



Volusia County
FLORIDA
Department of Public Protection

September 03, 2013

VolusiaExposed

Dear VolusiaExposed,

Re: PRR- 1112013 (Assault on Staff)

In response to your request received in our office, I am enclosing the certified copy of the file for the above-referenced request. Per F.S. 119.071(4) (d) all exempt information has been redacted. The fee for copying these documents plus the fee for the labor is **\$00.50**. Please make the check payable to the County of Volusia – Division of Corrections and mail to:

County of Volusia – Division of Corrections
1354 Indian Lake Road
Daytona Beach Fl.
32124

Sincerely,



Lieutenant Scott Mason
Volusia County Division of Corrections
(386) 258-4044
smason@volusia.org

Public Records Volusia County Fee Schedule

"The charge is limited to actual cost of duplication of the record. The phrase 'actual cost of duplication' is defined in Florida Statutes to mean the cost of the materials and supplies used to duplicate the record, but it does not include the labor costs and overhead costs of such duplication. An exception, however, exists for copies of County maps or aerial photographs supplied by County constitutional officers which may include a reasonable charge for the labor and overhead associated with their duplication." -- *Florida Government-In-The-Sunshine Manual.*

Volusia County's public records duplication fee policy

Paper copies -- The cost to duplicate paper records is 5 cents per page.

If the nature or volume of public records to be copied requires the extensive use of information technology resources or extensive clerical or supervisory assistance, or both, a reasonable service charge based on the cost actually incurred should be charged on a case by case basis. Extensive use of resources is defined as more than 15 minutes. This should be the direct hourly labor rate calculated for the Activity where the records are requested. (Please see formula below or consult Management and Budget for assistance).

Video cassettes -- Actual video tape cost and, if any, extensive clerical labor (see calculation sheet)

Audio cassettes -- Actual cassette tape cost and, if any, extensive clerical labor (see calculation sheet)

Electronic information retrieval -- Paper copy cost and, if any, Microcomputer Services extensive labor (see calculation sheet)

Formula for determining public records extensive labor costs based on one person or more than one person in your area:

1. Determine the person's annual direct labor hours (40 hr week x 52 weeks).
2. Total person's annual current budgeted salary (current salary, plus FICA, plus insurance, plus retirement).
3. Divide line 2 by the number of direct labor hours in line 1. The result is the direct hourly labor rate.
4. If more than one person is involved, multiply each person's direct hourly labor rate by the number of hours that person was involved in the project. Add together.

(Copy and give to requestor of records)

PUBLIC RECORDS DUPLICATION COST ESTIMATE FORM -- A determination of the cost of providing the requested information should be made as quickly as possible. This shall be conveyed to the requestor of information. The requestor of information shall be given a form estimating the cost of compliance with the information requested. The requestor shall pay for the cost of records in advance.

Paper copies - 10

Number of copies x \$.05 per page = 5

Paper copies -

Number of copies x \$.05 per page=

\$ 0.50

Certified copies -

Number of copies x \$1.00 per page=

\$

Electronic information retrieval

Labor as quoted by IT Department

\$ _____

Number of copies _____ x \$.05 per page =

\$ _____

Video VHS, CD-R, DVD

Actual replacement cost

\$ _____

Audio cassettes

Actual cassette tape cost

\$ _____

County maps

Determined by size, black and white or color

\$ _____

Extensive office/clerical labor costs

Extensive labor #1 (time _____ @ \$ _____ per hour)

\$ _____

Extensive labor #2 (time _____ @ \$ _____ per hour)

\$ _____

Extensive labor #3 (time _____ @ \$ _____ per hour)

\$ _____

POSTAGE to mail materials

\$ _____

EMAIL SEARCH - PER QUOTE ATTACHED

\$ _____

Total due from requestor of information

\$ 1.50

PRINT NAME: _____

SIGNATURE

DATE

(By signing you agree to pay the County of Volusia public record duplication and labor costs **IN ADVANCE.**)

**Volusia County Division of Corrections
Incident Report**

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 Nurse assaulted		DATE: 8/2/2013	TIME: 2015
INMATE NAME: Sharp, John		BOOKING NUMBER: 904147	Unit 2 D16
<p>On the above date and time I was escorting Nurse B. Turner for med pass on unit 2. We went into D block for lockdown meds. When going up the left side stairs I could see inmate Sharp, John 904147 pacing in cell 16. He does not receive medication, since I could see he was up and alert I didn't get any closer for an HUS check. He is a mental health inmate who is known for jumping out at and screaming at anyone who approaches his cell door. As I approached cell 15 I observed Nurse Turner walking up to his cell. I witnessed Inmate Sharp reach out of his cell and grab at Nurse Turner. She jumped back and looked very startled. I asked her "Did he touch you?" She replied by shaking her head yes. I immediately removed her from the block. Once out of the block I asked Nurse Turner where the inmate had touched her. She stated he grabbed me by my shoulder and neck area. Nurse Turner had a visible red mark to her clavical area. I then escorted her to the clinic and had her seen by Nurse M. Miller RN.</p>			
<i>J Thomas</i> #596 SIGNATURE	Sgt. Thomas PRINTED NAME	596 NUMBER	8/3/2013 0450 DATE & TIME

CORRECTIVE ACTION OR COMMENTS BY SUPERVISOR

As stated. Nurse Turner was taken to the clinic and checked by RN Miller. She was visibly upset but states she had no injuries. A VCDC 362 was filed, but boards were not recommended due to the I/m's mental health history. The I/m was moved from 2D16 to 2B16 behind plexiglass and placed on 2 officer full restraints. No force was necessary to move the I/m. I had Nurse Turner complete a First Report of Injury or illness report. On 08/04/2013 at approximately 0100 hours I spoke to Nurse Turner and asked if she wanted to press outside charges on I/m Sharp. She stated she did. I then contacted VCSCO Central and requested a Deputy be sent out to take the report.

<i>Capt. Sophie</i> #250 SIGNATURE	Captain Sophie PRINTED NAME	250 NUMBER	8/4/2013 0358 DATE & TIME
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CORRECTIVE ACTION OR COMMENT BY SUPERVISOR

Deputy Miller responded to VCBJ at approxiamtely 0300 hours. Nurse Turner gave her statement. Deputy Miller was then escorted to Unit 2 to make contact with I/m Sharp. Deputy Miller requested a copy of Sgt Thomas' report on th incident. I gave him a copy of this VCDC 401 with only her statement and stamped it "DRAFT Not-Final". A copy of the SA-707 is attached with Case #13-21198.

<i>Capt. Sophie</i> #250 SIGNATURE	Captain Sophie PRINTED NAME	250 NUMBER	8/4/2013 0358 DATE & TIME
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SENIOR MANAGEMENT REVIEW

Documented Report. Follow up with Capt. & Lt 8/7/13
After VOI written by Nurse Turner. 2.06c behind Plex Glass.

<i>Warden M'Claff</i> SIGNATURE	M'Claff PRINTED NAME	414 NUMBER	8/3/13 1400 DATE & TIME
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REVISED 2012

VCDC 401

3533

**VOLUSIA COUNTY DIVISION OF CORRECTIONS
SUPPLEMENTAL REPORT**

SUBJECT: Medical Staff Incident Unit 2

INMATE NAME:	Sharp, John	BOOKING NUMBER:	904147
DATE OF INCIDENT:	8/2/2013	TIME OF INCIDENT:	2015
LOCATION:	Unit 2	CELL:	2D16

On 08/02/2013 at approximately 2015 hours during medication pass I was standing at the officers station while Ofc. Bertrand let Sgt. Thomas and Nurse Turner into 2D Block. Upon them entering the housing block I heard Ofc. Bertrand tell an inmate, through the window, to remove whatever he had in his pocket. I approached Ofc. Bertrand to see if I could be of any assistance. When I arrived at the window I noticed Sgt. Thomas and nurse Turner reach the top of the stairs and take a step back in front of 2D16 which at the time housed inmate Sharp, John (904147). From the angle I was viewing from I couldn't see exactly what happened but it looked as if they were both startled by something. I immediately entered the housing block in order to find out what had happened and provide any assistance if necessary. As I entered the block I asked Sgt. Thomas if everything was okay, to which she replied that inmate Sharp grabbed nurse Turner. I asked if she would like me to call a code blue staff but she said it wasn't necessary because he is already behind a door. She said she would handle it by notifying Capt. Sophie. Both nurse Turner and Sgt. Thomas exited the housing block and went immediately to the clinic. Captain Sophie was notified of the situation and arrived on the unit with the additional staff and inmate Sharp was moved to 2B16 without incident.

SIGNATURE: *J. Weeks*

Date: 8/9/2013

Time report written: 0800

Employee Print Name: Ofc. J. Weeks

Employee Number: 1092

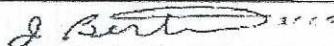
Revised 2011

VCDC 402

**VOLUSIA COUNTY DIVISION OF CORRECTIONS
SUPPLEMENTAL REPORT**

SUBJECT: Medical Staff Incident Unit 2			
INMATE NAME:	Sharp, John	BOOKING NUMBER:	904147
DATE OF INCIDENT:	8/2/2013	TIME:	2015
LOCATION:	Unit 2 D Block	CELL: 2D16	

On 08/02/2013 at approximately 2015 I was standing at the lockbox in front of 2D block allowing Sgt. Thomas and nurse Turner to enter the housing block to begin HUS segregation checks and medication pass. As Sgt. Thomas and nurse Turner were approaching the stairs, I noticed and inmate in the dayroom had something in his shirt pocket. I began to question the inmate through the window as to what was in his pocket. At that time, Ofc. Weeks approached me at the lockbox to see what was going on. The inmate reached into his pocket and pulled out a cookie, I noticed there was still something in his pocket so again I motioned to the inmate to empty his pocket. The inmate then reached into his pocket again and pulled out another cookie. As I was instructing the inmate to empty his pockets, Ofc. Weeks noticed a disturbance on the upper tier where Sgt. Thomas and nurse Turner were standing. Officer Weeks instructed me to let him into the block. Sergeant Thomas and nurse Turner descended the stairs and met with Ofc. Weeks. They then exited the housing block where Sgt. Thomas immediately escorted nurse Turner to the clinic. Officer Weeks informed me that he had been told that nurse Turner had possibly been grabbed by inmate Sharp, John (904147). Captain Sophie arrived with additional staff approximately ten minutes later where they escorted inmate Sharp to 2B16 without incident.

	Ofc. Bertrand J	1008	8/9/2013 800
STAFF SIGNATURE	PRINTED NAME	NUMBER	DATE & TIME

**VOLUSIA COUNTY DIVISION OF CORRECTIONS
DISCIPLINARY REPORT**

DATE: 8/2/13

INMATE: Sharp, John

BOOKING # 904147

OLD CELL: 2D16

NEW CELL: 2B16

Charges

- #1) #1 (A) Battery on staff (Class AA)
- #2) #33 Conduct which disrupts or interferes with the security of the institution. (Class A)
- #3) _____
- #4) _____

DETAIL OF OFFENSE(S):

On the below date and time, while performing my 72hr segregation medical check on I/M Sharp, he reached through his door, in a quick and violent manner, with his Right Hand, grabbed me around my throat, and squeezed. I/M Sharp squeezed my throat so hard that it hurt to breathe. I was unable to attempt to grab I/M Sharp's hand from my throat due to the medications for the other I/M's in 2D block. I was eventually able to move back wards and twist my upper body to get out of his grip. Due to the fact that this occurred during med pass and seg checks and that the unit 2 officers had to stop their other tasks to move I/M Sharp to a cell with plexiglass, I am also charging him with conduct which disrupts.

DATE & TIME OF OFFENSE: 2015 2AUG13 WITNESS: _____
B. Turner (w) LPN B. Turner
 STAFF SIGNATURE PRINTED NAME NUMBER

INVESTIGATING REPORT COMPLETED BY INVESTIGATING SUPERVISOR

INMATE'S WORK ASSIGNMENT AT TIME OF OFFENSE: N/A SUSPENDED: No

On 8/3/2013 at 0212 hours I went to cell B16 on unit 2 to read the above written report. Inmate Sharp was awake and pacing in his cell. As I approached the top step inmate Sharp stopped at the cell door. I asked him if he was alright. He was extremely agitated and yelled back to me "What is that supposed to mean?" I asked him again if he was alright and informed him that I had come to read him his VCDC 362. Inmate Sharp began screaming and cursing at me. He was rambling on about "I'm a fucking man" and making random statements about killing people. Inmate Sharp is a known mental health inmate and is housed in the mental health unit. Not wanting him to wake the entire unit with his screaming, I asked him one last time if he wanted me to read him his VCDC 362. Inmate Sharp yelled back at me "Fuck you devil, I know what you want, I'll kill you!" I then left the block. Due to inmate Sharp's mental health issues disciplinary boards are not recommended. Inmate Sharp was already in a lockdown status and had previously been cleared for lock down. He was moved to a cell with plexiglass over the window slots and a locking chow flap for safety reasons. He has been upgraded to a 2 officer full restraint per Captain Sophie.

J Thomas #596 Sgt. Thomas 596
 INVESTIGATING SUPERVISOR SIGNATURE PRINTED NAME NUMBER
 DISCIPLINARY BOARDS RECOMMENDED: No WAS INMATE SEGREGATED: Yes
 I/M SERVED W/ CHARGES AT: _____ HRS DATE: 8/3/2013 I/M REQUEST WITNESSES: _____
 INMATE WAIVES 24HR DELAY: _____ INMATE REFUSED APPEARANCE AT DISCIPLINARY BOARDS: _____
 REFUSED / INV. OFC INITIALS: _____ INMATE PROVIDED A COPY OF THE REPORT- INV.OFC INITIALS: _____

NOTE: ANY CHARGES THAT COULD RESULT IN THE LOSS OF STATUTORY GAIN TIME REQUIRE THE INMATE'S APPEARANCE

Inmate signature for disciplinary board waiver: _____

Inmate signature for 24 hour delay waiver: _____

Original-CM

Copy-For inmate

Copy-Warden

VOLUSIA COUNTY DEPARTMENT OF CORRECTIONS
Incident Report

THE INFORMATION BELOW WILL BE FILLED IN COMPLETELY BY THE OFFICER FILING THE REPORT AT THE TIME THE INCIDENT TAKES PLACE. ONLY ONE OFFICER CAN USE THE REVERSE SIDE OF THIS FORM. ALL SUBSEQUENT OFFICERS MUST USE A VCDC 402 (SUPPLEMENTAL REPORT) FOR CONTINUATION.

SUBJECT: <i>As 1/m assault by 1/m</i>		DATE: <i>8/5/13</i>	TIME:
INMATE'S NAME: <i>Sharp, John</i>		BOOKING NUMBER: <i>904147</i>	CELL NO. <i>2B110</i>
<p><i>On above time + date during med. pass and segregation check in unit D- escorted by Sgt Thomas, I advised Sgt Thomas that I was going to upper tier, for med pass / Sgt, upon entering top tier D-110 Sharp, John, keeping my distance, I look into cell, didn't see 1/m Sharp, I then look by the toilet, 1/m Sharp was standing by the wall, I made eye contact, and started to leave,</i></p>			
Reporting Officer: Print Name	Reporting Officer: Signature	Employee Number:	

CORRECTIVE ACTION OR COMMENTS BY HOUSING SUPERVISOR

<p><i>This incident was reported to me when I arrived to work Monday, August 5 @ 0615. I instructed staff to write this report.</i></p>		
Housing Unit Supervisor: Print Name	Housing Unit Supervisor: Signature	Employee Number:
<i>Tamara Perrine</i>	<i>Tamara Perrine</i>	

CORRECTIVE ACTION OR COMMENTS BY SHIFT COMMANDER

Shift Commander: Print Name	Shift Commander: Signature	Employee Number:

REVIEWED

<p><i>Noted Follow up with Lt + Capt on 8/7/13. Attached to 401 written by Lt Thomas. Report from Unit 06's Building</i></p>	
<p><i>Ward</i></p>	<p>Signature of Warden <i>W. McClain</i></p>

Jim Sharp was a violent matter, pushed his hands through the bars, to his shoulder and grabbed my neck/throat with his R hand, and started shaking me, Jim sharp was yelling - unable to understand him. I was unable to back up due to Sgt Thomas behind me, so I twisted my neck/body around and causing Jim sharp to stop. I then requested to leave the unit - Capt Aeph was called, requested to leave the unit, and return to clinic, Eval by Mark Miller RN, red marks was noted around my neck.

I was very scared by ^{the} situation, I felt Sgt Thomas could help by either calling a Code, yelling @ Jim, helping pulling Jim's hands off me, or pulling me around. I felt unsafe throughout med pass.


OFFICER'S SIGNATURE

EMP. NO.:

DATE:

9/5/13

TIME:

CR-0007-0199

**Jail Management System
Demographics - 904147 SHARP, JOHN**

August 04, 2013 01:09

Booking No: 904147	SPN: 5817	SSN: [REDACTED]	Book Date: 07/12/2013 10:40
Last Name: SHARP	First Name: JOHN	Middle Name: ANTHONY	Suffix: [v]
Address: 340 NORTH ST	City: DAYTONA BEACH	State: FL [v]	Zip Code: 32114-0000
DL Number: S610461613400	DL State: FL [v]	PIN: 296	Phone: () -

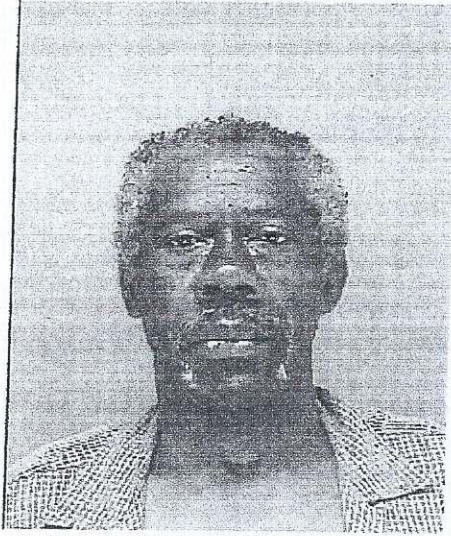
Education: HS Diploma [v]	Sheriff's Signal Codes	Status: MNSM [v]	Admission Type: Normal [v]
Marital Status: Single [v]		Translation Req'd: [v]	Arrest Type: On View Arrest [v]
Occupation: Unemployed [v]		Language: English [v]	Arrest Date: 07/12/2013 09:29
Religion: CHRISTIAN [v]		Illegal Alien: [v]	Arrest Agency: DBPD - DAYTON [v]
Indigent Type: Indigent [v]		FCIC/NCIC Check? Y [v]	Arrest Officer: DIAZ, DANIEL/D2719

Sex: Male [v]	Current Age: 51	Height: 600	Eye: Brown [v]	DLE No: 1953849
Race: Black [v]	Age at Arrest: 51	Weight: 170	Hair: Gray [v]	FBI No: 263138FA4
Ethn: Black [v]	POB: GREENVILLE	POB: MS [v]	Complexion: Dark [v]	DOC No: 100549
DOB: 09/20/1961	Citizenship: Y	DNA: ON FILE 05/30/02		

Comments:
15W PER MEDICAL INTAKE--7/25/2013 2 OFC. PRESENT WHEN DOOR OPENED AND IN HANDCUFFS PER SGT. ISLER 8/2/13: 2OFC F/R PER CAPT SOPHIE, ASSAULT ON STAFF

Inmate Detail

Booking No.	SPN	Inmate Name	Housing Location	Security/Hdlg	Status	Seg
5817		SHARP, JOHN ANTHONY	VCBJ-2-B-18-001	MINM	MNSM	MHC



Mugshot Taken at 07/12/2013 10:45 AM by INTERFACE

Charging Affidavit - Volusia

Arrest # _____ Bk # _____ Pg # 1 of 2

ARREST <input checked="" type="checkbox"/> NOTICE TO APPEAR <input type="checkbox"/> AFFIDAVIT <input type="checkbox"/> C.C. <input type="checkbox"/> ADULT <input checked="" type="checkbox"/> JUVENILE <input type="checkbox"/>		Court Case Number: _____	
(ORI) FL: FL0640000	Agency Name: VOLUSIA COUNTY SHERIFF'S OFFICE		Agency Case Number: 130021198
FCIC/NCIC Check? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	OBTS # _____	U.C.R. _____	Date Arrested: 08-04-2013
ADDRESS OF ARREST (Street, City, State, Zip): 1300 RED JOHN ROAD DAYTONA BEACH FL 32117		Arrested By: Miller, Dennis	ID Number: 7754
DEFENDANT		Sex: M Race: B	
NAME (Last): SHARP	(First): JOHN	(Middle): A	A.K.A.: _____
DOB: 09-20-1961	Age: 51	Driver's Lic./ID No.: S810-461-61-340-0	State: FL Year Expires: 2020 S.S.#: _____
Height: 6' 00"	Weight: 170	Hair: GRY Eyes: BRO	P.O.B. (City, State, Country): MS
Scars, Marks, Tattoos: _____	Business & Occupation: _____		Statement: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Probation: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Sexual Predator: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	English: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Deaf/Mute: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Address - Mailing/Permanent: 340 NORTH STREET		(CITY): DAYTONA BEACH (STATE): FL	ZIP CODE: 32114 RESIDENCE PHONE: _____
Address - Local: _____		(CITY): _____ (STATE): _____	ZIP CODE: _____ RESIDENCE PHONE: _____
Address - Other (Employer/School): _____		(CITY): _____ (STATE): _____	ZIP CODE: _____ BUS/SCHOOL PHONE: _____

CHARGES		DOMESTIC VIOLENCE? Yes <input type="checkbox"/>	Attachments: Affidavit(s) <input type="checkbox"/>	Statement(s) <input type="checkbox"/>	NTA Schedule <input type="checkbox"/>	Report <input type="checkbox"/>	Traffic Infraction(s) <input type="checkbox"/>	DUI <input type="checkbox"/>	Total Charges: 1
#1 Charge:	Battery on LEO/Firefighter/EMT/etc	FEL <input checked="" type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: 784.07(2)(B)	Citation No.:	Bond: 5,000				
#2 Charge:	_____	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: _____	Citation No.:	Bond: _____				
#3 Charge:	_____	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: _____	Citation No.:	Bond: _____				

CO-DEFENDANT		Co-Def #1. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/>	Fel. <input type="checkbox"/> Misd. <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>	Co-Def #2. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/>	Fel. <input type="checkbox"/> Misd. <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>	
#1 NAME (Last): _____	(First): _____	(Middle): _____	Race: _____	Sex: _____	DOB: _____	Age: _____
#2 NAME (Last): _____	(First): _____	(Middle): _____	Race: _____	Sex: _____	DOB: _____	Age: _____

NARRATIVE The undersigned certifies and swears that there is probable cause to believe the above-named defendant, on the 02 day of August, 2013, at approximately 0815 a.m. p.m. at 1300 RED JOHN RD DAYTONA BEACH within Volusia County, violated the law and did then and there:

1 On Sunday, 08/04/2013, at approximately 0245 hours, Deputy Miller was dispatched and responded to 1300 Red John Road (Volusia County Branch Jail), Daytona Beach, in reference to a report of a battery. Upon arrival, Deputy Miller contacted Barbara Turner (V1) who advised she had been battered by John Sharp (D1) on 08/02/2013 while attempting to administer medications.

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5 According to Turner, she is a registered nurse who works for Corizon Correctional Healthcare who is contracted with the branch jail to provide medical services. On 08/02/2013 at approximately 2015 hours, Turner and Sergeant Thomas (W1) were delivering medicine to inmates. Turner arrived at Unit 2 and proceeded to walk by cell #16, Sharp's cell. At this point, Sharp reached out of the cell and grabbed Turner by the neck and proceeded to shake her violently. Turner was able to free herself and back away from Sharp. Turner advised her breathing was not impeded and she was uninjured during the incident. Turner provided Deputy Miller with a sworn written statement detailing the incident and advised she wished to prosecute. Deputy Miller did not observe any signs of injury to Turner.

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12 Deputy Miller contacted Captain Sophie who provided him with a copy of Sergeant Thomas' incident report. Deputy Miller observed the following information in Sergeant Turner's report: On 08/02/2013, at approximately 2015 hours, Sergeant Thomas and Turner arrived at Unit 2 in order to pass out medication. Sergeant Thomas advised while walking up the left stair case she witnessed Sharp pacing back and forth inside of his cell. Sergeant Thomas advises that while walking by Sharp's cell she witnessed him reach out and grab a hold of Turner. Turner jumped back and appeared very

13
14
15

NOTICE TO APPEAR	MANDATORY APPEARANCE <input type="checkbox"/>	YOU NEED NOT APPEAR IN COURT BUT MUST COMPLY WITH INSTRUCTIONS ON THE REVERSE SIDE OF YOUR COPY <input type="checkbox"/>	FINE, AND COSTS AMOUNT: _____
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I AGREE TO APPEAR IN COURT HEREIN TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE INDICATED, I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED, OR PAY THE LISTED FINE, I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST WILL BE ISSUED.

SIGNATURE OF DEFENDANT	Date	RELATIONSHIP TO JUVENILE	JUVE DISP. CITATION No.
------------------------	------	--------------------------	-------------------------

Sworn to and subscribed before me, the undersigned this <u>04</u> day of <u>August</u> , 2013	I swear/affirm the above statements are correct and true	Rt Thumb
Name: <u>[Signature]</u>	OFFICER'S/COMPLAINANT'S SIGNATURE	
Notary Public <input type="checkbox"/> Law Enforcement or Corrections Officer <input checked="" type="checkbox"/>	MILLER, DENNIS	7754
Personally Known <input checked="" type="checkbox"/> Produced Identification <input type="checkbox"/>	NAME (PRINTED)	ID NUMBER
Type of Identification: _____		

OFFICIAL USE ONLY Inmate Number & Facility: _____

Narrative Supplement 707-B

Arrest
 Affidavit
 Notice to Appear
 Adult
 Juvenile

Court Case Number:

Page # 2 of 3

Defendant (Last) Name: SHARP		(First) JOHN	(Middle) A	Agency Case Number: 130021198	
CHARGES		DOMESTIC VIOLENCE? Yes <input type="checkbox"/>	Attachments: Affidavit(s)? <input type="checkbox"/>	Statement(s) <input type="checkbox"/>	NTA Schedule <input type="checkbox"/> Report <input type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/>
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No.:	Bond:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No.:	Bond:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No.:	Bond:

16 startled. Sergeant Thomas confirmed with Turner that Sharp had touched her and she indicated he grabbed her shoulder and neck area. Sergeant
 17 Thomas reported Turner had visible redness to her clavicle area.
 18
 19 Sergeant Thomas was not on scene while Deputy Miller was conducting his investigation. Deputy Miller obtained a copy of Sergeant Thomas'
 20 incident report, which was submitted with this report.
 21
 22 Deputy Miller responded to Sharp's location and attempted to interview him. Sharp declined to speak with Deputy Miller about the incident.
 23
 24 Based on the statements made and evidence obtained, Deputy Miller determined the following: Turner is a registered nurse who was engaged in the
 25 performances of her duties on 08/02/2013. Additionally, Sharp willfully and unlawfully touched Turner against her will. As such, Deputy Miller
 26 completed a State Attorney's Office charging affidavit and Sharp was charged additionally for the offense while in custody at the branch jail.

Sworn to and subscribed before me, the undersigned this <u>04</u> day of <u>August</u> , 2013	I swear/affirm the above statements are correct and true	Right Thumb
Name:	OFFICER'S/COMPLAINANT'S SIGNATURE	
Notary Public <input type="checkbox"/> Law Enforcement Officer <input checked="" type="checkbox"/> Personally Known <input checked="" type="checkbox"/> Produced Identification <input type="checkbox"/> Type of Identification:	MILLER, DENNIS NAME (PRINTED)	
	7754 ID NUMBER	