KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	24-1469-UF	Version Type:	AMENDED
Report Date:	10/23/2024 12:21 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Kerrville Police Dept.	Agency Address:	429 Sidney Baker St.
Agency City:	Kerrville	Agency State:	TX
Agency Zip:	78028		

Director Information

Director Salutation:	Chief	Director First Name:	Chris
Director Middle Name:			
Director Last Name:	McCall		
Reporter Name:	James Machetta II	Reporter Email:	james.machetta@kerrvilletx.gov

Decedent Information

Identity of Deceased

First Name: Rosny

Middle Name: Josafath

Last Name: Rodrigues-Midence

Suffix: n/a

Date of Birth: 2/25/2003 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 21

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

Date/Time of Custody or Incident: 10/15/2024 1:32 AM

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

Death Date and Time: 10/15/2024 1:32 AM

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)

Homicide (includes

Manner of Death:	Justifiable Homicide)

Medical Cause of Death:

Medical Cause of Death:
Gunshot wound to head and right thigh. JM

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:	1100 blk of State Highway 16	City:	Fredericksburg
County:	Gillespie	Zip:	78624

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

Location Category: Roadway/highway/street/sidewalk

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:

Custody of Law Enforcement Personnel during/fleeing 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:

Entry Date Time N/A: ☑

Where did the death occur?

Death Location: Scene of incident

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:

Evading with a Motor Vehicle

Offense 2:

Assault of a Public Servant (Attempt)

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: Alcohol / drug offense; Other, specify

Type of Offense, Other:

Traffic violation, Evading. JM

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: Used other weapon, specify:

Specify Weapon Used:

Personal Weapons, charging toward officer. JM

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

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

Appear intoxicated (alcohol or drugs):	Yes	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:	Unknown	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:	No

Summary of Incident

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

Summary:

The decedent led Kerrville Police Officers on a motor vehicle pursuit that originated in the 1600 block of Sidney Baker North, Kerrville, Texas and concluded approximately 21 miles later, in the 1100 block of State Highway 16, Fredericksburg, Texas. The decedent exited the wrecked motor vehicle, and the officer began giving him verbal commands. The decedent failed to comply with the officer's repeated commands and charged at the officer. The officer back peddled several steps, and the decedent continued to charge/rapidly close distance. The officer discharged her department issued duty weapon twice, striking the decedent in the head and right thigh. The decedent fell to the ground and began losing a large amount of blood volume from the gunshot wound to the head. JM