



Florida Department Of Corrections
 Office of the Inspector General
 Report of Investigation
 Walt Murphree, Interim Inspector General



Inspector General Case #: 09-41060

Facility: Dade Correctional Institution

Classification of Incident: [REDACTED]

Field Office/Region: Ft. Lauderdale/IV

Incident Date: 04//04/09 Time:

Inspector: Katouree D. Jackson

Date of Report: 07/19/09

Case Type: A-1

Check all that apply:

- [REDACTED]
- Prison Rape Elimination Act (PREA) Number (if applicable)
- Principal(s) Exhibits Attached
- Department of Corrections presented to State Attorney Declined Accepted
- Use of Force (UOF) Number (if applicable)
- Equal Employment Opportunity Commission (EEOC)
- Addendum
- Wing Video Camera(s) Present in the Area of Incident YES NO

SUMMARY OF ALLEGATIONS:

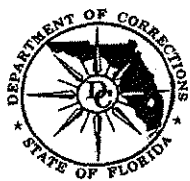
Inmate Phillip Williams was noticed [REDACTED] He said that he [REDACTED]
 [REDACTED] He was [REDACTED]

SUMMARY OF DISPOSITION/JUSTIFICATION FOR DOWNGRADE/EXONERATION:

Requesting this issue is downgraded.

Miami-Dade Police Department Homicide Bureau (Detective Denmark) is investigating his death and has not expressed any indication of foul play; to date the cause of death [REDACTED]
 [REDACTED]

The confinement wing video was viewed, no one entered Inmate Williams' cell to which he was housed alone. There were no administrative violations.



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	Name	Title / DC #	D.O.B.	Employee ID #
Complainant:	Chapman, Sean	Correctional Officer Sergeant	[REDACTED]	32607
Victim:	Williams, Phillip	DC# 603122	01/19/63	
Witness(es):				
Subject(s):				

Arrest: Employee Inmate Other Guilty Addendum Pending
 Charges: Not Guilty Nolo Contendere P.T.I. Other (explanation):
 Felony Misdemeanor
 Date of Arrest: Date Reported:

Sentence of Court / Agreement:

Administrative Violation(s):

Evidence: Weapon Drugs Other Describe:
 Other Agency Case Number:

FINDINGS:

Inmate Phillip Williams was noticed [REDACTED]

[REDACTED]

[REDACTED] (Exhibit A1)

The wing video was viewed; no one entered Inmate Williams' cell; he was housed alone. (Exhibit B1)

The autopsy report has not been completed pending [REDACTED] at which time the cause of death will be determined. Once the autopsy report is received it will be submitted to the Ft. Lauderdale Field Office.



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"I, the undersigned, do hereby swear, under penalty of perjury, that, to the best of my personal knowledge, information, and belief, I have not knowingly or willfully deprived, or allowed another to deprive, the subject of the investigation of any of the rights contained in ss.112.532 and 112.533, Florida Statutes."

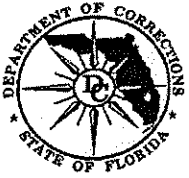
"Furthermore, under penalties of perjury, I declare I have read the foregoing report and the contents of the report are true and accurate based upon my personal knowledge, information, and belief."

A handwritten signature in black ink is written over a horizontal line.

Investigator's Signature

07/27/09

Date



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Kathleen Howell

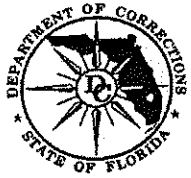
Senior Inspector 07/19/09 Date

Prison Inspector Supervisor 07/27/09 Date

Lead Inspector Supervisor _____ Date

Chief Prison Inspector _____ Date

Deputy/Inspector General _____ Date



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EXHIBIT/ATTACHMENTS SECTION

A. EXHIBIT(s) - attached:

1. Medical Examiner's Investigative Report

B. EXHIBIT(s) - not attached:

1. Wing Video