



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 24-1697-CJ

Version Type: AMENDED

Report Date: 1/30/2025 4:20 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: Carrol Morris

Reporter Email: cemorris@tarrantcountytx.gov

Decedent Information

Identity of Deceased

First Name: Mason

Middle Name: Andrew

Last Name: Yancy

Suffix:

Date of Birth: 6/15/1993

Sex: Male

Race: Anglo or White

Age At Time Of Death: 31

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

Date/Time of Custody or Incident: 12/24/2024 10:10 AM

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

Death Date and Time: 12/27/2024 10:36 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 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

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

Medical Treatment: Yes

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?: Pre-existing medical condition

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:

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: 12/24/2024 10:10
AM

Where did the death occur?

Death Location: Law enforcement
facility/booking
center

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:

Possession of Controlled Substance PG1/1B>=1G<4G HSC 481.115(c)

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: 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): No

Make suicidal statements?: No

Exhibit any mental health problems?: No

Exhibit any medical problems?: Yes

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:

Inmate Yancy was in his multi-person cell when he notified the detention officer that he felt unwell and was dehydrated. The detention officer called for an emergency medical response. A John Peter Smith Hospital nurse assigned to the jail responded. The nurse called for an ambulance after Inmate Yancy became unresponsive. CPR was performed and an AED was placed on him. MedStar ambulance and Fort Worth Fire Department both responded to the medical emergency. Inmate Yancy was pronounced at 2236 hours.

The Tarrant County Medical Examiners Office was contacted and Yancy was taken to their facility for an autopsy. The autopsy and toxicology reports have been requested, but the results are still pending.