

**FDLE**Florida Department of  
Law Enforcement**INTERNAL INVESTIGATION REPORT**

Incorporated by Reference in Rule 11B-27.003(2)(a), F.A.C.

**CJSTC**  
**78****Please type or print in black or blue ink and use capital and small letters for names, titles, and addresses****OFFICER**

1. Social Security Number:
2. Officer's Name:
3. Officer's Last Known Address:
4. Officer's Telephone Number:

[REDACTED]  
**McGuire, Shon D,**  
[REDACTED]  
[REDACTED]**AGENCY**

- |                           |                              |  |  |
|---------------------------|------------------------------|--|--|
| 5. Agency ORI:            | <b>FL0640000</b>             | 6. Agency Name:                              | <b>Volusia County Sheriff's Office</b> |
| 7. Agency Contact Person: | <b>Lieutenant Erik Eagan</b> | 8. Agency Contact Person's Telephone Number: | <b>(386)736-5961</b>                   |
| 9. Agency FAX Number:     | <b>(386)740-5190</b>         |  |  |

**VIOLATION - ALLEGATION**

10. Nature of Allegation(s): **Anonymous complaint of extramarital affair while on-duty.**
11. Agency Disposition: Sustained - (Violation of Section 943.13(4) or (7) or Rule 11B-27.0011, F.A.C.) ☐  
Sustained - (Violation of Agency Policy) ☐ Not Sustained ☐ Unfounded ☒ Exonerated ☐

12. Limitation Period for Disciplinary Action: Date Internal Investigation Initiated: 03/09/2012 Date Internal Investigation Completed: 04/10/2012

**Exception to limitation period for disciplinary action: Place a check mark by the exception to limitations that apply****Days Told**

- ☐ Written waiver of limitation by officer
- ☐ Ongoing criminal investigation or criminal prosecution
- ☐ Officer incapacitated or unavailable
- ☐ Multi-jurisdictional investigation
- ☐ Emergency or natural disaster as declared by the Governor

13. Criminal Charges Filed: **N/A**
14. Agency Disciplinary Action: **N/A**

15. If the allegation has been sustained and determined to be a violation of Section 943.13(4) or (7), F.S. or Rule 11B-27.0011, F.A.C., attach and forward the following documentation to the Florida Department of Law Enforcement.

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Summary of the Facts          | <input type="checkbox"/> Internal Investigation Report | <input type="checkbox"/> Name & Address of Witness    |
| <input type="checkbox"/> Witness Statement/Disposition | <input type="checkbox"/> Certified Court Documents     | <input type="checkbox"/> Other Supportive Information |

**NOTICE:** Pursuant to Section 943.1395(5), F.S., an employing agency must conduct an internal investigation when having cause to suspect that an officer it employs is not in compliance with Section 943.13(4) or (7), F.S. or Rule 11B-27.0011, F.A.C. If the investigation is sustained, the employing agency must forward a report to the Commission as specified by Rule 11B-27.003.

16. Agency administrator's signature

**April 18, 2012**

17. Date Signed

**Sheriff Ben F. Johnson**

18. Agency administrator's name and title