KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	21-1295-MJ	Version Type:	AMENDED
Report Date:	3/30/2022 7:38 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Fort Worth Police Dept.	Agency Address:	505 W. Felix St.
Agency City:	Fort Worth	Agency State:	TX
Agency Zip:	76115		

Director Information

Director Salutation:	Chief	Director First Name:	Neil
Director Middle Name:			
Director Last Name:	Noakes		
Reporter Name:	Douglas Rohloff	Reporter Email:	douglas.rohloff@fortworthtexas.gov

Decedent Information

Identity of Deceased

First Name: JONATHAN

Middle Name:

Last Name: RIVERA

Suffix:

Date of Birth: 8/20/1988 Sex: Male

Race: Anglo or White

Age At Time Of Death: 33

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

Date/Time of Custody or Incident: 9/7/2021 9:44 PM

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

Death Date and Time: 9/8/2021 5:03 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: Accidental

Medical Cause of Death:

Medical Cause of Death:

Cocaine Toxicity

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?: 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:	350 West Belknap Street	City:	Fort Worth
County:	Tarrant	Zip:	76102

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

Location Category:	Law Enforcement Facility

What type of custody/facility was the Decedent in at the time of death:

Type of Custody:	Municipal 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:	9/7/2021 10:20 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?:	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:

Possession of a Controlled Substance

Offense 2:

Unlawful Carrying of a Weapon

Offense 3:

Possession of a Controlled Substance

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: Other, specify

Type of Offense, Other:

Traffic stop for expired license plates

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:	No

Summary of Incident

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

Summary:

On 9/7/2021, at 2144 hours, the deceased was stopped by Fort Worth Police for expired license plates on a vehicle. During the investigation, the deceased was arrested for possession of controlled substance, UCW, possession of controlled substance, and possession of marijuana. At 2220 hours, the deceased was transported to Fort Worth City Jail, and it was believed the deceased ate some drugs. MedStar EMT's were called to the jail and evaluated the deceased. He denied eating any drugs and was cleared by EMTs. On 9/8/2021, at 0410 hours, the deceased started to have seizures, and MedStar EMTs were called again. They arrived and transported him to John Peter Smith Hospital where he was pronounce deceased.