



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 23-1685-CJ

Version Type: ORIGINAL
VERSION

Report Date: 12/13/2023 3:54
PM

Status: Submitted

Agency/Facility Information

Agency Name: El Paso County
Sheriff's Office

Agency Address: 3850 Justice Road

Agency City: El Paso

Agency State: TX

Agency Zip: 79938

Director Information

Director Salutation: Sheriff

Director First Name: richard

Director Middle Name:

Director Last Name: Wiles

Reporter Name: James Belknap

Reporter Email: jbelknap@epcounty.com

Decedent Information

Identity of Deceased

First Name: Jesus

Middle Name:

Last Name: Torres

Suffix:

Date of Birth: 7/24/1966

Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 57

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

Date/Time of Custody or Incident: 11/27/2023 7:53 AM

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

Death Date and Time: 11/27/2023 12:58 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)

Homicide (includes

Manner of Death: Justifiable
Homicide)

Medical Cause of Death:

Medical Cause of Death:

Strangulation, Suffocation, Blunt Trauma

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?: Other detainee(s)

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?: Baton/blunt instrument; Other Weapon, specify:

Other weapon, specify:

Plastic bag over head

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: Other, specify

Means of Death Other: plastic bag

Location / Custody Information

Where did the event causing the death occur?

Street Address: 12501 Montana Ave.

City: El Paso

County: El Paso

Zip: 79938

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:

Jail - multiple occupancy cell

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: 6/8/2023 9:09 AM

Where did the death occur?

Death Location: Elsewhere, specify

Death Location Elsewhere:

Jail Annex Pod 1020/Cell1018

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:

Poss. Controlled Substance PG1 >1gm<4gr

Offense 2:

Prob. Viol. Smuggling of Persons

Offense 3:

Were the Charges:: A probation/parole violation

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

Type of Offense: Violent Crime
Against Persons;
Alcohol / drug
offense

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):	Unknown	Make suicidal statements?:	Unknown
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:

Location:
El Paso County Jail Annex (EPCJA)
12501 E. Montana El Paso, TX 79938

Name of Inmate:
Jesus Torres (DOB:07/24/1966)
SS# 456-32-0839

On 11/27/2023 at approximately 0753 hours, officers were conducting a wellness check of inmate Torres after being told that he was a victim of an assault. in Cell 1018 Officers discovered Torres laying on his cell bunk

covered with a blanket Torrez was unresponsive and had a plastic bag tied around his head. Medical staff responded to provide medical aid. However, Torres did not show any signs of life. The case has been deemed a Homicide and the investigation is ongoing.