



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 21-685-UF

Version Type: AMENDED

Report Date: 12/6/2021 10:20
AM

Status: Submitted

Agency/Facility Information

Agency Name: Fort Bend County
Sheriff's Dept.

Agency Address: 1840 Richmond
Parkway

Agency City: Richmond

Agency State: TX

Agency Zip: 77469

Director Information

Director Salutation: Sheriff

Director First Name: Eric

Director Middle Name:

Director Last Name: Fagan

Reporter Name: Bradley
Whichard

Reporter Email: bradley.whichard@fortbendcountytexas.gov

Decedent Information

Identity of Deceased

First Name: Jose

Middle Name: Angel

Last Name: Ibarra-Ruiz

Suffix:

Date of Birth: 9/30/1996

Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 24

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

Date/Time of Custody or
Incident: 6/5/2021 10:47 PM

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

Death Date and Time: 6/5/2021 10:47 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 are
available

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

Manner of Death: Homicide (includes
Justifiable

Homicide)

Medical Cause of Death:

Medical Cause of Death:

Three gunshot wounds to the chest of which two contributed to cause of death.

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

Medical Treatment: Not Applicable

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

Who caused the death?: Law
enforcement/correctional
personnel

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?: Handgun

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?: Not Applicable;
cause of death was
accidental injury,
intoxication, suicide
or homicide

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

Means of Death: Firearm

Location / Custody Information

Where did the event causing the death occur?

Street Address: 13631 SH 36 S

City: Needville

County: Fort Bend

Zip: 77461

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

Location Category: Parking lot/garage

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

Type of Custody: Pre-Custodial Use
of Force

Specific type of custody/facility:

Specific Type of Custody/Facility:

N/A

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:

Entry Date Time N/A: ☒

Where did the death occur?

Death Location: Dead on arrival at
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:

Aggravated Assault (Peace Officer)

Offense 2:

Aggravated Assault

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: Violent Crime
Against Persons

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: Yes, mark all that apply

Decedent Display or Use Weapon Details: Displayed other weapon, specify:

Specify Weapon Displayed:

Knife

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: Attempted to injure law enforcement personnel; Attempted to injure civilian(s) or other inmate(s)

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?: Yes

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: No

Escape or attempt to escape/flee custody: No

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: No

Summary of Incident

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

Summary:

The Sheriff's Office Deputy was providing security for an event held at a private facility at the stated address. During this time the Deputy was notified by a citizen of a disturbance occurring within the parking lot of the facility and this disturbance involved a subject threatening others with a knife. The Deputy summoned assistance from other peace officers nearby and responded to the location of the disturbance, where he encountered the suspect brandishing a knife toward several citizens nearby. After making requests for the subject to drop the weapon (knife), the suspect continued to brandish the knife towards the Deputy and nearby citizens. During the encounter, the suspect turned and approached the retreating Deputy with the knife at which time the Deputy discharged his firearm, striking the suspect three times.

The suspect was transported to a local medical facility, where death was pronounced. As of time of this report, the autopsy has been conducted and final results pending completion of laboratory analysis.

Amended: Autopsy Report (Fort Bend Medical Examiner) was completed and submitted as noted within amended report filed 12/6/2021.