

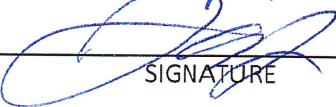
**Volusia County Division of Corrections
Incident Report**

Page: 1 of 2

THE INFORMATION BELOW WILL BE FILLED IN COMPLETELY BY THE PERSON FILING THE REPORT AT THE TIME THE INCIDENT TAKES PLACE. USE VCDC 402 (SUPPLEMENTAL REPORT) FOR CONTINUATION.


SUBJECT: <u>Weapon in Kitchen AT VCS</u>	DATE: <u>9/24/2020</u>	TIME: <u>0930</u>
INMATE NAME: <u>Capt. Mike Gallenkamp</u>	BOOKING #: <u>MP</u>	CELL: _____

I WAS SUPERVISING INMATE PAINTING THE KITCHEN WHEN THE CREW WAS LOW ON PAINT I CALLED CAPT. MIKE GALLENKAMP AND ASK HIM COULD HE REORDER IF I CAN GET MORE. WHEN I RETURNED I NOTICE THAT CAPT. GALLENKAMP HAD HIS WEAPON ON. IT WAS AT 9:18 WHEN I CALL HIM. WHEN I GOT CLOSE TO HIM CAPT. GALLENKAMP HAD HIS ARM OVER THE WEAPON BUT THERE WAS INMATE AROUND BOTH OF US AND THEY WOULD HAVE OVER HEARD ME TELLING HIM I WAS SHOWING HIM THAT HE HAD HIS WEAPON ON.

	JAMES A. Bailey	2711	09/24/2020 0930
SIGNATURE	PRINTED NAME	NUMBER	DATE & TIME

CORRECTIVE ACTION OR COMMENTS BY SUPERVISOR

Forward for review by security.

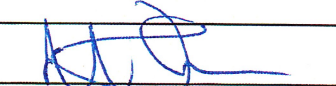
	Laura Bonnas	#1486	9/25 10:04
SIGNATURE	PRINTED NAME	NUMBER	DATE & TIME

CORRECTIVE ACTION OR COMMENT BY SUPERVISOR

SIGNATURE	PRINTED NAME	NUMBER	DATE & TIME

SENIOR MANAGEMENT REVIEW

File As Record. Mistakes happen

	M. Flowers		9-28-20 1104
SIGNATURE	PRINTED NAME	NUMBER	DATE & TIME

VOLUSIA COUNTY DIVISION OF CORRECTIONS

SUPPLEMENTAL REPORT

PAGE

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SUBJECT: Weapon in Kitchen AT VCBJS / Capt Mike Gallenkamp
 Inmate Name: N/A BOOKING #: SPN:
 DATE OF INCIDENT: 9/24/2020 TIME OF INCIDENT: About 07:00 CELL:
 LOCATION VCBJS Kitchen

IF I would HAVE went to Another location in the Kitchen to make A call THAT would HAVE MADE IT more DANGEROUS IF He was overpowered By the Inmates And I WAS NOT there to Help Him. Three MAINTENANCE workers WAS Also in the Kitchen AT The TIME, I closely monitored the situation UNTIL Capt. Gallenkamp LEFT. AFTER DR About An Hour LATER Capt Gallenkamp came Back in the Kitchen BUT He Did NOT HAVE His weapon this TIME. When I said Another location to make A call I would HAVE Had to Remove my FACE MASK to Do THAT so I would Be AWAY From everyBody. AFTER The crew WAS Finish AT 10:10 I went to UNIT 6 And Then To The SALLY PORT To secure ~~the~~ everything. I Then spoke with LT SHAW ABOUT WHAT Had Happen Between 11:00 and 12:30

STAFF SIGNATURE

Date:

09/24/2020

Time:

09:30

Employee Print Name:

JAMES A. BAILY

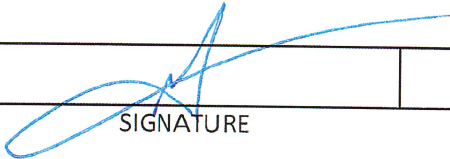
Employee Number:

2711

**Volusia County Division of Corrections
Incident Report**

Page: _____

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SUBJECT: Weapon in Building		DATE: 9/24/2020	TIME: 09:25
INMATE NAME: N/A	BOOKING #: N/A	SPN: N/A	CELL: N/A
<p>On 09/24/2020 at approximately 09:19 I received a phone call from Coach Bailey who was supervising a painting detail in the Branch Jail kitchen. Coach Bailey advised that he needed more paint and asked if I could come relieve him. I informed him that I was outside of the building but would relieve him shortly so that he could go get more. I entered VCBJ from Control and reported to the kitchen and relieved Coach at approximately 09:25. At approximately 09:26 Coach exited through the inmate dining room. At that same time I realized that I forgot to secure my Division issued firearm. I immediately covered the firearm with my forearm, exited the kitchen through the staff dining room and had another officer stand by in the kitchen until either Coach Bailey or I returned. I immediately exited the building and secured my firearm. I returned to the kitchen at approximately 09:31. Coach Bailey returned at approximately 09:39 at which time I left the area. At approximately 16:00 I spoke with Director Flowers and advised him of what had occurred.</p>			
	Capt. Gallenkamp	713	9/24/2020 16:00
SIGNATURE	PRINTED NAME	NUMBER	DATE & TIME

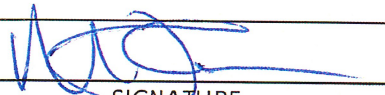
CORRECTIVE ACTION OR COMMENTS BY SUPERVISOR

SIGNATURE	PRINTED NAME	NUMBER	DATE & TIME

CORRECTIVE ACTION OR COMMENT BY SUPERVISOR

SIGNATURE	PRINTED NAME	NUMBER	DATE & TIME

SENIOR MANAGEMENT REVIEW

<p align="center">Corrective Action Taken Immediately by File For Record</p>			
	M. Flowers		9-24-20 1600
SIGNATURE	PRINTED NAME	NUMBER	DATE & TIME