



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 20-1137-C

Version Type: ORIGINAL
VERSION

Report Date: 9/2/2020 12:32 PM

Status: Submitted

Agency/Facility Information

Agency Name: Bastrop County
Sheriff's Dept.

Agency Address: 200 Jackson Street

Agency City: Bastrop

Agency State: TX

Agency Zip: 78602

Director Information

Director Salutation: Sheriff

Director First Name: Maaurice

Director Middle Name:

Director Last Name: Cook

Reporter Name: Matthew Plocica

Reporter Email: matthew.plocica@co.bastrop.tx.us

Decedent Information

Identity of Deceased

First Name: Armando

Middle Name:

Last Name: Mascorro

Suffix: JR

Date of Birth: 1/10/1992

Sex: Male

Race: Anglo or White

Age At Time Of Death: 28

Date/Time of Custody (arrest, incarceration) (mm/dd/yyyy hh:mm AM/PM):

Date/Time of Custody or
Incident: 9/1/2020 11:28 AM

Date/Time of Death (mm/dd/yyyy hh:mm AM/PM):

Death Date and Time: 9/1/2020 12:49 PM

Manner / Cause of Death

Has a medical examiner or coroner conducted an evaluation to determine a cause of death?

Medical Examiner/Coroner
Evaluation?: Yes, results
pending

What was the manner of death? (select only one)

Manner of Death: Pending autopsy
results

Medical Cause of Death:

Medical Cause of Death:

pending

Had the decedent been receiving treatment for the medical condition that caused the death after admission to your jail's jurisdiction?

Medical Treatment: Yes

If death was an accident, homicide or suicide, who caused the death?

Who caused the death?: Not applicable

If a weapon caused the death, what type of weapon caused the death? (Hold CTRL to select all that apply)

Type of weapon that caused death?: Unknown

Was the cause of death the result of a pre-existing medical condition or did the decedent develop the condition after admission?

Pre existing medical condition?: Could not be determined

If death was an accident, homicide or suicide, what was the means of death?

Means of Death: Unknown

Location / Custody Information

Where did the event causing the death occur?

Street Address: 300 block of Hwy
290 East near Roy
Davis Road

City: Elgin

County: Bastrop

Zip: 78621

What location category best describes where the event causing the death occurred?

Location Category: Field/woods/lake/waterway/beach

What type of custody/facility was the Decedent in at the time of death:

Type of Custody: Police Custody
(pre-booking)

Specific type of custody/facility:

Specific Type of Custody/Facility:

Custody of Law Enforcement Personnel subsequent to arrest

What was the time and date of the deceased's entry into the law enforcement facility where the death occurred (mm/dd/yyyy hh:mm AM/PM):

Entry Date Time: 9/1/2020 10:59 AM

Where did the death occur?

Death Location: Medical facility

General Information

Did any other law enforcement agencies respond to calls for service related to this incident?

Other Agencies Respond?: Yes

What were the most serious offense(s) with which the deceased was (or would have been) charged with at the time of death?

Offense 1:

Unauthorized use of a motor vehicle

Offense 2:

assault on a peace officer

Offense 3:

Were the Charges:: Not filed at time of death

What were the types of charges or reason for contact? (Hold CTRL to select all that apply)

Type of Offense: Other, specify

Type of Offense, Other:

suspicious person

At any time during the incident and/or entry into the law enforcement facility, did the decedent display or use a weapon?

Decedent display/use of weapons: No

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Attempt to Injure Others?: Yes (select all that apply)

Ways Decedent Attempted To Injure Others: Injured law enforcement personnel

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Appear intoxicated (alcohol or drugs): Unknown

Make suicidal statements?: Unknown

Exhibit any mental health problems?: Unknown

Exhibit any medical problems?: Unknown

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Barricade self or initiate standoff?:	No	Resist being handcuffed or arrested?:	Yes
Physically attempt/assault officer(s):	Yes	Gain possession of officer's weapon:	No
Verbally threaten other(s) including law:	Yes	Escape or attempt to escape/flee custody:	Yes
Attempt gain possession officer's weapon:	No		

Was the deceased under restraint in the time leading up to the death or the events causing the death?

Under Restraint: Yes, mark which restraint devices were used

Type of restraint

Type of Restraint: Other device, specify

Other device, specify: Handcuffs and a rope on feet/legs

Summary of Incident

Summary of How the Death Occurred: (max. 30,000 characters)

Summary:

At approximately 10:30AM, The Bastrop County Sheriffs Office received a report that a man had exited a moving vehicle from another driver on the roadway. The caller reported that she had seen a vehicle veer off the road and crash through a fence -- going several hundred feet into a field.

Deputies arrived on scene and made contact with the subject that had exited the vehicle in a open field.

The subject became extremely combative, and the deputies deployed their Tasers on the man. Backup law enforcement arrived to help take the suspect into custody, which resulted in injuries to two deputies.

EMS was called to the scene to treat the deputies and the suspect, and while they doing their medical assessment, they noticed that the suspect was having difficulty breathing so they initiated CPR and called for air transport. He was transported to the Austin Heart Hospital where he was pronounced deceased at 12:49 p.m.

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