

Adult Def PC Arrest
 Juvenile Def Application for
Warrant/Capias

AFFIDAVIT – COMPLAINT

Clerk's Case No. _____

SA Case No.(s) _____

PAGE 01 of 4

Agency ORI # **FL037275C**

1. Agency Name: Florida Department of Corrections		2. Agency Report Number: 20-01768		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)	
4. Date/Time of Offense: 01/25/2020		5. Date/Time of Arrest: 01/25/2020 @ 11:00 a.m.		6. Arresting Officer: Inspector William "Eddie" Dalton		7. Investigating Officer: Inspector William "Eddie" Dalton	

8. Defendant's Name: (Last) Clark			(First) Alvin			(Middle) Nathaniel			ALIAS			9. OBTS:			
10. Race/Sex: B/M		11. Date of Birth: 11/06/1957		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: 5'05"		16. Weight:		17. Eye Color: Brown		18. Hair Color: Black		19. Scars, marks, tattoos, unique physical features: (Location, type & description) N/A							
20. Driver's License Number/State: C462-014-57-406-0 / FL				21. Social Security Number: [REDACTED]				22. Residential Telephone:				23. Business Telephone:			
24. Address: (Street, Apartment Number) 3867 14th Ave S				(City) St Petersburg				(State) FL				(Zip) 33711			

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) Introduction of Contraband into a State Correctional Facility (6 counts)					60. Statute or Ordinance Number: 944.47(1)(a)(4)					<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> Ord.				
61. Charge Description: (# 1) Possession of a Controlled Substance w/ Intent to Distribute (4 counts)					62. Statute or Ordinance Number: 893.13					<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 "Eddie" Dalton			(First)			(Middle)			70. Race/Sex		71. Date of Birth:		72. Telephone Number: 850-569-5260		
73. Address: (Street, Apartment Number) 5563 10th Street			(City) Malone			(State) Florida			(Zip) 32445			74. Secondary Phone Number:			
75. Victim Notification of Arrest: NOTIFIED BY: _____ DATE: _____ TIME: _____									76. Information Given: 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 <input type="checkbox"/>			

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 3 page affidavit/complaint.					
Evidence Custodian's Name: Darla Henderson		Person responsible for statements: William Dalton		 Officer/Complainant Signature			William Dalton Type or print Complainant name		

Adult Def PC Arrest
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AFFIDAVIT – COMPLAINT (PROBABLE CAUSE NARRATIVE)

Clerk's Case No. _____

SA Case No.(s) _____

Agency ORI # **FL037275C**

80. Agency Name: Florida Department of Corrections	81. Agency Report Number: 20-01768	82. Date/Time of Arrest: 01/25/2020 @ 11:00 a.m.	83. Investigating Officer: Inspector William "Eddie" 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 Dalton of the Office of Inspector General, Florida Department of Corrections.

Your Affiant has probable cause to believe the Defendant, Alvin Clark (Mr. Clark), did commit the criminal offenses of Introduction of Contraband into a State Correctional Institution, to wit: Heroin, synthetic cannabinoid, cocaine, marijuana, buprenorphine (Suboxone), and tobacco (nicotine), in violation of 944.47 (1)(a)(4), and Possession of a Controlled Substance with Intent to Distribute, to wit: heroin, cocaine, and synthetic cannabinoid, and buprenorphine (Suboxone) in violation of 893.13.

On or around January 8, 2020, through January 25, 2020, your Affiant reviewed the legally recorded SECURUS phone calls of Inmate Shermon Allen DC#T07183 (Inmate Allen) housed at Jackson Correctional Institution in Malone, Jackson County, Florida. During the calls, your Affiant heard Inmate Allen conspire with his girlfriend, Sufia Rizvi (Ms. Rizvi), to introduce narcotics into Jackson Correctional Institution during visitation on January 25, 2020.

Through information developed from the recorded telephone calls the defendant, Alvin Clark (Mr. Clark) was identified as the person conspiring with Inmate Allen and Ms. Rizvi to introduce the contraband into Jackson Correctional Institution since Inmate Allen and Ms. Rizvi's visitation right were previously suspended. Mr. Clark is an approved visitor for Inmate George Warner, DC# 056887, also housed at Jackson Correctional Institution.

Based on the conversations, Ms. Rizvi gathered various narcotics at the direction of Inmate Allen and prepared them into packages for introduction. The plans discussed indicated the contraband was packaged into eight separate bundles and would be introduced during visitation on Saturday (01/25/2020) and Sunday (01/26/2020). The contraband was provided to Mr. Clark for Mr. Clark to introduce into the secure perimeter of Jackson Correctional Institution. Mareo Davis (defendant in JCSO related case) was identified as the person driving Mr. Clark to Jackson Correctional Institution.

On January 25, 2020, a white in color Nissan sedan was observed entering onto the grounds of Jackson Correctional Institution. Mr. Clark and Mr. Davis were visually identified as the occupants of the vehicle. Mr. Clark was assisted to the entrance of the institution by Mr. Davis as Mr. Clark was in a wheelchair. Once Mr. Clark entered the secure perimeter of the institution, Jackson County Sheriff's Office investigators confronted Mr. Davis in the parking lot. Following a canine alert on the Nissan sedan, four black taped bundles consistent with contraband were in proximity to the driver's seating area. The four bundles were labeled "2nd Day". Also in the bag was a label "1st day green for yahya" but not attached to any bundles.

As Mr. Clark entered the institution for visitation, he was subjected to a visual inspection and pat search and was asked if he possessed any contraband items by security staff. Mr. Clark responded that he did not. During the pat search, staff felt an object(s) concealed in Mr. Clark's genital region. When confronted by your Affiant about what was in his pants, Mr. Clark willfully provided four black tape bundles inside of condoms, from the front of his pants. The bundles are consistent with the bundles previously located in the Nissan sedan he arrived in.

The four bundles labeled "2nd Day," seized from the Nissan sedan contained approximately 73.86 grams of synthetic cannabinoid.

The four bundles seized from Mr. Clark's possession contained approximately one gram of heroine, (57) grams of synthetic cannabinoid, 8.1 grams of cocaine, 18 grams of marijuana, .8 grams of Suboxone sublingual strips (contains controlled substance buprenorphine), and 9.7 grams of tobacco (containing stimulant nicotine). Based on the totality of the evidence developed during this investigation, Mr. Clark knowingly received packages of contraband items, traveled to Jackson Correctional Institution in the company of Mr. Davis, and entered the secure perimeter of Jackson Correctional Institution with those contraband items with the intent to provide those items to Inmate Warner during their visitation. Mr. Clark also intended to introduce the contraband located in the Nissan the following day had he not been intercepted.

Your Affiant respectfully submits that probable cause has been established that Mr. Clark did commit six counts of Introduction of Contraband into a State Correctional Institution, to wit: Heroin, synthetic cannabinoid, cocaine, marijuana, buprenorphine (Suboxone), and tobacco (nicotine), in violation of 944.47 (1)(a)(4), and four counts of Possession of a Controlled Substance with Intent to Distribute, to wit: heroin, cocaine, and synthetic cannabinoid, and buprenorphine (Suboxone) in violation of 893.13.

Mr. Clark was placed under arrest, transported to and housed in the Jackson County Correctional Facility. This incident occurred in Jackson County, Florida.

<p>85. The undersigned, being duly sworn, states that the foregoing information contained in an affidavit consisting of <u>3</u> pages is true and correct to the best of his/her knowledge</p> <p style="font-size: 2em; color: blue; font-family: cursive;">William Dalton</p> <p>Signature of Officer/Complainant</p>	<p style="text-align: center;">Sworn to and subscribed before me this <u>25</u> day of <u>Jan</u>, 20<u>20</u></p> <p style="font-size: 2em; color: blue; font-family: cursive;">[Signature]</p> <p style="text-align: center;">Signature of Person Administering Oath</p> <p><input type="checkbox"/> Personally Known <input type="checkbox"/> Other Identification</p> <p style="text-align: center;">Seal</p> <p style="text-align: right;">ID Type</p>
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William Dalton
Officer/Complainant's Name (Printed)

DLG
ID Number

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)		Transferred to <input type="checkbox"/> Secure Detention	Released to <input type="checkbox"/> HRS Intake Officer, not detained
Release Date: _____ Release Time: _____ Released to (Name): _____		Processed within the agency and released <input type="checkbox"/> to other than HRS	