



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 26-812-CJ

Version Type: ORIGINAL
VERSION

Report Date: 10/16/2026 4:31
PM

Status: Submitted

Agency/Facility Information

Agency Name: Tarrant County
Sheriff's Office

Agency Address: 200 Taylor St.,
Plaza Bldg. 7th
Floor

Agency City: Fort Worth

Agency State: TX

Agency Zip: 76196

Director Information

Director Salutation: Sheriff

Director First Name: Bill

Director Middle Name:

Director Last Name: Waybourn

Reporter Name: William Phariss

Reporter Email: wtphariss@tarrantcountytexas.gov

Decedent Information

Identity of Deceased

First Name: Jose

Middle Name:

Last Name: Orozco

Suffix:

Date of Birth: 10/1/1988

Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 37

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

Date/Time of Custody or
Incident: 9/21/2026 1:53 AM

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

Death Date and Time: 9/22/2026 12:11
PM

Manner / Cause of Death

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

Medical Examiner/Coroner Yes, results
Evaluation?: 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 autopsy results

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

Medical Treatment: Unknown

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?: Not Applicable

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: Not applicable, cause of death was illness/natural cause

Location / Custody Information

Where did the event causing the death occur?

Street Address: 100 N Lamar

City: Fort Worth

County: Tarrant

Zip: 76196

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

Location Category: Law Enforcement
Facility

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

Type of Custody: County Jail

Specific type of custody/facility:

Specific Type of Custody/Facility:

Hospital/Infirmary

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?: 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:

Burglary of Building

Offense 2:

Offense 3:

Were the Charges:: Filed

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

Type of Offense: Crime Against
Property

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?: No

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

Appear intoxicated (alcohol or
drugs): No

Make suicidal statements?: No

Exhibit any mental health
problems?: No

Exhibit any medical problems?: No

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?:	No
Physically attempt/assault officer(s):	No	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:

On 09/22/2026, while cleaning cells, inmate workers notified jail staff that Inmate Orozco appeared to be unresponsive. Jail staff immediately responded and at approximately 11:05 am, a medical code was called. Medical staff was already on-site in the housing unit, responding immediately and initiating life saving measures. Additional jail staff and medical staff responded, continuing life saving measures until EMS arrived. EMS staff assessed the inmate's condition, continued life saving measures and transported him to John Peter Smith (JPS) Hospital Emergency Department via ambulance. Inmate Orozco was later pronounced deceased at JPS Hospital at 12:11pm on 09/22/2026 by JPS medical staff.