

Adult Def  PC Arrest  
 Juvenile Def  Application for  
Warrant/Capias

# AFFIDAVIT – COMPLAINT

Clerk's Case No. \_\_\_\_\_  
SA Case No.(s) \_\_\_\_\_

PAGE 01 of 03

Agency ORI # **FL037275C**

1. Agency Name: <b>Office of Inspector General - FDC</b>		2. Agency Report Number: <b>24-01027</b>		3. Charge Type: <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Misdemeanor w/associated felony <input type="checkbox"/> Municipal <input type="checkbox"/> County		3a. Ordinance Type: (If applicable) <input type="checkbox"/> Municipal <input type="checkbox"/> County	
4. Date/Time of Offense: <b>01/16/2024 1:30 P.M.</b>		5. Date/Time of Arrest: <b>Pending</b>		6. Arresting Officer: <b>Pending</b>		7. Investigating Officer: <b>Detective Treza Green</b>	


8. Defendant's Name: (Last) <b>Ben-Israel</b>			(First) <b>Yowab</b>			(Middle)			ALIAS			9. OBTS:			
10. Race/Sex: <b>B/M</b>		11. Date of Birth: <b>11/5/1968</b>		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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No			14. Controlled Substance Seized: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No TYPE & QUANTITY:					
15. Height: <b>5ft8</b>		16. Weight: <b>167lbs</b>		17. Eye Color: <b>Brown</b>		18. Hair Color: <b>Black</b>		19. Scars, marks, tattoos, unique physical features: (Location, type & description)							
20. Driver's License Number/State: <b>B260800684050/ Florida</b>				21. Social Security Number: [REDACTED]				22. Residential Telephone: <b>N/A</b>				23. Business Telephone: <b>N/A</b>			
35 35 Apalachee Drive			(City) <b>Sneads</b>			(State) <b>Florida</b>			(Zip) <b>32460</b>						

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) <b>Aggravated Battery of a Law Enforcement Officer</b>					60. Statute or Ordinance Number: <b>784.045 (1)(a)(1) Degree Felony</b>					<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> Ord.				
61. Charge Description: (# 2) <b>Obstruction/Resisting an Officer with Violence to his or her person (2 counts)</b>					62. Statute or Ordinance Number: <b>843.01 3<sup>rd</sup> Degree Felony</b>					<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> Ord.				
63. Charge Description: (# 3) <b>Battery of a Law Enforcement Officer</b>					64. Statute or Ordinance Number: <b>784.07 (2)(b)</b>					<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> Ord.				

65. Victim's Name: (If business, list legal business name) (Last)			(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)			(First)			(Middle)			70. Race/Sex:		71. Date of Birth:		72. Telephone Number:		
73. Address: (Street, Apartment Number)			(City)			(State)			(Zip)			74. Secondary Phone Number:			
75. Victim Notification of Arrest: NOTIFIED BY: _____ DATE: _____ TIME: _____								76. Information Given: Victim <input type="checkbox"/> Arrest Info <input type="checkbox"/> Rights Card <input type="checkbox"/> App. Info <input type="checkbox"/> Domestic <input type="checkbox"/> Viol. Info							

77. Physical Evidence collected in this case? <input type="checkbox"/> Yes <input checked="" 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 03 page affidavit/complaint.			
Evidence Custodian's Name:		Person responsible for statements: <b>Inspector Treza Green</b>		Officer/Complainant Signature 		Detective Treza Green Type or print Complainant name	

Adult Def  PC Arrest  
 Juvenile Def  Application for  
Warrant/Capias

# AFFIDAVIT – COMPLAINT (PROBABLE CAUSE NARRATIVE)

Clerk's Case No. \_\_\_\_\_

SA Case No.(s) \_\_\_\_\_

PAGE 02 of 03

Agency ORI # **FL037275C**

80. Agency Name: <b>Office of Inspector General - FDC</b>	81. Agency Report Number: <b>24-01027</b>	82. Date/Time of Arrest: <b>Pending</b>	83. Investigating Officer: <b>Detective Treza N. Green</b>
--	--	--	---

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 Law Enforcement Detective Treza N. Green of the Florida Department of Corrections, Office of the Inspector General.

Your Affiant has probable cause to believe on January 16, 2024, at 1:36 p.m. Inmate Yowab Ben-Israel (Inmate Ben-Israel) in the County of Jackson and the State of Florida, did commit the criminal offense of Aggravated Battery of a Law Enforcement Officer in violation of Florida Statute 784.045 (1)(a)(1), when Yowab Ben-Israel did actually and intentionally batter [REDACTED] by striking him in his head and facial area several times with a closed fist, [REDACTED]

Your Affiant has probable cause to believe on January 16, 2024, at 1:36 p.m. Inmate Yowab Ben-Israel (Inmate Ben-Israel) in the County of Jackson and the State of Florida, did commit the criminal offense of Battery of a Law Enforcement Officer in violation of Florida Statute 784.07 (2)(b), when Yowab Ben-Israel did actually and intentionally battered [REDACTED] striking him in his head area several times with a closed fist, [REDACTED]

Your Affiant has probable cause to believe Inmate Yowab Ben-Israel (Inmate Ben-Israel) committed the criminal offense of Obstruction Resisting with Violence, in violation of s. 843.01 Florida Statute, when Inmate Ben-Israel refused to comply with the Lawful order of [REDACTED] by refusing to submit to hand restraints, and by physically battering [REDACTED] in his head and facial area [REDACTED]

Your Affiant has probable cause to believe Inmate Yowab Ben-Israel (Inmate Ben-Israel) committed the criminal offense of Obstruction Resisting with Violence, in violation of s. 843.01 Florida Statute, when Inmate Ben-Israel refused to comply with the Lawful order of [REDACTED] by refusing to submit to hand restraints, and by physically battering [REDACTED] in his head area several times with a closed fist, [REDACTED]

On or about January 16, 2024, at 1:49 p.m. the Florida Department of Corrections, Office of the Inspector General, received allegations indicating [REDACTED] had been physically battered (with a closed fist) by Florida Department of Corrections Inmate Yowab Ben-Israel (Inmate Ben-Israel) who is being housed at Apalachee Correctional Institution (A.C.I.), [REDACTED]

## STATEMENT VICTIM [REDACTED]

On January 16, 2024, at 1:56 p.m. Detective Treza Green (Detective Green), responded to A.C.I. East Unit [REDACTED] and met with [REDACTED] to check [REDACTED] and to obtain his statement. [REDACTED] indicated that he wanted to provide a statement regarding his physical attack. In his digitally recorded sworn statement, [REDACTED] stated the following:

[REDACTED]

## STATEMENT VICTIM [REDACTED]

[REDACTED] responded to the scene to assist with apprehending Inmate Ben-Israel. On January 16, 2024, at 2:58 p.m., Detective Green met with [REDACTED] to obtain his statement. In his digitally recorded statement, [REDACTED] stated the following:

[REDACTED]

Sworn testimony was obtained from Inmate Yowab Ben-Israel (Inmate Ben-Israel) DC# 109667 who is currently housed at Apalachee Correctional Institution, Post Miranda Warnings, Inmate Ben-Israel [REDACTED]

[REDACTED]

During this investigation, I (Detective Green) reviewed the fixed wing video from [REDACTED] which captured the physical attack of [REDACTED]. After review of the video, Detective Green observed [REDACTED] attempting to place hand restraints on a black male inmate (later identified as Inmate Ben-Israel) near the center gate at approximately 1:35 p.m. Inmate Ben-Israel was observed turning around facing [REDACTED] and strike him in his facial area. Inmate Ben-Israel was observed striking [REDACTED] several times in his facial area causing him to fall backwards to the ground. Inmate Ben-Israel was observed standing over [REDACTED] continuously striking him [REDACTED]. Inmate Ben-Israel was observed grabbing what appeared to be [REDACTED] chemical agents cannister from his hand and began to walk away from the spot where [REDACTED] lay [REDACTED] and other staff members were observed entering the gate house moving towards Inmate Ben-Israel [REDACTED].

Based on the evidence compiled in this investigation and summarized in this affidavit, your Affiant submits probable cause is established that the defendant, Yowab Ben-Israel, knowingly battered [REDACTED] while housed at Apalachee Correctional Institution.

Inmate Ben-Israel was later identified by Correctional Officer Colonel William Jenkins as well as by [REDACTED] as the person responsible for physically battering and physically resisting [REDACTED].

Your Affiant submits probable cause has been establish for the warrantless arrest for Florida Department of Corrections Inmate Yowab Ben-Israel, DOB 11/05/1968, in Jackson County Florida, for one count each a violation of s. F.S.S. 784.045 (1)(a)(1), the law relating to Aggravated Battery of a Law Enforcement Officer, a violation of s. 843.01, the law relation to Obstruction/ Resisting a Law Enforcement Officer with Violence two (2) counts, and s. 784.07 (2) (b) the law relating to Battery of a Law Enforcement Officer.

All supporting documents referred to in this affidavit will be available for judicial review and will be further explained in your Affiant's report of investigation.

85. The undersigned, being duly sworn, states that the foregoing information contained in an affidavit consisting of 02 pages is true and correct to the best of his/her knowledge.	Sworn to and subscribed before me this <u>16</u> day of <u>January</u> , 2024.
Signature of Officer/Complainant <b>Inspector Treza N. Green</b>	Signature of Person Administering Oath
Officer/Complainant's Name (Printed)	<input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Other Identification
ID Number	ID Type
Seal	Seal

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: _____
95. Law Enforcement Disposition of Juvenile Contact: (Check one and complete release data)	
<input type="checkbox"/> Transferred to Secure Detention <input type="checkbox"/> Released to HRS Intake Officer, not detained <input type="checkbox"/> Processed within the agency and released to other than HRS	
Release Date: _____ Release Time: _____ Released to (Name): _____	