KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	24-1398-C	Version Type:	ORIGINAL VERSION
Report Date:	9/24/2024 10:47 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Ector County Sheriff's Ofc.	Agency Address:	2500 S. Highway 385
Agency City:	Odessa	Agency State:	TX
Agency Zip:	79761		

Director Information

Director Salutation:	Sheriff	Director First Name:	Michael
Director Middle Name:			
Director Last Name:	Griffis		

Reporter Name:	Randy Dominguez	Reporter Email:	randy.dominguez@ectorcountysheriff.us

Decedent Information

Identity of Deceased

First Name: Christian

Middle Name: Anthony

Last Name: Mendoza

Suffix:

Date of Birth: 12/8/1980 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 43

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

Date/Time of Custody or Incident: 8/25/2024 1:30 AM

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

Death Date and Time: 8/25/2024 2:29 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 pending

What was the manner of death? (select only one)

Alcohol/Drug

Manner of Death: Intoxication

Medical Cause of Death:

Medical Cause of Death:

Possible Drug Intoxication/Overdose

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?: 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:	3210 N. Mercury	City:	odessa
County:	Ector	Zip:	79763

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: Police Custody (pre-booking)

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:

Burglary of a Habitation

Offense 2:

Public Intoxication

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: 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):	Yes	Make suicidal statements?:	No
Exhibit any mental health problems?:	No	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?:	Yes	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:	Yes
Attempt gain possession officer's weapon:	Yes		

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

Summary of Incident

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

Summary:

On August 25, 2024, at approx. 0128hrs ECSO received a call for service at 3210 N. Mercury in reference to Burglary of a Habitation in Progress with the actor in the home. The calling party advised they were in the home and the actor had entered the residence through their Childs bedroom window. Deputies responded to the residence and were able to make entry. Upon entry into the home Deputies saw Blood on the interior walls of the home. As Deputies called out for the subject they could hear someone in the bathroom. Dispatch was able to advised Deputies the home owners were able to make it out of the house safely before they arrived through a window. Deputies approached the bathroom and could tell someone was inside the bathroom with the door closed. After several call outs to the subject Deputies opened the door and saw a subject in the bathroom who had blood on his person. Deputies gave verbal commands to have the subject exit the bathroom and get on the ground but had negative results. Deputies had to reach and grab the subject by the arms in attempts to get compliance from him. The subject resisted and ultimately was tased several times and brought to the ground. Deputies attempted to place the subject in handcuffs at which point the subject reached for the Deputies firearm. The subject was finally detained and placed in handcuffs and escorted out of the home and placed in a patrol unit. The suspect was not speaking clearly and was unable to speak in full sentences. Medical Services were called to the scene to check on the suspects possible intoxication level, and minor injuries. While en route to the hospital the subject stopped breathing. The

transporting ambulance came to a stop mid transport and called for additional medical support in this medical emergency. After a secondary ambulance arrived they were able to get additional personnel and worked the suspect as they continued the transport. The subject was then transported to Medical Center Hospital were life saving measures were performed, but ultimately the subject passed away. Time of death was 0229hrs.

It was learned the suspect was actually visiting a neighbor (2313 N. Mercury) in the area of the incident before he went to 3210 N. Mercury. While at the home of the neighbor the suspect was said to have ingested cocaine through the nose and was consuming alcohol. The neighbor told Deputies he asked the suspect to leave his home do to him ingesting narcotics while his family was home. The neighbor stated the suspect was heavily intoxicated when he first arrived to his residence.

An autopsy was conducted and results are pending. It was believed the suspect passed away from possible drug overdose. Suspect was identified as Christian Anthony Mendoza DOB 12-08-1980