



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 26-498-C

Version Type: ORIGINAL
VERSION

Report Date: 6/30/2026 8:31 AM

Status: Submitted

Agency/Facility Information

Agency Name: Brazoria County
Sheriff's Office

Agency Address: 3602 County Road
45

Agency City: Angleton

Agency State: TX

Agency Zip: 77515

Director Information

Director Salutation: Sheriff

Director First Name: Leonard

Director Middle Name:

Director Last Name: Stallman

Reporter Name: Clinton Lobpries

Reporter Email: clintl@brazoriacountytx.gov

Decedent Information

Identity of Deceased

First Name: John

Middle Name: Gabriel

Last Name: Mendoza

Suffix: Jr.

Date of Birth: 7/11/2007

Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 18

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

Date/Time of Custody or
Incident: 6/1/2026 12:09 AM

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

Death Date and Time: 6/1/2026 1:42 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 Wound of the Left Upper Extremity into Torso.

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: 150 Indian Warrior
Trail

City: Lake Jackson

County: Brazoria

Zip: 77566

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

Location Category: Residence/Home

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 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: 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:

Evading Arrest or Detention Using a Vehicle.

Offense 2:

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:

Reasonable suspicion to further investigate suspected violations of provisions of the Texas Transportation Code and Texas Penal Code Chapter 38.

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: Unknown

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

Attempt to Injure Others?: Unknown

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):	Unknown	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:

On June 1, 2026, the Deputy signaled the driver to stop on FM 2004 in Lake Jackson. The driver, however, refused to stop and instead chose to flee from the deputy. A vehicular pursuit continued until the driver entered a garage attached to a residence located in the 100 block of Indian Warrior Trail in Lake Jackson. When entering the garage approaching the driver, the deputy's firearm discharged and a bullet struck the driver.

The deputy and other emergency service personnel provided emergency medical aid to the driver, who was transported to a local hospital for medical care. Personnel at the hospital later pronounced the driver deceased. The Brazoria County Sheriff asked the Texas Rangers, in conjunction with the Brazoria County District Attorney's Office, to lead an investigation into the circumstances surrounding these events. The investigation is ongoing and remains active.