KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	26-590-C	Version Type:	ORIGINAL VERSION
Report Date:	8/4/2026 10:30 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	San Antonio Police Dept.	Agency Address:	315 S. Santa Rosa
Agency City:	San Antonio	Agency State:	TX
Agency Zip:	78207		

Director Information

Director Salutation:	Chief	Director First Name:	Jesse
Director Middle Name:			
Director Last Name:	Salame		
Reporter Name:	Rachel Barnes	Reporter Email:	rachel.barnes@sanantonio.gov

Decedent Information

Identity of Deceased

First Name: Raul

Middle Name:

Last Name: Armendarez

Suffix:

Date of Birth: 1/9/1980 Sex: Male

Race: Hispanic or Latino

Age At Time Of Death: 46

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

Date/Time of Custody or Incident: 7/18/2026 2:45 PM

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

Death Date and Time: 7/18/2026 6:36 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: Pending autopsy results

Medical Cause of Death:

Medical Cause of Death:

Pending

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: Unknown

Location / Custody Information

Where did the event causing the death occur?

Street Address:	8210 Marbach Rd	City:	San Antonio
County:	Bexar	Zip:	78227

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

Location Category: Parking lot/garage

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 subsequent to 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: Dead on arrival at 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:

None

Offense 2:

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: Medical / Mental Health assistance call

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?: Yes (select all that apply)

Ways Decedent Attempted To Injure Others: Attempted to injure law enforcement personnel

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?:	Yes	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?:	Yes
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:

Officers responded to the location for a Fire/EMS request for police assistance. Officers were on scene helping to calm the decedent asking for medical assistance. Officers had the decedent sit on the ground to allow Fire/EMS to check his vitals. The decedent displayed various jerking movements with his arms and legs and was demanding to sit inside the Fire/EMS vehicles. EMS returned to their vehicle to get sedation for the decedent. At that time, the decedent lunged forward at the officers. The officers stopped him and put him on the ground to handcuff him. The decedent stiffened his body and arms to resist handcuffing. There Officers, one on each arm and one on legs, were able to place handcuffs on the decedent with his hand behind his back and leg irons on his legs. This took about 1 minute. Immediately after cuffing, an Officer spoke to the decedent but he was unresponsive. EMS was on scene. Officers removed the handcuffs at their request. EMS performed life saving measures and transported the decedent to the hospital where he was pronounced deceased on arrival.