

THE STATE OF FLORIDA

v.

Christin Paige Graham

Race: White  
Sex: Female  
DOB: [REDACTED]  
DL: [REDACTED]  
Address: [REDACTED]



IN THE CIRCUIT COURT,  
FOURTEENTH JUDICIAL  
CIRCUIT, IN AND FOR JACKSON  
COUNTY, FLORIDA.

CASE NO.: 20-10797

CHARGE(s): 20-310CF

- I. Unlawful Compensation
- II. Unlawful Compensation
- III. Unlawful Compensation
- IV. Unlawful Compensation
- V. Unlawful Compensation
- VI. Unlawful Compensation
- VII. Unlawful Compensation
- VIII. Unlawful Compensation
- IX. Unlawful Compensation
- X. Unlawful Compensation
- XI. Unlawful Compensation
- XII. Unlawful Compensation
- XIII. Unlawful Compensation
- XIV. Unlawful Compensation
- XV. Unlawful Compensation
- XVI. Unlawful Compensation
- XVII. Unlawful Compensation
- XVIII. Unlawful Compensation
- XIX. Introduction / removal of contraband to whit: hand written communication
- XX. Introduction / removal of contraband to whit: hand written communication
- XXI. Introduction / removal of contraband to whit: hand written communication
- XXII. Introduction / removal of contraband to whit: hand written communication
- XXIII. Introduction / possession of contraband to whit: hand written communication
- XXIV. Unlawful Use of a Two-way Communication Device
- XXV. Unlawful Use of a Two-way Communication Device
- XXVI. Interference with Prisoners

CERTIFIED A TRUE COPY.  
6/11/2020  
CLAYTON D. ROOKS, III  
CLERK CIRCUIT COURT  
JACKSON COUNTY, FLORIDA  
By: Taylor Hobbs  
Deputy Clerk



WARRANT

IN THE NAME OF THE STATE OF FLORIDA TO ALL AND SINGULAR the sheriffs of this state and their duly appointed deputies and the Secretary of the Florida Department of Corrections or his duly authorized Inspectors, and the Executive Director of the Florida Department of Law Enforcement or his duly authorized Special Agents, and police officers acting within their jurisdiction.

WHEREAS, a Sworn Complaint, having been this day filed before me as Judge of the Circuit Court in and for Jackson County, wherein it is alleged that:

Christin Paige Graham, on or about May 31, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Compensation contrary to Florida Statutes 838.013 (1) (2 DEG FELONY), and

Christin Paige Graham, on or about May 31, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Compensation contrary to Florida Statutes 838.013 (1) (2 DEG FELONY), and

Christin Paige Graham, on or about June 1, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Compensation contrary to Florida Statutes 838.013 (1) (2 DEG FELONY), and

Christin Paige Graham, on or about June 1, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Compensation contrary to Florida Statutes 838.013 (1) (2 DEG FELONY), and

Christin Paige Graham, on or about June 2, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Compensation contrary to Florida Statutes 838.013 (1) (2 DEG FELONY), and

Christin Paige Graham, on or about June 5, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Compensation contrary to Florida Statutes 838.013 (1) (2 DEG FELONY), and

Christin Paige Graham, on or about June 5, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Compensation contrary to Florida Statutes 838.013 (1) (2 DEG FELONY), and

Christin Paige Graham, on or about June 6, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Compensation contrary to Florida Statutes 838.013 (1) (2 DEG FELONY), and

Christin Paige Graham, on or about June 8, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Compensation contrary to Florida Statutes 838.013 (1) (2 DEG FELONY), and

Christin Paige Graham, on or about June 9, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Compensation contrary to Florida Statutes 838.013 (1) (2 DEG FELONY), and

Christin Paige Graham, on or about June 9, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Compensation contrary to Florida Statutes 838.013 (1) (2 DEG FELONY), and

Christin Paige Graham, on or about June 11, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Compensation contrary to Florida Statutes 838.013 (1) (2 DEG FELONY), and

Christin Paige Graham, on or about June 13, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Compensation contrary to Florida Statutes 838.013 (1) (2 DEG FELONY), and

ID#: 17801

Christin Paige Graham, on or about June 16, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Compensation contrary to Florida Statutes 838.013 (1) (2 DEG FELONY), and

Christin Paige Graham, on or about June 17, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Compensation contrary to Florida Statutes 838.013 (1) (2 DEG FELONY), and

Christin Paige Graham, on or about June 18, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Compensation contrary to Florida Statutes 838.013 (1) (2 DEG FELONY), and

Christin Paige Graham, on or about June 24, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Compensation contrary to Florida Statutes 838.013 (1) (2 DEG FELONY), and

Christin Paige Graham, on or about June 24, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Compensation contrary to Florida Statutes 838.013 (1) (2 DEG FELONY), and

Christin Paige Graham, on or about May, 2019 through July, 2019, in the County of Jackson and State of Florida, committed the offense of Introduction / removal of contraband to whit: hand written communication contrary to Florida Statutes 944.47 (1)(a)(1) (3 DEG FELONY), and

Christin Paige Graham, on or about May, 2019 through July, 2019, in the County of Jackson and State of Florida, committed the offense of Introduction / removal of contraband to whit: hand written communication contrary to Florida Statutes 944.47 (1)(a)(1) (3 DEG FELONY), and

Christin Paige Graham, on or about May, 2019 through July, 2019, in the County of Jackson and State of Florida, committed the offense of Introduction / removal of contraband to whit: hand written communication contrary to Florida Statutes 944.47 (1)(a)(1) (3 DEG FELONY), and

Christin Paige Graham, on or about May, 2019 through July, 2019, in the County of Jackson and State of Florida, committed the offense of Introduction / removal of contraband to whit: hand written communication contrary to Florida Statutes 944.47 (1)(a)(1) (3 DEG FELONY), and

Christin Paige Graham, on or about May, 2019 through July, 2019, in the County of Jackson and State of Florida, committed the offense of Introduction / possession of contraband to whit: hand written communication contrary to Florida Statutes 944.47 (1)(a)(1) (3 DEG FELONY), and

Christin Paige Graham, on or about May, 2019 through July, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Use of a Two-way Communication Device contrary to Florida Statutes 934.215 (3 DEG FELONY), and

Christin Paige Graham, on or about May, 2019 through July, 2019, in the County of Jackson and State of Florida, committed the offense of Unlawful Use of a Two-way Communication Device contrary to Florida Statutes 934.215 (3 DEG FELONY), and

Christin Paige Graham, on or about May, 2019 through July, 2019, in the County of Jackson and State of Florida, committed the offense of Interference with prisoners contrary to Florida Statutes 944.39 (2nd DEG misdemeanor).

THEREFORE, you are hereby commanded to arrest instanter the said **Christin Paige Graham**.

WITNESS my hand and the official Seal of the Judge of the Circuit Court:

\_\_\_The defendant shall be admitted bail in the amount of \$\_\_\_\_\_.

No bail until first appearance, as provided by law.

SPECIAL CONDITIONS IN ADDITION TO MONETARY BAIL:

Given under my hand and seal on the \_\_\_\_\_ day of \_\_\_\_\_, 2020, Jackson County, Florida.

6/11/2020

*Waide Mercer*

WAIDE MERCER  
Jackson County Judge  
Acting Circuit Judge

6/11/2020 8:23:02 AM

This warrant came to hand the \_\_\_\_\_ day of \_\_\_\_\_, A.D., 20\_\_\_\_, and I executed the same by arresting the within named defendant on the \_\_\_\_\_ day of \_\_\_\_\_, A.D., 20\_\_\_\_. On the \_\_\_\_\_ day of \_\_\_\_\_, A.D., 20\_\_\_\_, the within named defendant was taken before the Court to be dealt with according to law.

SHERIFF By: \_\_\_\_\_ Deputy Sheriff

ID#: 17801

Adult Def  PC Arrest  
 Juvenile Def  Application for  
Warrant/Capias

# AFFIDAVIT - COMPLAINT

Clark's Case No. \_\_\_\_\_  
SA Case No.(s) \_\_\_\_\_

PAGE 01 of 4

Agency ORI # **FL037275C**

|   |  |   |  |   |  |  |  |
|---|--|---|--|---|--|--|--|
| 1. Agency Name:<br><b>Florida Department of Corrections</b> |  | 2. Agency Report Number:<br><b>19-10797</b> |  | 3. Charge Type:<br><input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Misdemeanor w/associated felony |  | 3a. Ordinance Type:<br>(if applicable)<br><input type="checkbox"/> Municipal <input type="checkbox"/> County |  |
| 4. Date/Time of Offense:<br><b>05/2019 - 07/2019</b>        |  | 5. Date/Time of Arrest:                     |  | 6. Arresting Officer:   |  | 7. Investigating Officer:<br><b>Inspector William "Eddie" Dalton</b>   |  |

|  |  |                            |                             |  |  |  |  |   |  |
|--|--|----------------------------|-----------------------------|--|--|--|--|---|--|
| 8. Defendant's Name: (Last)<br><b>Graham</b>                 |  | (First)<br><b>Christin</b> |                             | (Middle)<br><b>Paige</b>   |  | ALIAS  |  | 9. OBTS:  |  |
| 10. Race/Sex:<br><b>W/F</b>                                  |  | 11. Date of Birth:         |                             | 12. Residence Type:<br><input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Florida <input checked="" type="checkbox"/> Out of State |  | 13. Weapon Seized<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  | 14. Controlled Substance Seized: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>TYPE & QUANTITY: <b>n/a</b> |  |
| 15. Height:<br><b>5'03"</b>                                  |  | 16. Weight:<br><b>140</b>  |                             | 17. Eye Color:<br><b>Brown</b>   |  | 18. Hair Color:<br><b>Brown</b>  |  | 19. Scars, marks, tattoos, unique physical features: (Location, type & description)<br><b>N/A</b>                                   |  |
| 20. Driver's License Number/State:<br><b>/AL</b>             |  |                            | 21. Social Security Number: |  |  | 22. Residential Telephone:   |  | 23. Business Telephone:   |  |
| 24. Address: (Street, Apartment Number)<br><b>[REDACTED]</b> |  |                            | (City)<br><b>[REDACTED]</b> |  |  | (State)<br><b>[REDACTED]</b>   |  | (Zip)<br><b>[REDACTED]</b>  |  |

|   |  |                    |                             |  |  |  |  |  |  |
|---|--|--------------------|-----------------------------|--|--|--|--|--|--|
| 25. Defendant's Name: (Last)            |  | (First)            |                             | (Middle)   |  | ALIAS  |  | 26. OBTS:  |  |
| 27. Race/Sex:                           |  | 28. Date of Birth: |                             | 29. Residence Type:<br><input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Florida <input checked="" type="checkbox"/> Out of State |  | 30. Weapon Seized<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  | 31. Controlled Substance Seized: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>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:<br><input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Florida <input checked="" type="checkbox"/> Out of State |  | 47. Weapon Seized<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  | 48. Controlled Substance Seized: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>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)<br><b>Unlawful Compensation (18 counts)</b>  |  | 60. Statute or Ordinance Number:<br><b>838.016(1)</b>       |  | <input checked="" type="checkbox"/> F.S.<br><input type="checkbox"/> Ord. |  |
| 61. Charge Description: (#1)<br><b>Introduction / removal of contraband to wit: hand written communication (4 counts)</b>   |  | 62. Statute or Ordinance Number:<br><b>944.47 (1)(a)(1)</b> |  | <input checked="" type="checkbox"/> F.S.<br><input type="checkbox"/> Ord. |  |
| 63. Charge Description: (#1)<br><b>Introduction / possession of contraband to wit: hand written communication (1 count)</b> |  | 64. Statute or Ordinance Number:<br><b>944.47 (1)(a)(1)</b> |  | <input type="checkbox"/> F.S.<br><input type="checkbox"/> Ord.            |  |

|   |  |                         |  |                           |  |   |  |                             |  |  |  |
|---|--|-------------------------|--|---------------------------|--|---|--|-----------------------------|--|--|--|
| 65. Victim's Name: (If business, list legal business name) (Last)<br><b>State of Florida</b>                            |  | (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)<br><b>Inspector William "Eddie" Dalton</b> |  | (First)                 |  | (Middle)                  |  | 70. Race/Sex  |  | 71. Date of Birth:          |  | 72. Telephone Number:<br><b>850-568-1804</b> |  |
| 73. Address: (Street, Apartment Number)<br><b>5563 10<sup>th</sup> Street</b>   |  | (City)<br><b>Malone</b> |  | (State)<br><b>Florida</b> |  | (Zip)<br><b>32445</b>   |  | 74. Secondary Phone Number: |  |  |  |
| 75. Victim Notification of Arrest:<br>NOTIFIED BY: _____ DATE: _____ TIME: _____  |  |                         |  |                           |  | 76. Information Given:<br><input type="checkbox"/> Victim <input type="checkbox"/> Rights Card <input type="checkbox"/> App. Info |  |                             | <input type="checkbox"/> Arrest Info <input type="checkbox"/> Domestic <input type="checkbox"/> Viol. Info |  |  |

|  |  |   |  |   |  |  |  |   |  |  |  |
|--|--|---|--|---|--|--|--|---|--|--|--|
| 77. Physical Evidence collected in this case?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  | 78. Witness Statements taken in this case?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  | 79. I certify that all of the above information is true and correct to the best of my knowledge<br>and is page 01 of a 04 page affidavit/complaint. |  |  |  |   |  |  |  |
| Evidence Custodian's Name: <b>Daria Henderson</b>  |  | Person responsible for statements: <b>Inspector William Dalton</b>  |  | <i>William Dalton</i><br>Officer/Complainant Signature  |  |  |  | <b>Inspector William Dalton</b><br>Type or print Complainant name |  |  |  |

ID#: 17801

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:<br><b>Florida Department of Corrections</b> |  | 2. Agency Report Number:<br><b>19-10797</b> |  | 3. Charge Type:<br><input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Misdemeanor w/associated felony |  | 3a. Ordinance Type: (if applicable)<br><input type="checkbox"/> Municipal <input type="checkbox"/> County |  |
| 4. Date/Time of Offense:<br><b>05/2019 - 07/2019</b>        |  | 5. Date/Time of Arrest:                     |  | 6. Arresting Officer:   |  | 7. Investigating Officer:<br><b>Inspector William "Eddie" Dalton</b>                                      |  |

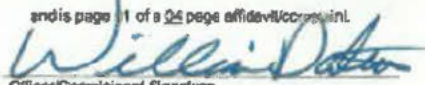
|  |  |                            |                             |  |  |   |  |  |  |
|--|--|----------------------------|-----------------------------|--|--|---|--|--|--|
| 8. Defendant's Name: (Last)<br><b>Graham</b>     |  | (First)<br><b>Christin</b> |                             | (Middle)<br><b>Paige</b>   |  | ALIAS   |  | 9. OBTS:   |  |
| 10. Race/Sex:<br><b>W/F</b>                      |  | 11. Date of Birth:         |                             | 12. Residence Type:<br><input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Florida <input checked="" type="checkbox"/> Out of State |  | 13. Weapon Seized:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  | 14. Controlled Substance Seized: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>TYPE & QUANTITY: n/a |  |
| 15. Height:<br><b>5'03"</b>                      |  | 16. Weight:<br><b>140</b>  |                             | 17. Eye Color:<br><b>Brown</b>   |  | 18. Hair Color:<br><b>Brown</b>   |  | 19. Scars, marks, tattoos, unique physical features: (Location, type & description)<br><b>N/A</b>                            |  |
| 20. Driver's License Number/State:<br><b>/AL</b> |  |                            | 21. Social Security Number: |  |  | 22. Residential Telephone:  |  | 23. Business Telephone:  |  |
| 24. Address: (Street, Apartment Number)          |  |                            | (City)                      |  |  | (State)   |  | (Zip)  |  |

|   |  |                    |                             |   |  |  |  |   |  |
|---|--|--------------------|-----------------------------|---|--|--|--|---|--|
| 25. Defendant's Name: (Last)            |  | (First)            |                             | (Middle)  |  | ALIAS  |  | 26. OBTS:   |  |
| 27. Race/Sex:                           |  | 28. Date of Birth: |                             | 29. Residence Type:<br><input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Florida <input type="checkbox"/> Out of State |  | 30. Weapon Seized:<br><input type="checkbox"/> Yes <input type="checkbox"/> No |  | 31. Controlled Substance Seized: <input type="checkbox"/> Yes <input type="checkbox"/> No<br>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:<br><input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Florida <input type="checkbox"/> Out of State |  | 47. Weapon Seized:<br><input type="checkbox"/> Yes <input type="checkbox"/> No |  | 48. Controlled Substance Seized: <input type="checkbox"/> Yes <input type="checkbox"/> No<br>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)<br><b>Unlawful Use of a Two-way Communication Device (2 counts)</b> |  | 60. Statute or Ordinance Number:<br><b>934.215</b> |  | <input checked="" type="checkbox"/> F.S.<br><input type="checkbox"/> Ord. |  |
| 61. Charge Description: (# 1)<br><b>Interference with Prisoners</b>                               |  | 62. Statute or Ordinance Number:<br><b>944.39</b>  |  | <input checked="" type="checkbox"/> F.S.<br><input type="checkbox"/> Ord. |  |
| 63. Charge Description: (# 1)   |  | 64. Statute or Ordinance Number:                   |  | <input type="checkbox"/> F.S.<br><input type="checkbox"/> Ord.            |  |

|   |  |                         |  |                           |  |   |  |                             |  |  |  |
|---|--|-------------------------|--|---------------------------|--|---|--|-----------------------------|--|--|--|
| 65. Victim's Name: (if business, list legal business name) (Last)<br><b>State of Florida</b>                            |  | (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)<br><b>Inspector William "Eddie" Dalton</b> |  | (First)                 |  | (Middle)                  |  | 70. Race/Sex:   |  | 71. Date of Birth:          |  | 72. Telephone Number:<br><b>850-569-1804</b> |  |
| 73. Address: (Street, Apartment Number)<br><b>5563 10<sup>th</sup> Street</b>   |  | (City)<br><b>Malone</b> |  | (State)<br><b>Florida</b> |  | (Zip)<br><b>32445</b>   |  | 74. Secondary Phone Number: |  |  |  |
| 75. Victim Notification of Arrest:<br>NOTIFIED BY: _____ DATE: _____ TIME: _____  |  |                         |  |                           |  | 76. Information Given:<br><input type="checkbox"/> Victim <input type="checkbox"/> Rights Card <input type="checkbox"/> App. Info |  |                             | <input type="checkbox"/> Arrest Info<br><input type="checkbox"/> Domestic<br><input type="checkbox"/> Viol. Info |  |  |

|  |  |   |  |  |  |  |  |   |  |  |  |
|--|--|---|--|--|--|--|--|---|--|--|--|
| 77. Physical Evidence collected in this case?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  | 78. Witness Statements taken in this case?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  | 79. I certify that all of the above information is true and correct to the best of my knowledge and is page 1 of a 2 page affidavit/complaint. |  |  |  |   |  |  |  |
| Evidence Custodian's Name: <b>Daria Henderson</b>  |  | Person responsible for statements: <b>Inspector William Dalton</b>  |  |    |  |  |  | <b>Inspector William Dalton</b><br>Type or print Complainant name |  |  |  |

ID#: 17801

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 # **FLD37275C**

|  |  |                          |   |
|--|--|--------------------------|---|
| 80. Agency Name:<br><b>Florida Department of Corrections</b> | 81. Agency Report Number:<br><b>19-10797</b> | 82. Date/Time of Arrest: | 83. Investigating Officer:<br><b>Inspector William "Eddie" Dalton</b> |
|--|--|--------------------------|---|

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 is Inspector William "Eddie" Dalton of the Office of the Inspector General, Florida Department of Corrections.

Your Affiant has probable cause to believe that in or about May 23, 2019, through June 24, 2019, Correctional Officer Trainee, Christin Graham (COT Graham), violated Florida State Statute related to Unlawful Compensation (16 counts), in violation of § 838.016(1), when COT Graham did receive (16) money transfers to personally benefit COT Graham, for the non-performance of her lawful duty, to wit: the overlooking, permitting, and/or enabling the violation of Florida criminal laws and Departmental disciplinary rules, including engaging in a prohibited personal relationship with Inmate, Robert Powell DC#134924 (AKA "Gott"); and Correctional Officer Trainee, Christin Graham, violated Florida Statutes related to Introduction of Contraband into a Graceville Correctional Facility (5 counts), in violation of § 944.47 (1) (a)(1), when COT Graham did actually and intentionally remove, on four (4) occasions, unauthorized written communication (letters) to her from Inmates Powell and Nathan, and COT Graham did actually and intentionally provide Inmate Powell with an unauthorized hand written letter while confined within the secure perimeter of Graceville Correctional Facility; and Correctional Officer Trainee, Christin Graham did commit the criminal offense of Unlawful Use of a Two-way Communication Device (2 counts), in violation of § 934.215, when COT Graham did utilize her personal cellular telephone, via two calling app numbers, to transmit conversation, text, images and/or video to contraband telephones that were in the possession of Inmate Powell, who was confined within the secure perimeter of Graceville Correctional Facility; and COT Graham did commit the criminal offense of Interference with Prisoners, in violation of § 944.39, when she began a personal relationship with Inmate Powell while Inmate Powell was under the custody of the Florida Department of Corrections, and by doing so has allowed Inmate Powell to violate the rules of the Department including communication through unauthorized means, possession of unauthorized items (contraband cellular telephones, possession of contraband, and other unauthorized items), all without reporting her relationship and Inmate Powell's actions. These unauthorized actions pose a threat to other staff and inmates.

On August 8, 2019, your Affiant, conducted a non-custodial sworn recorded interview with COT Graham at Jackson Correctional Institution. COT Graham indicated during the above listed dates, COT Graham was employed at Graceville Correctional Facility in the capacity of a Correctional Officer Trainee. COT Graham indicated she did receive training upon becoming employed with Graceville Correctional Facility related to policy and procedures, rules and regulations, Florida State Statutes, and that staff offender relationships are strictly prohibited. COT Graham indicated approximately two (2) weeks after becoming employed at Graceville Correctional Facility, she and Inmate Robert Powell became involved in a romantic relationship.

COT Graham indicated she did actually and intentionally remove, on four (4) occasions, unauthorized written communication (letters) to her from Inmates Powell and Nathan, and COT Graham did actually and intentionally provide Inmate Powell with an unauthorized hand written letter inside the secure perimeter of Graceville Correctional Facility while COT Graham was working as a Correctional Officer within the secure perimeter of Graceville Correctional Facility.

COT Graham indicated she was aware that Inmate Powell was in possession of several contraband cellular telephones while housed within the secure perimeter of Graceville Correctional Facility. COT Graham indicated she provided Inmate Powell with her personal telephone numbers [REDACTED] (personal cellular telephone number) [REDACTED] (TextMe calling and texting app) [REDACTED] (Text free texting app) so COT Graham and Inmate Powell could communicate via cellular telephone. COT Graham's communication with the contraband cell phone was confirmed on or about June 16, 2019, when a contraband cellular telephone was seized from an inmate at Graceville Correctional Facility. The seized contraband phone was communicating with the telephone numbers provided by COT Graham.

COT Graham indicated she did use her personal cellular telephone to communicate with Inmate Powell's contraband cellular telephones more than ten times. COT Graham indicated she has received calls, text messages, received pictures, sent pictures and conducted two video chats using an app called "IMO." COT Graham advised one video chat was just normal conversation. COT Graham advised the other video chat was sexually explicit and she and Inmate Powell were both nude and both masturbated to the point of having an orgasm. COT Graham indicated during the phone conversations, text messages, and while having face to face conversation with inmate Powell, he asked COT Graham to bring in pills, cigarettes, and to meet known associates of Inmate Powell's to pick up contraband items to introduce into the secure perimeter of Graceville Correctional Facility. COT Graham also indicated Inmate Powell advised she could hide the contraband in her bra or in her vagina. COT Graham advised she never introduced any such contraband into Graceville Correctional Facility.

COT Graham indicated she did provide Inmate Powell with her personal Cashapp (Kiara Locke) so Inmate Powell's family or known associates of Inmate Powell's could send COT Graham money via CashApp name Kiara Locke. COT Graham indicated she did receive money transactions via Square, CashApp name Kiara Locke from relatives or known associates of Inmate Powell's.

Records were obtained from Square Inc, the marketing company of the money transfer app CashApp, for the name Kiara Locke. Square records confirm Christin Graham, date of birth [REDACTED] telephone number, [REDACTED] address [REDACTED], [REDACTED] and email address, christinpalgemarie@gmail.com is the account holder associated with the account name Kiara Locke.

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Square records confirm, COT Graham received nineteen (19) money transfers between May 23, 2019, through June 24, 2019. Based on Square records that were provided, your Affiant was able to identify that sixteen (16) of the nineteen (19) CashApp transactions, totaling one thousand five hundred ninety-five dollars (\$1595.00) were received from inmates, inmates' family, or known associates of inmate Powell.

During the course of this investigation sworn testimony was obtained from cooperating inmates. Their testimony indicated money transfers to COT Graham's CashApp were payments for various purposes including but not limited to, the purchase and use of contraband cellular telephones, payment for protection within the facility, or for circumventing the authorized procedure for inmates to purchase canteen.

Your Affiant, respectfully submits probable cause has been established that Correctional Officer Trainee, Christin Graham while employed as a Correctional Officer with Graceville Correctional Facility, did commit the criminal violation, Unlawful compensation or reward for official behavior (16 counts), in violation of § 838.016 (1), by accepting monetary gains directly related to her prohibited relationship with inmates while working as a Correctional Officer, to wit: overlooking, permitting, and/or enabling the violation of Florida criminal laws and Departmental disciplinary rules, including engaging in a prohibited personal relationship with an inmate.

Your Affiant, submits probable cause is established that Correctional Officer Trainee, Christin Graham did commit the criminal violation, related to Introduction of Contraband into Graceville Correctional Facility (5 counts), in violation of § 944.47 (1) (a)(1), when COT Graham did actually and intentionally remove, on four (4) occasions, unauthorized written communication (letters) to her from Inmates Powell and Nathan, and COT Graham did actually and intentionally provide inmate Powell with an unauthorized hand written letter inside the secure perimeter of Graceville Correctional Facility.

Your Affiant, submits probable cause has been established that Correctional Officer Trainee, Christin Graham did commit the criminal violation, related to Unlawful Use of a Two-way Communication Device (2 counts), in violation of § 934.215, when COT Graham did utilize her personal cellular telephones, via two calling app to transmit conversation, text, images and/or video to contraband telephones that was in the possession of inmate Powell, who was confined within the secure perimeter of Graceville Correctional Facility.

Your Affiant, further submits COT Graham did commit the criminal offense of interference with Prisoners, in violation of § 944.39, when she began a personal relationship with inmate Powell while Inmate Powell was under the custody of the Florida Department of Corrections, and by doing so has allowed inmate Powell to violate the rules of the Department including communication through unauthorized means, possession of unauthorized items (contraband cellular telephones, possession of contraband, and other unauthorized items), all without reporting her relationship and inmate Powell's actions. These unauthorized actions pose a threat to other staff and inmates.

Your Affiant, requests an arrest warrant be issued for Christin Graham, W/F DOB- [REDACTED] address [REDACTED] [REDACTED] [REDACTED] for sixteen (16) counts of violation of § 838.016(1), the laws relating to unlawful compensation by a public servant, five (5) counts of violation of § 944.47 (1) (a)(1), the laws relating to the introduction of contraband communication, and two (2) counts of violation of § 934.215, the laws relating to the unlawful use of a two-way communication device, one (1) count of interference with Prisoners, in violation of § 944.39.

85. The undersigned, being duly sworn, states that the foregoing information contained in an affidavit consisting of 3 pages is true and correct to the best of his/her knowledge

Sworn to and subscribed before me this 16<sup>th</sup> day of JUNE, 2020

*William Dalton*  
Signature of Officer/Complainant

*William Dalton*  
Officer/Complainant's Name (Printed)

*OTG*  
ID Number

*[Signature]*  
Signature of Person Administering Oath

Personally Known  Other Identification

Seal ID Type

87. Adult's Relation to Juvenile Defendant:  Parent  Legal Guardian  Other

88. Adult's Name: (Last) (First) (Middle)

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):