| ☐ Adult Def | ☑ PC Arrest |
|----------------|---------------------------|
| ☐ Juvenile Def | \square Application for |
| | Warrant/Capia |

Custodian's

responsible

AFFIDAVIT – COMPLAINT

| Clerk's Case No. | |
|------------------|--|
| SA Case No.(s) | |

Type or print Complainant name

| PAGE 01 of | Warra - | ant/Capias | | | | | | | | Agency ORI # | # FL037275C | |
|--|---|-------------------|------------|--------------------------|---|--|------------------------------------|--|----------------------------|---------------------------------|---|--------|
| | | | | - | 2. Agency Report Number: 21-11549 | | 3. Charge ☐ ☐ Felony | | meanor | | inance Type: (If applicable) unicipal | |
| | 4. Date/Time of Offense: 5. Date/Time of Arrest: 07/30/2021 0945 hrs. 5. Date/Time of Arrest: 08/02/2021 070 hrs. | | | | 6. Arresting Officer: Inspector James K. Malon | | Malone | 7. Investigating Officer: | | | | |
| 8. Defendant's Name: (Last) Whitfield | | | • | (First) Devin | | | iiddle) | | ALIAS | 9. OBTS: | | |
| 10. Race/Sex: B/M | | | | ence Type: | ☐ Florida | | | oon Seized 14. Controlled Substance Seizer TYPE & QUANTITY: | | | d: ☐ Yes ☑ No | |
| 15. Height: 5"09" | 16. Weight: 131 | 17. Eye C Brov | Color: 18. | Hair Color: Black | | | │ | ical features: (Location, type & description) | | | | |
| 20. Driver's Licen: | se Number/State: | : | 21. Social | Security Num | | | dential Teleph)-983-580 | • | | | phone: | |
| 24. Address: (Stre 5850 East | eet, Apartment Nu t Milton Roa | | | (City) Milton | | | (State) FL | | | (Zip) 32583 | | |
| 25. Defendant's N | lame: (Last) | | | (First) | | | (Middle) | | | ALIAS | 26. OBTS: | |
| 27. Race/Sex: | 28. Date of Birth | h: | 29. Reside | ence Type: | ☐ Florida | tate | 30. Weap | oon Seized 31. Controlled Substance Seized: [TYPE & QUANTITY: | | | d: Yes No | |
| 32. Height: | 33. Weight: | 34. Eye C | | Hair Color: | 36. Scars, marks | | | | (Location, type | & description) | | |
| 37. Driver's Licen | nse Number/State: | : | 38. Social | Security Num | curity Number: 39. Resid | | | hone: | | 40. Business Telephone: | | |
| 41. Address: (Stre | et, Apartment Nu | umber) | | | (City) | | | (Stat | e) | | (Zip) | |
| 42. Defendant's N | Name: (Last) | | | (F | First) | | (Mi | iddle) | | ALIAS | 43. OBTS: | |
| 44. Race/Sex: | 44. Race/Sex: 45. Date of Birth: 46. Residen | | | | ice Type: | | | on Seized | | Illed Substance Seized: Yes No | | |
| 49. Height: | 50. Weight: | 51. Eye C | Color: 52. | y ☐ Count Hair Color: | ty Out of Sta 53. Scars, marks | | ☐ Yes unique physic | ☐ No cal features: | (Location, type | & description) | | |
| 54. Driver's Licen | se Number/State: | : | 55. Social | Security Num | nber: | 56. Resid | dential Teleph | elephone: 57. Business Telephone: | | | | |
| 58. Address: (Stre | eet, Apartment Nu | umber) | | | (City) | <u>I</u> | | (Stat | e) | l | (Zip) | |
| 59. Charge Descri | | forceme | nt Officer | , | | | | | or Ordinance (07(2)(b) | Number: | | ⊠ F.S. |
| Battery on a Law Enforcement Officer 61. Charge Description: (# 1) | | | | | | | 62. Statute or Ordinance Number: | | | | | |
| 63. Charge Description: (# 1) | | | | | | □ Ord. □ F.S. □ Ord. □ Ord. □ F.S. □ Ord. □ 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) (Middl | | | | | | (Middle) | 7 | 0. Race/Sex | 71. Date of Birth: | 72. Telephone Numb | | |
| 73. Address: (Street, Apartment Number) (City) (State) 5850 East Milton Road Milton FL | | | | | (Zip) 74. Secondar 32583 | | | 74. Secondary Phone | Number: | | | |
| 75. Victim Notification of Arrest: NOTIF ED BY: DATE: TIME: | | | | | 76. Information Given: ☐ Arrest Info Victim Domestic ☐ Rights Card ☐ App. Info ☐ Viol. Info | | | | | | | |
| 77. Physical Evidence collected in this case? 78. Witness Statements taken in this case? 79. I certify that all of the above information is true and correct to the best of my knowledge | | | | | | | dge | | | | | |
| Evidono | and is page 01 of a 2 page affidavit/complaint. | | | | | | | | | | | |

Officer/Complainant Signature

| | ts: Insp. James K. Maloney | | | |
|---|---|--|--|--|
| PAGE 01 MUST HAVE PAGE 02 (MORE IF REQUIRED) TO BE | A VALID AFFIDAVIT/COMPLAIN | Г | | |
| ☐ Adult Def ☐ PC Arrest | | | Clerk's Case N | 0 |
| ☐ Juvenile Def ☐ Application for | AFFIDAVIT | - COMPLAIN | SA Case No. | (e) |
| Warrant/Capias | (PROBABLE C | AUSE NARRATIVE | • | |
| | | | | 1# <u>FL037275C</u> |
| 80. Agency Name: FDC/Office of the Inspector General | 81. Agency Report Number: 21-11549 | 82. Date/Time of Arrest: 08/02/2021 0700 hrs. | 83. Investigating Officer: Inspector James | K. Maloney |
| 84. NARRATIVE OF THE FACTUAL BASIS FOR PROBABLE CAI did commit the violations of law as stated above and the factu | | | easonable grounds to believe t | hat the heretofore named defendant |
| Your Affiant is Law Enforcement Inspectorrections. | ctor James K. Malon | ey of the Officer of th | e Inspector General | , Florida Department of |
| Your Affiant has probable cause to believe Offense of Battery on a Law Enforcement | | | Devin Whitfield, DC | #B50276, did commit the |
| In sworn testimony, obtained on July 30, | 2021. Correctional Of | ficer (v | ctim) indicated | |
| | | (V | | |
| | | | | |
| | | | | |
| | | | | |
| In sworn testimony obtained on July 30, 2 Rosa Correctional Institution on July 30, Officer on all fours, and then proc Whitfield standing by Officer was warmed ways ground. | 2021, at the Caustic ceeded to assist. Whil | building, when he heard e running towards Offic | d a "loud thud", he t er Sergeant | • |
| Distance of Office and | | .1 | | |
| Photographs of Officer were obtained | ained and are describe | ed as | | |
| On July 30, 2021, Inmate Devin Whitfield remembered being escorted by a Hispani advised there were other people present, on, he didn't know where he was, he how the ground. Inmate Whitfield and did not wish to answer any more que | c, male officer from C that I could ask them ad been moved a lot then advised he rem | Dormitory to in front of Inmate Whitfield then a did not remember wh | D-Dormitory, denied Idvised he did not rel at happened, and di | d striking the officer, and member what was going |
| Digital images were obtained on Inmate | Whitfield's person, | | | |
| Your Affiant respectfully submits probal grounds of the Santa Rosa Correctional Enforcement Officer, in violation of F.S.S | Institution, Santa Ros | | | |
| 85. The undersigned, being duly sworn, states that the foregoi affidavit consisting of 2 pages is true and correct to the be | _ | Sworn to and subscribed befo | ore me this day of | , 20 |
| | | Signature of Person Ad | | |
| Signature of Officer/Complainant | | ☐ Personally Known ☐ Ott | ner Identification ID T | уре |
| | | Seal | | |
| 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) (Ci | ty) (State |) (Zip) 90. F | esidential Phone: | 91. Business Phone |
| 92. Notified By: (Name) | | 93. D | late/Time: | 94. Notification Method: |
| 95. Law Enforcement Disposition of Juvenile Contact: | Transferred to | Released to | Processed within the ag | ☐ Person ☐ Telephone |
| (Check one and complete release data) | | HRS Intake Officer, not detained | to other than HRS | and rolledge |