

ARREST  SWORN COMPLAINT  HOLD

JUVENILE  NOTICE TO APPEAR

OBTS NUMBER:

OFFICE OF THE INSPECTOR GENERAL

SPN NUMBER:

AGENCY ORI NUMBER:

FL037275C

PROBABLE CAUSE AFFIDAVIT

AGENCY CASE REPORT NUMBER:

20-12156

DEFENDANT

NAME OF SUBJECT (LAST, FIRST, MI): **Jackson, Jamaul Akeem** ALIAS / MAIDEN:

911 HOME ADDRESS (STREET, APARTMENT NUMBER, ETC.): [REDACTED] CITY: [REDACTED] STATE: **FL** ZIP CODE: [REDACTED] TELEPHONE NUMBER:

BUSINESS / SCHOOL ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.): CITY: STATE: ZIP CODE: TELEPHONE NUMBER:

MAILING ADDRESS (PO BOX, ETC. IF DIFFERENT THAN 911 ADDRESS): SCARS, MARKS, TATTOOS, FACIAL HAIR, UNIQUE PHYSICAL FEATURES (LOCATION, TYPE, DESCRIPTION):

RACE:  WHITE  AMERICAN INDIAN  BLACK  ASIAN / ORIENTAL SEX: **M** DATE OF BIRTH: [REDACTED] HEIGHT: **6'01"** WEIGHT: **245 lbs.** HAIR COLOR: **Black** EYE COLOR: **Brown** COMPLEXION: BUILD:

DRIVERS LICENSE / STATE ID NUMBER: STATE OF DL **FL** SOCIAL SECURITY NUMBER: [REDACTED] PHOTO NUMBER: PLACE OF BIRTH: **USA** COUNTRY OF CITIZENSHIP:

SUBJECT'S OCCUPATION: **Correctional Officer Sergeant** SPN NUMBER: AGENCY ORI NUMBER: **FL037275C** SO ID / AGENCY ID / NUMBER: BOOKING NUMBER:

LOCATION OF ARREST: **11120 NW Gainesville Rd., Ocala FL., 34482 (LCI)** DATE OF ARREST: **07/08/2020** TIME OF ARREST (MILITARY): DATE OF BOOKING: TIME OF BOOKING (MILITARY):

SUBJECT IDENTIFIED BY WHOM (VICTIM, WITNESS, LEO, ETC.): **LEO** SUBJECT'S NAME VERIFIED BY (PHOTO ID, FAMILY MEMBER, KNOWN TO OFFICER, ETC.): **FL DL**

CO-DEF.

|         |                |       |      |               |   |   |  |
|---------|----------------|-------|------|---------------|---|---|--|
| (NAME): | DATE OF BIRTH: | RACE: | SEX: | COURT NUMBER: | <input type="checkbox"/> ARRESTED<br><input type="checkbox"/> SWORN COMPLAINT | <input type="checkbox"/> FELONY<br><input type="checkbox"/> MISDEMEANOR | JUVENILE:<br><input type="checkbox"/> YES<br><input type="checkbox"/> NO |
| (NAME): | DATE OF BIRTH: | RACE: | SEX: | COURT NUMBER: | <input type="checkbox"/> ARRESTED<br><input type="checkbox"/> SWORN COMPLAINT | <input type="checkbox"/> FELONY<br><input type="checkbox"/> MISDEMEANOR | JUVENILE:<br><input type="checkbox"/> YES<br><input type="checkbox"/> NO |
| (NAME): | DATE OF BIRTH: | RACE: | SEX: | COURT NUMBER: | <input type="checkbox"/> ARRESTED<br><input type="checkbox"/> SWORN COMPLAINT | <input type="checkbox"/> FELONY<br><input type="checkbox"/> MISDEMEANOR | JUVENILE:<br><input type="checkbox"/> YES<br><input type="checkbox"/> NO |
| (NAME): | DATE OF BIRTH: | RACE: | SEX: | COURT NUMBER: | <input type="checkbox"/> ARRESTED<br><input type="checkbox"/> SWORN COMPLAINT | <input type="checkbox"/> FELONY<br><input type="checkbox"/> MISDEMEANOR | JUVENILE:<br><input type="checkbox"/> YES<br><input type="checkbox"/> NO |

JUVENILE

JUVENILE DISPOSITION:  RELEASED TO JAC  ISSUED NTA AND RELEASED NAME OF PARENT / GUARDIAN (NOTIFIED  YES  NO): WORK TELEPHONE NUMBER:

PARENT / GUARDIAN HOME ADDRESS (STREET, APARTMENT #, PO BOX, ETC.): CITY: STATE: ZIP CODE: HOME TELEPHONE NUMBER:

WITNESS

|         |          |                   |
|---------|----------|-------------------|
| (NAME): | ADDRESS: | TELEPHONE NUMBER: |
| (NAME): | ADDRESS: | TELEPHONE NUMBER: |
| (NAME): | ADDRESS: | TELEPHONE NUMBER: |
| (NAME): | ADDRESS: | TELEPHONE NUMBER: |

CHARGE 1

OFFENSE DESCRIPTION: **Sexual Misconduct (1 Count)**  FELONY  MISDEMEANOR  TRAFFIC  NTA COMPLETE STATUTE / ORDINANCE NUMBER: **944.35(3)(b)(1)** VICTIM NOTIFICATION: ARREST:  YES  NO RELEASE:  YES  NO

WARRANT  JUVENILE PU ORDER  CIVIL ORDER  CITATION DATE OF OFFENSE: **04/2020** TIME OF OFFENSE: **5:00 am** BAIL AMOUNT: **\$5000.00** VICTIM'S TELEPHONE NUMBER: **N/A**

VICTIM (NAME): **State of Florida Inmate** ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.): **11120 NW Gainesville Rd** CITY: **Ocala** STATE: **FL** ZIP CODE: **34482**

CHARGE 2

OFFENSE DESCRIPTION:  FELONY  MISDEMEANOR  TRAFFIC  NTA COMPLETE STATUTE / ORDINANCE NUMBER: VICTIM NOTIFICATION: ARREST:  YES  NO RELEASE:  YES  NO

WARRANT  JUVENILE PU ORDER  CIVIL ORDER  CITATION DATE OF OFFENSE: TIME OF OFFENSE: BAIL AMOUNT: VICTIM'S TELEPHONE NUMBER:

VICTIM (NAME): ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.): CITY: STATE: ZIP CODE:

CHARGE 3

OFFENSE DESCRIPTION:  FELONY  MISDEMEANOR  TRAFFIC  NTA COMPLETE STATUTE / ORDINANCE NUMBER: VICTIM NOTIFICATION: ARREST:  YES  NO

WARRANT  JUVENILE PU ORDER  CIVIL ORDER  CITATION DATE OF OFFENSE: TIME OF OFFENSE: BAIL AMOUNT: VICTIM'S TELEPHONE NUMBER:

VICTIM (NAME): ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.): CITY: STATE: ZIP CODE:

THE FOLLOWING INCIDENT OCCURRED AT (ADDRESS / LOCATION):  
**Lowell Correctional Institution**

CITY OF:  
**Ocala**

COUNTY OF:  
**Marion**

STATE OF:  
**FLORIDA**

Your Affiant is Senior Inspector Michael Green of the Office of the Inspector General, Florida Department of Corrections.

Your Affiant has probable cause to believe that between approximately the week of April 8, 2020 – April 15, 2020 Correctional Officer Sergeant Jamaul Akeem Jackson violated FSS 944.35(3)(b)(1), Sexual Misconduct, by having sexual relations with a female inmate at Lowell Correctional Institution.

The female inmate notified the Office of the Inspector General on Monday July 6, 2020 of a sexual relationship she engaged in with Sergeant Jackson. The inmate stated that [REDACTED] The inmate stated that [REDACTED] The inmate maintained the ejaculation and stored it within her property.

The clothing item that contained the alleged DNA was retrieved from the inmate's personal items and was in the location and condition described by the inmate. The clothing was sent to a local laboratory for the presence of DNA, which concluded male DNA was present on the item.

On July 8, 2020 Senior Inspector Green conducted a recorded interview with Sergeant Jackson. Post Miranda, Jackson agreed to provide a buccal swab of his cheeks, which was completed during the interview. Sergeant Jackson later admitted [REDACTED] Jackson was forthcoming with details of the incident and was remorseful. Jackson further stated that [REDACTED]

Both Jackson and the inmate alleged [REDACTED]

Jackson was placed under arrest and transported to the Marion County Jail without incident.

MANDATORY APPEARANCE IN COURT AT: DATE OF APPEARANCE: TIME OF APPEARANCE:  AM  PM

I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS NOTICE TO APPEAR. WILLFUL REFUSAL TO ACCEPT AND SIGN THIS NOTICE TO APPEAR MAY RESULT IN PHYSICAL ARREST. I UNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF MY RIGHTS. DEFENDANT (SIGNATURE): DATE:

SWORN TO AND SUBSCRIBED BEFORE ME THIS:  
DAY OF July, 2020  
SIGNATURE: [Signature]  
TITLE: Inspector General

I SWEAR THE ABOVE, AND REVERSE AND ATTACHED PAGES AND STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.  
NAME (PRINT): Inspector Michael Green  
SIGNATURE: [Signature]  
AGENCY: FDC - OIG LEO ID NUMBER: 113026