KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	20-661-UF	Version Type:	AMENDED
Report Date:	10/18/2021 2:59 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Beaumont Police Dept.	Agency Address:	PO BOX 3827
Agency City:	Beaumont	Agency State:	TX
Agency Zip:	77704		

Director Information

Director Salutation:	Chief	Director First Name:	James
Director Middle Name:	P		
Director Last Name:	Singletary		
Reporter Name:	Curtis Breaux	Reporter Email:	curtis.breaux@beaumonttexas.gov

Decedent Information

Identity of Deceased

First Name: Manuel

Middle Name:

Last Name: Ramirez

Suffix: Jr.

Date of Birth: 8/16/1992 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: 3/1/2020 10:58 PM

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

Death Date and Time: 7/24/2020 3:58 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)

Manner of Death: Homicide (includes Justifiable Homicide)

Medical Cause of Death:

Medical Cause of Death:

Complication of gunshot wound to torso.

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?: 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?: Rifle/shotgun

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:	5900 College St.	City:	Beaumont
County:	Jefferson	Zip:	77706

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

Location Category: Parking lot/garage

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:

N/A

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:
Aggravated Assault on a Public Servant	
	Offense 2:
Deadly Conduct	
	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:	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;

	Attempted to injure 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):	Unknown	Make suicidal statements?:	No
Exhibit any mental health problems?:	Unknown	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):	Yes	Gain possession of officer's weapon:	No
Verbally threaten other(s) including law:	Yes	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:

Officers responded to the "Temptations Club" in the 5900 blk. of College St., in ref. to a call that a patron that had been told to leave the club after causing a disturbance, and had returned and was firing a weapon into the building, while the building was still occupied with patrons and employees.
Upon first responding officer's arrival, the officer observed Manuel Ramirez Jr. actively engaged in the process of firing a pistol into the area of the business. The officer engaged the suspect and the suspect refused to comply with officer's commands. The officer fired to stop the continuous threat of Ramirez continuing to shoot into the business and in the direction of the officer.

Ramirez survived the initial incident and has been hospitalized since. Ramirez received approximately 39 surgeries through the date and time of his death.
An autopsy was ordered and the final results have been submitted.