



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 25-1080-UF

Version Type: ORIGINAL
VERSION

Report Date: 1/6/2026 10:11 AM

Status: Submitted

Agency/Facility Information

Agency Name: Baytown Police
Dept.

Agency Address: 3200 North Main St

Agency City: Baytown

Agency State: TX

Agency Zip: 77521

Director Information

Director Salutation: Chief

Director First Name: John

Director Middle Name:

Director Last Name: Stringer

Reporter Name: William Nelson

Reporter Email: william.nelson@baytown.org

Decedent Information

Identity of Deceased

First Name: Jose

Middle Name:

Last Name: Blanco Espinoza

Suffix:

Date of Birth: 6/25/1976

Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 49

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

Date/Time of Custody or Incident: 12/19/2025 4:00 AM

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

Death Date and Time: 12/19/2025 4:11 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)

Manner of Death: Homicide (includes Justifiable

Homicide)

Medical Cause of Death:

Medical Cause of Death:

Gunshot wounds

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: 3700 garth road
#805

City: Baytown

County: Harris

Zip: 77521

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

Location Category: Other, specify

Other Location Category:

Apartment Complex

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: Scene of incident

General Information

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

Other Agencies Respond?: No

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:

Homicide

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: Used other weapon, specify:

Specify Weapon Used:

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; Killed civilian(s) or other inmate(s); Injured 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?: N/A

Resist being handcuffed or arrested?: N/A

Physically attempt/assault officer(s): Yes

Gain possession of officer's weapon: No

Verbally threaten other(s) including law: N/A

Escape or attempt to escape/flee custody: N/A

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 entered the apartment and stabbed an adult male and female. The female died at the scene, the male was able to escape and survived. Police officers arrived on scene and gave commands to the decedent. The decedent refused to comply with officer commands and raised the knife and moved towards the officers. The officers, fearing for their safety, discharged their department issued weapons, stopping the threat.