

PHYSICIAN/CORONER'S AMENDMENT

NO ERASURES, WHITEOUTS, PHOTOCOPIES,
OR ALTERATIONS

STATE FILE NUMBER

1.1

LOCAL REGISTRATION NUMBER

BIRTH DEATH FETAL DEATH

TYPE OR PRINT CLEARLY IN BLACK INK ONLY – THIS AMENDMENT BECOMES AN ACTUAL PART OF THE OFFICIAL RECORD

PART I INFORMATION TO LOCATE RECORD

INFORMATION AS IT APPEARS ON ORIGINAL RECORD	1A. NAME—FIRST KRY S	1B. MIDDLE BRANDON	1C. LAST RUIZ	2. SEX M
	3. DATE OF EVENT—MM/DD/CCYY 03/28/2021	4. CITY OF EVENT LOMPOC	5. COUNTY OF EVENT SANTA BARBARA	

PART II STATEMENT OF CORRECTIONS

	6. CERTIFICATE ITEM NUMBER	7. INFORMATION AS IT APPEARS ON ORIGINAL RECORD	8. INFORMATION AS IT SHOULD APPEAR	
LIST ONE ITEM PER LINE	107A	PENDING INVESTIGATION	PERFORATING GUNSHOT WOUND OF HEAD	
	107AT	-	SECS	
	112	-	[REDACTED]	
	119	PENDING INVESTIGATION	HOMICIDE	
	120		NO	
	121		03/28/2021	
	122		2013	
	123		ALLEY	
	124		MULTIPLE GUNSHOT WOUNDS	
	125		ALLEY SOUTH EAST OF NORTH H STREET AND WALNUT AVENUE, LOMPOC, 93436,	

DECLARATION OF CERTIFYING PHYSICIAN OR CORONER	I HEREBY DECLARE UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.			
	9. SIGNATURE OF CERTIFYING PHYSICIAN OR CORONER ▶ KYLE BIBBY	10. DATE SIGNED—MM/DD/CCYY 05/20/2021	11. TYPED OR PRINTED NAME AND TITLE/DEGREE OF CERTIFIER DEP CORONER	
	12. ADDRESS—STREET and NUMBER 4434 CALLE REAL	13. CITY SANTA BARBARA	14. STATE CA	15. ZIP CODE 93110
	16. OFFICE OF VITAL RECORDS OR LOCAL REGISTRAR ▶		17. DATE ACCEPTED FOR REGISTRATION—MM/DD/CCYY	

CERTIFICATE OF DEATH

STATE OF CALIFORNIA
USE BLACK INK ONLY / NO ERASURES, WHITEOUTS OR ALTERATIONS
VS-1 (REV 3/06)

STATE FILE NUMBER

LOCAL REGISTRATION NUMBER

DECEDENT'S PERSONAL DATA	1. NAME OF DECEDENT—FIRST (Given) KRYS		2. MIDDLE BRANDON		3. LAST (Family) RUIZ	
	AKA. ALSO KNOWN AS – Include full AKA (FIRST, MIDDLE, LAST)				4. DATE OF BIRTH mm/dd/ccyy [REDACTED]	5. AGE Yrs. 26
	9. BIRTH STATE/FOREIGN COUNTRY CA		10. SOCIAL SECURITY NUMBER [REDACTED]	11. EVER IN U.S. ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK	12. MARITAL STATUS/SRDP* (at Time of Death) NEVER MARRIED	
	13. EDUCATION – Highest Level/Degree (see worksheet on back) SOME COLLEGE		14/15. WAS DECEDENT HISPANIC/LATINO(A)/SPANISH? (if yes, see worksheet on back) <input checked="" type="checkbox"/> YES MEXICAN <input type="checkbox"/> NO		16. DECEDENT'S RACE – Up to 3 races may be listed (see worksheet on back) WHITE	
USUAL RESIDENCE	20. DECEDENT'S RESIDENCE (Street and number, or location) [REDACTED]					
	21. CITY [REDACTED]		22. COUNTY/PROVINCE SANTA BARBARA		23. ZIP CODE [REDACTED]	24. YEARS IN COUNTY 26
	25. STATE/FOREIGN COUNTRY CA					
INFORMANT	26. INFORMANT'S NAME, RELATIONSHIP [REDACTED]			27. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) [REDACTED]		
	28. NAME OF SURVIVING SPOUSE/SRDP*—FIRST -		29. MIDDLE -		30. LAST (BIRTH NAME) -	
SPOUSE/SRDP AND PARENT INFORMATION	31. NAME OF FATHER/PARENT—FIRST [REDACTED]		32. MIDDLE [REDACTED]		33. LAST [REDACTED]	
	34. BIRTH STATE [REDACTED]		35. BIRTH STATE [REDACTED]		36. BIRTH STATE [REDACTED]	
FUNERAL DIRECTOR/ LOCAL REGISTRAR	39. DISPOSITION DATE mm/dd/ccyy 04/09/2021		40. PLACE OF FINAL DISPOSITION [REDACTED]			
	41. TYPE OF DISPOSITION(S) CR/BU		42. SIGNATURE OF EMBALMER ▶ NOT EMBALMED		43. LICENSE NUMBER -	
	44. NAME OF FUNERAL ESTABLISHMENT STARBUCK-LIND MORTUARY		45. LICENSE NUMBER FD1244	46. SIGNATURE OF LOCAL REGISTRAR ▶ HENNING ANSORG, MD, FACP		47. DATE mm/dd/ccyy 04/05/2021
PLACE OF DEATH	101. PLACE OF DEATH ALLEY			102. IF HOSPITAL, SPECIFY ONE <input type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DOA		
	104. COUNTY SANTA BARBARA		105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) SOUTH EAST NORTH H STREET AND WALNUT AVENUE		103. IF OTHER THAN HOSPITAL, SPECIFY ONE <input type="checkbox"/> Hospice <input type="checkbox"/> Nursing Home/LTC <input type="checkbox"/> Decedent's Home <input checked="" type="checkbox"/> Other	
CAUSE OF DEATH	107. CAUSE OF DEATH Enter the chain of events --- diseases, injuries, or complications --- that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. IMMEDIATE CAUSE (A) PENDING INVESTIGATION (Final disease or condition resulting in death) →				Time Interval Between Onset and Death (AT) -	108. DEATH REPORTED TO CORONER? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO REFERRAL NUMBER 21-3526
	Sequentially, list conditions, if any, leading to cause on Line A. Enter UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST				(BT)	109. BIOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
					(CT)	110. AUTOPSY PERFORMED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
					(DT)	111. USED IN DETERMINING CAUSE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
	112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 -					
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date.) -					113A. IF FEMALE, PREGNANT IN LAST YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	
PHYSICIAN'S CERTIFICATION	114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. Decedent Attended Since: (A) mm/dd/ccyy (B) mm/dd/ccyy		115. SIGNATURE AND TITLE OF CERTIFIER ▶		116. LICENSE NUMBER	
			118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE		117. DATE mm/dd/ccyy	
CORONER'S USE ONLY	119. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. MANNER OF DEATH <input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input checked="" type="checkbox"/> Pending Investigation <input type="checkbox"/> Could not be determined		120. INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK		121. INJURY DATE mm/dd/ccyy	
	122. HOUR (24 Hours)					
	123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)					
	124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)					
	125. LOCATION OF INJURY (Street and number, or location, and city, and zip)					
126. SIGNATURE OF CORONER / DEPUTY CORONER ▶ KYLE BIBBY		127. DATE mm/dd/ccyy 04/05/2021		128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER KYLE BIBBY, DEP CORONER		
STATE REGISTRAR	A	B	C	D	E	Printed on: 05/20/2021 11:05 AM By BIBBY, KYLE (KBIBBY)
					FAX AUTH.#	CENSUS TRACT

Coroner Report Santa Barbara County Sheriff

21-3526

Supplement No
ORIG



4434 Calle Real

Reported Date
03/29/2021

Santa Barbara, CA 93110-1002
Report Type
CORONER

Officer
BIBBY, K

(805) 681-4100

Administrative Information

Agency Santa Barbara County Sheriff	Report No 21-3526	Supplement No ORIG	Reported Date 03/29/2021	Reported Time 00:16	Status Incident
Report Type Coroner's investigation	Location N H ST/E WALNUT AV				
City Lompoc City	ZIP Code 93436	Rep Dist L155	Area 3	Beat LO	From Date 03/29/2021
Officer 4985/BIBBY, K	Assignment CORONER BUREAU		Entered by 4985	Assignment CORONER BUREAU	
Confidential HOMICIDE	RMS Transfer Pending	Report Title Coroner Report	Approving Officer 3768	Approval Date 06/02/2021	
Approval Time 14:13:41					
Cause of death (COR only) Perforating Gunshot Wound		Due to (COR only) of Head		OSC (COR only) [REDACTED]	
OSC Cont. (COR only) [REDACTED]	Manner of death (COR only) Homicide	Date/Time of death pronounced 03/28/2021 2013		Determined by (COR only) Investigation	
Dr. will sign N	Hospitalization No	Mortuary Starbuck-Lind	Removal Status Family Request	Date/Time NOK notified 3/29/21 1325	
NOK notified by: Detective Esparza	NOK notified via In Person	NOK relation to decedent Mother			

Person Summary

Invl COR	Invl No 1	Type I	Name RUIZ, KRYS BRANDON	MNI 1038743	Race H	Sex M	DOB 12/08/1994
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Summary Narrative

On 03/28/21, at approximately 2013 hours, 26-year-old, Krys Ruiz was pronounced deceased in the south alley, east of the intersection of North H St and Walnut Ave in the city of Lompoc. The decedent had been struck by multiple rounds, during an altercation with officers from the Lompoc Police Department. Death was pronounced at the scene, due to obvious signs. [REDACTED] multiple gunshot wounds. A note was located in the decedent's pocket explaining that he, "Was around much longer than [he] should have been."

The manner of death was determined to be homicide.

Coroner Report Santa Barbara County Sheriff

21-3526

Supplement No
ORIG

Decedent - Coroner Investigation 1: RUIZ, KRYS BRANDON

Involvement Decedent - Coroner Investigation				Invl No 1		Type Individual				
Name RUIZ, KRYS BRANDON				MNI 1038743		Race Hispanic/Mexican/Latin			Sex Male	
DOB [REDACTED]	Age 26	Juvenile? No	Height 5'01"	Weight 141#	Hair Color Blue	Eye Color Brown				
Type Home	Address [REDACTED]					City Lompoc City		State California		
ZIP Code [REDACTED]		Date 03/29/2021								
Type Operator License			ID No [REDACTED]			OLS California				
Relationship [REDACTED]		Name [REDACTED]		Race Hispanic/Mexican/Latin			Sex Female			
[REDACTED]						City Lompoc City				
Medical										
Citizenship UNITED STATES				Place of Birth California		Coroner Case No 21-3526		NOK Notified? Yes	Premise Sealed? No	Property? No
Vehicle? No	Legal Document No	Other Documents? No	Other Agency LOMPOC PD			NOK Name [REDACTED]				
Mortuary Name STARBUCK-LIND			On Call? No	Family Request? Yes	Other? No					
Nature of Illness [REDACTED]										
Decedent Driver No	Decedent Passenger No	Decedent Pedestrian No								

Narrative

Continuations :

[REDACTED] is the decedent's mother, and next of kin.
This report is the Coroner's investigation relating to SBSO case #21-3520.

Case Review:

On 3/28/21, at approximately 2154 hours, I received a phone call from Sergeant Morris, notifying me that there had been a shooting in the city of Lompoc, and that they would be needing a coroner to respond in a few hours. I received another call from Detective Alegria at approximately 0016 hours on 3/29/21, notifying me that they were ready for me to respond.

Physical evidence :

A series of digital photographs were taken of the decedent at the scene. The photo card was later downloaded for storage at the Coroner's Bureau.

Identification of decedent :

The decedent was positively identified by Lompoc Police Department officers. Additionally, I was able to confirm the decedent's identity by comparing his California Driver's License photo on CalPhoto. SBSO Forensics also obtained latent fingerprints from the decedent, which matched.

Examination of decedent :

On 3/29/21, at approximately 0016 hours, I received a call from Detective Alegria notifying me that there was an officer involved shooting in the city of Lompoc, and they were ready for a coroner. At approximately 0047 hours, I arrived on scene. Shortly afterward, I conducted a physical examination of the decedent at the scene.

The decedent was lying face down in the alleyway, just east of North H street, just south of the intersection with E Walnut Avenue. The decedent was fully clothed in blue sweatpants, a black shirt with rainbow writing, a black and blue jacket, gloves, socks, sports bra, boxer-brief style underwear, socks, and shoes. His left shoe was on the

Report Officer 4985/BIBBY, K	Printed At 06/02/2021 15:05	Page 2 of 5
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Coroner Report Santa Barbara County Sheriff

21-3526

Supplement No
ORIG

Narrative

ground next to his foot. Approximately 18 inches from the decedent's feet was a fixed-blade kitchen knife lying in a pool of blood, with apparent brain matter in it as well.

In an effort to preserve the decedent's state, I placed a new black body bag next to the decedent. Detective Alegria removed the decedent's handcuffs, and assisted me in rolling the decedent over onto his back, and into the body bag. I then removed the decedent's clothing in the body bag, and Forensics collected the clothing as evidence.

The decedent was a well-developed, overweight, Hispanic, biological female whose appearance was commensurate with his stated age. While the decedent was biologically female, I was informed that he was transitioning from female to male, therefore he will be referred to as male for this report.

He had a full head of short length black in color hair, which had been dyed blue-green. He was wearing a mask over his face, that appeared to be a bloody clown Halloween mask. Under the mask, the decedent's face was covered with blood. The back of the decedent's head appeared to have been struck by gunfire, and was severely deformed. Brain matter could be plainly seen. Additionally, the decedent's eyes were swollen, and he had gravel and debris imprinted into his face. He had a dermal piercing on the left side of his face, near his left eye. The decedent had a tattoo of a rocket ship behind his right ear, and what appeared to be a tattoo of a diamond on his upper back, just below his neck.

The decedent's chest was symmetrical. He had blood between his breasts, but did not appear to have any injuries there. He had a tattoo on his left flank of the Batman symbol.

The decedent had two small penetrating injuries on his right shoulder. He had a large section at the base of his right arm and shoulder, where skin and muscular tissue was missing. This also appeared to be an injury sustained by gunfire.

The decedent's abdomen was slightly extended due to his weight. He had a small device attached to his right abdomen that said "DexcomG6." [REDACTED]

The decedent had a tattoo of a rose on his right forearm. He had an additional tattoo on his left inner forearm that said "Survivor ;" The decedent had writing on his right inner forearm that said "Reach in my pocket." In the decedent's pocket, I found a piece of folded up paper that was sealed in a Ziploc bag. On the outside of the paper, I could read "I hope my death makes more sense than my life." I passed the note off to Forensics personnel, who retained it, and later found it to be a suicide note from the decedent.

The decedent had a small amount of dirt and blood on his back just above his buttocks. His legs were largely unremarkable. He had an abrasion on his left knee, which appeared fresh.

I did not notice any post mortem lividity, and rigor mortis had not yet set in. At the conclusion of my examination, at 0217 hours, I sealed the body bag with tag #558224. I placed the decedent in the back of my unit, and transported him to the Santa Maria Sheriff's Morgue.

On 3/29/21, at approximately 0750 hours, Detective Bruening removed the seal tag, so that Forensics could take the decedent's fingerprints, and he could obtain a nasopharyngeal swab for COVID testing. Detective Bruening resealed the bag with tag #560210 at 0815 hours, and then transported the decedent to the Santa Barbara Sheriff's Morgue.

At approximately 1005 hours, I removed tag #560210 so that x-rays could be taken of the decedent. At the conclusion of the x-rays, at 1029 hours, I replaced the tag with tag #560134.

Post mortem examination :

On 3/29/21 at 1005 hours, x-rays were conducted on the decedent, by Diagnostic Laboratories and Radiology, at the Santa Barbara Coroner's Bureau.

On 3/31/21 at 0930 hours, an autopsy was performed on the decedent at the Santa Barbara Coroner's Bureau. The autopsy was conducted by Forensic Pathologist Dr. Manny Montez with the assistance of Jon Kolbert. Also in

Coroner Report Santa Barbara County Sheriff

21-3526

Supplement No
ORIG

Narrative

attendance, were Detective Maxwell and Forensic Technician Loza from the Santa Barbara Sheriff's Department (See Dr. Manny Montez's autopsy report for full details).

Samples of bodily fluids were obtained from the decedent to include three tubes of heart blood (including one tube for DNA), and one tube of vitreous humor fluid.

A single tube of heart blood was submitted to Alere Forensics for toxicology analysis. All of the remaining samples were refrigerated at the Coroner's Bureau pending a need for toxicology analysis

Statements :

When I arrived, I spoke with Detective Alegria, who informed me that the decedent was believed to have prior contacts for [REDACTED]

On 4/1/21, at approximately 1413 hours, I contacted the decedent's mother, [REDACTED] via telephone. Ruiz confirmed that the decedent was transitioning, and went by Kryz, and identified as male. I explained that the Coroner's Office was doing our best to respect the decedent's gender identity, but informed her that there may be places in the report where anatomy may contradict that. Ruiz was understanding and appreciative.

Ruiz told me that the decedent had no known drug use, and was not currently taking any prescription medications, but was [REDACTED]. She told me the decedent had stopped taking any medications around October of 2020. Ruiz told me that the decedent drank very minimally, and may have used a marijuana vape, but did not use anything else.

[REDACTED]

Ruiz was unaware of any recent changes or abnormalities in the decedent's health, other than stating he had been having some gastrointestinal issues lately. She stated he had no other abnormal complaints or issues.

Medical History:

Social History:

The decedent was known to use cannabis daily, and consumed a minimal amount of alcohol, generally consisting of approximately one alcoholic beverage per week. The decedent was not known to use tobacco or other illicit substances.

Forensic toxicology:

I submitted a sample of the decedent's blood to Alere Forensics for toxicology. The toxicology results revealed the following:

Cyclobenzaprine: <10ng/mL

Report Officer 4985/BIBBY, K	Printed At 06/02/2021 15:05	Page 4 of 5
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Coroner Report Santa Barbara County Sheriff

21-3526

Supplement No
ORIG

Narrative

Norcyclobenzaprine: 12ng/mL
Delta 9-tetrahydrocannabinol: 11ng/mL
11-hydroxy-THC: 8ng/mL
11-nor-THC-9-carboxylic acid: 48ng/mL

I also submitted a sample of the decedent's vitreous humor to the Santa Barbara County Public Health Lab, as the decedent's mother had mentioned concern about his glucose levels potentially causing his behavior. The results indicated the following:

Glucose: 99mg/dL
Sodium: 140meq/L
Potassium: >10meq/L
Chloride: 116meq/L

Consultations with Forensic Pathologist:

I reviewed the circumstance surrounding this death with Dr. Manny Montez. We agreed that while the decedent had been struck by multiple projectiles, the gunshot wound to the decedent's head was the ultimate cause of death.

In review of the circumstances of this death:

On 03/28/21, at approximately 2013 hours, 26-year-old, Krys Ruiz was pronounced deceased in the south alley, east of the intersection of North H St and Walnut Ave in the city of Lompoc. The decedent had been struck by multiple rounds, during an altercation with officers from the Lompoc Police Department. Death was pronounced at the scene, due to obvious signs. [REDACTED]

[REDACTED] A note was located in the decedent's pocket explaining that he, "Was around much longer than [he] should have been."

Cause of Death:

It was determined that the decedent (Ruiz) died as a result of the following cause;

Perforating Gunshot Wound of Head

With other significant conditions:

Manner of death:

The manner of death will be certified by the Office of the Coroner as **HOMICIDE**.

Final Disposition

The decedent was released to representatives of Starbuck-Lind Mortuary in Lompoc, Ca. No property or medication was collected by the Coroner's Bureau.

Case closed

Agency # 21-3526

FORENSIC LABORATORY REPORT

AF # 2021-001254

To: Kyle Bibby
Santa Barbara Co. Sheriff-Coroner

Sample Collection Date: March 31, 2021

Decedent: Krys B. Ruiz

The following evidence was submitted to the Laboratory by a representative of the Santa Barbara Co. Sheriff-Coroner on 4/2/2021 via FedEx:

Submission 01: One tape sealed screw top metal canister containing a second screw top metal canister with one adhesive sealed plastic bag containing one tube of blood. Attached paperwork marked in part "Ruiz Krys B".

Item # 01-A: One gray top tube with approximately 5 mL of heart blood collected at 1040 hours.

Service Request:

FP222B - Expanded Pnl (Confirm) - Blood

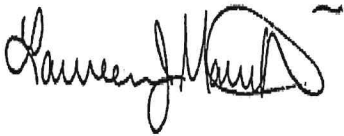
Drug Screen Results - ELISA

Drug Screen Classification	Result	Limit of Detection
Amphetamine \ MDA	Not Detected	20.0 ng/mL
Barbiturates	Not Detected	1.0 mcg/mL
Benzodiazepines	Not Detected	25.0 ng/mL
Buprenorphine	Not Detected	1.0 ng/mL
Carisoprodol	Not Detected	500.0 ng/mL
Cocaine Metabolite	Not Detected	50.0 ng/mL
Fentanyl	Not Detected	1.0 ng/mL
Marijuana Metabolite	Positive	10.0 ng/mL
Methadone	Not Detected	25.0 ng/mL
Methamphetamine \ MDMA	Not Detected	20.0 ng/mL
Opiates	Not Detected	10.0 ng/mL
Oxycodone \ Oxymorphone	Not Detected	5.0 ng/mL
PCP	Not Detected	5.0 ng/mL
Tramadol	Not Detected	50.0 ng/mL
Zolpidem	Not Detected	5.0 ng/mL

Confirmation/Screen Results

Analyte Name	Concentration	Method	Sample Type
Cyclobenzaprine	< 10 ng/mL	LC-MS-MS	Blood
Norcyclobenzaprine	12 ng/mL	LC-MS-MS	Blood
delta 9-Tetrahydrocannabinol (THC)	11 ng/mL	LC-MS-MS	Blood
11-hydroxy-THC (11-OH-THC)	8.0 ng/mL	LC-MS-MS	Blood
11-nor-THC-9-carboxylic acid (THC-COOH)	48 ng/mL	LC-MS-MS	Blood
Volatiles (EtOH, IPA, MeOH, Acetone)	Not Detected	GC-Headspace	Blood

Respectfully,

A handwritten signature in black ink, appearing to read "Laureen J. Marinetti". The signature is fluid and cursive, with a prominent loop at the end.

Laureen J. Marinetti, Ph.D., F-ABFT
Laboratory Head

Date of Report: April 30, 2021

Ascertain Forensics at Redwood Toxicology is accredited by The American Board of Forensic Toxicology (ABFT) and is recognized by the State of California as a Title 17 Forensic Alcohol Laboratory.

All samples, including the sample packaging, will be retained at the laboratory for one year after the date of report. After one year, the samples and packaging will be destroyed unless the client requests that the samples be returned or an alternate retention policy has been set up with the laboratory. The laboratory cannot ship controlled substances.

Comments

EtOH - ethanol, IPA - isopropanol, MeOH - methanol

ASCERTAIN™ FORENSICS

FORENSIC LABORATORY

REQUESTING AGENCY



2000059994

303754 Santa Barbara Co Sheriff Coronor
66-A South San Antonio Rd
Santa Barbara, CA 93110

TEST REQUISITION FORM Postmortem Forensic Toxicology

CASE INFORMATION Include all case information listed below.

Name of decedent: RUIZ KRYS B
Last First M.I.

Case number: 21-3526

Sex: M F Date of Birth: [REDACTED] Race: H Date and Time of Death: 3/28/21 2013

SPECIMEN INFORMATION Indicate all specimen specific information below.

Specimen(s) Submitted:
 Blood (cardiac) Blood (peripheral) Vitreous Urine Tissue: _____ Other: _____
Specify Tissue Type

Specimen Condition:
 Embalmed Exhumed Decomposed Other: _____

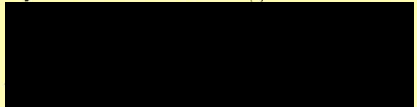
Location, date and time of collection:
SANTA BARBARA CORONERS 3/31/21 1040 ^{AM} _{PM}
(e.g. Hospital name, Facility, etc.) Date Time

Collected by: BOBBI KYLE [Signature]
Last First Signature

HISTORY AND CIRCUMSTANCES Indicate details regarding decedent death and history.

History and Circumstances:
 Cause of Death: PENDING
 Manner of Death: Natural Suicide Undetermined
 Accidental Death Homicide

Brief History—include known medication(s):



TEST(S) REQUESTED Indicate which specimen(s) are to be tested (instructions on back).

- F0443B RTN PNL+VOL CONF-BLD
- F0444U RTN PNL+VOL CONF-UR
- F0222D EXIP PNL CONF-BLD
- F0222U EXIP PNL CONF-UR
- F0007B DRUG ABUSE QUAL-BLD
- F0007U GEN PNL - QUAL-BLD
- F0451D CALY ALC PNL-CONF-BLD
- F0452U VOLATILE PNL-CONF-BLD
- F0759X VITREOUS PNL-VF
- F0760B CARBOXYHEMO-BLD
- F0760X CONTRABAND PNL-UT
- OTHER: _____

RECEIVING LAB ONLY

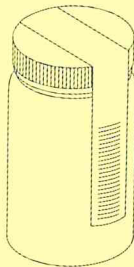
Receiver's initials: _____ Date: / / Kit seal intact? Yes No

TEAR OFF LABEL PORTION BEFORE SENDING TO LABORATORY

2-PART FORM 2 of 2 CLIENT COPY

Specimen Labeling Instructions

To ensure your specimen(s) arrives safely to Redwood Toxicology Laboratory, please follow the instructions found on the reverse side of this form.



SPECIMEN 1 CHECK APPROPRIATE BOX: Vitreous Urine Other: _____

Decedent's Name: _____
 Date of Collection: _____
 Collector's Initials: _____

KIT SECURITY SEAL

SPECIMEN 2 Decedent's Name: _____ OTHER: _____
 Date of Collection: _____
 Collector's Initials: _____

SPECIMEN 3 Decedent's Name: _____
 Date of Collection: _____
 Collector's Initials: _____

SPECIMEN 4 **CAUTION:** Bottle contains sodium fluoride powder. **PERIPHERAL BLOOD**
 Decedent's Name: RUIZ KRYS
 Date of Collection: 3/31/21
 Collector's Initials: KLOUTS
CAUTION: Bottle contains sodium fluoride powder. **CARDIAC BLOOD**

SPECIMEN 5 Decedent's Name: _____
 Date of Collection: _____
 Collector's Initials: _____ **TISSUE:** _____

PRESS HARD - YOU ARE MAKING MULTIPLE COPIES | USE BLUE OR BLACK INK ONLY



Santa Barbara County Sheriff-Coroner
Coroner's Bureau
66 S. San Antonio Road
Santa Barbara, California 93110
(805) 681-4145

AUTOPSY REPORT

Name:	RUIZ, KRYS BRANDON	Coroner's Case Number:	21-3526
Date of Autopsy:	03/31/21	Age:	26 years
Time of Autopsy:	0930 hours	Sex:	Male
Site of Autopsy:	Coroner's Bureau	Length:	62 inches
	Santa Barbara, California	Weight:	141 pounds

Coroner's Investigator:
Pathologist:

Coroner Detective Kyle Bibby
Manny Montez, M.D.

CAUSE OF DEATH:

**PERFORATING GUNSHOT WOUND
OF HEAD.**



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Coroner's Bureau
66 S. San Antonio Road
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(805) 681-4145

RUIZ, KRYS BRANDON
Coroner's Case Number: 21-3526

PAGE 1

A postmortem examination of the body, **RUIZ, KRYS BRANDON**, a 26 year old male, Hispanic, is authorized by the sheriff coroner and is performed at 0930 hours, on March 31, 2021, at the Santa Barbara County Sheriff Coroner's Facility in Santa Barbara, California. (Note: This decedent is biologically female but was transitioning to and identified as male).

Present is Sheriff Coroner Detective Kyle Bibby. Also present are Detective Maxwell and Forensic Technician Loza, Santa Barbara County Sheriff's Office. Assisting during the examination is Coroner Forensic Technician John Kolbert.

The body is received in a black plastic body bag and is identified by an appropriately labeled identification tag affixed to the bag. The identification tag is inscribed with the decedent's name and case number. There is an intact blue plastic security seal through the zipper. This seal is labeled "560136" and is broken at 0938 hours. When first viewed, the body is unclad and not accompanied by any personal effects. There is a stud in the left cheek with a green/blue stone. There is a white metal tongue stud through the tongue. There is a "Dexcom G6" medical device over the right lower abdomen.

EXTERNAL EXAMINATION:

The body is of a well-developed, well-nourished, Hispanic male, weighing approximately 141 pounds, measuring approximately 62 inches in length, and appearing the recorded age of 26 years.

The head is symmetric and brown and blue/green scalp hair is 1/4" to 2". The eyes have brown irides and the conjunctivae and sclerae are without petechiae or jaundice. The dilated pupils are round and equal. The eyelids are well developed. The lips are well developed. The pierced ears are normally formed. The nose is unremarkable. The oral cavity has intact teeth. The tongue is unremarkable. The face is symmetric. The neck is well developed. The trachea is in the midline. The anterior aspect of the torso is well-developed. The breasts are without palpable masses. The abdomen is not distended.



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RUIZ, KRYS BRANDON
Coroner's Case Number: 21-3526

PAGE 2

The posterior aspect of the torso is well developed. The genitalia are of a normally developed atraumatic female. The atraumatic anus is patent. The extremities are well-developed. The fingernails are short and intact. The toenails are long, intact, and dirty.

There is a tattoo of a spaceship behind the right ear. There is a tattoo of a bat over the left lower chest. There is a tattoo of a diamond over the upper midline back. There is a tattoo of "SURVIVOR;" over the front of the left forearm. There is a tattoo of a rose over the back of the right forearm. There is a tattoo of animal paws over the lateral left ankle. There are multiple horizontal mostly parallel faint scars over the front of the right thigh. There is a 1/8" scar over the left antecubital fossa.

POSTMORTEM CHANGES:

Rigor mortis is strong and symmetrical; livor mortis is non-fixed, faint, and dorsal; the body is cold to touch.

THERAPEUTIC PROCEDURES:

None.

INJURIES, EXTERNAL AND INTERNAL:

There are three (3) gunshot wounds of the body. The gunshot wounds are labeled "A" through "C". The sequence in which the gunshot wounds are described is for convenience only; no chronological sequence is implied by the order of dictation. None of the gunshot entrance wounds are associated with fouling or stippling of the adjacent skin. Powder residue is not present in any of the wound tracks. In addition, blunt force injuries are present. All descriptions of wounds are stated with reference to the standard anatomic planes.



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RUIZ, KRYS BRANDON
Coroner's Case Number: 21-3526

PAGE 3

Gunshot Wounds:

A. Perforating gunshot wound of head:

There is a gunshot entrance wound over the right side of the head, even with the front edge of the right ear, that is centered 2 3/4" below the top of the head and 3 1/2" right of midline. It is a 1/4" diameter oval perforation with a 1/2" white/red abrasion at the three o'clock margin.

After perforating the scalp, the bullet perforates the skull and brain before exiting.

The exit wound is a 5" x5" laceration located over the right side of the posterior head.

No bullet is recovered.

The major directions of this wound pathway are: front to back, right to left, and slightly downward.

The wound pathway is associated with marked hemorrhage. There are multiple severe global concussive fractures of the entire skull. There is brain extruding from the exit wound. The remaining brain is hemorrhagic and focally pulpified. There are peri-ocular hematomas around both eyes.



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RUIZ, KRYS BRANDON
Coroner's Case Number: 21-3526

PAGE 4

B. Perforating gunshot wound of right upper arm/back:

There is a gunshot entrance wound over the front of the right upper arm, near the shoulder, that is centered 10" below the top of the head and 7 1/2" right of midline. It is a 1/4" diameter circular perforation with a 1/32" to 1/4" circumferential irregular rim of white/red abrasion, greatest along the five o'clock to eight o'clock margin.

After perforating the skin, the bullet perforates the right humeral head and exits.

The exit wound is a 4" x 3" laceration located over the lateral right upper back that extends to the posterior right upper arm and axilla. The exit wound is generally centered 12" below the top of the head and 7 1/2" right of midline.

No bullet is recovered.

The major directions of this wound pathway are: front to back, right to left, and downward.

The wound pathway is associated with marked hemorrhage. The humeral head is pulpified. There is a concussive fracture of the right clavicle. There is a large blue/purple hematoma over the right upper arm and shoulder.



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RUIZ, KRYS BRANDON
Coroner's Case Number: 21-3526

PAGE 5

C. Penetrating gunshot wound of right upper arm and back:

There is a gunshot entrance wound over the posterior lateral right upper arm that is centered 9 1/2" below the top of the head and 8 1/2" right of midline. It is a 1/4" diameter circular perforation with a 1/32" to 1/4" circumferential rim of red abrasion, greatest along the three o'clock margin.

After perforating the skin, the bullet perforates the right proximal humerus and the right scapula and lodges.

The bullet lodgment site is in the soft tissues and muscle behind the right scapula.

A small caliber jacketed deformed bullet is recovered from the bullet lodgment site and is retained. (Note: Upon extracting the bullet, the core and jacket separated).

The major directions of this wound pathway are: slightly front to back, right to left, and very slightly downward.

The wound pathway is associated with marked hemorrhage. The proximal humerus is pulpified. There is a large blue/purple hematoma over the right upper arm and shoulder.



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RUIZ, KRYS BRANDON
Coroner's Case Number: 21-3526

PAGE 6

Blunt Force Injuries:

- A 1" abrasion over the right temporal region of the scalp.
- A 1/4" abrasion over the left lower lip.
- A 5" x 2" abrasion over the lower midline back.
- A 1" dense abrasion over the left knee.
- A 2" dense abrasion below the left knee.

These injuries, having been described, will not be repeated.

INTERNAL EXAMINATION:

HEAD: The scalp, subgaleal tissues, and temporalis muscles are otherwise unremarkable. The residual brain tissue weighs 900 grams and is otherwise unremarkable. The proximal spinal cord is unremarkable.

NECK: The cervical vertebrae, hyoid bone, tracheal and laryngeal cartilages, epiglottis, aryepiglottic folds, strap muscles, carotid and jugular vessels, and other paratracheal soft tissues are unremarkable. The upper airway is not obstructed. The tongue is unremarkable.

BODY CAVITIES: The organs are in their normal situs without adhesions. The subcutaneous adipose tissue is unremarkable. The parietal and peritoneal surfaces are unremarkable. The diaphragm is unremarkable. There are no abnormal fluid collections in the body cavities.



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RUIZ, KRYS BRANDON
Coroner's Case Number: 21-3526

PAGE 7

CARDIOVASCULAR SYSTEM: The pericardium is without exudate or adhesion. The heart weighs 220 grams. The epicardial surface and fat are unremarkable. The heart has a normal distribution of patent coronary arteries. The left ventricular myocardium shows no infarctions. The ventricular walls are not hypertrophied. The endocardium, papillary muscles, chordae tendineae, and four cardiac valves are unremarkable. There are no septal defects. The cardiac chambers are not dilated. The venae cavae and pulmonary arteries are without thrombus or embolus. The aortic arch and great vessels are unremarkable. The descending aorta shows no atherosclerosis. The renal and iliac vessels are unremarkable.

RESPIRATORY SYSTEM: The right lung weighs 220 grams and the left lung weighs 200 grams. The pleural surfaces show no blebs or bullae. The lungs are not hyper-inflated. The lungs show no congestion. The lungs are without consolidation or neoplasm. The patent tracheobronchial tree contains no mucus or mucus plugs. The vasculature is unremarkable. There are no thromboemboli.

LIVER, GALLBLADDER, PANCREAS: The liver weighs 1580 grams and has an intact brown capsule and brown parenchyma without focal lesions. The portal vessels are unremarkable. The unremarkable gallbladder contains less than 5 ml of yellow bile. The pancreas is without focal lesions.

HEMIC AND LYMPHATIC SYSTEMS: The spleen weighs 80 grams and has an intact purple capsule and dark red parenchyma without focal lesions. Lymph nodes are not enlarged.

GENITOURINARY SYSTEM: The right kidney weighs 120 grams and the left kidney weighs 140 grams. The subcapsular surfaces are smooth and unremarkable. The architecture and vasculature are unremarkable. The ureters maintain uniform caliber into an unremarkable empty bladder. The uterus, cervix, fallopian tubes, and ovaries are unremarkable.



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RUIZ, KRYS BRANDON
Coroner's Case Number: 21-3526

PAGE 8

ENDOCRINE SYSTEM: The pituitary, thyroid, and adrenal glands are without focal lesions.

DIGESTIVE SYSTEM: The esophagus and gastroesophageal junction are unremarkable. The stomach contains 100 ml of light-tan liquid without visible food, tablets, or pills. The gastric mucosa and wall are unremarkable. The intestines and appendix are unremarkable.

MUSCULOSKELETAL SYSTEM: The vertebrae, clavicles, sternum, ribs, and pelvis are unremarkable. The musculature is unremarkable.

TOXICOLOGY: Samples of blood and vitreous are taken at autopsy. DNA is taken at autopsy.

HISTOLOGY: Tissue is retained in formalin for stock. One stock jar is retained. No histology is submitted.

EVIDENCE: The bullet from gunshot wound "C" is submitted to Forensic Technician Loza, Santa Barbara Sheriff's Office, after the examination.

X-RAYS: Post mortem x-rays of the body are reviewed before the examination.



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Coroner's Bureau
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Santa Barbara, California 93110
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RUIZ, KRYS BRANDON
Coroner's Case Number: 21-3526

PAGE 9

ANATOMIC DIAGNOSES:

- A. Perforating gunshot wound of head ("A"):
- Entrance wound over the right side of the scalp.
 - Perforations of skull and brain.
 - Exit wound over the right side of the posterior scalp.
 - No bullet recovered.
 - The major directions of this wound pathway are front to back, right to left, and slightly downward.
 - Concussive skull fractures.
- B. Perforating gunshot wound of right upper arm/back("B"):
- Entrance wound over the front of the right upper arm, near shoulder.
 - Perforation of the right humeral head.
 - Exit wound over lateral right upper back and posterior right upper arm.
 - No bullet is recovered.
 - The directions of this wound pathway are: front to back, right to left, and downward.
- C. Penetrating gunshot wound of right upper arm and back ("C"):
- Entrance wound over the posterior lateral right upper arm.
 - Perforations of the right humerus and right scapula.
 - Bullet lodgment behind the right scapula.
 - Small caliber jacketed deformed bullet recovered and retained.
 - The directions of this wound pathway are: front to back, right to left, and very slightly downward.
- B. Blunt force injuries, multiple.



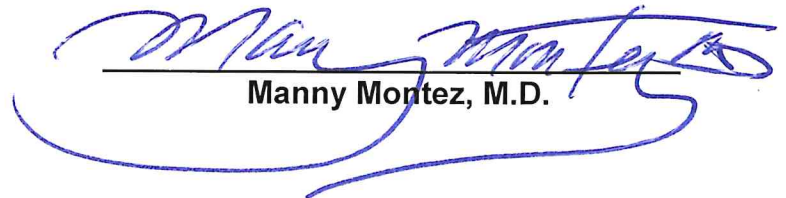
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RUIZ, KRYS BRANDON
Coroner's Case Number: 21-3526

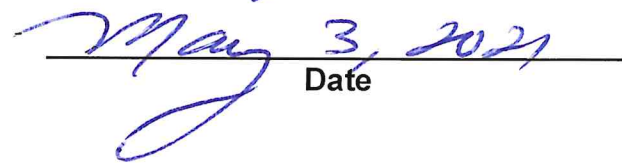
PAGE 10

OPINION:

This 26 year old male, Hispanic, **RUIZ, KRYS BRANDON**, died of Perforating Gunshot Wound of Head.



Manny Montez, M.D.



Date



Santa Barbara County Sheriff- Coroner

Coroner's Bureau
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CASE # 21-3526

Dr. Montez
Pathologist

Dear Sir,

Pursuant to your order, I have completed an autopsy on **Krys Brandon Ruiz**

Present at autopsy: Forensic Coroner Technician Jon Kolbert, Coroner Detective Kyle Bibby

Name:	Title:	Agency:
<u>IBUACIO 624 #</u>	<u>FORENSICS TECH I</u>	<u>SBSO</u>
<u>MAH Maxwell 4949</u>	<u>DETECTIVE</u>	<u>SBSO</u>

Based upon this examination, it is my opinion that the cause of death is

- A. _____
- B. _____
- C. Before firing gunshot wound to head
- D. _____

Other significant conditions: _____

Mode of Death (Pathologist Impression) Natural Accidental Suicide Homicide Undetermined Traffic

In connection with this examination, the following samples have been obtained:
Blood Urine Gastric Contents Bile Body Tissue VH Other DNA

Status: _____
Pending Toxicology: RIE Intoxication

Microscopic Examination: _____

Other Procedures: _____

This examination was performed at 0930 hours on the of 31st of March, 2021 at the Coroner's Bureau in Santa Barbara, CA

Sincerely,
M Pathologist

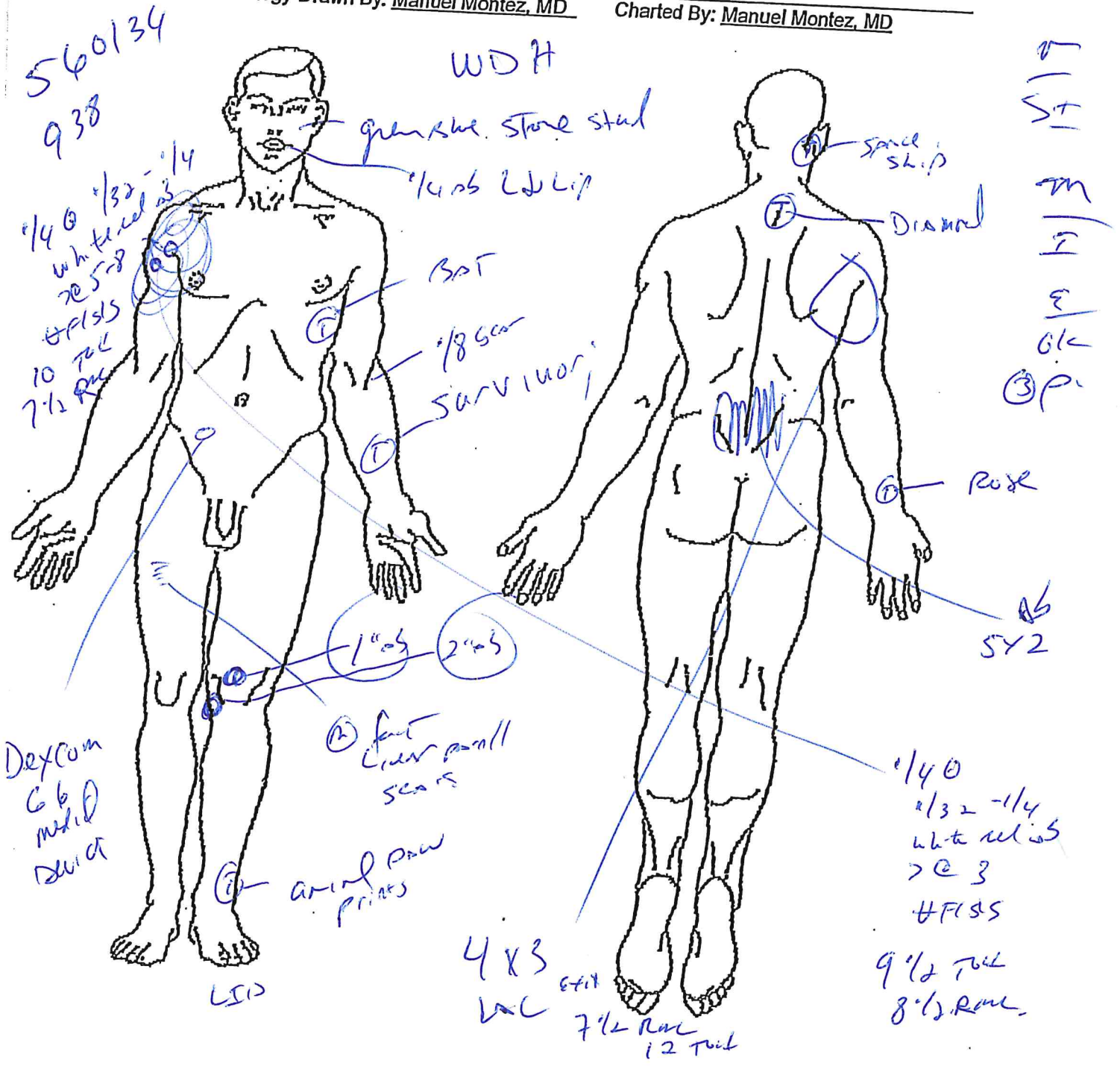
*Bullet to SBSO
X-rays reviewed before exam*



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Coroner Case # 21-3526

MALE BODY CHART
 Name: Koys Brandon Ruiz Date of Exam: 3-31-21
 Age: 26 Race: H Height: 62 Weight: 141 Hair: Br Eyes: Gr
 Jewelry Worn: _____
 Clothing Worn: Tongue studs white metal
 Toxicology Drawn By: Manuel Montez, MD Charted By: Manuel Montez, MD

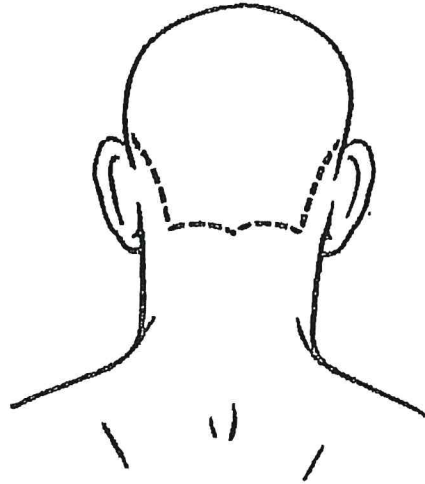
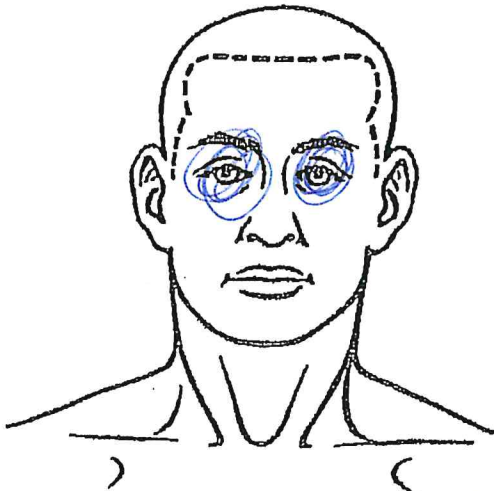




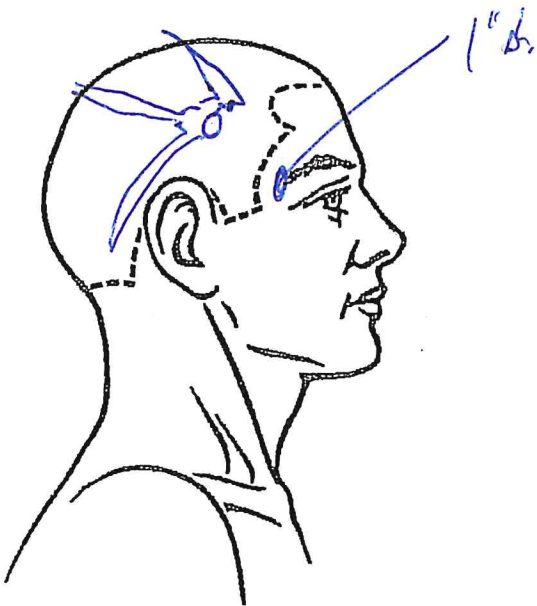
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Name: Ruiz

Case #: 21-3526



5x5 cm T LCL



1/4 oval
part of
1/2 oval
3
H/L/S/S

2 3/4
3 1/2 Row

D.K.W.

Diagram E Figure 25 (21)

AUTOPSY WEIGHTS

Case number: 21-3526

Heart: 220

LEFT LUNG: 200

RIGHT LUNG: 220

SPLEEN: 80

LEFT KIDNEY: 140

RIGHT KIDNEY: 120

LIVER: 1580

BRAIN: 900

F → B
R → L
S L ↓

SMC T D
Bullet or
Projectile
R/L Bullet
R Scapula