

PROBABLE CAUSE AFFIDAVIT

OBTS #		1. Arrest Affidavit	3. Complaint Affidavit	3	Juvenile	N
ORI #	FL037275C	Office of Inspector General - DC		Report #		

Location of Offense Baker Correctional Institution 20706 US Highway 90, Sanderson Florida		Date of Offense May 29, 2018	Date of Arrest May 29, 2018
Name: Victoria Lynn Ice			

Race W - White B - Black	1 - Indian American O - Oriental Asian	W	Sex F	DOB or Age 01/28/1975	Height 4' 11"	Weight Unk	Eye Color Blue	Hair Color Blnd	Complexion Light	Build Med
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Address (Street, Apt, Number) 18820 NW 76th Avenue, Alachua Fla 32615		(City)	(State)	Phone () -
<input type="checkbox"/> 1. Parent <input type="checkbox"/> 2. Legal Custodian <input type="checkbox"/> 3. Other				Residence Phone () -
Address (Street, Apt, Number)		(City)	(State)	Business Phone () -

Notified By: (Name)	Date	Time	Juvenile Disposition 1. Handled / Processed within Dept and Released	2. Turned over to DOH/C&F 3. Incarcerated (County Jail)
Released to: (Name)	Relationship	Date	Time	

Activity: S. Sell N. N/A P. Posses	R. Smuggle D. Deliver E. Use	K. Dispense / Distribute	M. Manufacture / Produce / Cultivate	Z. Other	Type: N. N/A A. Amphetamine	B. Barbiturate C. Cocaine E. Heroine	H. Hallucinogen M. Marijuana O. Opium / Deriv	P. Paraphernalia / Equipment S. Synthetic	U. Unknown Z. Other
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Charge Description Introduction of Contraband	Counts 1	<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> Ord	State Violation Number: 944.47	Violation of Section (ORD)
Activity N	Amount / Unit	State Attorney Number	Court Number	
<input type="checkbox"/> PC #	<input type="checkbox"/> Capias <input type="checkbox"/> AC <input type="checkbox"/> BW <input type="checkbox"/> PW <input type="checkbox"/> Juv. PU <input type="checkbox"/> Citation	Date Issued	Writt. Att. #	<input type="checkbox"/> Domestic Viol Inj. <input type="checkbox"/> Order of Arrest

Charge Description Principal in the 1st degree to Escape	Counts 1	<input type="checkbox"/> F.S. <input type="checkbox"/> Ord	State Violation Number: 777.011	Violation of Section (ORD)
Activity N	Amount / Unit	State Attorney Number	Court Number	
<input type="checkbox"/> PC #	<input type="checkbox"/> Capias <input type="checkbox"/> AC <input type="checkbox"/> BW <input type="checkbox"/> PW <input type="checkbox"/> Juv. PU <input type="checkbox"/> Citation	Date Issued	Writt. Att. #	<input type="checkbox"/> Domestic Viol Inj. <input type="checkbox"/> Order of Arrest

Charge Description PERJURY / NOT IN OR. PRE.	Counts 2	<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> Ord	State Violation Number: 857.012 (1)	Violation of Section (ORD)
Activity N	Amount / Unit N/A	State Attorney Number	Court Number	
<input checked="" type="checkbox"/> PC #	<input type="checkbox"/> Capias <input type="checkbox"/> AC <input type="checkbox"/> BW <input type="checkbox"/> PW <input type="checkbox"/> Juv. PU <input type="checkbox"/> Citation	Date Issued	Writt. Att. #	<input type="checkbox"/> Domestic Viol Inj. <input type="checkbox"/> Order of Arrest

The Undersigned Certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following Violation of the law:
On the 23rd day of April 2011 at 1620 AM. PM (Specially include facts constituting cause for arrest)

Narrative: Your Affiant is Senior Inspector Justin Bates with the Office of Inspector General for the Florida Department of Corrections;

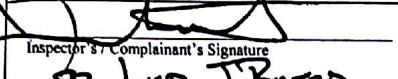

On the above date, the defendant traveled to Baker Correctional Institution (BCI) where her boyfriend, Inmate Shane Kizziah, DC# J43866 is housed. During a post miranda



IN SEVERAL SWORN INTERVIEWS, THE DEFENDANT GAVE MULTIPLE DIFFERENT ACCOUNTS OF THE INCIDENT TO OIG INVESTIGATORS. THIS MIS-LEAD INVESTIGATORS AND STAFF IN THE APPREHENSION.

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.

PC. Exists for Charge(s)		Judge's Signature	Date
<input type="checkbox"/> Miranda Warning	Hold for Agency Name:	Verified By:	Date:
<input type="checkbox"/> Adults Only Hold for First Appearance			
<input type="checkbox"/> Do not Bond Out Reason:			
Bond Type 1. ROR 2. Cash	3. Surety 4. Bail / Bond	5. Cert 6. Other	Bond Charge # Type

I swear/A firm the above and attached statements are true and correct	Sworn to And subscribed before me, the undersigned authority this <u>27th</u> day of <u>May</u> 20 <u>18</u>	Returnable Court Date	Returnable Court Time <input type="checkbox"/> AM <input type="checkbox"/> PM
Inspector's / Complainant's Signature 	Name/Title of Person Authorized to Administer Oath <u>Inspector</u>	Release Date	Release Time <input type="checkbox"/> AM <input type="checkbox"/> PM
Name (Printed) <u>SAs WSP. J. Barnes</u> ID# / Dist <u>24607</u>		Releasing Officer	
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