KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	21-1077-CJ	Version Type:	AMENDED
Report Date:	3/15/2022 11:32 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Jones County Sheriff's Office	Agency Address:	PO BOX 821
Agency City:	Anson	Agency State:	TX
Agency Zip:	79501		

Director Information

Director Salutation:	Sheriff	Director First Name:	Danny
Director Middle Name:	C		
Director Last Name:	Jimenez		
Reporter Name:	Danny Jimenez	Reporter Email:	danny.jimenez@co.jones.tx.us

Decedent Information

Identity of Deceased

First Name: Armando

Middle Name: Wayne

Last Name: Rubio

Suffix:

Date of Birth: 3/11/1981 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 40

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

Date/Time of Custody or Incident: 6/7/2021 1:03 PM

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

Death Date and Time: 8/3/2021 1:04 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: Natural

Medical Cause of Death:

Medical Cause of Death:

Asthma

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: 101 Ave J
City: Anson
County: Jones
Zip: 79501

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

Location Category: Other, specify

Other Location Category:

Anson General Hospital

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: 6/7/2021 1:03 PM

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:

MTR/ Fail to comply with sexual registration requirements

Offense 2:

Offense 3:

Were the Charges:: A probation/parole violation

What were the types of charges or reason for contact? (Hold CTRL to select all that apply)

Type of Offense: Other, specify

Type of Offense, Other:

violation of probation

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:	Yes, mark which restraint devices were used

Type of restraint

Type of Restraint:	Handcuffs; Leg Shackles

Summary of Incident

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

Summary:

On August 2, 2021 at 23:04 jail staff was conducting a walk-through of the cell areas when inmate Rubio was asked by a jailer if he was feeling well. Inmate Rubio stated that he did not feel well. Inmate Rubio does have a medical history of Asthma and also uses an inhaler. When completing the cell walk-through, the jailer escorted inmate Rubio to Medical where they checked his oxygen levels. Inmate Rubio was given a breathing treatment and the jailer called the on call RN. The on call nurse stated to take inmate Rubio to the emergency room for evaluation. At approximately 23:59, inmate Rubio was transported by a jailer on duty to Anson General Hospital. Upon arrival, inmate Rubio stated to hospital staff that he could not catch his breath. He was then placed in a room and given oxygen. Hospital staff then gave inmate Rubio several injections. At 00:25, inmate Rubio collapsed on the hospital room floor and CPR was administered. Hospital Emergency Room Doctor pronounced inmate Rubio deceased at 01:04 am on August 3, 2021. Jones County Justice of the Peace pronounced inmate Rubio deceased at 01:50 am on August 3, 2021.