KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	21-1505-CJ	Version Type:	AMENDED
Report Date:	5/13/2022 2:35 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Tarrant County Sheriff's Dept.	Agency Address:	200 Taylor St., Plaza Bldg. 7th Floor
Agency City:	Fort Worth	Agency State:	TX
Agency Zip:	76196		

Director Information

Director Salutation:	Sheriff	Director First Name:	Bill
Director Middle Name:			
Director Last Name:	Waybourn		
Reporter Name:	Clifton Shelton	Reporter Email:	cjshelton@tarrantcounty.com

Decedent Information

Identity of Deceased

First Name: LEON

Middle Name: ANTHONY

Last Name: JACOBS

Suffix:

Date of Birth: 2/22/1966 Sex: Male

Race: Black or African American

Age At Time Of Death: 55

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

Date/Time of Custody or Incident: 9/14/2021 9:50 PM

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

Death Date and Time: 10/30/2021 8:03 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: Natural

Medical Cause of Death:

Medical Cause of Death:

COVID-19 PNEUMONIA

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?:	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?:	Could not be determined

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:	15OO S. MAIN ST.	City:	FORT WORTH
County:	Tarrant	Zip:	76196

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:	County Jail

Specific type of custody/facility:

Specific Type of Custody/Facility:

Hospital/Infirmary

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:	9/14/2021 9:50 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:

BURGLARY OF A HABITATION WITH INTENT TO COMMIT FELONY

Offense 2:

Offense 3:

Were the Charges:: Filed

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

Type of Offense: Crime Against Property

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:	Leg Shackles

Summary of Incident

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

Summary:

Notification of the custodial death of Leon Anthony Jacobs (B/M 02-22-1966 TCSO CID #0980989 TX. SID #19434269 SS# and DL # not known) at 08:03 Hrs. on October 30, 2021. Jacobs was booked into the Tarrant County Jail on September 14, 2021 at 22:55 Hrs. for Burglary of a Habitation with Intent to Commit Felony. Jacobs was transported to John Peter Smith Hospital (JPSH) by Medstar Ambulance on October 6, 2021 at 09:48 Hrs. for health issues related to COVID-19. Dr. N. Perisetti pronounced Jacobs deceased at 08:03 Hrs. on October 30, 2021 in room P-533 at JPSH. Jacobs had no known MHMR diagnosis. Jacobs' known health conditions were Wolff-Parkinson-White Syndrome, COVID-19, chest pain, shortness of breath, and a possible Pulmonary Embolism. Jacobs tested positive for COVID-19 on September 27, 2021. The Tarrant County Medical Examiner's Office (TCME) conducted an autopsy and ruled it a natural death caused by COVID-19 Pneumonia. Fort Worth PD Major Case Unit will be the outside investigations agency.