



KEN PAXTON

ATTORNEY GENERAL *of* TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number: 19-342-C

Version Type: ORIGINAL
VERSION

Report Date: 4/10/2019 4:17 PM

Status: Submitted

Agency/Facility Information

Agency Name: Austin Police Dept.

Agency Address: PO BOX 689001

Agency City: Austin

Agency State: TX

Agency Zip: 78768

Director Information

Director Salutation: Chief

Director First Name: Brian

Director Middle Name:

Director Last Name: Manley

Reporter Name: Jonathan Herring

Reporter Email: jonathan.herring@austintexas.gov

Decedent Information

Identity of Deceased

First Name: Javier

Middle Name: Antonio

Last Name: Ambler

Suffix: II

Date of Birth: 10/7/1978

Sex: Male

Race: Black or African
American

Age At Time Of Death: 40

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

Date/Time of Custody or
Incident: 3/28/2019 1:26 AM

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

Death Date and Time: 3/28/2019 2:37 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) _____

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: Not Applicable

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?: Unknown

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: St. Johns and
Bethune

City: Austin

County: Travis

Zip: 78752

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: Police Custody
(pre-booking)

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:

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?: 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:

Evading in a Motor Vehicle

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: Other, specify

Type of Offense, Other:

Traffic Violation

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?: Unknown

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:	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: 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 3/28/19, an on-duty Williamson County Sheriff's Deputy was working patrol within Williamson County jurisdiction. At approximately 1:26am, this same Williamson County Sheriff's Deputy attempted to stop a Honda Pilot for a traffic violation at approximately the 16400 blk of FM1325. The driver of the Honda Pilot did not stop and began to evade arrest/detention. The Sheriff's Deputy pursued the driver of the Honda Pilot through Williamson County and into Austin, Texas. During the pursuit, the Honda Pilot was observed having three separate collisions with fixed objects on and off the roadway. The Honda Pilot stopped near the intersection of St. Johns and Bethune after a minor collision with a small grove of trees. The Sheriff's Deputy approached the Honda Pilot giving verbal commands for the driver to get on the ground. The driver exited the Honda Pilot but did not immediately comply with the Deputy's verbal commands. Two Deputies each deployed their individual tasers, and other officers from both agencies were able to gain compliance by placing the driver into custody. Once in custody, Deputies noticed the driver was un-responsive. Deputies were unable to locate a pulse and began chest compressions until EMS arrived and took over life saving interventions. The driver was transported to Dell Seton Medical Center in Austin, Texas. The decedent was pronounced deceased at 2:37am.

