KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	25-251-C	Version Type:	ORIGINAL VERSION
Report Date:	4/3/2025 8:08 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Arlington Police Dept.	Agency Address:	620 W. Division St.
Agency City:	Arlington	Agency State:	TX
Agency Zip:	76011		

Director Information

Director Salutation:	Chief	Director First Name:	Alexander
Director Middle Name:			
Director Last Name:	Jones		
Reporter Name:	Paul Long	Reporter Email:	paul.long@arlingtontx.gov

Decedent Information

Identity of Deceased

First Name: Pablo

Middle Name:

Last Name: Vasquez

Suffix:

Date of Birth: 8/31/1977 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 47

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

Date/Time of Custody or Incident: 3/27/2025 3:39 AM

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

Death Date and Time: 3/27/2025 4:28 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 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

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?:	Unknown whether decedent sustained a fatal injury

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:	Unknown

Location / Custody Information

Where did the event causing the death occur?

Street Address:	IH35 and View Rd	City:	Sanger
County:	Denton	Zip:	76266

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

Location Category: Roadway/highway/street/sidewalk

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:

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?: 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:

Aggravated Assault with a DW/FV

Offense 2:

Evading in a Vehicle

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: Unknown

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: 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): Yes

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?:	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:	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:

Officers initiated a vehicle pursuit due to the driver being a suspect in an Aggravated Domestic Assault. The suspect's vehicle was disabled by the deployment of Stop Sticks. The vehicle came to a stop without coming into contact with any other vehicle or object. Officers observed that the suspect was unresponsive, and his head was leaning to the side. Officers issued verbal commands and attempted to elicit a response by breaking the rear passenger window and deploying OC into the vehicle. After the suspect did not respond, officers extracted him from the car. The suspect was unconscious, and officers began CPR. There were signs of narcotics inside the vehicle, so officers administered Narcan and transferred the suspect to EMS personnel. The suspect was transported to the hospital where he was later pronounced deceased. The results of the autopsy are pending.