

Adult Def PC Arrest
 Juvenile Def Application for Warrant / Capias

AFFIDAVIT - COMPLAINT (PROBABLE CAUSE NARRATIVE)

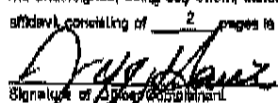
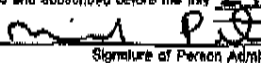
Clerk Case No. _____

SA Case No.(s) _____

60. Agency Name: Bay County Sheriffs Office	61. Agency Report Number: 2009-059628	62. Date / Time of Arrest: 08/23/2009 @ 08:00	63. Investigating Officer: JEFF HAIRE 86
---	---	---	--

64. NARRATIVE OF THE FACTUAL BASIS FOR PROBABLE CAUSE: The undersigned certifies that he / she has just and reasonable grounds to believe that the heretofore named defendant did commit the violation of law as stated above and the factual basis for this belief is as follows:

On August 23, 2009 at 2509 Dorothy Avenue, Bay County, Florida, your Affiant states that the Defendant, Garry Ulland, did intentionally with a premeditated design effect the death of the victim, [REDACTED]. The Defendant came home to his residence at 2509 Dorothy Avenue in the early morning hours of August 23, 2009 and found the Victim asleep in bed with the Defendant's wife. The Defendant, after being Mirandized, stated that the Defendant picked up a 2x4 board and struck the Victim multiple times in the head while the Victim was still laying in bed. The Defendant then admitted to having picked up a club and continued beating the Victim numerous times both in the residence and in the front yard of the residence, until the Victim left the yard and collapsed in a neighboring yard. The Victim was found by a neighbor several hours later and was transported to Bay Medical Center, where he died from the injuries inflicted by the Defendant. The Defendant's wife gave a similar statement of events as the Defendant regarding these facts. Due to aforementioned facts, your Affiant does believe that the Defendant is in violation of Florida State Statute 782.04, murder.

65. The undersigned, being duly sworn, states that the foregoing information contained in an affidavit, consisting of <u>2</u> pages is true and correct to the best of his / her knowledge.  Signature of Officer/Complainant JEFF HAIRE 86 Officer/Complainant's Name (Printed) ID Number	Sworn to and subscribed before me this <u>23</u> day of <u>AUG</u> , 20 <u>09</u>  Signature of Person Administering Oath <input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Oath (Identification) <u>ISL/D</u> Seal ID Type
---	---

67. Adult's Relation to Juvenile Defendant: <input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other _____	68. Adult's Name: (Last) _____ (First) _____ (Middle) _____
---	---

69. Address: (Street, Apartment Number) _____ (City) _____ (State) _____ (Zip) _____	90. Residential Phone: _____	91. Business Phone: _____
--	------------------------------	---------------------------

92. Notified by: (Name) _____	93. Date / Time: <u>@</u> _____	94. Notification Method: <input type="checkbox"/> Person <input type="checkbox"/> Telephone
-------------------------------	---------------------------------	--

95. Law Enforcement Disposition of Juvenile Contact: (Check one and complete release date) Release Date: _____ Release Time: _____ Released to (Name): _____	<input type="checkbox"/> Transfer to Secure Detention	<input type="checkbox"/> Released to HRS Intake Officer, not detained	<input type="checkbox"/> Processed within the agency and released to other than HRS
--	---	---	---

Clerk / File Copy