEX: Male RACE: White SOC SEC # [redacted]

5. ARRESTING OFFENSE(S): Felony DUI Resulting in Death (X2), Leaving the Scene W/Death. Hit and Run With Great Bodily Injury, Driving on Wrong Side of Road, Uninsured Motor Vehicle, Endangering Emergency Services Personnel, Possession of SCH I-V Dugs 2nd and Above
   SENTENCED _____ PRETRIAL X

6. DATE AND TIME OF COMMITMENT: 02/12/2020 @ 1821 Hours

7. NAME AND ADDRESS OF RELATIVE(S) OF THE DECEASED CONTACTED: [redacted]

8. RECORD OF DECEASED INMATE'S PHYSICAL CONDITION UPON ADMISSION: Motor vehicle accident prior to admission. Open wounds to [redacted]

9. CAUSE OF DEATH: Fentanyl toxicity – Manner of Death: Accidential

10. TIME AND DATE OF DEATH: _____ a.m. 1555 p.m. 05/12/2022

11. NAME OF DOCTOR WHO PRONOUNCED DEATH: Paramedic Russ Beam

12. NAME OF CORONER WHO ORDERED AUTOPSY: Hannah Gilstrap

13. AUTOPSY PERFORMED BY: Dr. Grace Dukes

14. NAME OF PERSON DISCOVERING DECEASED, TIME DISCOVERED, AND LOCATION WITHIN FACILITY: Sergeant Vernetta Crouch, 1513 Hours, Yellow Pod Room #35

15. AT THE TIME OF DEATH: 1245 (Actual Count) 45 (# of Officers on Duty).

16. WHEN INMATE WAS LAST SEEN ALIVE: Inmate Zack was seen entering Room # 35 in Yellow Pod at 1347 Hours on 05/12/2022

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

Scotty Bodiford
SIGNATURE OF OFFICIAL MAKING REPORT

Scotty Bodiford, Jail Administrator
TYPED OR PRINTED TITLE OF OFFICIAL

5-17-22
DATE OF REPORT

SCDC 8-2 (Revised January 1, 2007)

COPY