

Baker, Byron Ray  
DOD: 9/1/2012



**SHERIFF'S DEPARTMENT, ORANGE COUNTY  
Santa Ana, California**



**TO:** Captain. T. Bland  
**FROM:** Lieutenant B. Valentine *[Signature]*  
**RE:** In-Custody Death (Baker, Byron #2718779/ DR#12-154970)

**DATE:** September 1, 2012  
**INTRA-DEPARTMENT MEMO**

**Name:** Baker, Byron Ray

**Booking #:** 2718779

**Physical Description:** M/W 5'06" / 160 / Brown / Blue

**Date of Birth:** 01-30-63

**Last Known Address:** [REDACTED]

**Phone #:** [REDACTED]

**SSN:** [REDACTED]

**CDL:** [REDACTED]

**Location of Death:** UC Irvine Medical Center (#7230) 101 City Drive South, Orange CA 92868

**Day/Date/Time of Death:** Saturday / 09-01-12 / 1845 hours

**DR#:** 12-154970

**OCSD Homicide Inv.:** Daniel Salcedo

**Forensics Case #:** 12-154970

**Coroner Case #:** 12-03402-MT

**Deputy Coroner:** Trisha Martinez

**District Attorney Case #:** SA 12-021

**District Attorney Inv:** Katherine Kriskovic

**Arresting agency:** State Parole – Case #R00809

**Day/Date/Time of Arrest:** Tuesday / 08-21-12 / 1515 hours

**Day/Date/Time Booked:** Tuesday / 08-21-12 / 1802 hours

**Charges:** CPC 3455 (A) (4) Revocation Hearing

**Release/Date:** 10-03-12

**Disposition of Property:** All property released to Inv. Dan Salcedo (Clothing and comb, no money with Cashier)

**Summary:**

On Saturday September 1, 2012, at about 0145 hours, Baker experienced a seizure in his cell (Module L / Sector – 19 / Cell – 19). Baker was found face down on the floor and shaking by his cellmate [REDACTED]. [REDACTED] pressed the emergency button to notify the Deputies. Deputies J. Pawlikowski and S. Kim responded and found Baker laying under the table, unconscious and gasping for air. Baker had a pulse

**SHERIFF'S DEPARTMENT, ORANGE COUNTY**  
**Santa Ana, California**

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but was having trouble breathing Deputies Pawlikowski and Kim performed rescue breaths until medical staff arrived. Medical staff arrived at about 0150 hours and began treating Baker. At about 0205 hours, Baker was transported to UC Irvine Medical Center via ambulance.

On Saturday, September 1, 2012, at approximately 0710 hours Lieutenant L. Von Nordheim was notified by Operations Sergeant L. De Anda that UC Irvine Medical Center was requesting the next of kin for inmate Baker, Byron (01-30-1963) be notified to contact the hospital. Baker was on life support and not expected to survive. Next of kin [REDACTED] was notified at 0843 hours. At about 1819 hours, with the families consent, inmate Baker was removed from Life Support. At approximately 1850 hours, I was notified by Sergeant V. Pablo that inmate Baker had died. Deputy P. Hamilton #3342 stated inmate Baker was pronounced dead by Doctor Emily Clark and Doctor Christopher Owen on September 1, 2012, at approximately 1845 hours.

**Medical / In-Custody History:**

Inmate Baker was booked into the Orange County Jail on August 21, 2012 at 1802 hours. He remained on the booking loop until August 22, 2012 at 0645 hours when he was transferred the Theo Lacy Facility. He was housed in Module L, Sector 19, Cell 14 upon his arrival. He remained in that housing location until September 1, 2012 when the medical incident occurred. He was transported to UCI Medical Center on September 1, 2012 at about 0205 hours. While in-custody Baker was being treated for [REDACTED]

The Sheriff's Homicide Unit, District Attorney's Office, Sheriff's Identification and Coroner Division responded to the hospital and the Theo Lacy Facility to conduct a death investigation.

**Notifications:**

**Lieutenant Dan Dwyer(Department Commander) made the following notifications:**

Undersheriff J. Scott  
Assistant Sheriff M. Billings – Investigations  
Commander D. Barnes-Investigations  
Assistant Sheriff M. James- Custody/ Court Operations  
Commander S. Kea – Custody / Court Operations  
Office of Independent Review (OIR)  
Captain S. Doan-PIO  
John Moorlach – Chairman of the Board of Supervisors  
M. Patel- Interim County Executive Officer (via email)  
Captain A. Powell – Investigations  
Lt. Gavin-Investigations  
Sergeant A. Spencer – Homicide Unit  
Captain M. Long - S.A.F.E.  
Captain R. Peterson – Community Programs  
Orange County District Attorney's Office – Bureau of Investigations  
Coroner Division  
Sheriff's Identification – Crime Lab

**SHERIFF'S DEPARTMENT, ORANGE COUNTY**  
**Santa Ana, California**

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**Lieutenant B. Valentine (Theo Lacy Watch Commander) made the following notifications:**

Captain A. Bland – Theo Lacy Facility

Lieutenant Dave Johnson for Cathy Irons – CJX / Intake Release Center

Maria Kilcullen- Theo Lacy Records Supervisor

Virginia Sollars- Theo Lacy Medical Supervisor

Jean Wilkinson & Frank Ospino – Orange County Public Defender's Office (*E-Mail*)

Elia Martin for Tracy Carroll – Inmate Records Manager

ORANGE COUNTY JAIL  
SANTA ANA, CALIFORNIA

MODULE RECORD

2718779 BAKER

BYRON RAY

M W 506 160 BRO BLU

BKSTAT: REVH DOB: 013063 AGE: 49 POB: NV AGY: PRB ARACSN:

MED: MED ATTN REQ ILL/INJ: Y SSN: [REDACTED] BAIL: NO BAIL

JURIS: CSUP WR/CS: OLN: [REDACTED] OLNST: CA

AKA: BOOK DATE/TIME: 082112/1802

COMM/TM:

CHRGS: CNTS DEG CODE

01 F PC3455(A)(4)

DESC

REVOCATION HEARING

MOVEMENT

L19-14-2

MOVEMENT L19-2-L

BKN NAME:  
BAKER BYRON RAY

BKN:  
2718779

DNA on file per *LRDB*  
DATE: 082212 INITIALS: *BB*

Orange County Jail

Santa Ana, California

INMATE HISTORY RECORD

BKG#: 2718779 DATE/TIME: 082112 1802 BKG STATUS: REVH HSG LOC: IM IN

NAME: BAKER BYRON RAY DOB: 013063 POB: NV

AKA: PAPPAGEORGE BYRON RAY

COMM/TM:

M W 49 506 160 BRO BLU SSN: [REDACTED] OLN: [REDACTED] ST: CA

ILL/INJ: Y MED HIST: MED ATTN REQ ARR AGCY CASE #:

AGY: PRB JURIS: CSUP WR/CS #: R00809 BAIL OR FINE: \$NO-BAIL

CHARGES: CNTS DEG CODE SECTION

DESCRIPTION

1. 01 F PC 3455(A)(4) REVOCATION HEARING

AKA: BYRON, RAY

HOLDS	TIME	DATE	WARRANT NO.	JURISDICTION	BAIL	CHARGE	INIT.

SUPPLEMENT BOOKINGS	BOOKING NO.	DATE	WARR. / CASE NO.	JURISDICTION	BAIL	CHARGE	INIT.

OTHER ACTIVITY	082212@0725 AKA PER PBK/CRM						

SENTENCE EXPIRATION	BOOKING NO.	DATE	GOOD TIME	WORK TIME	S/E	FINAL S/E	INIT.
	BKG	8-29-12	18	18	<i>8/29/12</i>	OCTOBER 3, 2012	REVH
							MER



ORANGE COUNTY SHERIFF-CORONER DEPARTMENT  
AUTOMATED JAIL SYSTEM  
\* CASE DISPOSITION CONTROL SHEET \*

DATE: 09/01/12  
TIME: 1950  
PAGE: 1

BKG NAME: BAKER BYRON RAY BKG #: 2718779

TO BE REL'D FM... TL HO HO HO CURRENT HOUSING ASSIGNED... TL PR PR PR

TOTAL CASES: 001 TOTAL HOLDS: 00

SUFF	BKG DT	WARR/CASE #	JURS	S/E	DT	FUT DT	DISPO	RG	VERIFY
	082112	R00809	CSUP			NO	IN-CUSTODY	(/)	( )

TYPE OF RELEASE: DECE

IF AJPREL IS CANCELLED, ENTER CANCELLATION REASON \_\_\_\_\_

IF INMATE IS AN IN-CUSTODY RELEASE, ENTER AGENCY \_\_\_\_\_

SPECIAL INSTRUCTIONS \_\_\_\_\_

RECORDS VERIFICATION BY: \_\_\_\_\_ DATE: \_\_\_\_\_ TIME: \_\_\_\_\_  
SUPERVISORS APPROVAL BY: mlitsteller DATE: 9/1/12 TIME: 1950

\*\*\*\*\*  
RELEASE STATUS: FINAL (/) ADMIN ERROR ( )

RELEASE DEP: MEINKE #531 DATE: SEP 01 2012 TIME: 2000

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## PROPERTY INVENTORY RECEIPT

THIS FORM MUST BE COMPLETED ON ALL ORANGE COUNTY JAIL BOOKINGS.

SHADED AREAS ARE FOR I.R.C. USE ONLY

I.R.C. BOOKING NUMBER: 2718779

DATE/TIME: 08-21-12 / 1802

NAME: Baker LAST Byron FIRST Ray MIDDLE DOB.: 1-30-63ARRESTING AGENCY: O.C. Probation COURT: Central ARRESTING OFFICER: R. GosselinMONEY: \$ 0RECEIVED: \$ 0RECEIVED BY: 83343

This form is to be completed in the presence of the arrestee. List all items by amount and color. If property is not removed, indicate RETAINED in the appropriate box. List jewelry by either yellow or white metal, indicate color of stones only. Complete even if NO PROPERTY is received.

	VERIFIED/IRC	YELLOW METAL	WHITE METAL	VERIFIED/IRC
BELT		EARRINGS		
KNIFE		CHARMS		
CHECKBOOK		CHECKS		
BILLFOLD		BRACELET		
GLASSES		RINGS		
KEYS		NECK CHAIN		
WATCH		LIGHTER		

MISCELLANEOUS PROPERTY (Bulk property will NOT be accepted):

Comb

PROPERTY RELEASED: \_\_\_\_\_

RELEASED TO: \_\_\_\_\_ PRINT NAME/SIGNATURE: \_\_\_\_\_ DATE/TIME: \_\_\_\_\_

ITEMS RETAINED BY ARRESTING AGENCY, (EVIDENCE OR SAFEKEEPING):  
\_\_\_\_\_INVENTORY OFFICER: R. Gosselin PRINT NAME: \_\_\_\_\_ AGENCY: O.C. Probation COURT: Central  
SIGNATURE & BADGE #: R. A. Sonol # 336 DATE/TIME: 8-21-12 @ 1515 hrs

I HAVE REVIEWED THIS INVENTORY AND IT ACCURATELY REFLECTS THE PROPERTY IN MY POSSESSION AT THIS TIME.

ARRESTEE'S SIGNATURE: X VERIFIED BY: 83343

## MONEY/PROPERTY TRANSFER RECORD

TO BE COMPLETED ON ALL AGENCY-TO-AGENCY TRANSFERS/SIGNATURE INDICATES RECEIPT OF PROPERTY

RECEIVED BY: \_\_\_\_\_ AGENCY: \_\_\_\_\_ DATE/TIME: \_\_\_\_\_  
PRINT NAME/SIGNATURE

DISCREPANCIES (IF ANY): \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_ AGENCY: \_\_\_\_\_ DATE/TIME: \_\_\_\_\_  
PRINT NAME/SIGNATURE

DISCREPANCIES (IF ANY): \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_ AGENCY: \_\_\_\_\_ DATE/TIME: \_\_\_\_\_  
PRINT NAME/SIGNATURE

DISCREPANCIES (IF ANY): \_\_\_\_\_

## TO BE COMPLETED AT TIME OF RELEASE

I HAVE REVIEWED MY PROPERTY AND I ACKNOWLEDGE RECEIPT OF ALL MONEY AND ARTICLES LISTED ABOVE EXCEPT THAT PORTION THEREOF PREVIOUSLY RELEASED BY ORDER.

SIGNATURE: \_\_\_\_\_ DATE/TIME: \_\_\_\_\_

RELEASED BY: \_\_\_\_\_ AGENCY/COURT: \_\_\_\_\_

COMMENTS: \_\_\_\_\_ PRINT NAME/SIGNATURE

Original - File

Yellow - Property

Pink - Inmate

Gold - Agency

B779

ORANGE COUNTY JAIL  
Santa Ana, CaliforniaCAROUSEL #  
RACK #

R/8

## CLOTHING AND BULK PROPERTY INVENTORY

BKG#: 2718779

DATE/TIME: 082112 1802

BKG STATUS: REVH HSG LOC: IM IN

NAME: BAKER

BYRON

RAY

DOB: 013063 POB: NV

AKA: PAPPAGEORGE

BYRON

RAY

COMM/TM:

NUMBER AND ITEM	COLOR	CONDITION OR DAMAGE	DRY CLEAN	WASH	NUMBER AND ITEM	COLOR	CONDITION OR DAMAGE	DRY CLEAN	WASH
SHIRT				666					
PANTS									
SWEATER									
T-SHIRT									
UNDERPANTS									
SOCKS/HOSE									
BELT									
SHOES									
BOOTS									
JACKET TOPCOAT									

## COMMENTS

CLOTHING EXCHANGE MADE	DATE	DEPUTY	NO.
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## BULK PROPERTY INVENTORY

I HAVE RECEIVED ALL ITEMS EXCEPT:

I ACKNOWLEDGE THAT THE ABOVE CLOTHING AND PROPERTY INVENTORY IS CORRECT. I ALSO AUTHORIZE THE SHERIFF TO DISPOSE OF ALL MY CLOTHING AND PROPERTY NOT CLAIMED BY ME SIX MONTHS AFTER MY RELEASE FROM HIS CUSTODY.

SIGNATURE X

SIGNATURE X

I AUTHORIZE THE SHERIFF TO DISPOSE OF MY CLOTHING TO SALVAGE.

SIGNATURE X

I HAVE RECEIVED ALL OF THE ITEMS LISTED ABOVE.

SIGNATURE X

INVENTORIED BY  
DEPUTY \_\_\_\_\_ NO. \_\_\_\_\_

DATE \_\_\_\_\_

RELEASED  
DEPUTY \_\_\_\_\_ NO. \_\_\_\_\_  
DATE \_\_\_\_\_

CHECKLIST FOR INMATE CIVILIAN CLOTHING WORN OUT TO COURT AND RETURNED

INMATE NAME: \_\_\_\_\_ (PRINT)

INMATE BOOKING NUMBER: \_\_\_\_\_

OUT	IN	OUT	IN
<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?
INMATE'S INITIALS:	INMATE'S INITIALS:	INMATE'S INITIALS:	INMATE'S INITIALS:
DEPUTY'S INITIALS:	DEPUTY'S INITIALS:	DEPUTY'S INITIALS:	DEPUTY'S INITIALS:
<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?
INMATE'S INITIALS:	INMATE'S INITIALS:	INMATE'S INITIALS:	INMATE'S INITIALS:
DEPUTY'S INITIALS:	DEPUTY'S INITIALS:	DEPUTY'S INITIALS:	DEPUTY'S INITIALS:
<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?
INMATE'S INITIALS:	INMATE'S INITIALS:	INMATE'S INITIALS:	INMATE'S INITIALS:
DEPUTY'S INITIALS:	DEPUTY'S INITIALS:	DEPUTY'S INITIALS:	DEPUTY'S INITIALS:
<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?
INMATE'S INITIALS:	INMATE'S INITIALS:	INMATE'S INITIALS:	INMATE'S INITIALS:
DEPUTY'S INITIALS:	DEPUTY'S INITIALS:	DEPUTY'S INITIALS:	DEPUTY'S INITIALS:
<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?
INMATE'S INITIALS:	INMATE'S INITIALS:	INMATE'S INITIALS:	INMATE'S INITIALS:
DEPUTY'S INITIALS:	DEPUTY'S INITIALS:	DEPUTY'S INITIALS:	DEPUTY'S INITIALS:
<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?
INMATE'S INITIALS:	INMATE'S INITIALS:	INMATE'S INITIALS:	INMATE'S INITIALS:
DEPUTY'S INITIALS:	DEPUTY'S INITIALS:	DEPUTY'S INITIALS:	DEPUTY'S INITIALS:
<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?	<b>DATE:</b> IS CLOTHING ISSUED CORRECT?
INMATE'S INITIALS:	INMATE'S INITIALS:	INMATE'S INITIALS:	INMATE'S INITIALS:
DEPUTY'S INITIALS:	DEPUTY'S INITIALS:	DEPUTY'S INITIALS:	DEPUTY'S INITIALS:

COMMENTS (BE AS BRIEF BUT CONCISE AS POSSIBLE):

DATE: \_\_\_\_\_  
 DATE: \_\_\_\_\_  
 DATE: \_\_\_\_\_  
 DATE: \_\_\_\_\_

560299

0007838472  
537704DA4ORANGE COUNTY JAIL  
\*\*\* TAKE 10 PRINTS \*\*\*

## BOOKING RECORD

BKG#: 2718779 DATE/TIME: 082112 1802 BKG STATUS: REVH HSG LOC: IM IN  
 NAME: BAKER BYRON RAY USER: DUENASD  
 AKA: PAPPAGEORGE BYRON RAY DOB: 013063 POB: NV  
 COMM/TM:  
 M W 49 506 160 BRO BLU SSN: [REDACTED] OLN: [REDACTED] ST: CA  
 ILL/INJ: Y MED HIST: MED ATTN REQ ARR AGCY CASE #:  
 AGY: PRB JURIS: CSUP WR/CS #: BAIL OR FINE: \$NO BAIL  
 CHARGES: CNTS DEG CODE SECTION DESCRIPTION  
 1. 01 F PC 3455(A)(4) REVOCATION HEARING R

[REDACTED] TO BE COMPLETED AT TIME OF BOOKING

US S

I HEREBY AUTHORIZE THE SHERIFF OR HIS DEPUTY TO RECEIVE, OPEN AND INSPECT <sup>FAT</sup> ALL MAIL OR MESSAGES  
 WHICH ARE SENT TO ME OR BY ME WHILE CONFINED HEREIN. <sup>SAME</sup>

I HAVE RECEIVED THE JAIL RULES AND KNOW THEY ARE POSTED IN THE LIVING AREAS OF THE JAIL.

I UNDERSTAND HOW TO OBTAIN MEDICAL CARE WHILE IN CUSTODY.

PURSUANT TO PENAL CODE SECTION 851.5, I HAVE BEEN GIVEN THE OPPORTUNITY TO MAKE THREE (3)  
FREE TELEPHONE CALLS WITHIN THE LOCAL DIALING AREA, OR AT MY OWN EXPENSE IF OUTSIDE THE  
 LOCAL DIALING AREA.

TELEPHONE CALLS DESIRED \_\_\_\_\_ COMPLETED \_\_\_\_\_ DATE/TIME AUG 2, 2012

THIS IS NOT AN ADMISSION OF GUILT

DEP. J. FIKEJS #8913

SIGNATURE X \_\_\_\_\_ BOOKING DEPUTY \_\_\_\_\_ # \_\_\_\_\_

RIGHT THUMB PLAIN IMPRESSIONS — RIGHT HAND RIGHT THUMB PLAIN IMPRESSIONS — RIGHT HAND

FINGERPRINTS AT TIME OF RELEASE

FINGERPRINTS AT TIME OF BOOKING

C58



# Orange County Sheriff's Department **FILED**

320 North Flower Street

Santa Ana, CA 92703

(714) 834 - 6670

FOR COURT USE ONLY

SUPERIOR COURT OF CALIFORNIA  
COUNTY OF ORANGE  
CENTRAL JUSTICE CENTER

AUG 29 2012

SARAH C. CARLSON, Clerk of the Court

## ORDER TO PAY COUNTY CRIMINAL JUSTICE ADMINISTRATION FEE

Court Case Number:

Book No: 2718779

BY: D. HALLAS DEPUTY  
Book Date: 08/21/2012

Defendant's Name: BAKER, BYRON RAY

DOB: 01/30/1963

Address:

DR#:

Charges: PC3455 (A) (4)

AGY: PRB

The County of Orange is authorized to recover a criminal justice administration fee pursuant to Board of Supervisors' Resolution No. 09-193 and Government Code Sections 29550, subdivision (c) and 29550.2, subdivision (a) ("Any person booked into a county jail pursuant to any arrest by a governmental entity not specified in Section 29550 or 29550.1 is subject to a criminal justice administration fee for administrative costs incurred in conjunction with the arresting and booking if the person is convicted of any criminal offense relating to the arrest and booking.")

TOTAL REIMBURSEMENT ORDERED:

\$235.00

*denied*

(Other Amount Ordered)

The defendant, having been convicted of criminal charges related to said arrest and booking, **IT IS ORDERED** that Judgment be entered against the defendant in the above sum and said sum is hereby due and payable to **Orange County Sheriff's Department** within 30 days.

Defendant has been notified of this order.

Judge:

*M**VICKIE L. HIX*

Date:

*8-29-12*

Failure to pay this reimbursement fee may result in civil action, including but not limited to: notifying credit reporting agencies, pursuing small claims action, a hold placed on your driver's license, a civil judgment against you, and wage garnishments.

In Custody Release

Remittance Advice - Return with Payment

*X*

Defendant's Name: BAKER, BYRON RAY  
Booking No: 2718779  
Amount Ordered: \_\_\_\_\_

PLEASE SEND PAYMENT TO:

Orange County Sheriff's Department  
Financial/Administrative Services Division  
320 N. Flower Street, Suite # 108  
Santa Ana, CA 92703



**SHERIFF-CORONER DEPARTMENT  
COUNTY OF ORANGE  
CALIFORNIA**

**SANDRA HUTCHENS  
SHERIFF-CORONER**

September 4, 2012

Department of Justice  
Bureau of Criminal Information and Analysis  
Death in Custody Unit  
Sacramento, CA 94203-4270

Regarding: Baker, Byron Ray  
Date of Birth: 01/30/63  
Booking Number: 2718779  
Coroner's Number: 12-03402-MT

Dear Ms. Souza:

This letter is serving notice to the Department of Justice of the death of an inmate in the custody of the Orange County Sheriff's Department on September 1, 2012.

Inmate Baker, Byron Ray, booking number 2718779 was booked into the Orange County Jail Intake and Release Center on August 21, 2012 by Orange County Probation Department. He was booked on PC3455(A)(4) – Revocation Hearing charge. On August 29, 2012 he went to court and was sentenced. His release date was October 3, 2012.

On September 1, 2012 at approximately 0145 hours, Baker was experiencing a seizure. His cellmate notified Deputies. When Deputies J. Pawlikowski and S. Kim responded and noticed Baker had a pulse but, had trouble breathing. The deputies performed rescue breaths until medical staff arrived. At 0150 hours, medical staff began treating Baker. At 0205 hours he was transported to UC Irvine Medical Center via ambulance. Baker was put on life support and his next of kin was contacted at 0843 hours. At 1819 hours, with the families consent, Baker was removed from life support. At 1845 hours, Baker was pronounced dead by Dr. Emily Clark and Dr. Christopher Owen.

An autopsy will be performed on September 5, 2012 by Forensic Pathologist Dr. Joseph Cohen. The cause of death is pending. For additional information, please contact Chief Deputy Coroner Jacque Berndt at (714) 647-7440.

Sincerely,

A handwritten signature in black ink that reads "Steve Kea" followed by a stylized surname.

Steve Kea  
Commander

Cc: Orange County Board of Supervisors  
Orange County Grand Jury  
County Executive Office/Risk Management

550 N. FLOWER STREET, P.O. BOX 449, SANTA ANA, CA 92702-0499 (714) 647-6000 FAX (714) 647-4591

*Integrity without compromise, Service above self. Professionalism in the performance of duty.*

## DEATH IN CUSTODY REPORTING FORM

<b>DOJ USE ONLY</b>		<input checked="" type="checkbox"/> ORIGINAL <input type="checkbox"/> AMENDMENT
<b>RECORD KEY</b> <hr/> <b>AGENCY TYPE</b> <input type="checkbox"/> Police <input type="checkbox"/> Sheriff <input type="checkbox"/> Probation <input type="checkbox"/> State <input type="checkbox"/> Other Local		
<b>DATE OF DEATH</b> 09 / 01 / 2012 MM DD YYYY		<b>SUBJECT NAME</b> BAKER, BYRON RAY Last      First      Middle
<b>CII NUMBER</b> [REDACTED]		<b>DATE OF BIRTH</b> 01 / 30 / 1963 MM DD YYYY
<b>AGENCY NCIC NUMBER</b> <hr/> <b>COUNTY</b> <hr/> <b>DOJ USE ONLY</b>		<b>GENDER</b> <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
<b>CUSTODY OFFENSE</b> <hr/> PC3455(A)(4)		<b>RACE/ETHNICITY (Check One)</b> <input type="checkbox"/> Other Asian <input type="checkbox"/> Korean <input type="checkbox"/> Black <input type="checkbox"/> Laotian <input type="checkbox"/> Chinese <input type="checkbox"/> Other <input type="checkbox"/> Cambodian <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Filipino <input type="checkbox"/> Samoan <input type="checkbox"/> Guamanian <input type="checkbox"/> Hawaiian <input type="checkbox"/> Hispanic <input type="checkbox"/> Vietnamese <input type="checkbox"/> American Indian <input checked="" type="checkbox"/> White <input type="checkbox"/> Japanese <input type="checkbox"/> Asian Indian
<b>CUSTODY STATUS</b> <i>(Check One)</i> <input type="checkbox"/> Process of Arrest <input type="checkbox"/> In Transit <input type="checkbox"/> Awaiting Booking <input type="checkbox"/> Booked - No Charges Filed <input type="checkbox"/> Booked - Awaiting Trial <input checked="" type="checkbox"/> Sentenced <input type="checkbox"/> Out to Court <input type="checkbox"/> Other		<b>CUSTODIAL RESPONSIBILITY</b> <b>AT TIME OF DEATH</b> <i>(Check One)</i> <input type="checkbox"/> Process of Arrest <input type="checkbox"/> City Jail <input checked="" type="checkbox"/> County Jail <input type="checkbox"/> Adult Camp or Ranch <input type="checkbox"/> Local Juvenile Facility/Camp <input type="checkbox"/> Adult Operations and Adult Programs (formerly CDC) <input type="checkbox"/> Division of Juvenile Justice (formerly CYA) <input type="checkbox"/> State Hospital <input type="checkbox"/> Other
<b>FACILITY OF DEATH</b> <i>(Check One)</i> <input type="checkbox"/> Crime/Arrest Scene <input type="checkbox"/> Local Hospital <input type="checkbox"/> City Jail <input checked="" type="checkbox"/> County Jail <input type="checkbox"/> Adult Camp or Ranch <input type="checkbox"/> Local Juvenile Facility/Camp <input type="checkbox"/> Adult Operations and Adult Programs (formerly CDC) <input type="checkbox"/> Division of Juvenile Justice (formerly CYA) <input type="checkbox"/> State Hospital <input type="checkbox"/> Other		<b>MANNER OF DEATH</b> <i>(Check One)</i> <input checked="" type="checkbox"/> Pending Investigation <input type="checkbox"/> Natural <input type="checkbox"/> Accidental - Injury to Self <input type="checkbox"/> Accidental - Injury by Other <input type="checkbox"/> Suicide <input type="checkbox"/> Homicide Willful (Law Enforcement Staff) <input type="checkbox"/> Homicide Willful (Other Inmate) <input type="checkbox"/> Homicide Justified (Law Enforcement Staff) <input type="checkbox"/> Homicide Justified (Other Inmate) <input type="checkbox"/> Execution <input type="checkbox"/> Cannot Be Determined <input type="checkbox"/> Other
<b>LOCATION WHERE CAUSE OF DEATH OCCURRED</b> <i>(Check One)</i> <input type="checkbox"/> Not Applicable (Natural) <input type="checkbox"/> Crime/Arrest Scene <input type="checkbox"/> Facility - Administrative <input type="checkbox"/> Facility - Booking <input checked="" type="checkbox"/> Facility - Living <input type="checkbox"/> Facility - Common <input type="checkbox"/> Facility - Holding <input type="checkbox"/> Facility - Medical Treatment <input type="checkbox"/> Other		
<b>MEANS OF DEATH</b> <i>(Check One)</i> <input checked="" type="checkbox"/> Pending Investigation <input type="checkbox"/> Not Applicable (Natural) <input type="checkbox"/> Handgun <input type="checkbox"/> Rifle/Shotgun <input type="checkbox"/> Club, Blunt Instrument <input type="checkbox"/> Hands, Feet, Fists <input type="checkbox"/> Knife, Cutting Instrument <input type="checkbox"/> Hanging, Strangulation <input type="checkbox"/> Alcohol/Drug Overdose <input type="checkbox"/> Execution: Lethal Gas/Injection <input type="checkbox"/> Cannot Be Determined <input type="checkbox"/> Other		
<b>DATA SUPPLIED BY (Please print the following information):</b>		
<b>Name:</b> PAM WALKER		<b>Title:</b> ASST. MGR
<b>Agency:</b> ORANGE CO. SHERIFF'S DEPT.		<b>Telephone:</b> 714-647-6080
<b>Address:</b> 550 N. FLOWER ST., SANTA ANA, CA 92703		

Send completed form to: Department of Justice  
 Criminal Justice Statistics Center  
 P.O. Box 903427  
 Sacramento, CA 94203-4270  
 Facsimile: (916) 227-0427 or 227-3561  
 Telephone: (916) 227-3545

INTAKE RELEASE CENTER, ORANGE COUNTY  
SANTA ANA, CALIFORNIA

TO: Elisa Quiambao

DATE: 05/01/2013

FROM: Dep. Jeremiah Henry, Risk Management Bureau

RE: COPIES OF INMATE FILE

Briefly explain need: Claim Investigation

If known:  IN CUSTODY  OUT OF CUSTODY

BOOKING NUMBER NAME D.O.B.

2718779 Baker, Byron 01/30/1963

- PRE-BOOKING RECORD (Both sides)
- BOOKING & PROPERTY RECORD (With inmate's signature)
- CLOTHING & BULK PROPERTY INVENTORY
- INMATE HISOTRY CARD(S) (Both sides)
- MODULE CARD
- INMATE PERSONAL FUNDS LEDGER CARD(S) (Released inmates only)
- INMATE MONEY RELEASE AUTHORIZATION(S)
- SUPPLEMENTAL BOOKING RECORD(S)
- CUSTODY HOLD TYLETYPE(S)
- JAIL INCIDENT REPORT(S)
- DISCIPLINARY HEARING REPORT(S)
- OFFICIAL AGENCY VISITATION (J-056)
- ATTORNEY VISITATION (J-054)
- COURT ORDERS
- CITE AND RELEASE DOCUMENT(S)
- DETENTION RELEASE DOCUMENT(S)
- COPY OF ENTIRE FILE; Explain need: Claim against the County

OTHER:

Date Received:

05/06/2013

By:

Date Returned:

05/07/2013

By:

Elisa Q.

Distribution:

Original: Inmate File

Canary: To be returned with documents

Pink: Requestor



**SHERIFF-CORONER DEPARTMENT  
COUNTY OF ORANGE  
CALIFORNIA**

SANDRA HUTCHENS  
SHERIFF-CORONER

**TELECOPY TRANSMITTAL SHEET**

DATE: 09/05/12      TIME: 1310      NUMBER OF PAGES 3  
(INCLUDE COVER PAGE)

TO: Department of Justice      NAME

Criminal Justice Statistics Center      LOCATION

916-227-0427

/

916-227-3545

FAX PHONE NUMBER

OFFICE PHONE NUMBER

FROM: Pam Walker      NAME

Inmate Records/IRC      LOCATION

714-972-0776

/

714-647-6080

FAX PHONE NUMBER

OFFICE PHONE NUMBER

**MESSAGES:**

Death In-Custody: Baker, Byron Ray DOB:01/30/1963.

IF THERE ARE ANY QUESTIONS, PROBLEMS, OR YOU DON'T RECEIVE ALL OF THE PAGES, CALL  
714-647-6080

## TRANSMISSION VERIFICATION REPORT

TIME : 09/05/2012 13:13  
NAME : IRC RECORDS  
FAX : 7149720776  
TEL :  
SER. # : BROB7J613269

DATE, TIME	09/05 13:13
FAX NO./NAME	19162270427
DURATION	00:00:30
PAGE(S)	03
RESULT	OK
MODE	STANDARD ECM



**SHERIFF-CORONER DEPARTMENT  
COUNTY OF ORANGE  
CALIFORNIA**

SANDRA HUTCHENS  
SHERIFF-CORONER

## TELCOPY TRANSMITTAL SHEET

DATE: 09/05/12 TIME: 1310 NUMBER OF PAGES 3  
(INCLUDE COVER PAGE)

TO: Department of Justice NAME  
Criminal Justice Statistics Center LOCATION  
916-227-0427 / 916-227-3545  
FAX PHONE NUMBER OFFICE PHONE NUMBER

FROM: Pam Walker NAME  
Inmate Records/IRC LOCATION  
714-972-0776 / 714-647-6080  
FAX PHONE NUMBER OFFICE PHONE NUMBER

## MESSAGES:

Death In-Custody: Baker, Byron Ray DOB:01/30/1963.

ORANGE COUNTY SHERIFF-CORONER  
\*\*\* INMATE CASE SENTENCING SUMMARY \*\*\*

RUN DATE: 08/29/12  
RUN TIME: 16:10  
PAGE NO : 1

BKN: 2718779 LNAME: BAKER FNAME: BYRON MNAME: RAY

SUF	SENT DATE	DAYs	CONC/CONS	DEAD TIME	A/I	GTWT FACT	GOOD TIME	OVER	WORK TIME	OVER	S/E DATE
	082912	90	CONC	18	I	4	18		18		100312

\*\* END OF REPORT \*\*

**CASE NUMBER**

R00809

DATE SENTENCED

8-29-12

Calculated By

ED  
how

Days on this case

PK 90

### Consecutive cases

---

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---

---

Total Days	=	<u>90</u>
Credit Time Served	=	<u>18</u>
Subtotal	=	<u>72</u>
Good Time	=	<u>18</u> ✓ GT
Subtotal	=	<u>54</u>
Work Time	=	<u>18</u> ✓ WT
Subtotal	=	<u>36</u>
Credit Time Served	=	<u> </u>
Days to Serve	=	<u>36</u>
Key Date	=	<u>241</u>
Julian Calendar Date	=	<u>277</u>
S/E DATE	=	<u>10-3-12</u>
E/O Date 10%	=	<u>265 9-21-12</u>

Verified By

66

Booking No.

2718779

SUPERIOR COURT OF THE STATE OF CALIFORNIA, COUNTY OF ORANGE  
CENTRAL JUSTICE CENTER  
700 W Civic Center Drive, Santa Ana, CA 92701.

**NOTICE TO SHERIFF**

**NOTICE TO SHERIFF:**

PEOPLE OF THE STATE OF CALIFORNIA

VERSUS

**Baker, Byron Ray**

Case No: **R-00809**

AKAs: Baker, Byron ; Baker, Byron Anthony ; Baker, Byron Ray ; Baker, Byrun  
DOB: 01/30/1963 Sex: M BKG#:

Date of Order: 08/29/12    Judicial Officer: Hix, Vickie    Dept: C58

*BBK*  
*TLC*

The defendant admits violation(s) of post-release community supervision as alleged.

Court finds defendant in violation of post-release community supervision.

Defendant having been found in violation, post-release community supervision is ordered reinstated.

Court orders the defendant committed for 90 Day(s) in Orange County Jail. Credit for time served: 9 actual, 9 conduct, totaling 18 days.

Defendant remanded to the custody of the Sheriff.

Notice to Sheriff issued.

*BKG*  
*ENTERED*  
*CM*  
*slm*  
**29 AUG 2012**





# Orange County Sheriff's Department

320 North Flower Street

Santa Ana, CA 92703

(714) 834 - 6670

FILED  
SUPERIOR COURT OF CALIFORNIA  
COUNTY OF ORANGE  
CENTRAL JUSTICE CENTER

AUG 29 2012

ALAN CARLSON, Clerk of the Court

## ORDER TO PAY COUNTY CRIMINAL JUSTICE ADMINISTRATION FEE

Court Case Number:

Book No: 2718779

Book Date: 08/21/2012

Defendant's Name: BAKER, BYRON RAY

DOB: 01/30/1963

Address:

DR#:

Charges: PC3455(A) (4)

AGY: PRB

The County of Orange is authorized to recover a criminal justice administration fee pursuant to Board of Supervisors' Resolution No. 09-193 and Government Code Sections 29550, subdivision (c) and 29550.2, subdivision (a) ("Any person booked into a county jail pursuant to any arrest by a governmental entity not specified in Section 29550 or 29550.1 is subject to a criminal justice administration fee for administrative costs incurred in conjunction with the arresting and booking if the person is convicted of any criminal offense relating to the arrest and booking.")

**TOTAL REIMBURSEMENT ORDERED:**

\$235.00

*David*

(Other Amount Ordered)

The defendant, having been convicted of criminal charges related to said arrest and booking, **IT IS ORDERED** that Judgment be entered against the defendant in the above sum and said sum is hereby due and payable to **Orange County Sheriff's Department** within 30 days.

Defendant has been notified of this order.

Judge:

*VICKIE L. HIX*

Date:

*8/21/12*

Failure to pay this reimbursement fee may result in civil action, including but not limited to: notifying credit reporting agencies, pursuing small claims action, a hold placed on your driver's license, a civil judgment against you, and wage garnishments.

In Custody Release

Remittance Advice - Return with Payment



Defendant's Name: BAKER, BYRON RAY  
Booking No: 2718779  
Amount Ordered: \_\_\_\_\_

**PLEASE SEND PAYMENT TO:**

Orange County Sheriff's Department  
Financial/Administrative Services Division  
320 N. Flower Street, Suite # 108  
Santa Ana, CA 92703

Medical Temp. No: 7162745ORANGE COUNTY JAIL  
Santa Ana, California
 EXPEDITE BOOKING  
 MEDICAL BOOKING  
 NORMAL BOOKING  
**PRE-BOOKING RECORD**

## FOR JAIL USE ONLY

## PLEASE PRINT OR TYPE

BOOKING NUMBER <u>2718 779</u>	RECEIVING OFFICER <u>WIGGINS #2700</u>	DATE <u>08-21-12 / 1802</u>	SUPPLEMENTAL WARRANTS	HOW MANY
BKG STATUS <input type="checkbox"/> STREET BOOKING <input type="checkbox"/> WARRANT <input type="checkbox"/> COMMITMENT		<input type="checkbox"/> COURT ORDER	<input checked="" type="checkbox"/> OTHER (SPECIFY) <u>PROBATION</u>	

## TO BE COMPLETED BY ARRESTING OR TRANSPORTING OFFICER

PLEASE FILL IN ALL OF THE BOXES BELOW THIS LINE PRIOR TO SUBMITTING TO THE RECEIVING GUARD STATION

ARRESTING AGENCY <u>O.C. Probation</u>	OCSD AREA OR CONTRACT CITY	AGENCY CASE <u>A215343</u>	DATE & TIME ARRESTED <u>8-21-12 @ 0015 1515 hrs</u>					
NAME: LAST <u>Baker</u>		FIRST <u>Byron</u>	MIDDLE <u>Ray</u>					
BIRTHDATE <u>1-30-63</u>	SEX <u>Male</u>	RACE <u>White</u>	HEIGHT <u>5' 06"</u>	WEIGHT <u>160</u>	HAIR <u>Brown</u>	EYES <u>Blue</u>	STATE & COUNTRY OF BIRTH <u>Nevada - USA</u>	CITIZENSHIP <u>USA</u>
AKA <u>Peggyeorge, Byron Ray; Byron Ray</u>		DRIVER'S LICENSE NO. & STATE [REDACTED]						
JURISDICTION <u>Central Superior Court</u>		WARRANT OR CASE NUMBER <u>A215343</u>			BAIL <u>0</u>			
CHARGE 1 <u>PC 3455 (a)(4)</u>		CHARGE 4						
CHARGE 2		CHARGE 5						
CHARGE 3		CHARGE 6						

## DNA

 DNA COLLECTED BY OFFICER \_\_\_\_\_  PREVIOUSLY COLLECTED \_\_\_\_\_  NOT COLLECTED (EXPLAIN BELOW) \_\_\_\_\_

EXPLAIN WHY DNA WAS NOT COLLECTED

OCCUPATION <u>Retired</u>	MARITAL STATUS <u>Single</u>	SOCIAL SECURITY NUMBER [REDACTED]		TELEPHONE NO. [REDACTED]	
SCARS, MARKS, TATTOOS, AMPS <u>++ R+L Arm, Back, U R+L Arm, chest, Leg, R+L Leg</u>					
ADDRESS [REDACTED]	CITY <u>Midway City</u>		STATE <u>CA</u>	ZIP <u>92655</u>	
NEXT OF KIN: NAME [REDACTED]	RELATIONSHIP <u>Father</u>	TELEPHONE NO. [REDACTED]			
ADDRESS [REDACTED]	CITY <u>Midway City</u>	STATE <u>CA</u>	ZIP <u>92655</u>		
ARRESTEE EMPLOYER NAME <u>NA</u>	BUSINESS ADDRESS <u>NA</u>		CIT 8/29/12 BKT 8/21/12		

## OFFICER'S ADDITIONAL INFORMATION - CHECK BOX IF YOU BELIEVE THE ARRESTEE WILL REQUIRE MEDICAL ATTENTION OR SPECIAL MANAGEMENT.

 MEDICAL (ILL OR INJURED)  MENTAL  INTOXICATED  PROTECTIVE CUSTODY  HIGH SECURITY

## EXPLAIN

Transport to Central Superior Court, Dept C-58, on Wednesday 8-29-12 @ 8:30

## ARRESTING OFFICER

R. GosselinID # 336

## MANDATORY FOREIGN CONSULAR NOTIFICATION MADE PER CPC 834c

 YES  NO  N/A

## PERMISSION TO USE TELEPHONE AFTER ARREST

(Pursuant to Penal code Section 851.5)

I have been given the opportunity to make three (3) FREE telephone calls within the LOCAL DIALING area, or at MY OWN EXPENSE IF OUTSIDE the Local dialing area.

## RECORD OF TELEPHONE CALLS:

Telephone calls DESIRED 1Telephone calls COMPLETED 1

Location <u>O.C.J</u>	Date <u>8-21-12</u>	Time <u>1740 hrs</u>
Witnessing Officer <u>R. Gosselin</u>	ID # <u>336</u>	Agency <u>O.C. Probation</u>
SIGNATURE <u>In CUPRS</u>		

To be completed upon a physical arrest for any misdemeanor, pursuant to Penal Code Section 853.6.

The person arrested:

1.  was so intoxicated that he could have been a danger to himself or others.
2.  required medical examination or medical care or was otherwise unable to care for his own safety.
3.  was charged with one or more of the offenses listed in section 40302 of the Vehicle Code.  
(Note Paragraphs five and eight)
4.  had one or more outstanding arrest warrants issued.
5.  could not provide satisfactory evidence of personal identification.
6.  if released immediately would jeopardize the prosecution of the offense or offenses for which he was arrested or the prosecution of any other offenses.
7.  would be reasonably likely to continue the offense or offenses, or the safety of persons or property would be imminently endangered if immediately released.
8.  demanded to be taken before a magistrate or refused to sign the Notice to Appear.
9.  was not released for one or more of the reasons specified in paragraphs one through eight. Specifically state reason.

**SYNOPSIS: (For Officer's Use Only)**