



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 26-212-UF

Version Type: AMENDED

Report Date: 3/17/2026 10:10
AM

Status: Submitted

Agency/Facility Information

Agency Name: San Antonio Police
Dept.

Agency Address: 315 S. Santa Rosa

Agency City: San Antonio

Agency State: TX

Agency Zip: 78207

Director Information

Director Salutation: Chief

Director First Name: Jesse

Director Middle Name:

Director Last Name: Salame

Reporter Name: Russ Van Geffen

Reporter Email: russ.vangeffen@sanantonio.gov

Decedent Information

Identity of Deceased

First Name: Jonathan

Middle Name: Jehu

Last Name: Avila Ramirez

Suffix:

Date of Birth: 1/29/1991

Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 35

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

Date/Time of Custody or
Incident: 3/3/2026 6:00 PM

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

Death Date and Time: 3/4/2026 7:04 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:

Methamphetamine Toxicity and Hypertensive and arteriosclerotic cardiovascular disease in the setting of a recent struggle.

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

Medical Treatment: No

If death was an accident, homicide or suicide, who caused the death?

Who caused the death?: Decedent

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?: 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: Drug overdose

Location / Custody Information

Where did the event causing the death occur?

Street Address: US 281 at Jones
Maltsberger

City: San Antonio

County: Bexar

Zip: 78216

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: Pre-Custodial Use
of Force

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?: 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:

Evading Detention, Pedestrian on roadway

Offense 2:

Emergency Detention

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: Medical / Mental
Health assistance
call; Other, specify

Type of Offense, Other:

Suicide in progress

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?: 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?: Yes

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: Yes, mark which restraint devices were used

Type of restraint

Type of Restraint: Handcuffs

Summary of Incident

Summary of How the Death Occurred: (max. 30,000 characters)

Summary:

On 3/3/26, SAPD officers were dispatched to U.S. Highway 281 near Jones Maltsberger Road for a reported suicide in progress. The caller stated a male was standing on the highway barrier and had nearly fallen. Additional information indicated the male was walking along the highway. Upon arrival on the northbound side, officers observed the male, the decedent, run across the highway into the southbound lanes, prompting several vehicles to take evasive action. A responding officer attempted to contact the decedent, but he fled on foot. To prevent the decedent from reentering traffic, the officer pursued and caught the decedent, resulting in a brief struggle. Additional officers arrived, and the decedent was taken into custody despite continued resistance. The decedent was secured in a patrol vehicle and moved to a safe location. EMS was requested to assess the decedent's medical condition. EMS arrived and, upon evaluation, determined the decedent

needed additional medical care. EMS transported the decedent to University Hospital, where he was admitted. Later, on 3/4/2026, the decedent was pronounced deceased at 0714 hours.