

PROBABLE CAUSE AFFIDAVIT

OBTS #		1. Arrest Affidavit 3. Complaint Affidavit 2. Notice to Appear 4. Request for Capias 5. Teen Court Referral	1	Juvenile	N					
ORI #	FL037275C	Office of Inspector General - DC	Report #	21-05828						
Location of Offense			Date of Offense	Date of Arrest						
Suwannee Correctional Institution Annex 5964 US Highway 90, Live Oak FL 32060			04/15/2021							
Name: Michael C. Harris										
Race	Race	Sex	DOB or Age	Height	Weight	Eye Color	Hair Color	Complexion	Build	
W - White B - Black	I - Indian American O - Oriental Asian	W	M	6'00	220	Blue	BRO	MED	MED	
Address (Street, Apt, Number)			(City)	(State)	Phone					
LKA: [REDACTED]			(City)	(State)	Residence Phone		() -			
<input type="checkbox"/> 1. Parent Name of Parent or Custodian (Last, First, Middle) <input type="checkbox"/> 2. Legal Custodian <input type="checkbox"/> 3. Other			(City)	(State)	Business Phone		() -			
Address (Street, Apt, Number)			(City)	(State)	Business Phone		() -			
Notified By: (Name)			Date	Time	Juvenile Disposition 1. Handled / Processed within Dept and Released 2. Turned over to DOH/C&F 3. Incarcerated (County Jail)					
Released to: (Name)			Relationship	Date	Time					
Activity:	S. Sell	R. Smuggle	K. Dispense / Distribute	M. Manufacture / Produce / Cultivate	Z. Other	Type:	B. Barbiturate	H. Hallucinogen	P. Paraphernalia / Equipment	U. Unknown
N. N/A	B. Buy	D. Deliver				A. Amphetamine	C. Cocaine	M. Marijuana	S. Synthetic	Z. Other
P. Posses	T. Traffic	E. Use					E. Heroine	O. Opium / Deriv		
Charge Description			Counts	<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> Ord	State Violation Number:		Violation of Section (ORD)			
Aggravated Assault			1		784.021 (1)(a)					
Activity	Type	Amount / Unit		State Attorney Number		Court Number				
N	N							<input type="checkbox"/> Domestic Viol Inj. <input type="checkbox"/> Order of Arrest		
<input checked="" type="checkbox"/> PC	<input type="checkbox"/> Capias	<input type="checkbox"/> AC	<input type="checkbox"/> BW	<input type="checkbox"/> PW	<input type="checkbox"/> Juv. PU	<input type="checkbox"/> Citation	Date Issued	Writt. Att. #		
Charge Description			Counts	<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> Ord	State Violation Number:		Violation of Section (ORD)			
Improper Exhibition of a Firearm			1		790.10					
Activity	Drug Type	Amount / Unit		State Attorney Number		Court Number				
N	N							<input type="checkbox"/> Domestic Viol Inj. <input type="checkbox"/> Order of Arrest		
<input type="checkbox"/> PC	<input type="checkbox"/> Capias	<input type="checkbox"/> AC	<input type="checkbox"/> BW	<input type="checkbox"/> PW	<input type="checkbox"/> Juv. PU	<input type="checkbox"/> Citation	Date Issued	Writt. Att. #		
Charge Description			Counts	<input type="checkbox"/> F.S. <input type="checkbox"/> Ord	State Violation Number:		Violation of Section (ORD)			
Activity	Drug Type	Amount / Unit		State Attorney Number		Court Number				
								<input type="checkbox"/> Domestic Viol Inj. <input type="checkbox"/> Order of Arrest		
<input type="checkbox"/> PC	<input type="checkbox"/> Capias	<input type="checkbox"/> AC	<input type="checkbox"/> BW	<input type="checkbox"/> PW	<input type="checkbox"/> Juv. PU	<input type="checkbox"/> Citation	Date Issued	Writt. Att. #		

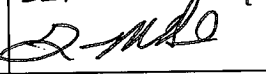
The Undersigned Certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above-named Defendant committed the following Violation of the law:
 On the 15th day of April 2021, at 05:21pm AM. PM (Specially include facts constituting cause for arrest)

Your Affiant is Inspector Heather Whitfield with the Office of Inspector General for the Florida Department of Corrections. The defendant is Sergeant Michael Harris a Correctional Officer currently assigned to Suwannee Correctional Institution (SWCI). Your Affiant has investigated an Aggravated Assault and Improper Exhibition of a firearm at SWCI.

Sworn recorded interviews with witnesses/ victims detail the fact that Sergeant Harris while working the tower in the center of the SWCI compound, displayed more than one firearm by pointing it directly at inmates while yelling derogatory and racial comments towards inmates. The inmate victims feared for their lives when Sergeant Harris pointed a firearm at them.

Video evidence corroborates the victim's statement by showing Sergeant Harris point more than one firearm in the direction of inmates without justification. The video also shows that before the firearms were displayed Sergeant Harris made hand gestures with both hands using his index finger and thumb as if he was shooting a gun at the inmates. Video also shows Sergeant Harris actively load a firearm before subsequently unloading it while the gun was pointed in an unsafe direction.

Your Affiant respectfully submits probable cause has been established indicating Sergeant Michael Harris did commit the violation of Aggravated Assault pursuant to 784.021(1)(a) and Improper Exhibition of a Firearm pursuant to 790.10 in Suwannee County, Suwannee Correctional Institution Annex on April 15, 2021. 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.

PC. Exists for Charge(s)		Judge's Signature		Date			
<input type="checkbox"/> Miranda Warning	Hold for Agency Name:	Verified By:		Date:	Bond Charge #	Bond Charge #	Bond Charge #
Adults Only Hold for First Appearance				Bond Type	3. Surety	5. Cert	Type
<input type="checkbox"/> Do not Bond Out Reason:				1. ROR	4. Bail / Bond	6. Other	Type
I swear/Affirm the above and attached statements are true and correct		Sworn to And subscribed before me, the undersigned authority this		Returnable Court Date		Returnable Court Time	
<i>Heather Whitfield</i> <small>Inspector's / Complainant's Signature</small> <i>Heather Whitfield</i> <small>Name (Printed)</small>		<small>day of</small> <i>May</i> <small>20</small> <i>21</i> <small>Name/Title of Person Authorized to Administer Oath</small> <i>S.T. L. McGawley</i> 				<input type="checkbox"/> AM <input type="checkbox"/> PM	
				Release Date		Release Time	
				Releasing Officer			Page 2 of 2