



Agency ORI Number
FL0530000

Polk County

Winter Haven, FL

INCIDENT NUMBER
220033846

JUVENILE

ADULT

BOOKING #

2228174

OBITS#

IN CIRCUIT/COUNTY COURT IN THE TENTH JUDICIAL CIRCUIT IN AND FOR POLK COUNTY,
FL

SUBMITTING MEMBER MARCELLO,ROBERTO MEMBER # 8567

DATE /TIME OF ARREST/INCIDENT 8/14/2022 16:00:00

LOCATION OF INCIDENT 10800 EVANS RD POLK CITY

NOTICE TO APPEAR COMPLAINT AFFIDAVIT ARREST REPORT

CITY OF POLK CITY(Unincorporated), COUNTY OF POLK, STATE OF FLORIDA

RIGHT THUMB PRINT

THE UNDERSIGNED AFFIANT SWEARS SHE/HE HAS JUST AND REASONABLE GROUNDS TO BELIEVE THAT ON 08/14/22 AT

APPROXIMATELY 15:31:00 IN THE VICINITY OF POLK CITY POLK COUNTY, FLORIDA

BAILEY,JESSICA PEARL ALIAS

LAST FIRST MIDDLE

ADDRESS 2009 BARTLEY ST N HAINES CITY, FL 33844 PHONE (336)934-1594

RACE/SEX B/F DOB 12/25/1987 HT 504 WT 145 EYE BRO HAIR BLK COMP BUILD

SPEECH SCARS POB UNKNOWN, US MARITAL STATUS

DL# B400435879650 ST FL SS# OCCUPATION

EMPLOYER/SCHOOL PHONE

JUV-PARENTS PHONE n/a

NOTICE TO APPEAR/OF APPOINTMENT

I AGREE TO APPEAR IN COURT/JAC AT 20 AT AM/PM TO ANSWER THE CHARGE(S) IN THIS COMPLAINT OR TO PAY THE PRESCRIBED FINE FOR THIS OFFENSE. I UNDERSTAND THAT A WILFUL FAILURE TO APPEAR WILL RESULT IN A WARRANT FOR MY ARREST AND MAY BE A NEW OFFENSE (DO NOT BE LATE).

Defendant/Violators Signature Parent/Guardian Signature Date

COMMITTED THE OFFENSE(S) OF:

CANNABIS POSSESS Not More Than 20 grams FSS/FAC/CO 893.13(6)(B) Counts: 1 LEVEL/DEGREE M1

Smuggle Contraband Prison-Controlled Subst FSS/FAC/CO 944.47 (1)(A)4 Counts: 1 LEVEL/DEGREE F2

AFFIDAVIT CONTINUATION

Sheriff's



Office

FORM #9013A - Revised 05/27/10

Agency ORI Number
FL0530000

Polk County

Winter Haven, FL

INCIDENT NUMBER
220033846

CO-DEFENDANT:

VICTIM/WITNESS:

Victim:	STATE OF FLORIDA	/					N/A
Witness:	FERNANDEZ,LUIS A	10800 EVANS RD	POLK CITY	FL	33868	(863)640-2533	03/21/68

PROBABLE CAUSE:

ON 08/14/2022 at approximately 1602 hours, I responded to Polk Correctional Institute located at 10800 Evans Rd. Polk City, Fl. Upon arrival I made contact with Inspector Luis Fernandez with the Florida Department of Corrections, Office of Inspector General ID# 145650 and he stated the following

"I was working a Contraband Interdiction Unit (CIU) detail on the above date and time at Polk Correctional Institution. I was informed that a female, identified later as Jessica P. Bailey (Ms. Bailey) via North Carolina Driver License, had contraband inside her vagina after she entered the secured compound at Polk CI for visitation.

I conducted a sworn interview with Briana Davis (Officer Davis), Senior Probation Officer who is also dual certified as Correction Officer. Officer Davis advised the following via recorded sworn statement; At approximately 10:44 am, she was assigned to the front desk for female visitor searches. Visitor Jessica Bailey went into the search room and while conducting a search of Ms. Bailey, Senior Probation Officer Briana Davis went all the way up between Ms. Bailey's leg and felt a hard object. Officer Davis stated Ms. Bailey advised that it was a tampon and got very nervous. After Officer Davis asked again if she was hiding something, Ms. Bailey [REDACTED]. Ms. Bailey then pulled the object out of between her legs and handed it to Officer Davis. Officer Davis secured the object and called the Officer In Charge (OIC) Captain Cody Finley who then called me.

I conducted a voice recorded sworn interview with Ms. Bailey and post Miranda she advised that [REDACTED]

I observed a plastic bag containing loose tobacco leaves and inside the tobacco leaves, I observed another plastic bag containing what appeared to be Cannabis. Captain Christopher Clifton from the CIU unit was present and assisted by testing the green leafy substance which yielded a positive result for Cannabis.

The package was examined and contained a green leafy substance. The substance weighed 8.9 grams and field tested positive for Cannabis.

Your Affiant respectfully submits probable cause has been established that the Defendant, Jessica Bailey, did in the County of Polk, and the State of Florida, commit the criminal offense of Introduction of Contraband into a State Correctional Institution, in violation of F.S. 944.47(1)(a)(4), and Possession of Cannabis which is in violation of F.S. 893.13(6)(b)."

Based on Inspector Louis Statements I placed Bailey under arrest and transported her to the Sheriff's processing Center without incident.

SWORN TO AND SUBSCRIBED BEFORE ME, THE UNDERSIGNED AUTHORITY, THIS 14 DAY OF August 2022

This affidavit was electronically signed

BIDDICK,KAYLA 23721

MARCELLO,ROBERTO 8567

DEPUTY CLERK/NOTARY PUBLIC/LEO

AFFIANT

Adult Def PC Arrest
 Juvenile Def Application for
Warrant/Capias

AFFIDAVIT - COMPLAINT

Clerk's Case No. _____

SA Case No.(s) _____

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2228174

Agency ORI # FL037275C

1. Agency Name: Office of Inspector General - FDC		2. Agency Report Number: 22-12578		3. Charge Type: <input checked="" type="checkbox"/> Felony <input checked="" 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: 08/14/2022 @ 10:44 A.M.		5. Date/Time of Arrest: 08/14/2022 @ 11:20 A.M.		6. Arresting Officer: Inspector Luis Fernandez		7. Investigating Officer: Inspector Luis Fernandez	

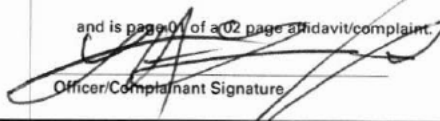
8. Defendant's Name: (Last) Bailey			(First) Jessica			(Middle) Pearl			ALIAS			9. OBTS:		
10. Race/Sex: B/F		11. Date of Birth: 12/25/1987		12. Residence Type: <input type="checkbox"/> Florida <input type="checkbox"/> City <input type="checkbox"/> County <input checked="" type="checkbox"/> Out of State			13. Weapon Seized <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		14. Controlled Substance Seized: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No TYPE & QUANTITY: 8.9 grams of suspected marijuana					
15. Height: 5'2"		16. Weight: 130		17. Eye Color: Brown		18. Hair Color: Black		19. Scars, marks, tattoos, unique physical features: (Location, type & description)						
20. Driver's License Number/State: 022972589 / NC				21. Social Security Number: [REDACTED]				22. Residential Telephone: 336-934-1594			23. Business Telephone:			
24. Address: (Street, Apartment Number) 1428 Douglas Street				(City) Winston-Salem				(State) North Carolina			(Zip) 27105			

25. Defendant's Name: (Last)			(First)			(Middle)			ALIAS			26. OBTS:		
27. Race/Sex:		28. Date of Birth:		29. Residence Type: <input type="checkbox"/> Florida <input type="checkbox"/> City <input type="checkbox"/> County <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"/> Florida <input type="checkbox"/> City <input type="checkbox"/> County <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) INTRODUCTION OF CONTRABAND					60. Statute or Ordinance Number: 944.47(1)(a)(4)					<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> Ord.	
63. Charge Description: (# 1) POSSESSION OF A CONTROLLED SUBSTANCE (CANNABIS)					64. Statute or Ordinance Number: 893.13(6)(b)					<input checked="" 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: <input type="checkbox"/> Arrest Info <input type="checkbox"/> Victim <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:		78. Witness Statements taken in this case? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Person responsible for statements: Inspector Luis Fernandez		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 02 page affidavit/complaint.  Officer/Complainant Signature		Inspector Luis Fernandez 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) _____

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Agency ORI # FL037275C

80. Agency Name: Office of Inspector General - FDC	81. Agency Report Number: 22-12578	82. Date/Time of Arrest: 08/22/2022 11:00AM	83. Investigating Officer: Inspector Luis Fernandez
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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 is Law Enforcement Inspector Luis Fernandez with the Florida Department of Corrections, Office of Inspector General.

Your Affiant was working a Contraband Interdiction Unit (CIU) detail on the above date and time at Polk Correctional Institution. I was informed that a female, identified later as Jessica P. Bailey (Ms. Bailey) via North Carolina Driver License, had contraband inside her vagina after she entered the secured compound at Polk CI for visitation.

I conducted a sworn interview with Briana Davis (Officer Davis), Senior Probation Officer who is also dual certified as Correction Officer. Officer Davis advised the following via recorded sworn statement; At approximately 10:44 am, she was assigned to the front desk for female visitor searches. Visitor Jessica Bailey went into the search room and while conducting a search of Ms. Bailey, Senior Probation Officer Briana Davis went all the way up between Ms. Bailey's leg and felt a hard object. Officer Davis stated Ms. Bailey advised that it was a tampon and got very nervous. After Officer Davis asked again if she was hiding something, Ms. Bailey [REDACTED] Ms. Bailey then pulled the object out of between her legs and handed it to Officer Davis. Officer Davis secured the object and called the Officer In Charge (OIC) Captain Cody Finley who then called me.

I conducted a voice recorded sworn interview with Ms. Bailey and post Miranda she advised that [REDACTED]

I observed a plastic bag containing loose tobacco leaves and inside the tobacco leaves, I observed another plastic bag containing what appeared to be Cannabis. Captain Christopher Clifton from the CIU unit was present and assisted by testing the green leafy substance which yielded a positive result for Cannabis.

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Your Affiant respectfully submits probable cause has been established that the Defendant, Jessica Bailey, did in the County of Polk, and the State of Florida, commit the criminal offense of Introduction of Contraband into a State Correctional Institution, in violation of F.S. 944.47(1)(a)(4), and Possession of Cannabis which is in violation of F.S. 893.13(6)(b).

All supporting documents referred to in this affidavit will be available for judicial review and will be further explained in your affiant's report of investigation.

<p>85. The undersigned, being duly sworn, states that the foregoing information contained in an affidavit consisting of 02 pages is true and correct to the best of his/her knowledge</p> <div style="text-align: center;"> Signature of Officer/Complainant Inspector Luis Fernandez Officer/Complainant's Name (Printed) </div> <div style="text-align: center; margin-top: 10px;"> #145650 ID Number </div>	<p>Sworn to and subscribed before me this <u>14</u> day of <u>August</u>, 20<u>22</u></p> <p style="text-align: center;"><u>D SMARCELLO PCSO 8567</u></p> <p style="text-align: center;">Signature of Person Administering Oath <input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Other Identification</p> <p style="text-align: center;">Seal ID Type</p>
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87. Adult's Relation to Juvenile Defendant: <input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> 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: <input type="checkbox"/> Person <input type="checkbox"/> Telephone
95. Law Enforcement Disposition of Juvenile Contact: (Check one and complete release data)	
<input type="checkbox"/> Transferred to Secure Detention	<input type="checkbox"/> Released to HRS Intake Officer, not detained
<input type="checkbox"/> Processed within the agency and released to other than HRS	
Release Date: _____ Release Time: _____ Released to (Name): _____	