

**7th. Judicial Circuit 707
Charging Affidavit - Volusia**

Arrest # _____ Bk # _____ Pg # 1 of 4

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: 2022 101651 CFDL	
(ORI) FL: <u>FL0640000</u>	Agency Name: <u>VOLUSIA COUNTY SHERIFF'S OFFICE</u>		Agency Case Number: <u>220013939</u>
FCIC/NCIC Check? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	OBTS #	U.C.R:	Date Arrested: <u>07-18-2022</u> Time of Arrest: <u>1836</u>
ADDRESS OF ARREST (Street, City, State, Zip): <u>2629 ACADEMY AVE DELTONA FL 32738</u>		Arrested By: <u>WEAVER, CHAD</u>	ID Number: <u>8185</u>
DEFENDANT	NAME (Last) <u>ROLLINS</u> (First) <u>IYANNA</u> (Middle) <u>Y</u>	A.K.A.:	Sex: <u>F</u> Race: <u>B</u>
DOB: <u>03-18-2004</u>	Age: <u>18</u> Driver's Lic./ ID No.: _____	State: <u>FL</u> Year Expires: <u>2029</u>	S.S.# - _____
Height: <u>5' 09"</u>	Weight: <u>130</u> Hair: <u>BLK</u> Eyes: <u>BRO</u>	P.O.B. (City, State, Country): <u>FL</u>	Statement: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Scars, Marks, Tattoos:	Business & Occupation:	Citizenship: Yes <input checked="" type="checkbox"/> No <input 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 (STREET, APT. NUMBER) <u>241 DENISE ST</u>		(CITY) <u>OVIEDO</u> (STATE) <u>FL</u>	ZIP CODE <u>32765</u> RESIDENCE PHONE _____
Address - Local (STREET, APT. NUMBER)		(CITY) _____ (STATE) _____	ZIP CODE _____ RESIDENCE PHONE _____
Address - Other (Employer/School) (STREET, APT. NUMBER)		(CITY) _____ (STATE) _____	ZIP CODE _____ BUS/SCHOOL PHONE _____

CHARGES	DOMESTIC VIOLENCE? Yes <input type="checkbox"/>	Attachments: Affidavit(s)? <input checked="" type="checkbox"/>	Statement(s) <input type="checkbox"/>	NTA Schedule <input type="checkbox"/>	Report <input checked="" type="checkbox"/>	Traffic Infraction(s) <input type="checkbox"/>	DUI <input type="checkbox"/>	Total Charges: <u>03</u>
#1 Charge: <u>Battery on LEO/Firefighter/EMT/etc</u>	FEL <input checked="" type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: <u>784.07(2)(B)</u>	Citation No.:	Bond: <u>5000</u>				
#2 Charge: <u>Battery on LEO/Firefighter/EMT/etc</u>	FEL <input checked="" type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: <u>784.07(2)(B)</u>	Citation No.:	Bond: <u>5000</u>				
#3 Charge: <u>Resisting an Officer with Violence</u>	FEL <input checked="" type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: <u>843.01</u>	Citation No.:	Bond: <u>5000</u>				

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 18 day of July, 2022, at approximately 0630 a.m. p.m. at 2629 ACADEMY AVE DELTONA within Volusia County, violated the law and did then and there:

1 On 07/18/2022 Sergeant Weaver responded to the area of 2639 Ainsworth Ave., Deltona in reference to a burglary alarm. Upon arriving on scene,
 2 Sergeant Weaver inadvertently stopped one street west of Ainsworth on Academy Ave. As Sergeant Weaver exited his vehicle he noticed a silver
 3 passenger car with dark tinted windows leaving the driveway of the residence believed to have the active burglary alarm. The vehicle briefly pulled
 4 back into the driveway and then left north bound toward Sergeant Weaver.
 5
 6 Sergeant Weaver signaled at the vehicle with his hand for it to stop, but initially it did not. The vehicle eventually stopped and Sergeant Weaver
 7 attempted to speak with the driver, who was later identified as Iyanna Rollins (D1). Sergeant Weaver asked Iyanna if she lived at the house to which
 8 she replied she did not. He then asked why she was at the house, but she refused to answer the question. Sergeant Weaver requested Iyanna to
 9 turn off the vehicle. Iyanna refused to turn the vehicle off and began to roll the driver side window up. Sergeant Weaver opened the car door and saw
 10 Iyanna reach towards the gear shift located near the center console of the vehicle. After giving several verbal commands for Iyanna to turn the vehicle
 11 off, Sergeant Weaver reached into the vehicle and turned the ignition off. While Sergeant Weaver was reaching into the vehicle Iyanna made

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. _____
SIGNATURE OF JUVENILE PARENT OR CUSTODIAN _____		CITATION No. _____	

Sworn to and subscribed before me, the undersigned this <u>18</u> day of <u>July</u> , <u>2022</u> , Name: <u>[Signature]</u>	I swear/affirm the above statements are correct and true <u>[Signature]</u>	Rt Thumb _____
Notary Public <input type="checkbox"/> Law Enforcement or Corrections Officer <input checked="" type="checkbox"/>	OFFICER'S/COMPLAINANT'S SIGNATURE <u>WEAVER, CHAD</u> <u>8185</u>	
Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>	NAME (PRINTED) ID NUMBER	
Type of Identification: <u>Sgt. Held 7548</u>		

OFFICIAL USE ONLY Inmate Number & Facility: _____

Volusia**Notice to Appear Instruction Sheet**

Follow these instructions according to the boxes checked.

Court Case Number:
Agency Case Number:

- Mandatory Court Appearance -- You MUST appear at COURT. You will receive a Notice of Arraignment from the County Clerk's Office at the mailing address you have given. Failure to appear at the time and place designated, will result in a warrant being issued for your arrest.**
- Court Appearance Not Mandatory -- You MUST comply with EITHER A or B:**

**PAYMENTS SHOULD BE MADE PAYABLE TO:
CLERK OF THE COURT.**

A. Pay the Fine: You must complete the waiver information below and either mail or personally present this citation at the Clerk's Office checked below, from 8:00 a.m. to 4:30 p.m., Monday through Friday within 15 days of the issuance of this Notice to Appear. ***Fines may be paid in cash, personal check, money order or certified check made payable to: Clerk of the Court . (DO NOT MAIL CASH.)***

Total fine and costs you must pay: \$ _____

B. Contest the Citation: You MUST request that a court date be set within 15 days of the issuance of this Notice to Appear (if the 15th day falls on a Saturday, Sunday or legal holiday, the period is extended to the next working day) by either appearing between the hours of 8:00 a.m. and 10:00 a.m. at the Clerk's Office checked below, or by mailing your written request to the Clerk of the Court at the address checked below.

COUNTY CLERK'S OFFICES:

- Volusia County Courthouse, room B155, 101 N. Alabama Avenue, Deland, FL, 32724
- Court House Annex, room 109, 125 E. Orange Avenue, Daytona Beach, FL, 32114
- Volusia County Courthouse, room 6, 124 N. Riverside Drive, New Smyrna Beach, FL, 32169

I agree to appear at the time and place as designated above to answer the listed charge(s) or pay the fine and costs. I understand that if I willfully fail to request a court date and/or fail to appear before the court as required by this Notice to Appear, or fail to pay the indicated fine and costs on or before the date set forth above, I may be held in contempt of court and a warrant for my arrest will be issued.

DEFENDANT'S SIGNATURE (MANDATORY): _____

ATTENTION: PERSONS WITH DISABILITIES

If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact Court Administration, 125 E. Orange Avenue, Ste.300, Daytona Beach, FL 32114; Telephone: 386-257-6096 within two (2) working days of your receipt of this notice: If you are hearing or voice impaired, call 1-800-955-8771 or 1-800-955-8770. **THIS IS NOT A COURT INFORMATION LINE.**

Plea and Waiver Information

If this notice indicates that you have the option to pay a fine or appear in court and you choose to pay the fine, follow the instructions in paragraph A above. Read and sign this page. This page MUST be returned to the clerk's office with your fine payment.

- In consideration of my not appearing in court, I enter my plea on the affidavit in this case, for the offense charged, waiving my right to be present and the reading of the affidavit. I understand the nature of the charge(s) against me and hereby enter my plea of guilty or nolo contendere (no contest) .
- In doing so, I understand the nature of the charge(s) against me, I understand that I waive my right to counsel, the right to a trial before a judge or jury, the right to a continuance, and the right to appeal. Payment of this fine will result in adjudication of guilt to this charge being withheld.
- By my signature, I acknowledge that I understand the above statements. I am not under the influence of alcohol or drugs. I also certify that my address listed below is correct.

Defendant's Signature: _____
(First) (Middle) (Last)

Date: _____

Defendant's Name (print): _____

Defendant's Address: _____

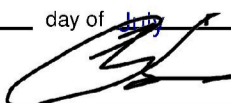
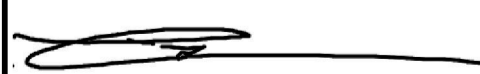
Narrative Supplement 707-B

Arrest
 Affidavit
 Notice to Appear
 Adult
 Juvenile

Court Case Number:

Defendant Name: ROLLINS	(Last)	(First) IYANNA	(Middle) Y	Agency Case Number: 220013939
CHARGES		DOMESTIC VIOLENCE? Yes <input type="checkbox"/>	Attachments: Affidavit(s)? <input checked="" type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input checked="" type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/>	Total Charges: 03
#	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:

12 statements threatening to punch Sergeant Weaver. Iyanna then exited the vehicle and continued to yell at Sergeant Weaver while waving her hands
 13 and pointing her finger in front of his face. Sergeant Weaver tried to explain the reason for the contact but Iyanna continued to yell and refused to
 14 listen.
 15
 16 Due to Iyanna's actions, Sergeant Weaver attempted to secure her in handcuffs. Sergeant Weaver tried to explain to Iyanna that she was not under
 17 arrest but being secured. Iyanna began to resist and shoved Sergeant Weaver. A struggle ensued as Sergeant Weaver attempted to place her in
 18 handcuffs. While trying to secure Iyanna, she kicked Sergeant Weaver as well as struck him in the head with a closed fist multiple times. Although
 19 she continued to actively resist, Sergeant Weaver was eventually able to secure Iyanna with handcuffs. After being secured with handcuffs Iyanna
 20 continued to threaten Sergeant Weaver. Iyanna threatened to bite and spit on Sergeant Weaver.
 21
 22 Deputy Muzzy responded to the scene after Iyanna was placed in handcuffs. As Deputy Muzzy was attempting to adjust the handcuffs, Iyanna kicked
 23 her in the right leg.
 24
 25 During the incident none of the parties involved sustained any injuries. Sergeant Weaver used restraining force to secure Iyanna. It should be noted
 26 both Sergeant Weaver and Deputy Muzzy were wearing official Volusia Sheriff's Office uniforms.
 27
 28 There were multiple subjects located in the car when Sergeant Weaver initially made contact with the vehicle. Those unidentified subjects walked into
 29 the residence prior to additional units arriving on scene and were not able to be identified.
 30
 31 Iyanna was arrested and charged with battery on a law enforcement officer and resisting an officer with violence.

Sworn to and subscribed before me, the undersigned this <u>18</u> day of <u>July</u> , 2022 Name: 	I swear/affirm the above statements are correct and true 	Right Thumb
Notary Public <input type="checkbox"/> Law Enforcement Officer <input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/> Type of Identification:	OFFICER'S/COMPLAINANT'S SIGNATURE	
	WEAVER, CHAD NAME (PRINTED)	8185 ID NUMBER

Witness/Victim/Evidence Form 707-A

Arrest
 Affidavit
 Notice to Appear
 Adult
 Juvenile

Court Case Number:

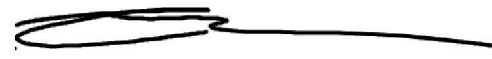
Defendant (Last) (First) (Middle)			Agency Case Number:		220013939				
Name: ROLLINS IYANNA Y			Vic <input type="checkbox"/> Wit <input type="checkbox"/>		Race:	Sex: M <input type="checkbox"/> F <input type="checkbox"/>	Age:	DOB:	SSN:
Address (#, Street, City, State):					Zip:	Home: Phone:		Statement: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Bus/School Address:					Zip:		Bus: Phone:		Phone:
Relative/Contact Name			Relative/Contact Address:		Phone:				
Name: (Last) (First) (Middle)			Vic <input type="checkbox"/> Wit <input type="checkbox"/>		Race:	Sex: M <input type="checkbox"/> F <input type="checkbox"/>	Age:	DOB:	SSN:
Address (#, Street, City, State):					Zip:	Home: Phone:		Statement: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Bus/School Address:					Zip:		Bus: Phone:		Phone:
Relative/Contact Name			Relative/Contact Address:		Phone:				

EVIDENCE COLLECTED

Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
BWC recording	07-18-2022		
Owner Name (Last) (First) (Address)	(Phone)	Value	
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Owner Name (Last) (First) (Address)	(Phone)	Value	

I certify that the foregoing is a complete list of witnesses/victims & evidence known to me.

WEAVER, CHAD
Investigating Officer

 8185
ID Number

VCSSO
Agency