### PC Arrest Adult Def □ Juvenile Def □ Application for

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

**AFFIDAVIT - COMPLAINT** Warrant/Capias PAGE 01 of 3

<ol> <li>Agency Name:</li> </ol>				T 0 0							FL03/2/3C	
	Department			19-03			3. Charge Type:  ☑ Felony ☐ N	lisdemear	nor 🗖 Misc w/associ	3a. Ordi demeanor lated felony   Mur	inance Type: (If applicable) nicipal ☐ County	
	& 11/03/18	121	7Time of Arrest			sting Officer:			7. inve	estigating Officer: spector Mat		
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Evidence: State Cell issue cell phone Custodian's Name: Inspector Matthew Ryan Person Responsible for statements: Inspector Matthew Ryan Matthew R. Ryan Type or print Complainant name PAGE 01 MUST HAVE PAGE 02 (MORE IF REQUIRED) TO BE A VALID AFFIDAVIT/COMPLAINT

 ■ Adult Def
 ■ PC Arrest
 □ Juvenile Def
 □ Application for Warrant/Capias

# AFFIDAVIT - COMPLAINT (PROBABLE CAUSE NARRATIVE)

 01.0 11- (-)
SA Case No.(s)

Clerk's Case No.

80. Agency Name:
Office of the Inspector General,
Florida Department of Corrections

81. Agency Report Number: 19-03556 82. Date/Time of Arrest: Pending 83. Investigating Officer:

Matthew R. Ryan
Inspector, OIG FL DOC

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 Matthew R. Ryan of the Office of Inspector General (OIG), Florida Department of Corrections.

Your affiant has probable cause to believe that between October 23, 2018, and November 3, 2018, FL DOC Correctional Officer Kevin Long made arrangements to provide inmates at the Sumter Correctional Institution (SCI) alcohol and cellular phones for electronic money payments and did commit two (2) counts of Unlawful Compensation or Reward for Official Behavior in violation of FSS 838.016, and, to facilitate his illegal activity, additionally committed two (2) counts of Unlawful Use of a Two-Way Communication Device in violation of FSS 934.215.

On February 27, 2019, SCI senior staff notified the OIG that business with Correctional Officer Kevin Long to introduce contraband into the SCI Work Camp for the purpose of distributing that contraband to other inmates.

Based on the evidence obtained from subpoenas and interviews, it has been proven that Officer Long received electronic transfer (Western Union and RIA Financial) money payments to introduce illegal contraband; alcohol and cellular phones into SCI while he was on duty as a Correctional Officer employed with the Florida Department of Corrections. Two transactions took place in Sumter County where Officer Long received these payments totaling \$190.00. In a sworn interview, Inmate Harrington stated Officer Long received these payments for distributing alcohol and cell phones at the SCI Work Camp. The payments to Officer Long were conducted via electronic money transfers arranged by Ms. Brandy Walls. In a sworn interview, Ms. Walls confirmed she made payments to Officer Long at Inmate Harrington's direction.

Documentation provided as a result of issued subpoenas substantiated Inmate Harrington and Ms. Walls' statements, verifying the amounts and dates of the payments made to Officer Long; \$150.00 via Western Union, and \$40.00 via RIA Financial. The coordination of these payments were between Inmate Harrington, Ms. Walls, and Officer Long via cellular phone communications (phone calls and text messages). Copies were provided of the text messaging between Officer Long, Inmate Harrington, and Ms. Walls. Cellular phone service providers Verizon and T-Mobile provided documentation in response to issued subpoenas that confirmed the communications arranging this illegal activity.

Additional details are included in the criminal case summary report.

Your affiant respectfully submits that probable cause has been established that Correctional Officer Kevin Long, while a Correctional Officer at the Sumter Correctional Institution, did intentionally and unlawfully commit 2 counts of Unlawful Compensation or Reward for Official Behavior, FSS 838.016, and of 2 counts of Unlawful Use of a Two-Way Communication Device, FSS 934.215.

85. The undersigned, being duly swom, states that the for afficient consisting of 2 pages is true and correct to the	egoing information contained in a le best of his/her knowledge	n	Syorn to and subscribed	H	December 2019 2:28pm
Signature of Office Complainant Inspector Mathew R. Ryan	84194		Signature of Pe	erson Administering Oath	1000
Officer/Complainant's Name (Printed)	ID Number		Seal		ID Туре
87. Adult's Relation to Juvenile Defendant:		88. Ad	lult's Name: (Last)	(First)	(Middle)
☐ Parent ☐ Legal Guardian ☐ Other					,
89. Address: (Street, Apartment Number)	(City)	(State)	(Zip)	90. Residential Phone:	91. Business Phone
92. Notified By: (Name)				93. Date/Time:	94. Notification Method:
95. Law Enforcement Disposition of Juvenile Contact: (Check one and complete release data)	Transferred to ☐ Secure Detention		ased to Intake Officer, not detained	Processed within the age	Person Telephone
Release Date: Release Time:	Released to (Name):				

## PC Arrest Adult Def

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

	ef D Application		AFFIL	JAVII .	- COMPLA	THALL	SA Case No.(s)	
PAGE 01 of 3	Warrant	Capias					ORI#	FL037275C
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77. Physical Evidence collected in this case?

☑ Yes ☐ No 78. Witness Statements taken in this case?

☑ Yes ☐ No ertify hat all of the above information is true and correct to the best of my knowledge page 01 of a 03 page affidavit/complaint. Evidence: State Cell issue cell phone Person Responsible for statements: Inspector Matthew Ryan Custodian's
Name: Inspector Matthew Ryan Matthew R. Ryan Type or print Complainant name

PAGE 01 MUST HAVE PAGE 02 (MORE IF REQUIRED) TO BE A VALID AFFIDAVIT/COMPLAINT

 Adult Def PC Arrest □ Juvenile Def □ Application for Warrant/Capias

(Check one and complete release data)

Release Time:

Release Date:

## AFFIDAVIT – COMPLAINT (PROBABLE CAUSE NARRATIVE)

SA Case No.(s)

Clerk's Case No.

80. Agency Name: Office of the Inspector General, Florida Department of Corrections

81. Agency Report Number: 19-03556

82. Date/Time of Arrest: Pendina

83. Investigating Officer: Matthew R. Ryan Inspector, OIG FL DOC

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 Matthew R. Ryan of the Office of Inspector General (OIG), Florida Department of Corrections.

Your affiant has probable cause to believe that between October 23, 2018, and November 3, 2018, FL DOC Correctional Officer Kevin Long made arrangements to provide inmates at the Sumter Correctional Institution (SCI) alcohol and cellular phones for electronic money payments and did commit two (2) counts of Unlawful Compensation or Reward for Official Behavior in violation of FSS 838.016, and, to facilitate his illegal activity, additionally committed two (2) counts of Unlawful Use of a Two-Way Communication Device in violation of FSS 934.215.

On February 27, 2019, SCI senior staff notified the OIG that conducted business with Correctional Officer Kevin Long to introduce contraband into the SCI Work Camp for the purpose of distributing that contraband to other inmates.

Based on the evidence obtained from subpoenas and interviews, it has been proven that Officer Long received electronic transfer (Western Union and RIA Financial) money payments to introduce illegal contraband; alcohol and cellular phones into SCI while he was on duty as a Correctional Officer employed with the Florida Department of Corrections. Two transactions took place in Sumter County where Officer Long received these payments totaling \$190.00. In a sworn interview, Inmate Harrington stated Officer Long received these payments for distributing alcohol and cell phones at the SCI Work Camp. The payments to Officer Long were conducted via electronic money transfers arranged by Ms. Brandy Walls. In a sworn interview, Ms. Walls confirmed she made payments to Officer Long at Inmate Harrington's direction.

Documentation provided as a result of issued subpoenas substantiated Inmate Harrington and Ms. Walls' statements, verifying the amounts and dates of the payments made to Officer Long; \$150.00 via Western Union, and \$40.00 via RIA Financial. The coordination of these payments were between Inmate Harrington, Ms. Walls, and Officer Long via cellular phone communications (phone calls and text messages). Copies were provided of the text messaging between Officer Long, Inmate Harrington, and Ms. Walls. Cellular phone service providers Verizon and T-Mobile provided documentation in response to issued subpoenas that confirmed the communications arranging this illegal activity.

Additional details are included in the criminal case summary report.

□ Secure Detention

Released to (Name):

Your affiant respectfully submits that probable cause has been established that Correctional Officer Kevin Long, while a Correctional Officer at the Sumter Correctional Institution, did intentionally and unlawfully commit 2 counts of Unlawful Compensation or Reward for Official Behavior, FSS 838.016, and of 2 counts of Unlawful Use of a Two-Way Communication Device, FSS 934 215

85. The undersigned, being duly swom, states that the fore affidivit consisting of 2 pages is true and correct to the Signature of Officer Complainant  Signature of Officer Complainant	Syom to and subscribed before me this day of				
Inspector Mathew R. Ryan	84194				
Inopositor matricer It. Ryan	04134				
Officer/Complainant's Name (Printed)	ID Number		01		ID Type
			Seal		
87. Adult's Relation to Juvenile Defendant:		88. Ac	fult's Name: (Last)	(First)	(Middle)
☐ Parent ☐ Legal Guardian ☐ Other				(· ·····,	(minute)
89. Address: (Street, Apartment Number)	(City)	(State)	(Zip)	90. Residential Phone:	91. Business Phone
92. Notified By: (Name)				93. Date/Time:	94. Notification Method:
95. Law Enforcement Disposition of Juvenile Contact:	Tanadamada		- 11		☐ Person ☐ Telephone
Charles Disposition of Juvenile Contact;	Transferred to	Relea	ased to	Processed within the age	ncv and released

☐ HRS Intake Officer, not detained

Processed within the agency and released

☐ to other than HRS

### Adult Def PC Arrest □ Juvenile Def □ Application for Warrant/Capias

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

AFFIDAVIT - COMPLAINT PAGE 01 of 3 ORI# FL037275C 1. Agency Name: 2. Agency Report Number: 3. Charge Type:

☑ Felony ☐ Misdemeanor ☐ Misdemeanor

□ Misdemeanor 3a. Ordinance Type: **Florida Department of Corrections** 19-03556 (If applicable)

Municipal County w/associated felony 4. Date/Time of Offense: Daje/Time of Arrest: 6. Arresting Officer: Investigating Officer 10/23/18 & 11/03/18 N/A **Inspector Matthew Ryan** 2019 8. Defendant's Name: (Last) (First) (Middle) ALIAS 9. OBTS: Long Kevin 10. Race/Sex: 11. Date of Birth: 12. Residence Type: 13. Weapon Seized 14. Controlled Substance Seized: Yes ⊠ No W/M ☑ Florida TYPE & QUANTITY: County
18. Hair Color: N/A □ Out of State □ Yes ☑ No □
19. Scars, marks, tattoos, unique physical features: (Location, type & description) ☐ City 15 Height: 16. Weight: 17. Eye Color: 5'6" Unk Unk Unk Unk 20. Driver's License Number/State: ial Security Numb 22. Residential Telephone: 23. Business Telephone: N/A 352-569-6100 24. Address: (Street, Apartment Number) 25. Defendant's Name: (Last) (First) (Middle) ALIAS 26. OBTS: N/A 27. Race/Sex: 28. Date of Birth: 29. Residence Type: 30. Weapon Seized 31. Controlled Substance Seized: ☐ Yes □ No ☐ Florida TYPE & QUANTITY: ☐ City □ County Out of State Out of State Yes No

36. Scars, marks, tattoos, unique physical features: (Location, type & description) 32. Height: 33. Weight: 34. Eve Color: 35. Hair Color: 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: N/A 44. Race/Sex: 45. Date of Birth: 46. Residence Type: 47. Weapon Seized 48. Controlled Substance Seized: Yes □ No ☐ Florida TYPE & QUANTITY: ☐ City ☐ County 52. Hair Color: Ut of State No Source, marks, tattoos, unique physical features: (Location, type & description) 49. Height: 50. Weight: 51. Eve Color: 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) 60. Statute or Ordinance Number 2 Counts Unlawful Compensation or Reward for 838.016 ☑ F.S. Official Behavior Ord. 61. Charge Description: (# 1) 62. Statute or Ordinance Number: 2 Counts of Unlawful Use of a Two-Way 934.215 XI F.S. **Communication Device** Ord. 63. Charge Description: (# 1) 64. Statute or Ordinance Number: □ F.S. ☐ Ord. 65. Victim's Name: (If business, list legal business name) (Last) (Middle) 66. Race/Sex 67 Date of Birth: 68. Telephone Number: STATE OF FLORIDA FDOC N/A N/A 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: N/A N/A N/A N/A 73. Address: (Street, Apartment Number) (State) (Zip) 74. Secondary Phone Number: **Sumter Correctional** Bushnell FL 33513 9544 County Rd 476B 75. Victim Notification of Arrest: 76. Information Given: ☐ Arrest Info Domestic NOTIFIED BY: DATE: TIME: ☐ Rights Card ☐ Viol. Info 77. Physical Evidence collected in this case? 78. Witness Statements taken in this case? the above information is true and correct to the best of my knowledge ✓ Yes a 03 page affidavit/complaint.

Evidence: State Cell issue cell phone Person Custodian's Responsible for statements: Inspector Matthew R. Ryan Name: Inspector Matthew Ryan **Matthew Ryan** onature Type or print Complainant name PAGE 01 MUST HAVE PAGE 02 (MORE IF REQUIRED) TO BE A VALID AFFIDAVIT/COMPLAIN

■ Adult Def
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Office of the Inspector General,
Florida Department of Corrections

81. Agency Report Number: 19-03556 82. Date/Time of Arrest: Pending 83. Investigating Officer:

Matthew R. Ryan
Inspector, OIG FL DOC

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85. The undersigned being duly sworn estates that the for	ocolog information contained to a						
85. The lindersigned, being duly swom, states that the foregoing information contained in an afficient consisting of 2 pages is true and correct to the best of his/her knowledge  Signalurant Officer Complainant			Syform to and subscribed before me this				
Inspector Mathew R. Ryan	84194				-		
Officer/Complainant's Name (Printed)	ID Number		Seal		ID Type		
87. Adult's Relation to Juvenile Defendant:		88. Ad	lult's Name: (Last)	(First)	(Middle)		
Parent Legal Guardian Other  89. Address: (Street, Apartment Number)	(City)	(State)	(Zip)	90. Residential Phone:	91. Business Phone		
92. Notified By: (Name)				93. Date/Time:	94. Notification Method:		
95. Law Enforcement Disposition of Juvenile Contact: (Check one and complete release data)	Transferred to		sed to	Processed within the ac	Person Telephone gency and released		