VOLUSIA COUNTY SHERIFF'S OFFICE

| | Juvenile | | Hate Crime | | | | | INCIE | DENT | Γ RE | PORT | | | | Page | 1_ | of | 4Pages |
|----------------|-----------------------------------|--------------------------------|--------------------------------|--------------------------------|----------------------|--|------------------|------------------------|------------------------|----------|-------------------|---------------------------------|------------------------------|------------------|--------------------------------|------------------------|---------------------------------------|-------------------------------|
| | Gang | | J , | e / Exploitation | | | | | | | | | Agency Rep 11002655 | | nber | | | |
| | Domestic Vic | | R <u>S - Spou</u> | se | | ency ORI N | | | | | | Zone # | 1 | | Telephone Ha | ndled | 1. Yes | |
| | Reported: Day | Date | Time (n | nil) ı Time | FL0 Dispatched | 0640000 (mil.) | | Arrived (mi | 1) . | Time Co | ompleted (mil.) | 24 Nature o | f Call (Report 1 | Tyne) | Call? (T.H.C.) | | 2. No | 2 |
| | Saturday | 09-03-20 | 1 ' | 2328 | - | () | 2333 | | , | | mpieteu (mm.) | 338 | | | ıg Assault/B | atterv- | Snouse | (UCR) |
| | Incident Type: 1. Felony | 3. Misdeme 4. Traffic | eanor 5. | Ordinance | Incident: Da From | y Da | | Tir | me (mil.) | | Day | Date | | Time (r | | | uring: U - Unkno | |
| _ | 2. Traffic Felony | Misdem | neanor | | Saturda | ay 09 | -03-201 | | | | то | | | | N - | Night | U - UTIKITO | N |
| AT/ | Offense #1 | l *' | te Violation Nui)3(1)(A)1 | mber | | | | Description Battery | | Strike | | | | | | Attempted Committed | С | |
| T D | #2 | Statut | te Violation Nu | mber | | | | Description | | | | | | | | Attempted | | |
| EVENT DATA | Incident Location | (Street, Apt. No | umber) | | | City | | | | | | | C - Committed Zip | | | | | |
| | XXXXXXXX | | | 1 | | DELAND d Drug Related Alcohol Related Forced Ent | | | | | | | 1 | | 32720 | | | |
| | Business Name / | Area Identifier | | # Prem. E | |). N/A 1. | Yes | | A 1. Yes | | Forced Entr | , . | Arson-Inha 1. Occupie | d 3 | . Abandoned | ' | Arson-Atter 1. Yes | |
| | Location Type | Location Type | Codes | | | 2. | No 2 | | 2. No | | 2. No | [2 | 2. Unoccup | oied | | | 2. No | |
| | | 01.Residence- 02.Apartment/ | | Convenience Sto Gas Station | | permarket pt/Discoun | | | /Financia mercial/C | | | | 21.Airport 22.Bus/Rail Te | rminal | 25.Parking Lot 26.Highway/R | | | Motor Vehicle Other Mobile |
| | 01 | 03.Residence | | iquor Sales Bar/Nightclub | 11.Spe | ecialty Sto | re | 15.Indus | strial/Mfg. | | 19.Jail/F | | 23.Construction | | 27.Park/Wood | | eld 88.L 99.C | Jnknown Other |
| | V/W Code | | Victim/Subject 0. N/A | | Addre | ss/Phone | Туре | | | | Race | | Sex | Resid | ence Type | F | Residence S | |
| (0 | W-Witness O | -Other | 1. Juvenile 2. L.E. Officer | Governmen | t C. Ce | | N. I | Message Next of Kin | | chool | 1 |)-Oriental/Asian J-Unknown | M-Male F-Female | 0. NA 1. City | / 4. Out-of-S | State 1 |). N/A I. Full Year 2. Par. Yea | |
| CODES | R-Reporting Per | son i | 3. Adult | 9. Other | | H. Home O. Other V. Vacation | | | | | I-American Ir | ndian | U-Unknown | 2. Co | | 3 | . Non-Res | ident |
| 00 | Means of Attack F-Firearm | | Dangerous | Extent of 00.N/A | 03.1 | Laceration | | | | | | | Domestic \ | | S-Spouse | B-S | hip to Offer ibling | Z-Other |
| | K-Knife/Cutting | Inst. H-Hands | s, Fists, Feet, E | tc. 01.Guns 02.Stabb | | Unconscio Poss.Brok | | | oss of Tee urns | eth | | isible Injury Serious Injury | 2. No | | P-Parent C-Child | | other Famil o-Habitant | |
| | Offense Indicat | | N Code # | V. Type | Nature of 0 | Call (for Vi | ctim, if dif | ferent from | n Incident |) | Name (Last/E | Business) | (| First) | | | | (Middle) |
| ESS | 2. #2 Address (Street, | 1 V | 1 | 3 | | | | | | City | Fernandez | z-Stott State | R Zip | osa | Resi | dence Ph | one | M |
| Ž | XXXXXXXXX | | | | | | | | | DELAN | | Oldio | 32720 |) | | XXXXX | | |
| \mathbb{N} | Business/School/ | Other Address | (Street, Apt. No | umber) | | City | | S | State | | Zip | | Address T | ype | Business/Schoo | ol/Other F | hone | Phone Type |
| I | Other Contact Inf | fo (Time Availab | ole, Interpreter, | etc.) | | | | Syno | psis of In | volveme | ent | | | | | | | |
| VICTIM/WITNE | | Race | Sex | Date of Birth | | Age | Ethnicity | | of D1 | /ne | Res. Status | Means of Attack | Extent of | Injury | Domestic Vic | lence | Relation | ehin |
| | If Victim Type 1, 2, or 3 | W | F | 08-07-1965 | | 46 | Н | • | 2 | | 1 | H | 09 | irijury | 1 | лепсе | S | silip |
| , | Offense Indicator 1. #1 3. Bot | th I | N Code # | V. Type | Nature of 0 | Call (for Vi | ctim, if dif | ferent from | n Incident |) | Name (Last/E | , | • | First) | | | | (Middle) |
| VICTIM/WITNESS | 2. #2 Address (Street, | Apt. Number) | 1 | 3 | | | | | | City | Fernandez | State | M Zip | laria | Resi | dence Ph | none | R |
| Ľ | XXXXXXXXX | | | | | City | | | State | DELA | ND Zip | FL | 32720 Address T | | | XXXXX | | D |
| \mathbb{N} | Business/School/ | Other Address | (Street, Apt. N | umber) | | City | | | otate | | Ζip | | Address | ype | Business/Schoo | /Other P | none | Phone Type |
| ΙĽ | Other Contact Inf | | | | 1 ' | psis of In | | ent | | | | | | | | | | |
| > | If Victim Type | Race | Sex | Date of Birth | | Age | Ethnicity | | Res. Ty | | Res. Status | Means of Attack | Extent of | Injury | Domestic Vic | lence | Relation | ship |
| | 1, 2, or 3 Offense Indicator | W | F W Code # | 04-09-1936 | Nature of (| 75 | H otim if dif | foront from | 2 | , | 1 Name (Last/E | Pusinoss) | | Firet) | | | | (Middle) |
| S | 1. #1 3. Bot | | V Code 7 | V. Type | Nature of 0 | Jali (IUI VI | cum, ii uii | iereni non | rinduent | , | Ivaille (Last/L | business) | (| First) | | | | (Middle) |
| VICTIM/WITNESS | 2. #2 Address (Street, | Apt. Number) | | | | | | | | City | <u> </u> | State | Zip | | Resi | dence Ph | none | |
| E | Business/School/ | Other Address | (Street Ant No | umher) | | City | | 5 | State | | Zip | | Address T | vpe | Business/Schoo | ol/Other F | hone | Phone Type |
| \ \ \ | Dadiness, Concon | Other Address | (Olicot, ript. 14 | umber) | | | | | | | —r | | | ,,,, | | | | T Hone Type |
| E | Other Contact Inf | fo (Time Availab | ole, Interpreter, | etc.) | | | | Syno | psis of In | volveme | ent | | | | | | | |
| > | If Victim Type | Race | Sex | Date of Birth | | Age | Ethnicity | / | Res. Ty | /ре | Res. Status | Means of Attack | Extent of | Injury | Domestic Vic | lence | Relation | ship |
| | 1, 2, or 3 Offense Indicator | · V/\ | N Code # | ¥ V. Type | Nature of 0 | Call (for Vi | ctim. if dif | ferent from | Incident |) | Name (Last/E | Business) | | First) | | | | (Middle) |
| SS | 1. #1 3. Bot 2. #2 | | | | | | | | | , | | , | , | , | | | | (, |
| 삙 | Address (Street, | Apt. Number) | • | | | | | | | City | | State | Zip | | Resi | dence Ph | none | |
| ΙI | Business/School/ | Other Address | (Street, Apt. N | umber) | | City | | 5 | State | | Zip | | Address T | уре | Business/School | ol/Other F | hone | Phone Type |
| M | Other Contact Inf | fo (Timo Avoilah | alo Interpretor | oto) | | | | Syno | psis of In | volvomo | ant . | | | | | | | |
| VICTIM/WITNE | Other Contact III | o (Time Availab | ne, interpreter, | | | | | Oyno | p3i3 01 iii | voiveine | | | | | | | | |
| > | If Victim Type 1, 2, or 3 | Race | Sex | Date of Birth | | Age | Ethnicity | / | Res. Ty | /pe | Res. Status | Means of Attack | Extent of | Injury | Domestic Vic | lence | Relation | ship |
| | Offense Indicator | | N Code # | V. Type | Nature of 0 | Call (for Vi | ctim, if dif | ferent from | n Incident |) | Name (Last/E | Business) | (| First) | | | ' | (Middle) |
| SS | 2. #2 Address (Street, | | | | | | | | | City | | State | Zip | | Dooi | dence Ph | | |
| 뜀 | | | | | | | | | | Oity | | Giale | | | | | | |
| .IM | Business/School/ | Other Address | (Street, Apt. No | umber) | | City | | S | State | | Zip | | Address T | уре | Business/School | ol/Other F | hone | Phone Type |
| IW L | Other Contact Inf | fo (Time Availab | ole, Interpreter, | etc.) | | | | Syno | psis of In | volveme | ent | | | | | | | |
| VICTIM/WITNESS | HV:-E | Race | Sex | Date of Birth | | Age | Ethnicity | <u> </u> | Res. Ty | /pe | Res. Status | Means of Attack | Extent of | Injurv | Domestic Vic | olence | Relation | ship |
| [| If Victim Type 1, 2, or 3 | | | | | | | | ' | | | | | , , | 1 | | | |

| | INCIDENT REPORT (CONT.) Page 2 of 4 Pages | | | | | | | | | | | | | | | | | | | | |
|-------------|--|--|--|---|--|--|---|--|--|--|---|--|--|--|--|---|---|--|--|--|--|
| | | ense Indicator | Subject Code | | | Code | # Subj. Ty | rpe Name | (Last) | | (First) | | | (Midd | lle) | Race | Sex | Ethn | city | | |
| | 1. # 2. # | | S-Suspect V D-Defendant | /-Victim (Missing I | Person) | D 1 | 3 | Stott | | | Michael | | | w | , | W | М | Н | | | |
| | 1 | te of Birth | Age To Ag | | · 1 | To Height | Weight | To W | /eight Eye Co | lor | | Hair Color | | | Maid | en Name | | | | | |
| | | -05-1955 ckname / Street Name | 56 | 6' 0 | | e of Birth - | 220 City | County | HAZ State | l En | nployer/Other/ | NHI School | | | | Occupati | ion | | | | |
| | ''' | whathe / Girect Name | | | 1 100 | 5 OI BII - | City | I | IMA | - 1 | SO | 0011001 | | | | Law Ent | | | | | |
| | La | st Known Address (Stree | et, Apt. Number) | | | | City | | State | Zip |) | | Address | Туре | Phone | | | | Phone Type | | |
| | | (XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | | | | | DELAND FL 32720 | | | | | | | | | XXXXXX | (XX | | DI T | | |
| | 1 | her Address (Street, Apt 3 W Indiana Ave | . Number) | | | | City DELANI | - | State FL | Zip 32 | 720 | | Address H | туре | Phone | , | | | Phone Type | | |
| 2 | | iver's License State/Nun | nber | | | Social Se | ecurity Num | | 1.5 | | ID Number | | | | | | 1 | D Type | | | |
| ≓ | FL | XXXXXXXX | <u>{XXX</u> | | | XXXXX | XXXX | | | | | | | | | | | | | | |
| SECTION | Cic | othing (Describe) | 1 | , | | 1 | , | | Scars/Marks/Ta | ttoos (Typ | oe/Describe) | | | Scars/N | /larks/Ta | attoos (Typ | e/Describ | oe) | | | |
| | На | air Length /Style | Skin | | Build | Fac | Facial Features Speech/Voice Defo | | | | | | oformity Glasses | | | | | | | | |
| Ž | | | | | | | | | | | | | / | | / | | | | | | |
| <u> SS</u> | If Subject: Demeanor Mask Weapon Type | | | | | | , , , , | | | | | | | bject Wa Custody? | 1. | Ýes | 1. T | arrant Fro his Ageno Other Age | m: ;y | | |
| / MISSING | | Date of Last Contact | Date of E | I mancipation | n (| Caution | Caution F | Reason | 1 | | | l Personal H | labits (Dr | ugs / Alc | | No 2 | 1 2. C | otner Agei | icy I | | |
| 15 | | 2 115 | | | | | <u> </u> | | 1141 | | | | | | | | | | | | |
| SUBJECT | (F | May Be With: | | Physical Cor | ndition: | | | Mental Con | dition: | | Doctor N | Name: | | | | Dentist Na | ame: | | | | |
| 19 | SSING | Incident Type | | | | Foul Play | | Mis | sing Before? | | Fingerprints | | Pho | oto Avail | able? | | Dental F | Record | | | |
| ြလ | U. | 1. Runaway 2. Parents | 6. Disa Victi | | | Suspected | l? | """ | onig Boloro. | | Available? | | | | | | Availabl | e? | | | |
| | Ξ | | 7. Volu Adu | | 1 | 1. Yes 2. No | | 1. Y 2. N | | | 1. Yes | 1 | | Yes | | 1 | 1. Yes | | 1 | | |
| | 쁘 | 5. Endangered | 8. Unki | | | 8. Unknow | 'n | | Jnknown | | 2. No | | 2.1 | NO | | | 2. No | | | | |
| | | 1, | | | | /D: () | | | | | | . | | | | | | | | | |
| | I, | | | | | | | | | | | | | | | ssing | | | | | |
| | | ense Indicator | Subject Code | | | | # Subj. Ty | pe Name | (Last) | | (First) | | | (Midd | lle) | Race | Sex | Ethn | city | | |
| | 1. # 2. # | | S-Suspect V D-Defendant | /-Victim (Missing I | Person) | | | | | | | | | | | | | | | | |
| | Da | te of Birth | Age To Ag | ge Hei | ght I | To Height | Weight | To W | /eight Eye Co | lor | | Hair Color | | | Maid | en Name | | | | | |
| | Nic | ckname / Street Name | | | Place | e of Birth - | City | County | State | l En | nployer/Other/ | School | | | | Occupati | ion | | | | |
| | | | | | | | J.1, | 1 | | | , | | | | | | | | | | |
| | La | st Known Address (Stree | et, Apt. Number) | | | | City | | State | Zip |) | | Address | Type | Phone | • | | | Phone Type | | |
| | Otl | her Address (Street, Apt | Number) | | | | City | | State | Zip |) | | Address | Type | Phone | | | | Phone Type | | |
| _ | | | , | | | | | | | | | | | ,. | | | | | | | |
| SECTION | Dr | iver's License State/Nun | nber | | | Social Se | ecurity Num | ber | | Other | ID Number | | | | | | ' | D Type | | | |
| 15 | Clo | othing (Describe) | | | | | | | Scars/Marks/Ta | ttoos (Tyr | pe/Describe) | | | Scars/N | /larks/Ta | attoos (Typ | e/Describ | oe) | | | |
| 뽕 | | | / | / | | / | / | | | | | | | | | | | | | | |
| 9 | Ha | ir Length /Style | Skin | | Build | Fac | ial Features | 3 | 1 | Speech | n/Voice E | Deformity | , | | , | | 1 | Glasses | | | |
| AISSING | | Demeano | or Mask | Wear | Don Type | | / | | / | I | / | | | bject Wa | | | | arrant Fro | | | |
| ₩ | If S | Subject: / | | | | 1 | / | | 1 | / | | If Arreste | | Custody? | 2. | Yes No | 1. I 2. C | his Ageno Other Age | cy ncy | | |
| _ | | Date of Last Contact | Date of E | mancipation | n | Caution | n Caution Reason | | | | Personal Habits | | | | is (Drugs / Alcohol) | | | | | | |
| | | May Be With: | F | hysical Co | ndition: | | <u>' </u> | Mental Con | | | Doctor N | Name: | | | | Dentist Name: | | | | | |
| | 5 | 2 | W | | | | | | | | | | Dhata Assailabla | | | Dentist Na | ame: | | Dontal Booord | | |
| S | <u></u> | Incident Type | | | | Foul Play | | LMI | | | | | Die | -4- A:I | -61-0 | Dentist Na | | Dd | | | |
| | ČĆ | Incident Type 1. Runaway | 6. Disa | | | Foul Play Suspected | 1? | Mis | dition: sing Before? | | Fingerprints Available? | | Pho | oto Avail | able? | Dentist Na | Dental F Availabl | | | | |
| 1 | MISSING | Incident Type 1. Runaway 2. Parents 3. Involuntary | 6. Disa Victi 7. Volu | im | | | 1? | Mis | sing Before? | | Fingerprints | | | oto Avail Yes | able? | Dentist Na | Dental F | | | | |
| | IF MIS | 4. Disabled | Victi 7. Volu Adu | im ıntary ılt | | Suspected 1. Yes 2. No | I | 1. Y 2. N | sing Before? /es | | Fingerprints Available? | | | Yes | able? | Dentist Na | Dental F Availabl | | | | |
| | S | | Victi 7. Volu | im ıntary ılt | | Suspected | I | 1. Y 2. N | sing Before? | | Fingerprints Available? | | 1. \ | Yes | able? | Dentist Na | Dental F Availabl 1. Yes | | | | |
| | S | 4. Disabled 5. Endangered | Vict 7. Volu Adu 8. Unki | im untary ilt nown | | Suspected 1. Yes 2. No 8. Unknow (Printed | /n | 1. Y 2. N 8. U | sing Before? /es | | Fingerprints Available? 1. Yes 2. No | Signature | 1. \ 2. I | Yes No | | | Dental F Availabl 1. Yes 2. No | e? | a missing | | |
| | E MIS | 4. Disabled 5. Endangered I, person; and this ac | Vict 7. Volu Adu 8. Unki gency has my peri | im untary ult nown mission to | | 1. Yes 2. No 8. Unknow (Printed person in a | n | 1. Y 2. N 8. U | sing Before? /es lo Jnknown | | Fingerprints Available? 1. Yes 2. No | | 1. \ 2. f | Yes No that I ha | ave rep | ported the | Dental F Availabl 1. Yes 2. No | e? | a missing | | |
| | 1 | 4. Disabled 5. Endangered 1, person; and this ac | Vict 7. Volu Adu 8. Unki gency has my peri 11 at approxir | im untary ilt nown mission to mately 2 | 2327 ho | 1. Yes 2. No 8. Unknow (Printed person in a urs, Dep |)a statewide | 1. Y 2. N 8. U e alert. nbridge r | sing Before? 'es No Jinknown esponded to | | Fingerprints Available? 1. Yes 2. No | K, DeLa | 1. Y 2. If | Yes No that I ha | ave rep | ported the | Dental F Availabl 1. Yes 2. No | e? | a missing | | |
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| TIVE | 1 2 3 | 4. Disabled 5. Endangered I, person; and this ag On 09-03-20' disturbance. Fernandez-Sevening of 09 | gency has my period at approximupon arrival, tott advised s 9-03-2011 with | im untary silt nown mission to mately 2 Deputy the and h a grou | 2327 ho Bainbri her hus up of ind | 1. Yes 2. No 8. Unknow (Printed person in a urs, Depdge met | n)a statewide outy Bair with Ro | alert. abridge rosa M. Femately sondez-Sto | esponded to ernandez-Sto | ott (V1 irs, Mic ring the | Fingerprints Available? 1. Yes 2. No (XXXXXXX)) who adv chael W. Se gatherin | (, DeLa vised th Stott (D | nd, in the following accused to accuse the following accuse the followin | refere wing: | nce toncernan | ported the o a dom | Dental F Availabl 1. Yes 2. No above p | person as | he | | |
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VOLUSIA COUNTY SHERIFF'S OFFICE

| | | | | | NARR | RATIVE / SI | JPPLEMENT | • | Page | 3 of 4 Pages |
|--------------------------|--|--|--|---|---|--|--|--|---|---|
| EVNT | ' | rt Date | Report Time | Orig. Reported Date | Nature of Call (for Incider | | Agency Report Number | | | 1.Original |
| NARRATIVE / CONTINUATION | 09-03 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 37 37 37 37 37 38 38 | Deputy I argumer altercating fearful. For Deputy I consuminous fernand abrasion Deputy I for simp stateme provided scene and Deputy I against a Case statement of the consuminous fernand abrasion Deputy I for simp statement of the consuminous fernand abrasion Deputy I against a Case state of the consuminous fernand fe | Bainbridge met with took place, but di on, Stott stormed in Fernandez providect Bainbridge met withing alcohol through in a verbal argume vised he went outsing to the left side of lez-Stott's abrasion | in Maria R. Fernandid not actually with the residence used a sworn written in Stott who walked out the evening about the evening about the did not deep of the residence in the residence of the | ndez (O1), the mot ness any physical sing profanity. Stot statement, detailin d towards Deputie and also confirmed t physically touch if ce to avoid further he altercation. Sto Stott stated, "she re the injuries. The period determination Stot on the statements completed a stater nestic violence legal t for their injuries of ergeant Maddox, of as transported to the | ther of Fernance altercation. Feet also pushed ag the incident. The was upset also pushed ag the was upset also pushed ag the incident. The was upset also pushed ag the was upset and evidence and evidence and evidence and evidence and evidence al rights and represent advising all rights and represent accents; both of the incident. | lez-Stott, who advernandez stated State a table within the ready to go to jail with Fernandez-Stat. and Fernandez-Statt, that from blowing are later submitted ary aggressor of the at hand, Fernandeshe did not wish to medies pamphlet refused transport. | vised she was insident and Fernande residence, lashing. ". Stott confirmed stott's flirtatious be tott followed him. So came at me". Whathe guy". Deputy I into evidence via the incident. After I dez-Stott refused to pursue charges in which she sign to the hospital. Id and Deputy Bair | de the residence z-Stott were out a out, causing in the and Fernar shavior. Stott stated he nen Stott was a Bainbridge not the District Two provide a swagainst Stott. It ed for. EVAC which is a stote of the stote | atside and after the Fernandez to be andez-Stott had been tated the two were suffered minor advised of iced small are evidence locker. It was being arrested from written Deputy Bainbridge was called to the seted an SA7-07 |
| TIVE | <u> </u> | OCF Hotline | <u> </u> | | Date: | Time: | FCIC / NCIC Entry | T.T. BOLO | Date: | By: |
| ADMINISTRATIVE | | CAC ecting Report | Spoke With: Number Agency | Addit | ional Forms | | FCIC / NCIC Cancel | | | |
| NIS | | | | | ttached: Narrative | | Persons Property | Veh./Tow Sheet | Other Describe: | Inc |
| NDM. | | er Reporting - oridge, Kyle | | | Officer Reporting - Signat | ture | | ID. Number | Unit 1C26 | Date 09-03-2011 |
| 1 | | | Printed (If Applicable) | | Officer Reviewing - Signa | ature (HApplicable) | | ID. Number | Unit | Date |

VOLUSIA COUNTY SHERIFF'S OFFICE

PROPERTY REPORT

| EVNT | Report Da | | Report T | | Original Inc | | | ature of Call (for In | cident) | | | Agency Report Number 1.0riginal 2.Supplement | | | | | | | | rayes | |
|------------------|---|-----------------------------------|-------------------------------------|--|--------------------------------|---|--|---|-----------------|---|----------------------------------|---|----------|--|-------------------------|-------------|--------------------------------|--|------------------------------|----------------|----------|
| THEFT | 09-03-20 Type The | | 2327 Theft Coo N/A | | 09-03-20 04. | Pocket Pick | 33 | 06. Embez | zlement | t | | . From I | | 09. | . From Veh | icle | 11. By C | omputer | 13. Bicycle | | 99.Other |
| 푸 | 00 Person C | | Burglary | 03. Shopliftin | | Purse Snat | ching | 07. From 0 | Coin Ope | er.Machine | е | Acces | ss Bldg. | 10. | . Extortion | | 12. Frau | | | /ehicle Parts | |
| | V-Victim S-Suspect D-Defend W-Witnes | N-No et O-O dant R-Ro ss | ext of Kin ther eporting Part | 1. Fii 2. Oi 3. Su 4. Oi | nder wner uspect ther | | | Evidence Damaged Prop Arson/Burned Photo & Releas | Agency | red red (Outsid Recovered | e | 8.Found 12.Stolen And Recov 9.Found/Contraband 13.Disposal 10.Prisoner's Pers.Prop. 14.Prop. Of Decease 11.Stolen 15.Return to Owner | | | | eceased | 17.Bak 18.Sei 19.Aba | zed/Confiscate andoned | ed | | |
| CODES | B. Bicycle C. Camer | | | E-Equipment F-Furniture a G-Games and H-Household | nd Furnishi d Gambling | ngs Apparatus | J-Special Docs/Food Stamps/Tickets K-Keepsakes and Collectibles | | | | | M. Musical Instrument O. Office Equipment P.Personal Accessories R-Radio/TV/Sound Devices S-Sports/Camping/Rec.Equip T-Toxic Chemicals | | | | | W.Well-drilli Y-All Other I | quip (Binocula ng Equipment tems and Equ RUGS,JWLR\ | ipment | | |
| | Activity P. Possess D. Deliver S. Sell E. Use B. Buy K. Dispense/Distribute T. Traffic M. Manufacture/Produce/ R. Smuggle Cultivate | | | | | Type Z. Other A. Amphetamine B. Barbiturates C. Cocaine E. Heroin H. Hallucinogen | | | | M. Marijuana U. Unknowi O. Opium/Derivative Z. Other P. Paraphernalia/ Equipment S. Synthetic | | | n | Unit 1. Gram 6. 2. Milligram 7. 3. Kilogram 8. 4. Ounce 9. 5. Pound 99 | | | erm | | | | |
| Ţ | Leave Bla | | Person | | Pers. In | vl. Item | # S | Status | | egory | Article | | | 1 | cription | 61/ | //ID | | | | |
| F | Serial Nu | mber | | Owner Appl | ied Numbe | . [1 | 1 | Value Recover | ed: | D | OTHEF ate Recove | | | | tograph eiture Y / N | | T and D T.W.T.C. (Y | | Value | | |
| PROPERTY | If Article | Qty. | Brand | | Model | | | Jewelry Type | | If Drug Act | | у | Туре | | Quantity | Un | Unit | | \$ Estimated Street Value \$ | | |
| 颪 | If Gun | Make | | Model | C | aliber | Тур | e/Cat | | Action | | | Finish | | E | Barrel Le | ength | | Barrel Type | | |
| ╮ | Leave Bla | ank: | Person | Code # | Pers. In | vl. Item | # S | Status | Cate | egory | Article | | | Des | cription | | | | | | |
| FI | Serial Number Owner Applied Numb | | | ied Number | | Value Recovered | | | Di | ate Recove | ered: | d: ſ | | Forfeiture Y / N: F.W.T.C. (| | .W.T.C. (Y | //N) | Value \$ | | | |
| PROPERTY | If Article | Qty. | Brand | | Model | | Т | Jewelry Type If Drug Act | | | Activit | у | Туре | Quantity | | Un | Unit | | Estimated Street Value \$ | | |
| ▔ | If Gun | Make | | Model | C | aliber | Тур | ype/Cat Action | | | | Finish | sh Ba | | Barrel Le | ength | | Barrel Type | | | |
| > | Leave Blank: Person Code # Pers. Invl. Item | | | | vl. Item | # S | Status | Cate | egory | Article | | | Des | cription | | | | • | | | |
| ERT | Serial Number Owner Applied Number | | | ber Value Recovered: \$ | | | ed: | Date Recovered: | | | Forfeiture Y / N: F.W.T.C. (Y/N) | | | | //N) | Value \$ | | | | | |
| PROPERTY | If Article Qty. Brand M | | Model | | | | If Drug Act | | Activit | у | Туре | | Quantity | Un | Unit | | Estimated Stre | et Value | | | |
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| ≻ | Leave Bla | ank: | Person | Code # | Pers. In | vl. Item | # S | Status Category Articl | | | Article | | | Des | cription | | | | | | |
| ERT | Serial Nu | mber | | Owner Appl | ied Number | Value Recovered: | | | Date Recovered: | | | Forfeiture Y / N: F.W.T.C. (| | .W.T.C. (Y | //N) | Value \$ | | | | | |
| PROPERTY | If Article | Qty. | Brand | | Model | | | | If Drug Activit | | у | Туре | | Quantity Unit | | it | | Estimated Street Value | | | |
| ۵ | If Gun | Make | | Model | C | aliber | Тур | e/Cat | | Action | , | | Finish | | E | Barrel Le | ength | Barrel Type | | | |
| | Item# | Date: 09-04- | 2011 | Time: 0055 | | eleased by (ep K Bain | | | | | | <u></u> | | | eived by (Previdence | , | | | Received by (S | ignature): | |
| | Leave Bla | ank: | | | | eason for Cl | nange | | | 0 | | \leq | 7 | | | | | | | | |
| | Item# | Date: | | Time: | R | eleased by (| Printe | ed): | Re | eleased by | (Signature | ·): | | Rece | eived by (P | rinted): | | | Received by (S | ignature): | |
| \ \ \ \ | Leave Bla | ank: | | | R | eason for Cl | nange | : | · | | | | | | | | | | | | |
| UST | Item# | Date: | | Time: | R | eleased by (| Printe | ed): | Re | eleased by | (Signature |): | | Rece | eived by (P | rinted): | | | Received by (S | lignature): | |
| OF C | Leave Bla | ank: | | | R | eason for Cl | nange | : | | | | | • | | | | | | • | | |
| CHAIN OF CUSTODY | Item # | Date: | | Time: | R | eleased by (| Printe | ed): | Re | eleased by | (Signature | ·): | | Rece | eived by (P | rinted): | | | Received by (S | ignature): | |
| 히 | Leave Bla | ank: | | | R | eason for Cl | nange | : | | | | | • | | | | | | | | |
| | Item# | Date: | | Time: | R | eleased by (| Printe | ed): | Re | eleased by | (Signature |): | | Rece | eived by (P | rinted): | | | Received by (S | ignature): | |
| | Leave Bla | ank: | | | R | eason for Cl | nange | i: | | | | | | | | | | | | | |
| | Item # | Date: | | Time: | R | eleased by (| Printe | ed): | Re | eleased by | (Signature | ·): | | Rece | eived by (P | rinted): | | | Received by (S | lignature): | |
| | Leave Bla | ank: | | | R | eason for Cl | nange | : | | | | | | | | | | | | | |
| <u>z</u> i | | eporting - Pr Ige, Kyle | inted | | | | Of | ficer Reporting - S | Signature | | | | | | ID. Numb | er | | Unit I C26 | | Date 09-03-201 | 1 |
| ADMIN. | Officer Reviewing - Printed (If Applicable) | | | | | | | Officer Reviewing - Signature (If Aprilcable) | | | | | | | ID. Number Unit | | | | Date | - | |

| 7th. Judicial Circuit 707 Charging Affidavit - Volusia | | | Arrest # | # | Bk # | Pg # <u>_</u> 1 | of <u>3</u> |
|--|---|----------------------------------|------------------|-----------------------------|--------------------------|-------------------------|------------------------|
| ARREST 🛛 NOTICE TO APPEAR 🗌 AFFIDA | AVIT C.C. |] ADULT 🛛 JUV | /ENILE LI N | Court Case Number: | | | |
| (ORI) FL: FL0640000 Agency Name | VOLUSIA COUNTY SH | | ١ | Agency Case Number: 11002 |)26555 | | |
| FCIC/NCIC Check? ✓ Yes No OBTS# | | | I . | Date Arrested: 09-04-201 | | Time of Arrest: 0009 | 9 |
| ADDRESS OF ARREST (Street, City, State, Zip): 1535 S Ridgewood Ave DELAND | FL | I . | Arrested: | ridge,Kyle | · | ID Number: 7391 | |
| NAME (Last) | (First) | (Middle) A | A.K.A.: | luge,ryic | | Sex: | Race: |
| DOB: Age: Driver's Lic./ | Michael | I . | I . | Year | S.S.# - | M | l W |
| 07-05-1955 56 ID No.: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | Eyes: P. | P.O.B. | FL E | Expires: | • | XXXXXX | Statement: |
| 6' 00 220 WHI Scars, Marks, | | City, State, Country): | | | MA | | Yes No Citizenship: |
| Tattoos: Probation: Yes No Sexual Predator: | | Occupation: VCSO English: Ves 1 | No | D | Law Enforc Deaf/Mute: | | Yes No No |
| Address - Mailing/Permanent (STREET, APT. | | (CIT | | (STATE) | ZIP CODE | | IDENCE PHONE |
| XXXXXXXXXX Address - Local (STREET, APT. | | DELA (CIT | AND | FL (STATE) | 32720 ZIP CODE | | XXXXXX IDENCE PHONE |
| Address - Other (Employer/School) (STREET, APT. | | (CIT | | (STATE) | ZIP CODE | | SCHOOL PHONE |
| DOMESTIC | · | | | | | ☐ Total | |
| CHARGES VIOLENCE? Yes Attachments #1 Charge: | | 1 | | Report Traffic Infra | action(s) | DUI Charge: | |
| #1 Battery Touch/Strike FEL #2 Charge: FEL | | FS/ORD: 784.03(1)(A | 4)1 | Citation No.: | | No Bond: | <u>d</u> |
| #3 Charge: FEL | | FS/ORD: | | Citation No.: | | Bond: | |
| 70 | | f. Ord. NTA | Co-Def #2. Arres | ested? Y N | Fel. Misd. | Traf. Ord. | П ата П |
| #1 NAME Co-DEFENDANT Co-Def #1. Arrested? Y N (First | | (Middle) | Race: | Sex: | DOB: | | Age: |
| (Last) (Firs | st) | (Middle) | Race: | Sex: | DOB: | | Age: |
| #2 NAME | | | | | | | |
| · · | tifies and swears that t | · | | | | _ | |
| on the03 day ofSeptember | | | | | | | |
| at XXXXXXXXXXXXXXXXXXXXXX DELAND | within Volus | sia | County | y, violated the law | / and did then | and there: | |
| Touch/strike the victim against her will. At the ti | mo of incident, the (| defendant and vict | im had heen | married for appl | rovimately se | (7) vear | and |
| 2 lived together as a family unit. | Me or moreor, and a | Jelenuani and viol | Miliau been. | Manieu ioi appi | OXIIIIately 55 | Veri (1) yourd | 3, anu |
| 3 4 On 09-03-2011 at approximately 2327 hours, D | Penuty Bainbridge re | enonded to XXXX | XXXXXXX, D | Del and in refere | ence to a dor | mestic | |
| 5 disturbance. Upon arrival, Deputy Bainbridge m | | | | | /100 10 4 41. | lesuo | |
| 6 7 Fernandez-Stott advised she and her husband | of approximately se | wen (7) vears, Mic | hael W. Stott | (D1), had been | consuming a | alcohol on the | e evening |
| 8 of 09-03-2011 with a group of individuals. Ferna | andez-Stott stated, o | during the gatherin | ng, Stott accus | ised Fernandez- | | | |
| 9 unknown 22 year old male. Fernandez-Stott sta 10 | ited Stott had become | ne jealous since rie | er recent cosi | metic surgery. | | | |
| 11 Fernandez-Stott advised after the gathering, St | | | | | | | |
| 12 Fernandez-Stott stated the argument became p 13 Bainbridge observed the abrasion and photogra | | | | | | | |
| 14 Fernandez-Stott stated Stott's behavior was no | | | | | | | |
| 15 | | | | | · | | |
| NOTICE TO APPEAR MANDATORY APPEARANCE | YOU NEED NOT APPE INSTRUCTIONS ON TH | HE REVERSE SIDE C | OF YOUR COPY | Y | FINE, AND CO AMOUNT: | | |
| I AGREE TO APPEAR IN COURT HEREIN TO ANSWER THE OFFI BEFORE THE COURT AS REQUIRED, OR PAY THE LISTED FINE | | | | | | AIL TO APPEAR | |
| | | | | | JU\ DIS | | |
| | | SIGNATU | JRE OF JUVENILE | PARENT OR CUSTODI | | TATION | |
| SIGNATURE OF DEFENDANT | Date | | RELATIONSHIP TO | O JUVENILE | | | |
| Sworn to and subscribed before me, the undersigned this 04 day of September 2011 | I swear/affirm the above state | atements are correct and true | e | | | Rt Thumb | |
| Name: | 1/2 | <u> </u> | | | | | |
| Notary Public Law Enforcement or Corrections Officer | | OFFICER'S/COMF | PLAINANT'S SIGNA | | | 7 | |
| Personally Known Produced Identification | BAINBRIDGE,KYLE NAME (PRINTED) | | | 7391 ID NUMBER | | \dashv | |
| Type of Identification: | | | _ | | _ | | |
| OFFICIAL LISE ONLY | Inmate Number | | | | | _ | |

| | arrative 707- | В | Arrest Affidavit | Adult | | | |
|---|--|---|--|---|--|---|---|
| _ | upplement | | Notice to Appear | | Court Case Number: | P | age# 2 of 3 |
| | efendant ^(Last) ime: Stott | | (First) Michael | (Middle) W | Agency Case Number: 110026555 | | |
| | | DOMESTIC Yes VIOLENCE? | Attachments: Affic | | Statement(s) NTA Schedule | e Report Traffic Infra | action(s) Total Charges: |
| | Charge: | VIOLENCE? — | FEL MISD | | FS/ORD: | Citation No.: | Bond: |
| # | Charge: | | FEL MISD | ORD | FS/ORD: | Citation No.: | Bond: |
| # | Charge: | | FEL MISD | ORD | FS/ORD: | Citation No.: | Bond: |
| # 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 | Deputy Bainbridge took place, but did is Stott stormed in the Fernandez provided Deputy Bainbridge consuming alcohol involved in a verbal Stott advised he we abrasions to the left Fernandez-Stott's a Stott's neck and pho | not actually witness residence using produced a sworn written state at a sworn was investigation led to set a sworn with a Florida domestic stott and Stott for the contribution of the sworn was a sworn with a sworn was a sworn with a sworn was a sworn was a sworn was a sworn with a sworn was a sworn with a sworn was a sworn was a sworn was a sworn with a sworn was a sworn written was a sworn written with a sworn was a sworn written was a sworn written with a sworn written was a sworn written with a sworn written was a sworn written with a sworn written written with a sworn written with a sworn written with a sworn written with a sworn written written written written with a sworn written | dernandez (O1), the any physical alterofanity. Stott also attement, detailing walked towards Daning and also conflid not physically the altercation the altercation the determination of the determina | ne mother of reation. Ferr pushed a tathe incident reputies, state firmed he was couch Fernar further confronts. Stott state "she must haphs were lated on Stott was ents and evice advising shights and rerene; both refered | Fernandez-Stott, who advission andez stated Stott and Fernable within the residence, last. Iting, "I'm ready to go to jail". as upset with Fernandez-Stotned. Stott and Fernandez-Stotned, "she (Fernandez-Stott) contaction and Fernandez-Stott) contact got that from blowing that the primary aggressor of the dence at hand, Fernandez-Stotned in the primary aggressor of the dence at hand, Fernandez-Stotned in the primary aggressor of the dence at hand, Fernandez-Stotned in the hospital stotness of the hospital stotness o | ed she was inside the resistandez-Stott were outside hing out, causing Fernand Stott confirmed he and Fett's flirtatious behavior. Stott followed him. Stott stated ame at me". When Stott we guy". Deputy Bainbridge via the District Two evidents incident. After learning Stott refused to provide a syrges against Stott. Deputy le signed for. EVAC was cal. | dence when the argument and after the altercation, lez to be fearful. Internandez-Stott had been out stated the two were If he suffered minor as advised of a noticed small abrasions to ice locker. Tott was being arrested for worn written statement Bainbridge provided alled to the scene and |
| | | | | | | | |
| Swo | orn to and subscribed before me | , the undersigned | I swear/a | iffirm the above sta | atements are correct and true | | Right Thumb |
| this | 04 day of Septemb | er , <u>2011</u> | — , / | | 7 | | |
| Nan | ne: | | | 2 | | | |
| Nota | ary Public | aw Enforcement Officer | | | OFFICER'S/COMPLAINANT'S SIGN | ATURE | |
| Pers | sonally Known | Produced Identification | BAINBI | RIDGE,KYLE | | 7391 | |
| Typ | e of Identification: | | | PRINTED) | | ID NUMBER | |