

Adult Def PC Arrest
 Juvenile Def Application for
Warrant/Capias

AFFIDAVIT – COMPLAINT

Clerk's Case No. _____

SA Case No.(s) _____

PAGE 01 of 2

Agency ORI # **FL037275C**

1. Agency Name: FDC / Office of the Inspector General		2. Agency Report Number: 20-01389		3. Charge Type: <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Misdemeanor w/associated felony <input type="checkbox"/> Municipal <input type="checkbox"/> County		3a. Ordinance Type: (If applicable) <input type="checkbox"/> Municipal <input type="checkbox"/> County	
4. Date/Time of Offense: 01/13/2020 / 7:00 a.m.		5. Date/Time of Arrest: Warrant Request		6. Arresting Officer: Inspector Richard Wyatt		7. Investigating Officer: Inspector Richard Wyatt	

8. Defendant's Name: (Last) Casey		(First) Charles		(Middle) L		ALIAS N/A		9. OBTS:	
10. Race/Sex: B/M		11. Date of Birth: 06/06/1967		12. Residence Type: <input type="checkbox"/> City <input type="checkbox"/> County <input checked="" type="checkbox"/> Florida <input type="checkbox"/> Out of State		13. Weapon Seized <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		14. Controlled Substance Seized: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No TYPE & QUANTITY:	
15. Height: 6'01"		16. Weight: 190		17. Eye Color: Brown		18. Hair Color: Black		19. Scars, marks, tattoos, unique physical features: (Location, type & description) \$ left arm, Moon right arm	
20. Driver's License Number/State: N/A			21. Social Security Number: [REDACTED]			22. Residential Telephone: N/A		23. Business Telephone: N/A	
24. Address: (Street, Apartment Number) 23916 NW 83rd Avenue			(City) Raiford			(State) FL		(Zip) 32083	

25. Defendant's Name: (Last) N/A		(First)		(Middle)		ALIAS		26. OBTS:	
27. Race/Sex:		28. Date of Birth:		29. Residence Type: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Florida <input type="checkbox"/> Out of State		30. Weapon Seized <input type="checkbox"/> Yes <input type="checkbox"/> No		31. Controlled Substance Seized: <input type="checkbox"/> Yes <input type="checkbox"/> No TYPE & QUANTITY:	
32. Height:		33. Weight:		34. Eye Color:		35. Hair Color:		36. Scars, marks, tattoos, unique physical features: (Location, type & description)	
37. Driver's License Number/State:			38. Social Security Number:			39. Residential Telephone:		40. Business Telephone:	
41. Address: (Street, Apartment Number)			(City)			(State)		(Zip)	

42. Defendant's Name: (Last)		(First)		(Middle)		ALIAS		43. OBTS:	
44. Race/Sex:		45. Date of Birth:		46. Residence Type: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Florida <input type="checkbox"/> Out of State		47. Weapon Seized <input type="checkbox"/> Yes <input type="checkbox"/> No		48. Controlled Substance Seized: <input type="checkbox"/> Yes <input type="checkbox"/> No TYPE & QUANTITY:	
49. Height:		50. Weight:		51. Eye Color:		52. Hair Color:		53. Scars, marks, tattoos, unique physical features: (Location, type & description)	
54. Driver's License Number/State:			55. Social Security Number:			56. Residential Telephone:		57. Business Telephone:	
58. Address: (Street, Apartment Number)			(City)			(State)		(Zip)	

59. Charge Description: (# 1) Battery of a Law Enforcement Officer (2 Counts)		60. Statute or Ordinance Number: 784.07 (1)(d)		<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> Ord.	
61. Charge Description: (# 1)		62. Statute or Ordinance Number:		<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> Ord.	
63. Charge Description: (# 1)		64. Statute or Ordinance Number:		<input type="checkbox"/> F.S. <input type="checkbox"/> Ord.	

65. Victim's Name: (If business, list legal business name) (Last)		(First)		(Middle)		66. Race/Sex		67. Date of Birth:		68. Telephone Number:	
69. Contact Person if victim is deceased, a minor child, or business: (Last)		(First)		(Middle)		70. Race/Sex		71. Date of Birth:		72. Telephone Number:	
73. Address: (Street, Apartment Number)			(City)			(State)		(Zip)		74. Secondary Phone Number:	
75. Victim Notification of Arrest: NOTIFIED BY: _____ DATE: _____ TIME: _____							76. Information Given: Victim <input type="checkbox"/> Arrest Info <input type="checkbox"/> Rights Card <input type="checkbox"/> App. Info <input type="checkbox"/> Domestic <input type="checkbox"/> Viol. Info				

77. Physical Evidence collected in this case? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Evidence Custodian's Name: I		78. Witness Statements taken in this case? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Person responsible for statements: Inspector Richard Wyatt		79. I certify that all of the above information is true and correct to the best of my knowledge and is page 01 of a 3 page affidavit/complaint. _____ Officer/Complainant Signature		Richard Wyatt Type or print Complainant name	
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Adult Def PC Arrest
 Juvenile Def Application for
Warrant/Capias

AFFIDAVIT – COMPLAINT (PROBABLE CAUSE NARRATIVE)

Clerk's Case No. _____
SA Case No.(s) _____

Agency ORI # FL037275C

80. Agency Name: FDC / Office of the Inspector General	81. Agency Report Number: 20-01389	82. Date/Time of Arrest: Warrant Request	83. Investigating Officer: Inspector Richard Wyatt
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84. NARRATIVE OF THE FACTUAL BASIS FOR PROBABLE CAUSE: The undersigned certifies and swears that he/she has just and reasonable grounds to believe that the heretofore named defendant did commit the violations of law as stated above and the factual basis for this belief is as follows:

Your Affiant, Inspector Richard Wyatt, is a sworn law enforcement officer of the Office of the Inspector General, Florida Department of Corrections.

On January 13, 2020, at Hardee Correctional Institution, Bowling Green, Florida, Hardee County, the above named defendant, Inmate Charles Casey born 06/06/1967 did violate Florida State Statute, committing the offense of: Battery of a Law Enforcement Officer; by knowingly and intentionally without consent; physically touched another namely uniformed [REDACTED] (1 count), and [REDACTED] (1 count) (F.S.S. 784.07(1) (d). The defendant Casey with a closed fist struck [REDACTED] about her face, causing her to collapse to the ground. The defendant then with a closed fist struck [REDACTED] about the face causing her to collapse to the ground as well.

In a sworn statement on January 14, 2020, Correctional Sergeant Skyler Alden indicated he responded to C Dormitory to assist [REDACTED]. While en-route he observed an inmate later identified as the defendant go after the two [REDACTED]. Upon his arrival he found both [REDACTED] lying on the ground, [REDACTED].

In a sworn statement on January 14, 2020, Correctional Officer Frank Massa, indicated he was responding to a radio call for assistance from [REDACTED] at C Dormitory. While en-route he observed [REDACTED] arriving at C Dormitory as well. Both [REDACTED] left his line of view with only the inmate in sight. He observed the inmate identified as Inmate Casey make an aggressive move toward the [REDACTED]. Upon arrival he observed the inmate in a fist clinched stance, standing over both victims who were on the ground. Both victims [REDACTED].

In a sworn statement on January 14, 2020, Correctional Officer Robert Berning, indicated he was responding to a radio call for assistance from [REDACTED] at C Dormitory. While en-route he observed [REDACTED] arriving at C Dormitory. He observed the defendant lunge in the direction of the victims who were out of his line of sight. Upon arriving at C Dormitory he observed both victims on the ground [REDACTED].

In a sworn statement on January 16, 2020, Correctional [REDACTED] indicated [REDACTED].

In a sworn post Miranda statement on January 27, 2020, at Florida State Prison, the defendant Charles Casey indicated the following to Senior Inspector Steven Donaldson: He was trying to use the telephone in C Dormitory at approximately 7:00 a.m., when [REDACTED] told him to get off the telephone. She [REDACTED] hung the phone up and told him to step outside and was being disrespectful to him by cursing. Once outside she called for assistance and [REDACTED] arrived. He felt she [REDACTED] was going to pepper spray him and he told her "don't spray me with that". He claims she advanced aggressively and he struck her, and she fell to the ground. [REDACTED] jumped on his back and he pushed her off when he struck her knocking her to the ground. He struck each victim one time. He stated his intention was to strike Sergeant Alden but it should be noted Alden had not arrived on scene yet. He was taken to the ground and secured by the three responding officers.

Both victims were transported to an [REDACTED]. [REDACTED] has not yet been interviewed [REDACTED]. Neither officer has been able to return to work as of this date.

In summary the defendant Inmate Charles Casey did knowingly and intentionally subject [REDACTED] and [REDACTED] to physical contact [REDACTED] at Hardee Correctional Institution, violating 2 counts of Florida State Statute 874.07 (1)(d).

Inmate Casey is currently serving a natural life sentence.

85. The undersigned, being duly sworn, states that the foregoing information contained in an affidavit consisting of <u>3</u> pages is true and correct to the best of his/her knowledge	Sworn to and subscribed before me this _____ day of _____, 20 ____
Signature of Officer/Complainant _____	Signature of Person Administering Oath <input checked="checked" type="checkbox"/> Personally Known <input type="checkbox"/> Other Identification _____
	Seal _____ ID Type _____

Officer/Complainant's Name (Printed)

ID Number

87. Adult's Relation to Juvenile Defendant:

88. Adult's Name: (Last)

(First)

(Middle)

Parent Legal Guardian Other _____

89. Address: (Street, Apartment Number)

(City)

(State)

(Zip)

90. Residential Phone:

91. Business Phone

92. Notified By: (Name)

93. Date/Time:

94. Notification Method:

Person Telephone

95. Law Enforcement Disposition of Juvenile Contact:
(Check one and complete release data)

Transferred to
 Secure Detention

Released to
 HRS Intake Officer, not detained

Processed within the agency and released
 to other than HRS

Release Date: _____ Release Time: _____ Released to (Name): _____