KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	19-242-UF	Version Type:	AMENDED
Report Date:	9/11/2019 9:15 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:	William
Director Middle Name:	P.		
Director Last Name:	McManus		
Reporter Name:	Mark Morales	Reporter Email:	mark.morales@sanantonio.gov

Decedent Information

Identity of Deceased

First Name: Daniel

Middle Name: Martin

Last Name: Moncada

Suffix:

Date of Birth: 11/6/1991 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 27

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

Date/Time of Custody or Incident: 3/4/2019 2:20 AM

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

Death Date and Time: 3/4/2019 3:36 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:

Deceased died of multiple gunshot wounds.

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?:	Law enforcement/correctional personnel

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?:	Handgun

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:	Firearm

Location / Custody Information

Where did the event causing the death occur?

Street Address:	11707 Spring Dale	City:	San Antonio
County:	Bexar	Zip:	78249

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

Location Category: Residence/Home

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:
Attempted Capital Murder-PO	
	Offense 2:
Municipal Warrants	
	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

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:	Yes, mark all that apply
Decedent Display or Use Weapon Details:	Discharged firearm

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:	Attempted to injure law enforcement personnel

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?:	Yes	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?:	Yes
Physically attempt/assault officer(s):	Yes	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:

The mother of the actor called police stating that her son is bi-polar and schizophrenic and is off his medications. She went on to say that he was having auditory hallucinations, throwing items, and breaking doors inside the residence. Two officers arrived to the location and began to assess the actor's condition as he was backed into a corner of a bedroom. The actor was instructed to show his hands and did so but would not move from the corner. A decision was made to arrest the actor on municipal court warrants. As officers walked towards the actor, he raised a shotgun from behind him. He fired the shotgun at the officers. A sergeant that was there to assist the officers returned fire. The actor was struck and fell to the ground. Officers secured the actor's shotgun along with another assault rifle that was in close proximity. Medical attention was rendered by the officers and EMS was requested. The actor was transported to a Level 1 Trauma Hospital where he was pronounced dead.