

# VOLUSIA COUNTY SHERIFF'S OFFICE

## INCIDENT REPORT

<input type="checkbox"/> Juvenile <input type="checkbox"/> Gang <input type="checkbox"/> Domestic Violence <input type="checkbox"/> Endangered / Other		<input type="checkbox"/> Hate Crime <input type="checkbox"/> Elderly Abuse / Exploitation VOR _____		Agency Report Number <b>170000884</b>		
Agency ORI Number <b>FL0640000</b>				Zone # <b>JL</b>	Telephone Handled Call? (T.H.C.) 1. Yes 2. No <b>2</b>	
Reported: Day <b>Tuesday</b>		Date <b>01-10-2017</b>	Time (mil.) <b>1546</b>	Time Dispatched (mil.) <b>1549</b>	Time Arrived (mil.) <b>1635</b>	Time Completed (mil.) <b>1704</b>
Nature of Call (Report Type) <b>ABAT Assault/Battery(UCR class)</b>						
Incident Type: 1. Felony 2. Traffic Felony		3. Misdemeanor 4. Traffic Misdemeanor	5. Ordinance 9. Other	Incident: Day From <b>Sunday</b>	Date <b>01-01-2017</b>	Time (mil.) <b>2030</b>
TO <b>Sunday</b>	Date <b>01-01-2017</b>	Time (mil.) <b>2035</b>	Occurred During: D - Day N - Night <b>N</b>			
Offense #1 <b>1</b>	Type <b>784.082(3)</b>	Statute Violation Number <b>784.082(3)</b>	Description <b>Battery-Prsn.Detained in Prison/Jail</b>			
#2		Statute Violation Number	Description			
Incident Location (Street, Apt. Number) <b>1300 RED JOHN DR</b>			City <b>DAYTONA BEACH</b>		Zip <b>32124</b>	
Business Name / Area Identifier <b>VOLUSIA COUNTY BRANCH JAIL</b>		# Prem. Entered	Drug Related 0. N/A 1. Yes 2. No <b>0</b>	Alcohol Related 0. N/A 1. Yes 2. No <b>0</b>	Forced Entry 1. Yes 2. No 3. Attempted <b>2. No</b>	Arson-Inhabited 1. Occupied 2. Unoccupied 3. Abandoned
Location Type <b>19</b>	Location Type Codes 01. Residence-Single 02. Apartment/Condo 03. Residence/Other 04. Hotel/Motel	05. Convenience Store 06. Gas Station 07. Liquor Sales 08. Bar/Nightclub	09. Supermarket 10. Dept/Discount Store 11. Specialty Store 12. Drug Store/Hospital	13. Bank/Financial Inst. 14. Commercial/Office Bldg. 15. Industrial/Mfg. 16. Storage	17. Gov't/Public Bldg. 18. School/University 19. Jail/Prison 20. Religious Bldg	21. Airport 22. Bus/Rail Terminal 23. Construction Site 24. Other Structure
	25. Parking Lot/Garage 26. Highway/Roadway 27. Park/Woodlands/Field 28. Lake/Waterway	29. Motor Vehicle 30. Other Mobile 88. Unknown 99. Other				
V/W Code V-Victim W-Witness R-Reporting Person		N-Next of Kin O-Other	Victim/Subject Type 0. N/A 1. Juvenile 2. L.E. Officer 3. Adult	4. Business 5. Government 6. Church 9. Other	Address/Phone Type B. Business/Work C. Cell H. Home	M. Message N. Next of Kin O. Other
	P. Pager S. School V. Vacation	Race W-White B-Black I-American Indian	O-Oriental/Asian U-Unknown	Sex M-Male F-Female U-Unknown	Residence Type 0. NA 1. City 2. County 3. Florida 4. Out-of-State	Residence Status 0. N/A 1. Full Year 2. Par. Year 3. Non-Resident
Means of Attack F-Firearm K-Knife/Cutting Inst.		O-Other Dangerous H-Hands, Fists, Feet, Etc.	Extent of Injury 00. N/A 01. Gunshot 02. Stabbed	03. Laceration 04. Unconscious 05. Poss. Broken Bones	06. Poss. Internal Injury 07. Loss of Teeth 08. Burns	09. Abrasions/Bruises 10. No Visible Injury 99. Other Serious Injury
	Domestic Violence 1. Yes 2. No	Victim Relationship to Offender S-Spouse P-Parent C-Child	B-Sibling O-Other Family H-Co-Habitant	Z-Other		
Offense Indicator 1. #1 2. #2 3. Both		V/W Code <b>1 V</b>	# <b>1</b>	V. Type <b>3</b>	Nature of Call (for Victim, if different from Incident)	Name (Last/Business) (First) (Middle) <b>ADKINS BRANDEN S</b>
Address (Street, Apt. Number) <b>340 NORTH ST</b>						City <b>DAYTONA BEACH FL</b>
	State <b>FL</b>	Zip <b>32114</b>	Residence Phone <b>(386) 589-1717</b>			
Business/School/Other Address (Street, Apt. Number)			City <b>DAYTONA BEACH FL</b>	State <b>FL</b>	Zip <b>32114</b>	Address Type <b>B</b>
	Business/School/Other Phone <b>(386) 254-1555</b>	Phone Type <b>B</b>				
Other Contact Info (Time Available, Interpreter, etc.)						Synopsis of Involvement <b>VICTIM (JAIL INMATE)</b>
If Victim Type 1, 2, or 3	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>09-02-1992</b>	Age <b>24</b>	Ethnicity <b>N</b>	Res. Type <b>2</b>
	Res. Status <b>1</b>	Means of Attack <b>H</b>	Extent of Injury <b>09</b>	Domestic Violence <b>2</b>	Relationship	
Offense Indicator 1. #1 2. #2 3. Both		V/W Code <b>1 R</b>	# <b>1</b>	V. Type <b>2</b>	Nature of Call (for Victim, if different from Incident)	Name (Last/Business) (First) (Middle) <b>THOMAS LT</b>
Address (Street, Apt. Number) <b>1300 RED JOHN DR</b>						City <b>DAYTONA BEACH FL</b>
	State <b>FL</b>	Zip <b>32124</b>	Address Type <b>B</b>	Business/School/Other Phone <b>(386) 254-1555</b>	Phone Type <b>B</b>	
Business/School/Other Address (Street, Apt. Number)			City <b>DAYTONA BEACH FL</b>	State <b>FL</b>	Zip <b>32124</b>	Address Type <b>B</b>
	Business/School/Other Phone <b>(386) 254-1555</b>	Phone Type <b>B</b>				
Other Contact Info (Time Available, Interpreter, etc.)						Synopsis of Involvement <b>REPORTING PARTY (JAIL LT.)</b>
If Victim Type 1, 2, or 3	Race <b>W</b>	Sex <b>F</b>	Date of Birth	Age	Ethnicity	Res. Type
	Res. Status	Means of Attack	Extent of Injury	Domestic Violence	Relationship	
Offense Indicator 1. #1 2. #2 3. Both		V/W Code	#	V. Type	Nature of Call (for Victim, if different from Incident)	Name (Last/Business) (First) (Middle)
Address (Street, Apt. Number)						City State Zip Residence Phone
Business/School/Other Address (Street, Apt. Number)			City State Zip	Address Type	Business/School/Other Phone	Phone Type
Other Contact Info (Time Available, Interpreter, etc.)						Synopsis of Involvement
If Victim Type 1, 2, or 3	Race	Sex	Date of Birth	Age	Ethnicity	Res. Type
	Res. Status	Means of Attack	Extent of Injury	Domestic Violence	Relationship	
Offense Indicator 1. #1 2. #2 3. Both		V/W Code	#	V. Type	Nature of Call (for Victim, if different from Incident)	Name (Last/Business) (First) (Middle)
Address (Street, Apt. Number)						City State Zip Residence Phone
Business/School/Other Address (Street, Apt. Number)			City State Zip	Address Type	Business/School/Other Phone	Phone Type
Other Contact Info (Time Available, Interpreter, etc.)						Synopsis of Involvement
If Victim Type 1, 2, or 3	Race	Sex	Date of Birth	Age	Ethnicity	Res. Type
	Res. Status	Means of Attack	Extent of Injury	Domestic Violence	Relationship	
Offense Indicator 1. #1 2. #2 3. Both		V/W Code	#	V. Type	Nature of Call (for Victim, if different from Incident)	Name (Last/Business) (First) (Middle)
Address (Street, Apt. Number)						City State Zip Residence Phone
Business/School/Other Address (Street, Apt. Number)			City State Zip	Address Type	Business/School/Other Phone	Phone Type
Other Contact Info (Time Available, Interpreter, etc.)						Synopsis of Involvement
If Victim Type 1, 2, or 3	Race	Sex	Date of Birth	Age	Ethnicity	Res. Type
	Res. Status	Means of Attack	Extent of Injury	Domestic Violence	Relationship	

# INCIDENT REPORT (CONT.)

SUBJECT / MISSING SECTION	Offense Indicator 1. #1 3. Both 2. #2	Subject Code S-Suspect V-Victim D-Defendant (Missing Person)	Code #	Subj. Type	Name (Last) (First) (Middle)	Race	Sex	Ethnicity
	3		D 1 3		MADISON ERIC D	B	M	N
	Date of Birth	Age To Age	Height To Height	Weight To Weight	Eye Color	Hair Color	Maiden Name	
	06-27-1971	45		190	BRO	BLD		
	Nickname / Street Name		Place of Birth - City		County	State	Employer/Other/School	Occupation
						FL		
	Last Known Address (Street, Apt. Number)			City	State	Zip	Address Type	Phone
	949 VERNON ST			DAYTONA BEACH	FL	32114	H	
	Other Address (Street, Apt. Number)			City	State	Zip	Address Type	Phone
	Driver's License State/Number			Social Security Number		Other ID Number		ID Type
	FL M325204712270			[REDACTED]				
	Clothing (Describe)			Scars/Marks/Tattoos (Type/Describe)			Scars/Marks/Tattoos (Type/Describe)	
	Hair Length /Style		Skin	Build	Facial Features	Speech/Voice	Deformity	Glasses
	If Subject:	Demeanor	Mask	Weapon Type		If Arrested:	Subject Was Already in Custody?	Warrant From:
							1. Yes 2. No	1. This Agency 2. Other Agency
	Date of Last Contact	Date of Emancipation	Caution	Caution Reason		Personal Habits (Drugs / Alcohol)		
	May Be With:		Physical Condition:		Mental Condition:	Doctor Name:		Dentist Name:
	Incident Type		Foul Play Suspected?		Missing Before?	Fingerprints Available?	Photo Available?	Dental Record Available?
	1. Runaway 2. Parents 3. Involuntary 4. Disabled 5. Endangered		6. Disaster Victim 7. Voluntary Adult 8. Unknown		1. Yes 2. No 8. Unknown	1. Yes 2. No	1. Yes 2. No	1. Yes 2. No
	I, _____ (Printed) _____ (Signature) certify that I have reported the above person as a missing person; and this agency has my permission to enter this person in a statewide alert.							

SUBJECT / MISSING SECTION	Offense Indicator 1. #1 3. Both 2. #2	Subject Code S-Suspect V-Victim D-Defendant (Missing Person)	Code #	Subj. Type	Name (Last) (First) (Middle)	Race	Sex	Ethnicity
	Date of Birth	Age To Age	Height To Height	Weight To Weight	Eye Color	Hair Color	Maiden Name	
	Nickname / Street Name		Place of Birth - City		County	State	Employer/Other/School	Occupation
	Last Known Address (Street, Apt. Number)			City	State	Zip	Address Type	Phone
	Other Address (Street, Apt. Number)			City	State	Zip	Address Type	Phone
	Driver's License State/Number			Social Security Number		Other ID Number		ID Type
	Clothing (Describe)			Scars/Marks/Tattoos (Type/Describe)			Scars/Marks/Tattoos (Type/Describe)	
	Hair Length /Style		Skin	Build	Facial Features	Speech/Voice	Deformity	Glasses
	If Subject:	Demeanor	Mask	Weapon Type		If Arrested:	Subject Was Already in Custody?	Warrant From:
							1. Yes 2. No	1. This Agency 2. Other Agency
	Date of Last Contact	Date of Emancipation	Caution	Caution Reason		Personal Habits (Drugs / Alcohol)		
	May Be With:		Physical Condition:		Mental Condition:	Doctor Name:		Dentist Name:
	Incident Type		Foul Play Suspected?		Missing Before?	Fingerprints Available?	Photo Available?	Dental Record Available?
	1. Runaway 2. Parents 3. Involuntary 4. Disabled 5. Endangered		6. Disaster Victim 7. Voluntary Adult 8. Unknown		1. Yes 2. No 8. Unknown	1. Yes 2. No	1. Yes 2. No	1. Yes 2. No
	I, _____ (Printed) _____ (Signature) certify that I have reported the above person as a missing person; and this agency has my permission to enter this person in a statewide alert.							

1 On January 10, 2017, at approximately 1549 hours, Deputy Medina was dispatched to the Volusia County Branch Jail in reference to an battery  
2 complaint. Upon arrival, Deputy Medina made contact with Lt. Thomas (R1) who advised the following:  
3  
4 Lt. Thomas advised she requested a trustee to clean the office on 01/10/2017. While in the office, the trustee advised Lt. Thomas of a possible  
5 sexual battery attempt that occurred between two inmates. Lt. Thomas immediately initiated an investigation and discovered the inmates involved  
6 were Branden S. Adkins (V1) and Eric D. Madison (D1). Lt. Thomas advised she made contact with Adkins who advised her the physical  
7 altercation which occurred with Madison on 01/01/17 was due to Madison making sexual advances towards Adkins. Lt. Thomas then contacted

ADMINISTRATIVE	Final Case Status: 1	Final Case Status Codes: 1.Arrest/Adult 2.Arrest/Juv. 3.Exceptional/Adult 4.Exceptional/Juv. 5.Closed 6.Unfounded	<input type="checkbox"/> Victim Advocate	<input type="checkbox"/> Triad	<input type="checkbox"/> SA Referral
	<input type="checkbox"/> DCF Hotline	Date:	Time:	<input type="checkbox"/> FCIC / NCIC Entry	<input type="checkbox"/> T.T. BOLO
	<input type="checkbox"/> CAC	Spoke With:		<input type="checkbox"/> FCIC / NCIC Cancel	Date: By:
	Connecting Report Number	Agency	Additional Forms Attached: <input type="checkbox"/> Narrative <input checked="" type="checkbox"/> SA 707 <input type="checkbox"/> Persons <input checked="" type="checkbox"/> Property <input type="checkbox"/> Veh./Tow Sheet <input type="checkbox"/> Other Describe: _____		
	Officer Reporting - Printed	Officer Reporting - Signature		ID. Number	Unit
	Medina, Joel			8601	1X36
	Officer Reviewing - Printed (If Applicable)	Officer Reviewing - Signature (If Applicable)		ID. Number	Unit
				Date	Date
				01-10-2017	

# VOLUSIA COUNTY SHERIFF'S OFFICE

## NARRATIVE / SUPPLEMENT

<b>EVNT</b>	Report Date 01-10-2017	Report Time 1546	Orig. Reported Date 01-10-2017	Nature of Call (for Incident) <b>ABAT</b>	Agency Report Number 170000884	1.Original	2.Supplement	1
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NARRATIVE / CONTINUATION

8 law enforcement to investigate the incident.

9

10 Deputy Medina made contact with Adkins who advised the following:

11

12 Adkins stated on January 1, 2017, at approximately 2030 hours, he was laying face down on the bed inside his cell writing a letter when

13 Madison entered the cell. Adkins stated Madison grabbed his buttocks and said "I'm gonna take this ass." Adkins stated Madison was removing

14 his pants while attempting to remove Adkins's pants. Adkins stated he immediately began yelling at Madison and started a physical altercation with

15 Madison in an effort to fight him off. Adkins advised Madison subsequently grabbed him by the neck and began strangling him to the point where

16 Adkins could not breathe. Adkins stated the altercation ended due to the correctional officers entering the area. Adkins stated while he was being

17 removed from the area, Madison was yelling at him making threats to have Adkins killed if he spoke about the altercation. Adkins stated he was

18 seen by the medical staff at the jail following the altercation which revealed Adkins suffered redness to his neck where he was choked. Adkins

19 stated Madison was unsuccessful in his efforts to sexually batter him; however, Adkins advised he wanted to press charges against Madison for

20 battery.

21

22 Deputy Medina made contact with Madison and immediately read him his Miranda rights to which Madison understood, waived, and agreed to

23 speak with Deputy Medina about the incident. Madison advised the following:

24

25 Madison stated he was upset with Adkins in reference to a prior incident and entered Adkins's cell and asked Adkins to return some of his

26 property. Madison stated he and Adkins engaged in a verbal argument. Madison stated he observed a piece of paper in Adkins's hand and

27 snatched it away from Adkins. Madison advised Adkins threw a punch at him and missed. [REDACTED]

28 [REDACTED]. Madison advised Adkins began tossing back and forth attempting to get out of Madison's grip. Madison

29 released Adkins [REDACTED]. Madison stated Adkins got off the bed and began another physical altercation with

30 him. [REDACTED]

31 [REDACTED]. Madison stated the altercation never escalated to anything sexual in nature.

32

33 Deputy Medina obtained a sworn written statement from Adkins and attached it to this report. Deputy Medina reviewed the report by completed

34 Lt. Thomas in reference to this incident. [REDACTED]. Deputy Medina

35 also reviewed the patient urgent care assessment completed by the jail's medical staff which was done shortly after the altercation and

36 documented that Adkins sustained redness to his neck consistent with the allegations. Deputy Medina was unable to obtain digital photographs of

37 Adkins' injuries due to the lapse in time from occurrence.

38

39 Deputy Medina concluded there was no probable cause to support that a sexual battery occurred; however, based on Madison's admission,

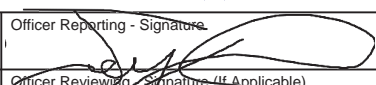
40 Deputy Medina arrested Madison for battery by a person who is being detained in a prison, jail, or other detention facility upon visitor or other

41 detainee. At the time of arrest, Madison was already in custody at the jail. Deputy Medina made the jail staff aware of the new charge. Madison

42 was given a no bond status on his new charge due to him being a sex offender.

43

44 Case Status: Closed

<b>ADMINISTRATIVE</b>	Final Case Status: <u>1</u>	Final Case Status Codes: 1.Arrest/Adult 2.Arrest/Juv. 3.Exceptional/Adult 4.Exceptional/Juv. 5.Closed 6.Unfounded	<input type="checkbox"/> Victim Advocate	<input type="checkbox"/> Triad	<input type="checkbox"/> SA Referral			
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Officer Reporting - Printed	Officer Reporting - Signature		ID. Number	Unit	Date			
Medina, Joel			8601	1X36	01-10-2017			
Officer Reviewing - Printed (If Applicable)	Officer Reviewing - Signature (If Applicable)		ID. Number	Unit	Date			

**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:	
(ORI) FL: <u>FL0640000</u>	Agency Name: <u>VOLUSIA COUNTY SHERIFF'S OFFICE</u>		Agency Case Number: <u>170000884</u>
FCIC/NCIC Check? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	OBTS #	U.C.R.:	Date Arrested: <u>01-10-2017</u> Time of Arrest: <u>1704</u>
ADDRESS OF ARREST (Street, City, State, Zip): <u>1300 RED JOHN DR DAYTONA BEACH FL 32124</u>		Arrested By: <u>Medina,Joel</u>	ID Number: <u>8601</u>
<b>DEFENDANT</b>	NAME (Last) <u>MADISON</u> (First) <u>ERIC</u> (Middle) <u>D</u>	A.K.A.:	Sex: <u>M</u> Race: <u>B</u>
DOB: <u>06-27-1971</u>	Age: <u>45</u> Driver's Lic./ID No.: <u>M325204712270</u>	State: <u>FL</u> Year Expires: <u>2019</u>	S.S.# - <u>[REDACTED]</u>
Height: <u>5' 09</u>	Weight: <u>190</u> Hair: <u>BLD</u> Eyes: <u>BRO</u>	P.O.B. (City, State, Country): <u>FL</u>	Statement: Yes <input checked="" type="checkbox"/> No <input 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>949 VERNON ST</u>		(CITY) <u>DAYTONA BEACH</u> (STATE) <u>FL</u>	ZIP CODE <u>32114</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

<b>CHARGES</b>	DOMESTIC VIOLENCE? Yes <input type="checkbox"/>	Attachments: Affidavit(s)? <input type="checkbox"/>	Statement(s) <input checked="" 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>1</u>
#1 Charge: <u>Battery-Prsn.Detained in Prison/Jail</u>	FEL <input checked="" type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: <u>784.082(3)</u>	Citation No.: <u>N/A</u>	Bond: <u>NO BOND</u>				
#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:				

<b>CO-DEFENDANT</b>	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 01 day of January, 2017, at approximately 0830  a.m.  p.m. at 1300 RED JOHN DR DAYTONA BEACH within Volusia County, violated the law and did then and there:

1 On January 10, 2017, at approximately 1549 hours, Deputy Medina was dispatched to the Volusia County Branch Jail in reference to a battery  
2 complaint. Upon arrival, Deputy Medina made contact with Lt. Thomas (R1) who advised the following:  
3  
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5 sexual battery attempt that occurred between two inmates. Lt. Thomas immediately initiated an investigation and discovered the inmates involved  
6 were Branden S. Adkins (V1) and Eric D. Madison (S1). Lt. Thomas advised she made contact with Adkins who advised her the physical altercation  
7 which occurred with Madison on 01/01/17 was due to Madison making sexual advances towards Adkins. Lt. Thomas then contacted law enforcement  
8 to investigate the incident.  
9  
10 Deputy Medina made contact with Adkins who advised the following:  
11

<b>NOTICE TO APPEAR</b>	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:
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		RELATIONSHIP TO JUVENILE	JUVE DISP. CITATION No.
Date			

Sworn to and subscribed before me, the undersigned this <u>10</u> day of <u>January</u> , <u>2017</u> , Name: <u>[Signature]</u>	I swear/affirm the above statements are correct and true <u>[Signature]</u> OFFICER'S/COMPLAINANT'S SIGNATURE	Rt Thumb
Notary Public <input type="checkbox"/> Law Enforcement or Corrections Officer <input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/> Type of Identification: _____	<u>MEDINA,JOEL</u> NAME (PRINTED)	<u>8601</u> ID NUMBER

**OFFICIAL USE ONLY** Inmate Number & Facility:

**Narrative Supplement 707-B**

Arrest  
 Affidavit  
 Notice to Appear  
 Adult  
 Juvenile

**Court Case Number:**

Defendant Name: <b>MADISON</b>	(Last)	(First)	(Middle)	Agency Case Number: <b>170000884</b>
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<b>CHARGES</b>	DOMESTIC VIOLENCE? Yes <input type="checkbox"/>	Attachments: Affidavit(s)? <input type="checkbox"/>	Statement(s) <input checked="" type="checkbox"/>	NTA Schedule <input type="checkbox"/>	Report <input checked="" type="checkbox"/>	Traffic Infraction(s) <input type="checkbox"/>	Total Charges: <b>1</b>
#	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:		

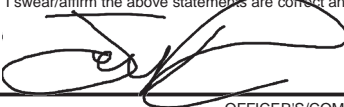
12 Adkins stated on January 1, 2017, at approximately 2030 hours, he was laying face down on the bed inside his cell writing a letter when Madison  
 13 entered the cell. Adkins stated Madison grabbed his buttocks and said "I'm gonna take this ass." Adkins stated Madison was removing his pants  
 14 while attempting to remove Adkins's pants. Adkins stated he immediately began yelling at Madison and started a physical altercation with Madison in  
 15 an effort to fight him off. Adkins advised Madison subsequently grabbed him by the neck and began strangling him to the point where Adkins could  
 16 not breathe. Adkins stated the altercation ended due to the correctional officers entering the area. Adkins stated while he was being removed from  
 17 the area, Madison was yelling at him making threats to have Adkins killed if he spoke about the altercation. Adkins stated he was seen by the medical  
 18 staff at the jail following the altercation which revealed Adkins suffered redness to his neck where he was choked. Adkins stated Madison was  
 19 unsuccessful in his efforts to sexually batter him; however, Adkins advised he wanted to press charges against Madison for battery.

21 Deputy Medina made contact with Madison and immediately read him his Miranda rights to which Madison understood, waived, and agreed to  
 22 speak with Deputy Medina about the incident. Madison advised the following:

24 Madison stated he was upset with Adkins in reference to a prior incident and entered Adkins's cell and asked Adkins to return some of his  
 25 property. Madison stated he and Adkins engaged in a verbal argument. Madison stated he observed a piece of paper in Adkins's hand and snatched  
 26 it away from Adkins. Madison advised Adkins threw a punch at him and missed. [REDACTED]  
 27 [REDACTED]. Madison advised Adkins began tossing back and forth attempting to get out of Madison's grip. Madison released Adkins  
 28 [REDACTED]. Madison stated Adkins got off the bed and began another physical altercation with him. [REDACTED]  
 29 [REDACTED]  
 30 [REDACTED]. Madison stated the altercation never escalated to anything sexual in nature.

32 Deputy Medina obtained a sworn written statement from Adkins and attached it to this report. Deputy Medina reviewed the report by completed Lt.  
 33 Thomas in reference to this incident. [REDACTED]. Deputy Medina also  
 34 reviewed the patient urgent care assessment completed by the jail's medical staff which was done shortly after the altercation and documented that  
 35 Adkins sustained redness to his neck consistent with the allegations. Deputy Medina was unable to obtain digital photographs of Adkins' injuries due  
 36 to the lapse in time from occurrence.

38 Deputy Medina concluded there was no probable cause to support that a sexual battery occurred; however, based on Madison's admission,  
 39 Deputy Medina arrested Madison for battery by a person who is being detained in a prison, jail, or other detention facility upon visitor or other  
 40 detainee. At the time of arrest, Madison was already in custody at the jail. Deputy Medina made the jail staff aware of the new charge. Madison was  
 41 given a no bond status on the new charge due to him being a sex offender.

Sworn to and subscribed before me, the undersigned this <u>10</u> day of <u>January</u> , 2017, Name: <u>[Signature]</u>	I swear/affirm the above statements are correct and true  OFFICER'S/COMPLAINANT'S SIGNATURE	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:	MEDINA, JOEL NAME (PRINTED)	8601 ID NUMBER