KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	25-875-UF	Version Type:	ORIGINAL VERSION
Report Date:	11/3/2025 1:03 PM	Status:	Submitted

Agency/Facility Information

Agency Name:	Cedar Park Police Dept.	Agency Address:	911 Quest Parkway
Agency City:	Cedar Park	Agency State:	TX
Agency Zip:	78613		

Director Information

Director Salutation:	Chief	Director First Name:	Michael
Director Middle Name:			
Director Last Name:	Harmon		
Reporter Name:	Daniel Kitchens	Reporter Email:	daniel.kitchens@cedarparktexas.gov

Decedent Information

Identity of Deceased

First Name: Jacob

Middle Name: Robert

Last Name: Allen

Suffix:

Date of Birth: 9/4/2001 Sex: Male

Race: Anglo or White

Age At Time Of Death: 24

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

Date/Time of Custody or Incident: 11/2/2025 10:15 PM

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

Death Date and Time: 11/2/2025 10:24 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 pending

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

Manner of Death: Homicide (includes Justifiable

Homicide)

Medical Cause of Death:

Medical Cause of Death:

Multiple GSW

Had the decedent been receiving treatment for the medical condition that caused the death after admission to your jail's jurisdiction?

Medical Treatment: Not Applicable

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?: Handgun

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:	1286 S Lakeline Blvd	City:	Cedar Park
County:	Williamson	Zip:	78613

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

Location Category: Roadway/highway/street/sidewalk

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:

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: Scene of incident

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:

Aggravated Assault with a Deadly Weapon Against a Public Servant

Offense 2:

Aggravated Assault with a Deadly Weapon Causing Serious Bodily Injury

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: Displayed firearm without discharge

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Yes (select all that

Attempt to Injure Others?:	apply)
Ways Decedent Attempted To Injure Others:	Attempted to injure law enforcement personnel; Injured 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?:	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:	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 a stabbing at 1851 S Lakeline Blvd (Top Spin Karaoke) where victim was stabbed 6-7 times following an altercation at the bar. While attempting to locate the suspect, officers observed him riding his motorcycle back towards the bar. Traffic stop initiated and short pursuit ensued. Suspect stopped motorcycle a short time later and retrieved a Springfield 1911 .45acp handgun from one of the saddlebags of

the motorcycle. Suspect brandished the weapon at officers and in response, fearing serious bodily injury or death, two officers fired several times, striking the offender. Offender was pronounced deceased on scene.

Suspect had multiple alerts for violent threats to law enforcement, extreme opposition to law enforcement, and has threatened to harm and shoot at officers.