

Adult Def PC Arrest
 Juvenile Def Application for
Warrant/Capias

AFFIDAVIT – COMPLAINT

Clerk's Case No. _____

SA Case No.(s) _____

Agency ORI # FL037275C

PAGE 01 of 3

1. Agency Name: Fl. Dept. of Corrections-Office of Inspector General		2. Agency Report Number: 20-15057		3. Charge Type: <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor <input type="checkbox"/> w/associated felony		3a. Ordinance Type: (If applicable) <input type="checkbox"/> Municipal <input type="checkbox"/> County	
4. Date/Time of Offense: 08/26/2020 @ 6:57 P.M.		5. //Date/Time of Arrest: 08/26/2020 @3:57 a.m.		//6. Arresting Officer: Inspector William Dalton		7. Investigating Officer: Inspector William Dalton	

8. Defendant's Name: (Last) Shannon (First) Marvin (Middle) _____ ALIAS _____			9. OBTS: _____			
10. Race/Sex: B/M	11. Date of Birth: 11/17/1977	12. Residence Type: <input type="checkbox"/> City <input type="checkbox"/> County <input checked="" type="checkbox"/> Florida <input type="checkbox"/> Out of State		13. Weapon Seized <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	14. Controlled Substance Seized: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No TYPE & QUANTITY:	
15. Height: 5'09"	16. Weight: 190Lbs	17. Eye Color: Brown	18. Hair Color: BLACK	19. Scars, marks, tattoos, unique physical features: (Location, type & description)		
20. Driver's License Number/State:		21. Social Security Number: [REDACTED]		22. Residential Telephone:		23. Business Telephone: NA
24. Address: (Street, Apartment Number) Florida Department of Corrections (City) Sneads (State) Florida (Zip) 32460						

25. Defendant's Name: (Last) _____ (First) _____ (Middle) _____ ALIAS _____			26. OBTS: _____			
27. Race/Sex:	28. Date of Birth:	29. Residence Type: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Florida <input type="checkbox"/> Out of State		30. Weapon Seized <input type="checkbox"/> Yes <input type="checkbox"/> No	31. Controlled Substance Seized: <input type="checkbox"/> Yes <input type="checkbox"/> No TYPE & QUANTITY:	
32. Height:	33. Weight:	34. Eye Color:	35. Hair Color:	36. Scars, marks, tattoos, unique physical features: (Location, type & description)		
37. Driver's License Number/State:		38. Social Security Number:		39. Residential Telephone:		40. Business Telephone:
41. Address: (Street, Apartment Number) _____ (City) _____ (State) _____ (Zip) _____						

42. Defendant's Name: (Last) _____ (First) _____ (Middle) _____ ALIAS _____			43. OBTS: _____			
44. Race/Sex:	45. Date of Birth:	46. Residence Type: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Florida <input type="checkbox"/> Out of State		47. Weapon Seized <input type="checkbox"/> Yes <input type="checkbox"/> No	48. Controlled Substance Seized: <input type="checkbox"/> Yes <input type="checkbox"/> No TYPE & QUANTITY:	
49. Height:	50. Weight:	51. Eye Color:	52. Hair Color:	53. Scars, marks, tattoos, unique physical features: (Location, type & description)		
54. Driver's License Number/State:		55. Social Security Number:		56. Residential Telephone:		57. Business Telephone:
58. Address: (Street, Apartment Number) _____ (City) _____ (State) _____ (Zip) _____						

59. Charge Description: (# 1) Attempted Murder	60. Statute or Ordinance Number: 782.051	<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> Ord.
61. Charge Description: (# 1) Possession of Contraband in a State Correctional Institution	62. Statute or Ordinance Number: 944.47(1)(a)(5)	<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> Ord.
63. Charge Description: (# 1)	64. Statute or Ordinance Number:	<input type="checkbox"/> F.S. <input type="checkbox"/> Ord.

65. Victim's Name: (If business, list legal business name) (Last) State of Florida (First) _____ (Middle) _____			66. Race/Sex	67. Date of Birth:	68. Telephone Number:
69. Contact Person if victim is deceased, a minor child, or business: (Last) Inspector William Dalton (First) _____ (Middle) _____			70. Race/Sex	71. Date of Birth:	72. Telephone Number: (850) 688-6102
73. Address: (Street, Apartment Number) 5563 10th Street (City) Malone (State) Florida (Zip) 32445			74. Secondary Phone Number: (850) 569-1804		

75. Victim Notification of Arrest: NOTIFIED BY: _____ DATE: _____ TIME: _____		76. Information Given: <input type="checkbox"/> Victim <input type="checkbox"/> Rights Card <input type="checkbox"/> App. Info <input type="checkbox"/> Arrest Info <input type="checkbox"/> Domestic <input type="checkbox"/> Viol. Info	
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77. Physical Evidence collected in this case? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	78. Witness Statements taken in this case? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	79. I certify that all of the above information is true and correct to the best of my knowledge and is page 01 of a 2 page affidavit/complaint  Officer/Complainant Signature	Insp. William Dalton Type or print Complainant name
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- Adult Def PC Arrest
 Juvenile Def Application for
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AFFIDAVIT – COMPLAINT (PROBABLE CAUSE NARRATIVE)

Clerk's Case No. _____
SA Case No.(s) _____

80. Agency Name: Florida Department of Corrections Office of Inspector General	81. Agency Report Number: 20-15057	82. Date/Time of Arrest: 08/26/2020 @3:57 a.m.	83. Investigating Officer: Insp. William Dalton
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84. NARRATIVE OF THE FACTUAL BASIS FOR PROBABLE CAUSE: The undersigned certifies and swears that he/she has just and reasonable grounds to believe that the heretofore named defendant did commit the violations of law as stated above and the factual basis for this belief is as follows:

Your Affiant is Inspector William "Eddie" Dalton of the Office of the Inspector General, Florida Department of Corrections.

Your Affiant has probable cause to believe Inmate Marvin Shannon DC#459421, did commit the criminal offenses of Attempted Murder in violation of F.S.S. 782.051 and Possession of Contraband in a State Correctional Institution, to wit homemade knife in violation of F.S.S. 944.47(1)(a)(5), when Inmate Shannon removed a homemade knife, commonly referred to as a shank from his person with full intention of stabbing and killing a staff member, who was dressed in official Department of Correction uniform, and identifying themselves as a Correctional Officer in the lawful performance of his duties.

In a sworn statement, [REDACTED] advised [REDACTED]

In a post miranda sworn statement, Inmate Shannon advised on August 26, 2020, he was in an unauthorized area of M-dormitory when [REDACTED] entered M-dormitory he asked Inmate Shannon to step outside, which he complied. Inmate Shannon indicated once outside, [REDACTED] instructed him to turn around a "cuff up" you are going to confinement. Inmate Shannon advised [REDACTED] indicated to him that he was going to "beat" Inmate Shannon once he was placed in hand restraints and taken to Y-dormitory (confinement). Inmate Shannon advised [REDACTED]

A review of the video recording system for M-Dormitory area of Apalachee Correctional Institution, East Unit showed [REDACTED] entering M-dormitory and making contact with Inmate Shannon. Inmate Shannon can be seen acting aggressively by swinging his arms back and forth and getting in [REDACTED] face. Other Inmates can be seen attempting to restrain Inmate Shannon. [REDACTED] and Inmate Shannon exit M-dormitory and Inmate Shannon returns a few seconds later. Inmate Shannon then walked towards the center of the room and Inmate Shannon can be seen reaching in his pants. Inmate Shannon can be seen walking in an aggressive manner towards [REDACTED] and Sergeant Booth. Inmate Shannon was holding a weapon in his right hand and can be seen stabbing [REDACTED] in the left shoulder area. Inmate Shannon then ran towards [REDACTED] and Sergeant Booth in an aggressive manner. Sergeant Booth utilize chemical agents to Inmate Shannon's person which caused Inmate Shannon to slip and fall to the ground. [REDACTED] and Booth was able to exited M-dormitory before Inmate Shannon could get back to his feet.

Your Affiant respectfully submits that probable cause has been established that Inmate Marvin Shannon DC#459421 did commit the criminal violation of Attempted Murder, in violation of F.S.S. 782.051 and Possession of Contraband in a State Correctional Institution, to wit a homemade knife in violation of FS 944.47(1)(a)(5), when Inmate Shannon utilized a homemade weapon to stab [REDACTED] at Apalachee Correctional Institution in Jackson County, Florida.

85. The undersigned, being duly sworn, states that the foregoing information contained in an affidavit consisting of 3 pages is true and correct to the best of his/her knowledge

Sworn to and subscribed before me this 27 day of Aug, 2020

William Dalton
Signature of Officer/Complainant

Cokey Helms
Signature of Person Administering Oath
 Personally Known Other Identification

Inspector William Dalton Badge # 029 ID Number
Officer/Complainant's Name (Printed) ID Number

Seal ID Type

87. Adult's Relation to Juvenile Defendant: <input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other _____		88. Adult's Name: (Last) _____ (First) _____ (Middle) _____	
89. Address: (Street, Apartment Number) _____ (City) _____ (State) _____ (Zip) _____		90. Residential Phone: _____	91. Business Phone _____
92. Notified By: (Name) _____		93. Date/Time: _____	94. Notification Method: <input type="checkbox"/> Person <input type="checkbox"/> Telephone
95. Law Enforcement Disposition of Juvenile Contact: (Check one and complete release data)		Processed within the agency and released	
<input type="checkbox"/> Transferred to _____ <input type="checkbox"/> Secure Detention		<input type="checkbox"/> Released to _____ <input type="checkbox"/> HRS Intake Officer, not detained	
Release Date: _____	Release Time: _____	Released to (Name): _____	