

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: <b>Fl. Dept. of Corrections - Office Of Inspector General</b>		2. Agency Report Number:		3. Charge Type: <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Misdemeanor w/associated felony		3a. Ordinance Type: (If applicable) <input type="checkbox"/> Municipal <input type="checkbox"/> County	
4. Date/Time of Offense: <b>5/26/2018 6:45 AM</b>		5. Date/Time of Arrest: <b>5/26/2018 6:59 AM</b>		6. Arresting Officer: <b>Senior Inspector Louis Cordova</b>		7. Investigating Officer: <b>Senior Inspector Louis Cordova</b>	

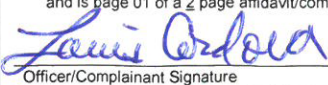
8. Defendant's Name: (Last) <b>Eagerton</b>			(First) <b>Julia</b>		(Middle) <b>Summer</b>		ALIAS		9. OBTS:	
10. Race/Sex: <b>W/F</b>		11. Date of Birth: [REDACTED]		12. Residence Type: <input type="checkbox"/> City <input type="checkbox"/> County <input checked="" type="checkbox"/> Florida <input type="checkbox"/> Out of State		13. Weapon Seized <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		14. Controlled Substance Seized: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No TYPE & QUANTITY: <b>334.50 grams of K2</b>		
15. Height: <b>5'4"</b>		16. Weight: <b>260 LBS</b>		17. Eye Color: <b>Hazel</b>		18. Hair Color: <b>Reddish Brown</b>		19. Scars, marks, tattoos, unique physical features: (Location, type & description)		
20. Driver's License Number/State: <b>E263437958350</b>			21. Social Security Number: [REDACTED]		22. Residential Telephone: [REDACTED]		23. Business Telephone: <b>NA</b>			
24. Address: (Street, Apartment Number) [REDACTED]			(City) [REDACTED]		(State) [REDACTED]		(Zip) [REDACTED]			

25. Defendant's Name: (Last)			(First)		(Middle)		ALIAS		26. OBTS:	
27. Race/Sex:		28. Date of Birth:		29. Residence Type: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Florida <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"/> City <input type="checkbox"/> County <input type="checkbox"/> Florida <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) <b>Introduction of Contraband into/onto State Prison</b>				60. Statute or Ordinance Number: <b>944.47(1)(a)(4)</b>		<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> Ord.	
61. Charge Description: (# 1) <b>Possession of Narcotics</b>				62. Statute or Ordinance Number: <b>893.13</b>		<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> Ord.	
63. Charge Description: (# 1) <b>Unlawful compensation</b>				64. Statute or Ordinance Number: <b>838.016</b>		<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> Ord.	

65. Victim's Name: (If business, list legal business name) (Last) <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) <b>Senior Inspector Louis Cordova</b>			(First)		(Middle)		70. Race/Sex		71. Date of Birth:		72. Telephone Number: <b>(850) 639-7407</b>	
73. Address: (Street, Apartment Number) <b>500 Ike Steele Road</b>			(City) <b>Wewahitchka</b>		(State) <b>Florida</b>		(Zip) <b>32465</b>		74. Secondary Phone Number: <b>(850) 639-7408</b>			
75. Victim Notification of Arrest: NOTIFIED BY: _____ DATE: _____ TIME: _____								76. Information Given: Victim <input type="checkbox"/> Arrest Info <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		78. Witness Statements taken in this case? <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 01 of a 2 page affidavit/complaint.   Officer/Complainant Signature					
Evidence Custodian's Name: Sr. <b>Insp. Louis Cordova</b>		Person responsible for statements: Sr. <b>Insp. Louis Cordova</b>		Sr. <b>Insp. Louis Cordova</b> Type or print Complainant name					

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

**ORIGINAL**

Adult Def  PC Arrest  
 Juvenile Def  Application for  
Warrant/Capias

Clerk's Case No.

SA Case No.(s)

# AFFIDAVIT – COMPLAINT (PROBABLE CAUSE NARRATIVE)

80. Agency Name: <b>Florida Department of Corrections Office of Inspector General</b>	81. Agency Report Number: <b>18-07186</b>	82. Date/Time of Arrest: <b>5/26/2018 6:59 AM</b>	83. Investigating Officer: <b>Sr. Insp. Louis Cordova</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 Senior Law Enforcement Inspector Louis Cordova of the Office of the Inspector General, Florida Department of Corrections.

Your Affiant has probable cause to believe on May 26, 2018, Officer Julia Eagerton did commit the criminal offense of Introduction of Contraband into/onto a State Correctional Institution, in violation of s. 944.47(1)(a)(4), Fla. Stat., Possession of Narcotics, in violation of s. 893.13 Fla. Stat., and Unlawful Compensation in violation of s. 838.016, Fla. Stat., when she introduced nine (9) individual bundles wrapped in black electrical tape, concealed on her person, which was filled with 334.50 grams of synthetic cannabinoids (K2) into/onto the Gulf Correctional Institution located in Wewahitchka, Florida.

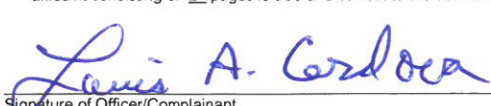

On May 24, 2018, [REDACTED] which indicated Officer Eagerton was introducing narcotics into the Gulf Correctional Institution in her bra and inside her tampon.

On May 26, 2018, at approximately 6:45 a.m., Officer Eagerton entered the Gulf Correctional Institution and was confronted by security staff. Officer Eagerton was escorted to the bathroom to be pat searched. Once in the bathroom, Officer Eagerton voluntarily surrendered the nine (9) bundles wrapped in black electrical tape to security staff. The items were located in her bra and feminine hygiene pad.

Your Affiant conducted a post-Miranda interview of Officer Eagerton [REDACTED]

Your Affiant inspected the bundles introduced by Officer Eagerton. Based on your Affiant's training and experience, the green leafy substance contained in the nine (9) bundles was consistent in both texture and aroma with synthetic cannabinoids.

Your Affiant respectfully submits that probable cause has been established that Officer Eagerton did commit the criminal violation of Introduction of Contraband into/onto a State Correctional Institution, in violation of s. 944.47(1)(a)(4), Fla. Stat., Possession of Narcotics, in violation of s. 893.13, Fla. Stat., and Unlawful Compensation in violation of s. 838.016, Fla. Stat., at Gulf Correctional Institution, 500 Ike Steele Road, Wewahitchka, Florida 32465, and in Gulf County, Florida.

85. The undersigned, being duly sworn, states that the foregoing information contained in an affidavit consisting of <u>2</u> pages is true and correct to the best of his/her knowledge	Sworn to and subscribed before me this <u>26</u> day of <u>May</u> , 20 <u>18</u>
 Signature of Officer/Complainant	 Signature of Person Administering Oath <input type="checkbox"/> Personally Known <input type="checkbox"/> Other Identification
Sr. Inspector Louis Cordova Badge # 4432 Officer/Complainant's Name (Printed)	Seal <u>CLEO</u> ID Type
ID Number	

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)	Transferred to <input type="checkbox"/> Secure Detention Released to <input type="checkbox"/> HRS Intake Officer, not detained Processed within the agency and released <input type="checkbox"/> to other than HRS
Release Date: Release Time: Released to (Name):	

**ORIGINAL**