## **INTERNAL INVESTIGATION REPORT**

Florida Department of Law Enforcement

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



Please type or pr	Int in black or blue ink a		for names, titles, and addresses	
4 Casial Cassuit Atomshau		OFFICER		
Social Security Number:     Officer's Name:		Turney, Joel H		
Officer's Last Known Address:		rumey, Joer H		
4. Officer's Telephone Num	,			
		AGENCY		
5. Agency ORI:	FL0640000	6. Agency Name:	Volusia County Sheriff's Offic	e
7. Agency Contact Person:	Lieutenant R. Gogg	in 8. Agency Contact Personal Telephone Number:	on's 386-736-5961	
9. Agency FAX Number:	386-740-5190			
	VIC	DLATION - ALLEGATION		
10. Nature of Allegation(s):	unfounded. Invest	igation did reveal below list	uring course of arrest. Allegation ed policy violations- 26.2.34 Failure t Not Endangering; 26.2.5 Neglect of	0
11. Agency Disposition:	Sustained - (Violation	of Section 943.13(4) or (7) or	Rule 11B-27.0011, F.A.C.)	
Sustained - (Violation of A	·	Not Sustained 🗔	Unfounded   Exonerated	<u> </u>
12. Limitation Period for Disc Action:		nal Investigation 12/23/2009	Date Internal Investigation Completed: 01/19/2010	
Exception to limitation   limitation	period for disciplinar	y action: Place a check mar	k by the exception to Days Tolled	
Written waiver of li	mitation by officer			
_ <del>_</del>	nvestigation or crimina	prosecution		
Officer incapacitate	ed or unavailable			
Multi-jurisdictional	_			
Emergency or natu	ıral disaster as declare	d by the Governor		
13. Criminal Charges Filed: I	None			
14. Agency Disciplinary Actio		1		
15. If the allegation has been 27.0011, F.A.C., attach at	sustained and determ	ined to be a violation of Sectic g documentation to the Florida	on 943.13(4) or (7), F.S. or Rule 11B- a Department of Law Enforcement.	
Summary of the Facts	🖸 Inte	nal Investigation Report	Name & Address of Witness	
Witness Statement/Dispos	sition   Cert	ified Court Documents	C Other Supportive Information	
cause to suspect that an office	er it employs is not in a	compliance with Section 943.1	uct an internal investigation when havin 3(4) or (7), F.S. or Rule 11B-27.0011, a report to the Commission as speci	_
Will	Thee		3/3/10	
16. Agency administrator's si		1	7. Date Signed	

DEMITT
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18. Agency administrator's name and title

Effective 1/1/1993 Revised 11/8/2007

## FDLE

## **INTERNAL INVESTIGATION REPORT**

Florida Department of Law Enforcement Incorporated by Reference in Rule 11B-27.003(2)(a), F.A.C.



CJSTC 78

Please type or p	rint in black or blue ink and	use capital and small letters of OFFICER	for names, titles, and addresses
Social Security Number:			
2. Officer's Name:	· · · · · · · · · · · · · · · · · · ·	dee, Charles Robison	
3. Officer's Last Known Ad			
4. Officer's Telephone Nun	nber:		-
		AGENCY	
5. Agency ORI:	FL0640000	6. Agency Name:	Volusia County Sheriff's Office
7. Agency Contact Person:	Lleutenant R. Goggin	<ol><li>Agency Contact Person Telephone Number:</li></ol>	<sup>n's</sup> 386-736-5961
9. Agency FAX Number:	386-740-5190	. Staphona (talinasi)	
	VIOLA	ATION - ALLEGATION	
10. Nature of Allegation(s):	unfounded. Investiga	tion did reveal below lister	ring course of arrest. Allegation d policy violations- 26.2.34 Failure to Not Endangering; 26.2.5 Neglect of
11 Agong Disposition	duty;		
11. Agency Disposition:			tule 11B-27.0011, F.A.C.) □
Sustained - (Violation of	Agency Policy)	Not Sustained	Unfounded
12. Limitation Period for Disc Action:	ciplinary Date Internal Initiated: 12/	Investigation 23/2009	Date Internal Investigation Completed: 01/19/2010
Exception to limitation limitations that apply	period for disciplinary a	ction: Place a check mark	by the exception to Days Tolled
Written waiver of	limitation by officer		
Ongoing criminal	investigation or criminal pr	osecution	
Officer incapacitat			
Multi-jurisdictional	•		
Emergency or nat	ural disaster as declared b	y the Governor	
13. Criminal Charges Filed:	NONE.		
14. Agency Disciplinary Action	on: Written Reprimand.		
15. If the allegation has been 27.0011, F.A.C., attach a	n sustained and determine and forward the following d	d to be a violation of Section ocumentation to the Florida	943.13(4) or (7), F.S. or Rule 11B- Department of Law Enforcement.
Summary of the Facts	🗀 Interna	Investigation Report	☐ Name & Address of Witness
☐ Witness Statement/Dispo	osition 🗀 Certifie	d Court Documents	Other Supportive Information
cause to suspect that an office F.A.C. If the investigation is by Rule 11B-27.003.	cer it employs is not in com is sustained, the employ	pliance with Section 943.13	ct an internal investigation when having (4) or (7), F.S. or Rule 11B-27.0011, report to the Commission as specified
Wille	in Rple		3/3/10
16. Agency administrator's s		17	. Date Signed

WILLIAM R. LEE

CHIEF DEPLAY

18. Agency administrator's name and title

Effective 1/1/1993 Revised 11/8/2007