OFFICIAL USE ONLY

Charging Af	ıcia	Arrest # Bk #				_	Pg #1 of 3							
				r 🖂 🕯	C C 🗆	ADIII '	г 🛛 т	IIVENII I	F 🗆	Т	Court Case			
ARREST   NOTICE TO APPEAR   AFFIDAVIT   C.C.   ADULT   JUVENILE   Count case Number:  (ORI) FL: 0   3   7   2   7   5   C   Name: Office of the Inspector General- DC   Number: 19-03021														
No.					TICP:				Date Number:			Time of		
FCIC/NCIC Check? Yes $\square$ No $\square$ OBTS								Arrested:				Arrest:		
ADDRESS OF ARREST:	Name T			By:				Nu			lumber:			
DEFENDANT	(L,F,M):	Driver	aymond Jr.	r. AKA: R				Raymond Lewis			Sex: male Race: bl			
DOB: 03/15/1984	Age: 34	ID No	: N/.	N/A State:					Year Expires:			S S #:		
Height: 5'09"	Weight: 19	0	Hair: black	(City, St, Country)				ando, FL, Un	ited States of	a	Statement: Yes □ No ☑			
Scars, Marks, Tattoos:				- 1	Business & Occupation:	Florida St	ate Inm	ate #C03439	9					Citizenship: Yes ⊠ No □
Probation: Yes	□ No ⊠	Sexual	Predator:	Yes	□ No ⊠	Engli	sh:	Yes ⊠	No [		Deaf/Mut	e:	Yes	□ No ⊠
Address-Mailing/Permanent	2050 TE.	•	ET, APT NUM	*			,					NCE PHONE		
Address-Local	3950 Tiger		oad, ET, APT NUM	Daytona Beach (CITY)					FL (STATE)	32124 386-323-1070 ZIPCODE RESIDENCE PHONI				
Address-Other(Employer/Sci	hoof)	(STRE	ET, APT NUM	(RFR)			· (CI	TY)		(STATE)	ZIPCOI	)F	RIIS/SCI	HOOL PHONE
		(STICE	1	iblit)			(6)			(STITE)	211 001			
CHARGES	DOMESTIC VIOLENCE?	YES			davit(s)  State		-	Schedule 🗌	Report		.,,	DUI [	Cnar	
#1 Charge: Battery of a law ent	forcement officer			MISD					Citation No :			Bond:		
#2 Charge:			FEL _	☐ MISD ☐ ORD ☐ FS/ORD:				Citation No :			Bond:			
#3 Charge:			FEL [	MISE	ORD 🗆	FS/ORD	):			Citation No	1		Bond:	
CO-DEFENDAN	Co-Def#	1. Arreste	1? Y □ N □ F	el 🗆 N	Misd □ Traf □	Ord 🗆	NTA	Co-Dej	f#2. An	rested? Y 🗌	N □ Fel □			Ord NTA
#1 NAME(L,F,M):										Race:	Sex:	I	OOB:	Age:
#2 NAME(L,F,M):										Race:	Sex:	I	OOB:	Age:
NARRATIVE  The undersigned certifies and swears that there is probable cause to believe the above named defendant, on the 16th day of February, 2019, at approximately 4:40 □ a.m. ⋈ p m. at Tomoka Correctional Institution located at 3950 Tiger Bar Road in Daytona Beach, FL within Volusia County, violated the law and did then and there:  Intentionally and unlawfully batter the Victim, Correctional Officer a uniformed correctional officer employed by the Florida														
Department of Corre her official duties at t Your affiant is Inspec	the time of the	e battery										as on-	duty and	performing
On February 16, 2019 at approximately 4:40pm, was performing her official duties by supervising the feeding of the Evening Meal in the north dining room of Tomoka Correctional Institution. She observed the Defendant, Inmate Raymond Lewis, speaking or attempting to speak with other inmates in an attempt to obtain more food.  Inmate Lewis was holding a hard plastic food tray in his left hand while was speaking with him.														
NOTICE TO AP	PEAR N	MANDATO	ORY Y	OU NE	ED NOT APPE			UT MUST	COMPI	Y WITH	FINE, AN		-	
APPEARANCE   INSTRUCTIONS ON THE REVERSE SIDE OF YOUR COPY   AMOUNT:  I AGREE TO APPEAR IN COURT HEREIN TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE INDICATED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR  BEFORE THE COURT AS REQUIRED OR PAY THE LISTED FINE I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST WILL BE ISSUED.														
BEFORE THE COURT AS RI	EQUIRED OR F	'AT IHEL	ISTED FINE TO	NAT BE	HELD IN CON	NIEMPI O	r COL	KI AND A	WARK	Juve Juve	II ARRESI W	ILL BE	ISSUED.	
					SIGNATURE OF JUVENILE PARENT OR CUSTODIAN				DIAN	Disp CITATION No				
SIGNATURE OF DEFENDA	ANT DAT	ΓE		RELAT	TIONSHIP TO J	UVENILE								
Sworn to and subscribed befo		signed	+	I swear	/affirm the above	e statement	ts are co	rrect and tr	ue			F	Rt Thumb	
This day of , _														
Name:					ŌI	FFICER'S/	COMP	LAINANT'	S SIGN	ATURE				
Notary Public   Law Enforcement or Corrections Officer					(PRINTED)	,			NUMI					
Personally Known  Produced Identification  Type of Identification:				Jona	onathan Warren				37424					

Inmate Number & facility: C03439/Tomoka Correctional Institution

Na	rrative 707-B □Am	rest 🛛 Adult								
Su	ıpplement □ Maffi	idavit	Court Case Number:		Page	# 2 of 3				
Defen	dant Name: vis, Raymond Jr.		Agency Case Number 19-03021	r:						
	DOMESTIC	ttachments: Affidavit(s)   Statemen		☐ Report ☑ Traffi	c Infraction(s)	Total				
#	Charge:	FEL 🗌	MISD  ORD	FS/ORD:	Citation No:	Charges: 1 Bond:				
#	Charge:	FEL 🗆 :	MISD □ ORD □	FS/ORD:	Citation No:	Bond:				
#	Charge:	FEL 🗌 :	MISD   ORD	FS/ORD:	Citation No:	Bond:				
	placed his hands behind his back and faced a nearby wall. He was handcuffed by Sergeant Heather Pheneger with the assistance of and Donna Ashley.									
Corre	ectional Officer Ryan Eckersen on Febru	on Febru	<u>a</u> ry 16.		W	Sergeant as photographed by				
	onversation that preceded it. Inmate Ro was speaking with Inm Inmate Williams did not witness the b	omer Williams heard the con ate Lewis about a rule violat	versation between		and Inmate Lewis	. Williams_reported				
batte	te Lewis was interviewed at approximary? I threw the tray on her. That's what	I did." Inmate Lewis was in								
reque	ested an attorney and was not asked any o	questions about the incident.								
Sworn	to and subscribed before me, the undersigned	I swear/affirm the above staten	nents are correct and tr	ue .	Г	Right thumb				
	day of,					Ĭ				
Name:	Public Law Enforcement Officer	OFFI	CER'S/COMPLAINAN	NT'S SIGNATURF						
	nally Known Produced Identification	NAME(PRINTED)	- Later Com Landa	S SIGINITORE	ID NUMBER					
Туре	f Identification:	Jonathan Warren			37424					

## Witness/Victim/Evidence Form 707-A

Arrest	
✓ Affidavit	
☐ Notice to	Annes

Adult
 ☐ Juvenile

Court Case Number:

Pg # 3 of 3

Defendant Name: Lewis, Raymond Jr.					y Case er:	19-03021				19#3013		
Name (L,F,M):		Vic ⊠ Wit □	Race:	-	Sex:	FM	Age:	DOB:		SSN:		
Address (#, Street, City, State):	Exempt- FDC Swo				Zip:	ы	Home Phone:			Statement: Yes ⊠ No □		
Bus /School Address:	Tomoka Correctional Institution, 3950 Tiger Bay Road, Da				ytona Beach FL			Zip: 32124			Bus Phone: 386-254-2627	
Relative/ Contact Name:	Relative/ Address:				ontact			32124			Phone:	
Name	Pheneger, Heather	Vic	Race:		Sex:		Age:	Age: DOB:		SSN:		
(L,F,M): Address	Exempt- FDC Swo	rn	Wit 🛛 white			M 🔲 I	· X	Home			Statement: Yes  No	
(#, Street, City, State): Bus /School		al Institution, 3950 Tiger Bay	Road, Daytona Beach FL				Phone: Zip: 32124				Bus Phone: 386-254-2627	
Address: Relative/		Relative/Contact					32124			Phone:		
Contact Name: Name	Ashley, Donna		Vic	Address:  Vic		Sex:			e: DOB:		SSN:	
(L,F,M): Address	Exempt- FDC Swo		Wit  white		M □ I Zip:	M□F⊠		1		Statement:		
(#, Street, City, State): Bus /School	-	al Institution, 3950 Tiger Bay	D 1D 1 D 1FI				Phone: Zip:				Yes ⊠ No □ Bus	
Address: Relative/	Tomoka Correctiona	ar mistrution, 3930 Tiger Bay	Relative/C		each FL			32124			Phone: 386-254-2627 Phone:	
Contact Name: Name			Address:		Sex:		Age: DOB:		SSN:			
(L,F,M): Address	Eckersen, Ryan		Vic ☐ Race: Wit ⊠ white		M ⊠ I	F				Statement:		
(#, Street, City, State): Bus /School	Exempt- FDC Swo						Phone: Zip:				Yes ⊠ No □	
Address: Relative/	3950 Tiger Bay Roa	id, Daytona Beach FL	Palatina/C	Policies (Contact				32124			Phone: 386-254-2627 Phone:	
Contact Name:		Address:					T					
Name (L,F,M):	Duran, Terri	Vic □ Wit ⊠	Race:	M□F⊠		FX	Age:	DOB:		SSN:		
Address (#, Street, City, State):	Exempt- FDC Con				Zip:	Phone:				Statement: Yes ⊠ No □		
Bus /School Address:	Tomoka Correctiona	Road, Daytona Beach FL				Zip: 32124				Bus Phone: 386-254-2627		
Relative/ Contact Name:		Relative/Contact Address:								Phone:		
Name (L,F,M):	Williams, Romer Le	Vic ☐ Race: Wit ☑ black		Sex: M ⊠ F □		Age: DOB: 53 10/26/		65	SSN:			
Address (#, Street, City, State):	Tomoka Corrections	y Road, Daytona Beach FL			Zip: 32124		Home Phone: 386-323-107		70	Statement: Yes ⊠ No □		
Bus /School Address:						Zip:			Bus Phone:			
Relative/ Contact Name:				Relative/Contact Address:							Phone:	
EVIDENCE COLLECTED												
Description of Evidence				Dat	e Recovere	d	Model Ser	rial/ID Num	ber		Drug Amount	
Owner(Name)	(Address)						(Phone)	Val Serial/I D Number		Valu		
Description of Evidence				Dat	e Recovere	d	Model Ser	nal/ID Num	ber		Drug Amount	
Owner(Name)  Description of Evidence	(Address)						(Phone)	e) Val Serial/I D Number			Drug Amount	
Description of Evidence  Description of Evidence								Iodel Serial/I D Number				
							Drug Amount					
					Date Recovered						Drug Amount	
Description of Evidence								1 Serial/I D Number 1 Serial/I D Number			Drug Amount	
Description of Evidence				Dat	e Recovere	a .	Model Ser	na/ID Num	ber		Drug Amount	