

State of Florida
Department of Corrections
PHOTO IDENTIFICATION CARD

09/26/99

Name: MITCHELL, DAWANE GUDSKYLL DC#: 0-467531 Date Received: 09/20/99
Date Sentenced: 09/12/1995 County: DADE Circuit: 13
Crime: SEX BAT/THREAT W/DEADLY WPN. ; ROBBERY W/FIREARM OR D/WEAPON
; BURG/DWELL/OCCUP. CONVEY ;
MAND. TERM: 3 YR 0 MO (CRIME COMMITTED WITH FIREARM)
MAND. TERM: 3 YR 0 MO (CRIME COMMITTED WITH FIREARM)
MAND. TERM: 3 YR 0 MO (CRIME COMMITTED WITH FIREARM)
CURRENT TERM: 17 YR 0 MO 0 DA



SEX: M RACE: B

LAST: MITCHELL

FIRST: DAWANE

DATE OF BIRTH: 01/13/1978

RACE: BLACK SEX: MALE DOB: 01/13/1978
Height: 5' 05" Weight: 175 lbs Build: THIN
Hair: BLACK Eyes: BROWN Complexion: DARK
OTHER: OTHER (OTHER) GOLD TEETH
SCARS:

Home: MIAMI FLORIDA
Where Born: MIAMI, FLORIDA

Not by in care of Florida Dept of Corrections
400 NW 5TH AV MIAMI, FL 33132

Birth Date: Year: 2000
FT Class:

Religion: MOTHER
(305) 344 0300



(<http://www.dc.state.fl.us/index.html>)

Florida Department of Corrections
(<http://www.dc.state.fl.us/index.html>)

"Inspiring Success by Transforming One Life at a Time"



Ron DeSantis, Governor

Ricky D. Dixon, Secretary

Offender Search (<http://www.dc.state.fl.us/OffenderSearch/InmateInfoMenu.aspx>)

Visit an Inmate (<http://www.dc.state.fl.us/ci/visit.html>)

Correctional Institutions (<http://www.dc.state.fl.us/ci/index.html>)

Probation Services (<http://www.dc.state.fl.us/cc/index.html>)

FDC Jobs (<http://www.fldocjobs.com>)

Newsroom (<http://www.dc.state.fl.us/comm/index.html>)

Statistics (<http://www.dc.state.fl.us/pub/index.html>)

Corrections Offender Network

Inmate Release Information Detail

(This information was current as of 11/18/2005)



DC Number:	467531
Name:	MITCHELL, DAWANE G
Race:	BLACK
Sex:	MALE
Birth Date:	01/13/1978
Custody:	CLOSE
Release Date:	11/01/2005

Stated Residence Upon Release:

4907 N. W. 15TH AVENUE
MIAMI, FLORIDA 33142

Aliases:

DAWANE G MITCHELL, DAWANE GODSKYLL MITCHELL

Current Prison Sentence History:

Offense Date	Offense	Sentence Date	County	Case No.	Prison Sentence Length
07/27/1993	BURGLARY, ARMED W/EXP. OR WEAPO	09/12/1995	MIAMI-DADE	9326777	17Y 0M 0D
07/27/1993	SEX BAT/ WPN. OR FORCE	09/12/1995	MIAMI-DADE	9326777	17Y 0M 0D
07/27/1993	SEX BAT/ WPN. OR FORCE	09/12/1995	MIAMI-DADE	9326777	17Y 0M 0D
07/27/1993	ROBB. GUN OR DEADLY WPN	09/12/1995	MIAMI-DADE	9326777	17Y 0M 0D

Note: The offense descriptions are truncated and do not necessarily reflect the crime of conviction. Please refer to the court documents or the Florida Statutes for further information or definition.

Incarceration History:

Date In-Custody	Date Out-Custody
09/20/1995	11/01/2005

[First](#)
[Previous](#)
[Next](#)
[Last](#)
[Return to List](#)

[New Search](#)

Record: 1 of 1

The Florida Department of Corrections updates this information regularly, to ensure that it is complete and accurate, however this information can change quickly. Therefore, the information on this site may not reflect the true current location, status, release date, or other information regarding an inmate.

This database contains public record information on felony offenders sentenced to the Department of Corrections. This information only includes offenders sentenced to state prison or state supervision. Information contained herein includes current and prior offenses. Offense types include related crimes such as attempts, conspiracies and solicitations to commit crimes. Information on offenders sentenced to county jail, county probation, or any other form of supervision is not contained. The information is derived from court records provided to the Department of Corrections and is made available as a public service to interested citizens. The Department of Corrections makes no guarantee as to the accuracy or completeness of the information contained herein. Any person who believes information provided is not accurate may contact the Department of Corrections.

For questions and comments, you may contact the Department of Corrections, Bureau of Admission and Release, at (850) 488-9167 or go to <http://prod.fdc-wpws001.fdc.myflorida.com/ci/index.html>. This information is made available to the public and law enforcement in the interest of public safety.

Search Criteria: (/OffenderSearch/search.aspx?TypeSearch=IR) Last Name: Mitchell First Name: Dawane Search Aliases: YES Offense Category: Release Facility: ALL Stated County of Residence Upon Release: ALL County of Commitment: ALL

[Return to Corrections Offender Information Network \(/OffenderSearch/InmateInfoMenu.aspx\)](#)

About Us

<http://www.dc.state.fl.us/about.html>

As Florida's largest state agency, and the third largest prison system in the

Quick Links

[Contact an Inmate](#)
<http://www.dc.state.fl.us/ci/ContactInmate.html>
[Public Records](#)
<http://www.dc.state.fl.us/comm/PRR.htm>
[Victim Services](#)
<http://www.dc.state.fl.us/vict/index.html>
[Inmate and Offender Programming](#)

Contact Us

<http://www.dc.state.fl.us/o1>

501 South Calhoun Street
Tallahassee, FL 32399-2500

country, FDC employs
24,000 members,
incarcerates approximately
80,000 inmates and
supervises nearly 146,000
offenders in the community.

Volunteer

(<http://www.dc.state.fl.us/volunteer/index.html>)

File a Complaint

(<http://www.dc.state.fl.us/apps/IGcomplaint.aspx>)

Organization

(<http://www.dc.state.fl.us/org/orgchart.html>)

Regulatory Plan

(<http://www.dc.state.fl.us/pub/regulatory/Prison Rape Elimination Act 2018.pdf>)

(<http://www.dc.state.fl.us/development/index.html>)

Corrections Foundation

(<https://www.correctionsfoundation.org/>)

Public Information

(<https://www.fcor.state.fl.us/index.shtml>)

Inspector General

(<http://www.dc.state.fl.us/ig/index.html>)

Prison Rape Elimination Act

(<http://www.dc.state.fl.us/PREA/index.html>)

Phone Directory

(<http://www.dc.state.fl.us/org/contact.html>)

Citizen Services

(<http://www.dc.state.fl.us/citizen/index.html>)

(850) 488-5021



Corrections Offender Network

Inmate Release Information Detail

(This information was current as of 11/16/2005)



DC Number: 467531
Name: MITCHELL, DAWANE G
Race: BLACK
Sex: MALE
Birth Date: 01/12/1978
Custody: CLOSE
Release Date: 11/01/2005

Stated Residence Upon Release:

4007 N. W. 15TH AVENUE
MIAMI, FLORIDA 33142

Aliases:

DAWANE G MITCHELL, DAWANE GODSKYLL MITCHELL

Current Prison Sentence History:

Offense Date	Offense	Sentence Date	County	Case No.	Prison Sentence Length
07/27/1993	BURGLARY/ARMED W/EXP. OR WEAP	09/12/1995	MIAMI-DADE	9326777	17Y 0M 0D
07/27/1993	SEX BAT/ WPN. OR FORCE	09/12/1995	MIAMI-DADE	9326777	17Y 0M 0D
07/27/1993	SEX BAT/ WPN. OR FORCE	09/12/1995	MIAMI-DADE	9326777	17Y 0M 0D
07/27/1993	ROBB. GUN OR DEADLY WPN	09/12/1995	MIAMI-DADE	9326777	17Y 0M 0D

Note: The offense descriptions are truncated and do not necessarily reflect the crime of conviction. Please refer to the court documents or the Florida Statutes for further information or definition.

Incarceration History:

Date In Custody	Date Out Custody
09/26/1995	11/01/2005

First Previous Next Last Return to List New Search Records: 1 of 1

The Florida Department of Corrections updates this information regularly, to ensure that it is complete and accurate, however this information can change quickly. Therefore, the information on this site may not reflect the true current location, status, release date, or other information regarding an inmate.

This database contains public record information on felony offenders sentenced to the Department of Corrections. This information only includes offenders sentenced to state prison or state supervision. Information contained herein includes current and prior offenses. Offense types include related crimes such as attempts, conspiracies and solicitations to commit crimes. Information on offenders sentenced to county jail, county probation, or any other form of supervision is not contained. The information is derived from court records provided to the Department of Corrections and is made available as a public service to interested citizens. The Department of Corrections makes no guarantee as to the accuracy or completeness of the information contained herein. Any person who believes information provided is not accurate may contact the Department of Corrections.

For questions and comments, you may contact the Department of Corrections, Bureau of Admission and Release, at (850) 488-9167 or go to Frequently Asked Questions About Inmates for more information. This information is made available to the public and law enforcement in the interest of public safety.

Search Criteria: DC#: 467531 Search Aliases: NO Offense Category: Release Facility: ALL Stated County of Residence Upon Release: ALL County of Commitment: ALL

[Return to Corrections Offender Information Network](#)

About Us

As Florida's largest state agency, and the most complex system in the country, FDC works to ensure that every inmate is treated fairly and that every inmate is given the opportunity to reform and live a productive life.

Contact Us
Public Records
Media
Tour & Open House
Inmate Mail
Regulatory Mail

Quick Links

Public Services
Inmate and Offender Information
Probation Information
Inmate Information
Inmate Group
Prison Visit Information

Contact Us

STU HUNTS COUNCIL
Tallahassee, FL 32309-2000
Main: (904) 488-9167
Phone: (904) 488-9167
Crime Services

2016 201

2022 receiv
- from
voters

Mitchell, Dawane (Maint)

CERTIFIED COPY
SUPERVISOR OF ELECTIONS
R. Simpson
CITY SUPERVISOR

0 Mitchell, Dawane 2000 NW 1st Ter, Pompano Beach, 33060

st Style First Middle Driver License Source Soc Sec Num Source
tchell Dawane F,Form F,Form
r Suf Dir Street Name Type Dir Suf Unit Type Nbr City Name County Zip Code
00 NW 1st Ter Pompano Beach BROWARD 33060

City State Zip Code Country

Mail Address

☐ Receive Sample Ballots by Email

Language Preference None

x Race Party
3, Black, not Hispanic Npa, No Party Affiliation

Pty Chg Req Dia
1 1

Regn Date
01/23/2020

☒ See Comms

Reason(Status)
E(P) Civil Rights Etc.

te of Birth Birth Place Telephone Ext
1/13/1978 Florida (954)658-3965

Assistance? ☐ EW Interest?
Addr Protect? ☐ Fed Elections Only
ID Required to Vote ☐ Photo Id Seen

Districts	Precinct	Cng	Sen	Hse	CC	SB	Wrd	POMPANO BEACH
C006.0	20	33	92	2	7	154		

Photo ID Type

CERTIFIED COPY
SUPERVISOR OF ELECTIONS
B. Simpson
 SUPERVISOR

BRO 127813592

Mitchell, Dawane

2000 NW 1st Ter, Pompano Beach, 33060

Registration Agency. Your signature can be copied. (Section 97, ch 28, Fla. Stat.)

Place this in the space provided. If it is optional to list your race or ethnicity, please check boxes (C) where applicable.

Numbered rows 1 through 7 and 12 must be completed for a new registration.

Florida Voter Registration Application

This is: ☒ New Registration ☐ Record Update/Change (e.g., Address, Party Affiliation, Name, Signature) ☐ Request to Replace Voter Information Card

1 Are you a citizen of the United States of America? ☒ YES ☐ NO

2 ☒ I affirm that I am not a convicted felon, or if I am, my right to vote has been restored.

3 ☐ I affirm that I have not been adjudicated mentally incapacitated with respect to voting or, if I have, my right to vote has been restored.

4 Date of Birth (mm-dd-yyyy) 01-23-1978 FVRS No. [REDACTED]

5 Florida Driver License (FL DL) or Florida Identification (FL ID) Card Number [REDACTED] If you FL DL or FL ID, then provide Last 4 digits of Social Security Number [REDACTED] ☐ I have NONE of these numbers.

6 Last Name Mitchell First Name Dawane Middle Name [REDACTED] Name Suffix (Jr., Sr., II, etc.):

7 Address Where You Live (legal residence - no P.O. Box) Apt./Unit City Pompano Beach County Broward Zip Code 33060

8 Mailing Address (if different from above address) Apt./Unit City State or Country Zip Code

9 Address Where You Were Last Registered to Vote Apt./Unit City State Zip Code

10 Former Name (if name is changed) Gender Male ☒ F State or Country of Birth Florida Telephone No. (optional) 754-658-3965

11 ☐ Email me SAMPLE BALLOTS if option is available in my county. (See Public Record Notice above). My email address is:

Party Affiliation (Check only one. If left blank, you will be registered without party affiliation.)

☐ Florida Democratic Party

☐ Republican Party of Florida

☒ No party affiliation

☐ Minor party (print party name):

Race/Ethnicity (Check only one)

☐ American Indian/Alaskan Native

☐ Asian/Pacific Islander

☒ Black, not of Hispanic Origin

☐ Hispanic

☐ White, not of Hispanic Origin

☐ Multi-racial

☐ Other:

(Check only one if applicable)

☐ I am an active duty Uniformed Services or Merchant Marine member

☐ I am a spouse or a dependent of an active duty uniformed services or merchant marine member

☐ I am a U.S. citizen residing outside the U.S.

☐ I will need assistance with voting.

☐ I am interested in becoming a poll worker.

12 Oath: I do solemnly swear (or affirm) that I will protect and defend the Constitution of the United States and the Constitution of the State of Florida, that I am qualified to register as an elector under the Constitution and laws of the State of Florida, and that all information provided in this application is true.

SIGN MARK HERE

Date 01/20/2020

Date Image Scanned
 02/12/2020

Date = 02/12/2020

Mitchell, Dawane (Activity)

VERIFIED COPY
SUPERVISOR OF ELECTIONS

B. Simpson
SUPERVISOR

BRO [REDACTED] Mitchell, Dawane

2000 NW 1St Ter, Pompano Beach, 33060

Last Voter Activity Date Nov/03/2020

pre-FVRS Regn Number [REDACTED]

Date Last Voted Nov/03/2020

Registration Code OT16

Date of Last Status Change Feb/11/2022

Date Last Voter Card Printed Jan/31/2020

Record Creation Date Jan/27/2020

Number of Times Voted

Registration Date Jan/23/2020

Last Transaction

Date Operator

02/11/22 08:37:16 AM scahuasqui

Mitchell, Dawane (Elections)

CERTIFIED COPY
SUPERVISOR OF ELECTIONS
R. Simpson
DEPUTY SUPERVISOR

BRO 127813592 Mitchell, Dawane

2000 NW 1st Ter, Pompano Beach, 33060

Elec#	Date	Name	EVID Sig	Status/History
227	8/23/2022	Primary Election	N	Ineligible Voter (023N)
225	11/3/2020	2020 General Election	N	Voted

Mitchell, Dawane (Audit)

CERTIFIED COPY
SUPERVISOR OF ELECTIONS
R. Simpson
SUPERVISOR

BRO [REDACTED] Mitchell, Dawane 2000 NW 1St Ter. Pompano Beach, 33060

Date	Cnty	Operator	Field	New Value	Old Value
2/11/2022 8:56 AM		scahuasqui	Comm-Out	Mailed Notice of Final Ineligibility	Sch'd by scahuasqui
2/11/2022 8:37 AM		scahuasqui	Comm-Out	Voter No Response by expiry of allowable time	No Voter Response.
2/11/2022 8:37 AM		scahuasqui	Abs-Cancel	227 Primary Election	
2/11/2022 8:37 AM		scahuasqui	Abs-Cancel	228 General Election	
2/11/2022 8:37 AM	BRO	scahuasqui	AbExp	1/1/1890 12:00:00 AM	12/31/2022 12:00:00 AM
2/11/2022 8:37 AM	BRO	scahuasqui	FvrsLCD	02/11/2022 08:37:15:00	10/14/2020 10:53:03:00
2/11/2022 8:37 AM	BRO	scahuasqui	FvrsLCD	02/11/2022 08:37:15:00(BU02)	10/14/2020 10:53:03:00
2/11/2022 8:37 AM	BRO	scahuasqui	Reasn	E (E(P) Civil Rights Etc.)	1 (1(A) Active Voter)
2/11/2022 8:37 AM	BRO	scahuasqui	Sttus	P	A
2/1/2022 11:47 AM	BRO	mcmasson	898/7	Petr-Sig Accepted :Limited Authorization of Casino Gambling	
1/19/2022 7:42 AM		BSheppard	Abs-Mail	232 2022 Special Election S33: Municipals	Ballot=(002G)3143
1/14/2022 12:54 PM	BRO	spalkowe	898/5	Petr-Sig Bad Signature :Limited Authorization of Casino Gambling	Bad Signature
1/6/2022 9:19 AM		scahuasqui	Comm-Out	Felon Letter FVRS	Sch'd by brofab5
1/6/2022 8:40 AM		gdiaz	Comm-In	Office Note:	DOC 467531
1/3/2022 6:17 PM		kaird	Abs-Request	232 2022 Special Election S33: Municipals	
11/22/2021 1:06 PM		kaird	Abs-Mail	230 2022 SpGEN C20, SpPRI S33_H94	Ballot=(001G)764
11/18/2021 2:45 PM		kaird	Abs-Request	230 2022 SpGEN C20, SpPRI S33_H94	
3/12/2021 10:33 AM		brofab5	Abs-Request	228 General Election	
3/12/2021 8:55 AM		brofab5	Abs-Request	228 General Election	
3/11/2021 6:32 PM		jwolf	Abs-Request	227 Primary Election	

Mitchell, Dawane (Audit)

CERTIFIED COPY
 SUPERVISOR OF ELECTIONS
R. Simpson
 DEPUTY CLERK

BRO [REDACTED] Mitchell, Dawane 2000 NW 1St Ter, Pompano Beach, 33060

Date	Cnty	Operator	Field	New Value	Old Value
3/12/2021 8:55 AM		brofab5	Abs-Request	228 General Election	
3/11/2021 6:32 PM		jwolf	Abs-Request	227 Primary Election	
10/14/2020 3:43 PM		BSheppard	Abs-Mail	225 2020 General Election	Ballot=(007G)3090
10/14/2020 11:31 AM	BRO	brofab5	ActyDt	10/14/2020 11:31:23 AM	10/14/2020 12:00:00 AM
10/14/2020 10:52 AM		SAxelrod	Abs-Request	225 2020 General Election	
10/14/2020 10:52 AM	BRO	SAxelrod	AbExp	12/31/2022 12:00:00 AM	1/1/1880 12:00:00 AM
10/14/2020 10:52 AM	BRO	SAxelrod	ActyDt	10/14/2020 10:52:12 AM	1/27/2020 12:00:00 AM
10/14/2020 10:52 AM	BRO	SAxelrod	Email	Thepsalmist34@gmail.com	
10/14/2020 10:52 AM	BRO	SAxelrod	FvrsLCD	10/14/2020 10:53:03:00(RG05)	01/29/2020 07:46:24:00
2/20/2020 10:25 AM		toconnor	Comm-In	Application QA Completed	QA Completed
2/12/2020 10:38 AM		mgoussen	Comm-In	Scanned Front of Card Img	
1/31/2020 10:26 AM		kwaite	Comm-Out	Sent a Voter Id Card	New Voter Registration Sch'd by FVRS/DOS
1/29/2020 7:46 AM	BRO	FVRS/DOS	FvrsLCD	01/29/2020 07:46:24:00	01/27/2020 09:04:01:00
1/29/2020 7:46 AM	BRO	FVRS/DOS	Reasn	1 (1(A) Active Voter)	ZZ (ZZ(Z) Pending HSMV Verification)
1/29/2020 7:46 AM	BRO	FVRS/DOS	Sttus	A	Z
1/27/2020 9:03 AM	BRO	FVRS/BRO	Miciv	C	
1/27/2020 9:02 AM			Regn-Form	Good Registration:	OT16, Othr-3rdPartyVoterRegistration
1/27/2020 9:02 AM	BRO	gsolomon	ActyDt	1/27/2020 9:02:11 AM	1/1/1880 12:00:00 AM
1/27/2020 9:02 AM	BRO	gsolomon	AProt	N	
1/27/2020 9:02 AM	BRO	gsolomon	Asist	N	

Mitchell, Dawane (Audit)

CERTIFIED COPY
 SUPERVISOR OF ELECTIONS
R. Simpson
 COUNTY SUPERVISOR

BRO [REDACTED]		Mitchell, Dawane		2000 NW 1St Ter, Pompano Beach, 33060		
Date	Cnty	Operator	Field	New Value	Old Value	
1/27/2020 9:02 AM	BRO	gsolomon	AProl	N		
1/27/2020 9:02 AM	BRO	gsolomon	Asist	N		
1/27/2020 9:02 AM	BRO	gsolomon	BDate	1/13/1978 12:00:00 AM	1/1/1880 12:00:00 AM	
1/27/2020 9:02 AM	BRO	gsolomon	BPice	Florida		
1/27/2020 9:02 AM	BRO	gsolomon	Brnch	OT16		
1/27/2020 9:02 AM	BRO	gsolomon	City	15 (POMPANO BEACH)		
1/27/2020 9:02 AM	BRO	gsolomon	CtyWd	154		
1/27/2020 9:02 AM	BRO	gsolomon	DrvLc	[REDACTED]		
1/27/2020 9:02 AM	BRO	gsolomon	Email S	N		
1/27/2020 9:02 AM	BRO	gsolomon	Evid SH	N		
1/27/2020 9:02 AM	BRO	gsolomon	FedEl	N		
1/27/2020 9:02 AM	BRO	gsolomon	FName	Dawane		
1/27/2020 9:02 AM	BRO	gsolomon	Fvrs	127813592		
1/27/2020 9:02 AM	BRO	gsolomon	FvrsLCD	01/27/2020 09:04:01:00		
1/27/2020 9:02 AM	BRO	gsolomon	IdReq	N		
1/27/2020 9:02 AM	BRO	gsolomon	L4SSN	[REDACTED]		
1/27/2020 9:02 AM	BRO	gsolomon	LangPre	None		
1/27/2020 9:02 AM	BRO	gsolomon	LName	Mitchell		
1/27/2020 9:02 AM	BRO	gsolomon	MitDep	N		
1/27/2020 9:02 AM	BRO	gsolomon	NoDlnSs	N		

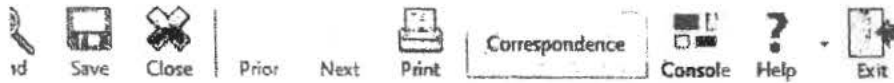
Mitchell, Dawane (Audit)

CERTIFIED COPY
 SUPERVISOR OF ELECTIONS
B. Simpson
 SUPERVISOR

BRO [REDACTED] Mitchell, Dawane 2000 NW 1St Ter, Pompano Beach, 33060

Date	Cnty	Operator	Field	New Value	Old Value
1/27/2020 9:02 AM	BRO	gsolomon	LangPre	None	
1/27/2020 9:02 AM	BRO	gsolomon	LName	Mitchell	
1/27/2020 9:02 AM	BRO	gsolomon	MidDep	N	
1/27/2020 9:02 AM	BRO	gsolomon	NoDinSs	N	
1/27/2020 9:02 AM	BRO	gsolomon	Party	Npa	
1/27/2020 9:02 AM	BRO	gsolomon	PtyChRq	01/27/2020	
1/27/2020 9:02 AM	BRO	gsolomon	Race	3	
1/27/2020 9:02 AM	BRO	gsolomon	Reasn	ZZ (ZZ(Z) Pending HSMV Verification)	
1/27/2020 9:02 AM	BRO	gsolomon	RegDt	1/23/2020 12:00:00 AM	1/1/1880 12:00:00 AM
1/27/2020 9:02 AM	BRO	gsolomon	RePrc	C006.0	
1/27/2020 9:02 AM	BRO	gsolomon	ResAd	2000 NW 1st Ter Appt	
1/27/2020 9:02 AM	BRO	gsolomon	Sex	M	
1/27/2020 9:02 AM	BRO	gsolomon	SocSc	- [REDACTED]	
1/27/2020 9:02 AM	BRO	gsolomon	Sttus	Z	
1/27/2020 9:02 AM	BRO	gsolomon	SupVot	N	
1/27/2020 9:02 AM	BRO	gsolomon	Tel	6583965	
1/27/2020 9:02 AM	BRO	gsolomon	TelArCd	954	
1/27/2020 9:02 AM	BRO	gsolomon	Usps	156	
1/27/2020 9:02 AM	BRO	gsolomon	Zip	33060	

Mitchell, Dawane (Read Only)



Doc Images Activity Elections Audit Vote-by-Mail Comms Eligibility Maint

Mitchell, Dawane

2090 NW 1St Ter, Pompano Beach, 33060

St	Style	First	Middle	Driver License	Source	Soc Sec Num	Source		
chell	▼	Dawane			F,Form ▼		F,Form ▼		
Suf	Dir	Street Name	Type	Dir	Unit Type	Nbr	City Name	County	Zip Code
10		NW	1St	Ter			Pompano Beach	BROWARD	33060

City	State	Zip Code	Country

all Address

☐ Receive Sample Ballots by Email

Language Preference None ▼

Race	Party	Pty Chg Req Dte	Regn Date	☐ See Comms	Reason(Statue)
3 Black, not Hispanic ▼	Npa. No Party Affiliation ▼	/ /	01/29/2020		(E(P) Civil Rights Felon ▼

e of Birth	Birth Place	Telephone	Ext
13/1978	Florida	(954)658-3865	

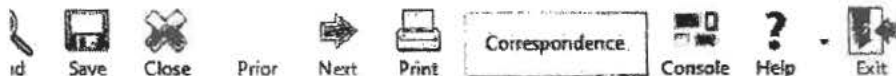
Assistance? ☐ EW Interest?
Addr Protect? ☐ Fed Elections Only
ID Required to Vote ☐ Photo ID Seen

Districts
Precinct Cng Sen Hse CC SB
C006.0 20 33 92 2 7

Photo ID Type

▼

Mitchell, Dawane (Read Only)



Doc Images Activity Elections Audit Vote-by-Mail Comms Eligibility Maint

Mitchell, Dawane

2000 NW 1st Ter, Pompano Beach, 33060

Registration Agency: Your signature can be copied. (Check **OFF** box, File Set) **ADDITIONAL: It is optional to fill your race or ethnicity. Below: Please check boxes (C) where applicable.**

Numbered rows 1 through 7 and 12 must be completed for a new registration

This is: ☒ New Registration ☐ Record Update/Change (e.g., Address, Party Affiliation, Name, Signature) ☐ Request to Replace Voter Information Card

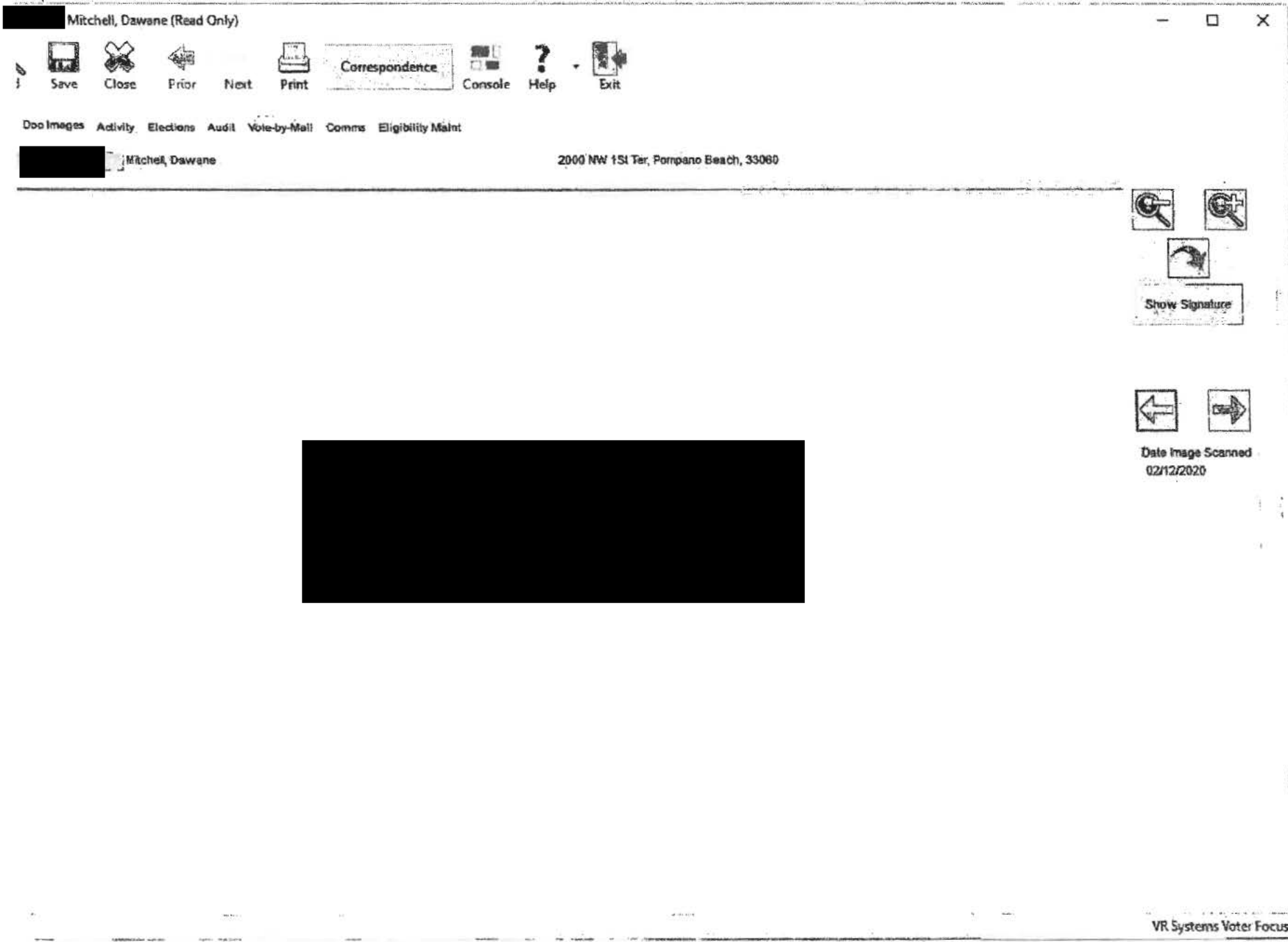
1	Are you a citizen of the United States of America?	☒ YES ☐ NO	OFFICIAL USE ONLY	
2	☒ I affirm that I am not a convicted felon, or if I am, my right to vote has been restored.			
3	☒ I affirm that I have not been adjudicated mentally incapacitated with respect to voting or, if I have, my right to vote has been restored.			
4	Date of Birth (mm-dd-yyyy)	01-13-1978	PVRS No:	
5	Florida Driver License (FL DL) or Florida Identification (FL ID) Card Number		If FL DL or FL ID, then provide	Last 4 digits of Social Security Number
6	Last Name	Mitchell	Middle Name	Dawane
7	Address Where You Live (legal residence-no P.O. Box)	2000 NW 1st Ter	City	Pompano Beach
8	Mailing Address (if different from above address)		City	
9	Address Where You Were Last Registered to Vote		City	
10	Former Name (if name is changed)		State or Country of Birth	Florida
11	☐ Email me SAMPLE BALLOTS if option is available in my county. (See Public Record Notice above) My email address is:			
Party Affiliation (Check only one. If left blank, you will be registered without party affiliation)		Race/Ethnicity (Check only one)		(Check only one if applicable)
☐ Florida Democratic Party ☐ Republican Party of Florida ☒ No party affiliation ☐ Minor party (print party name):		☐ American Indian/Alaskan Native ☐ Asian/Pacific Islander ☒ Black, not of Hispanic Origin ☐ Hispanic ☐ White, not of Hispanic Origin ☐ Multi-racial ☐ Other		☐ I am an active duty Uniformed Services or Merchant Marine member ☐ I am a spouse or a dependent of an active duty uniformed services or merchant marine member ☐ I am a U.S. citizen residing outside the U.S.
☐ I will need assistance with voting. ☐ I am interested in becoming a poll worker.		SIGN/ MARK HERE 		Date 01/20/2020



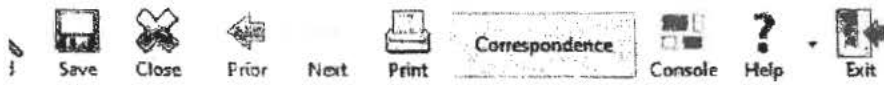
Show Signature



Date Image Scanned
02/12/2020



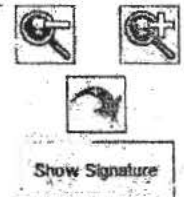
Mitchell, Dawane (Read Only)



Doc Images Activity Elections Audit Vote-by-Mail Comms Eligibility Maint

Mitchell, Dawane

2000 NW 151 Ter, Pompano Beach, 33060



Date Image Scanned
02/12/2020

Mitchell, Dawane (Read Only)



Save



Close



Prior



Next



Print



Correspondence



Console



Help



Exit

Doc Images

Activity

Elections

Audit

Vote-by-Mail

Comms

Eligibility Maint

Mitchell, Dawane

2000 NW 1st Ter, Pompano Beach, 33060

Last Voter Activity Date

Nov/03/2020

pre-FVRS Regn Number

Date Last Voted

Nov/03/2020

Registration Code

8

Date of Last Status Change

Feb/11/2022

Date Last Voter Card Printed

Jan/31/2020

Record Creation Date

Number of Times Voted

Registration Date

Jan/23/2020

- Last Transaction

Date

Operator

VR Systems Voter Focus

Save Close Prior Next Print Correspondence Console Help Exit

DocImages Activity Elections Audit Vote-by-Mail Comms Eligibility Maint

Mitchell, Dawane 2000 NW 1st Ter, Pompano Beach, 33060

c#	Date	Name	Status/History
1	11/3/2020	2020 General Election	Voted

Preview Sample Ballot

Voting Pass

Ballot Style: (007G) Npa



2020 General Election (225)

Precinct: (C006.0)



Reg#:

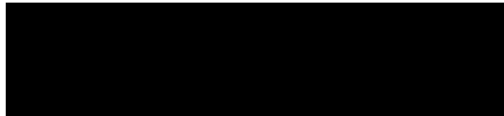


Mitchell, Dawane

Birth Date: 01/13/1978

2000 NW 1st Ter

Pompano Beach FL 33060



MJ

Boys & Girls Club of Broward County

11/3/2020 4:22:12 PM

(17055) (15.00004)

Voting Pass

Ballot Style: 0070 Npa



2020 General Election (225)

Precinct: C006.0



Reg#:



Mitchell, Dawane

Birth Date: 01/13/1978

2000 NW 1st Ter

Pompano Beach FL 33060



MJ

Boys & Girls Club of Broward County

11/3/2020 4:22:12 PM

11/3/2020 4:22:12 PM

2000 NW 1st Ter, Pompano Beach, 33060

ast	Style	First	Middle	Driver License	Source	Soc Sec Num	Source
Itchell	▼	Dawane			F,Form ▼	-	F,Form ▼

br	Suf	Dir	Street Name	Type	Dir	Unit Type	Nbr	City Name	County	Zip Code
000		NW ▼	1St	Ter ▼	▼	▼		Pompano Beach	BROWARD	33060

City	State	Zip Code	Country

mailAddress

☐ Receive Sample Ballots by Email

Language Preference

ex Race Party Pty Chg Req Dte Regn Date ☐ See Comms Reason (Status)

date of Birth	Birth Place	Telephone	Ext
1/13/1978	Florida	(954)558-3985	

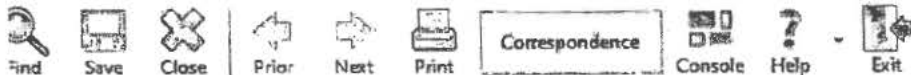
☐ Assistance?	☐ EW Interest?
☐ Addr Protect?	☐ Fed Elections Only
☐ ID Required to Vote	☐ Photo Id Seen

Photo ID Type

[illegible]

Districts	Cng	Sen	Hse	CC	SB
Precinct					
C006.0	20	33	92	2	7

Mitchell, Dawane (Read Only)



Int Doc Images Activity Elections Audit Vote-by-Mail Comms Eligibility Maint

NO Mitchell, Dawane

2000 NW 1st Ter, Pompano Beach, 33060

Important Notice: Your signature can be copied. (Section 97.02(2), Fla. Stat.)

WARNING: It is illegal to list your race or ethnicity. Please check boxes (C) where indicated.

Numbered rows 1 through 7 and 12 must be completed for a new registration

This is: ☒ New Registration ☐ Record Update/Change (e.g., Address, Party Affiliation, Name, Signature) ☐ Request to Replace Voter Information Card

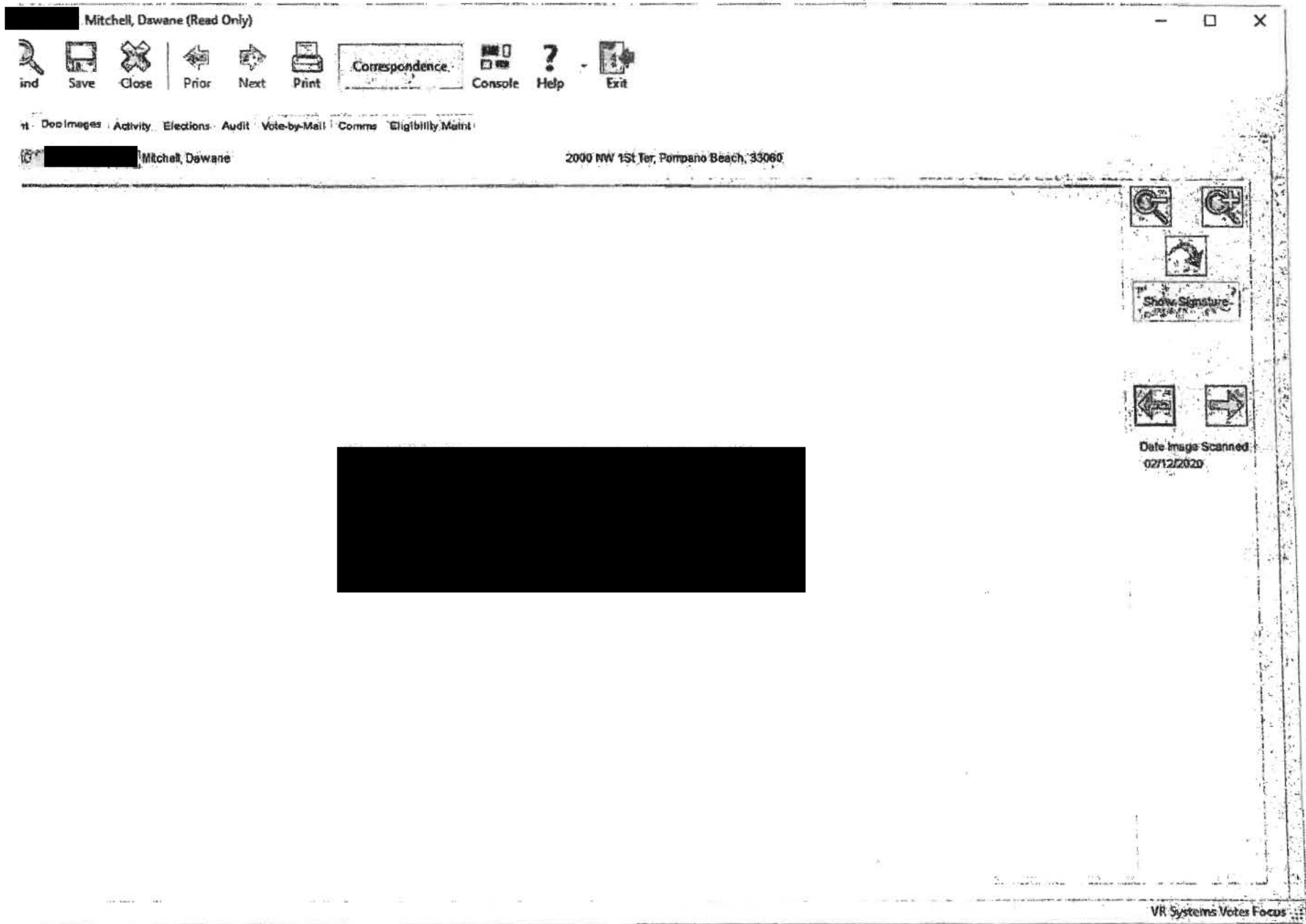
1	Are you a citizen of the United States of America?	☐ YES ☐ NO	OFFICIAL USE ONLY	
2	☒ I affirm that I am not a convicted felon, or if I am, my right to vote has been restored.			
3	☐ I affirm that I have not been adjudicated mentally incapacitated with respect to voting or, if I have, my right to vote has been restored.			
4	Date of Birth (mm/dd/yyyy)	01-13-1978	PVRB Ref:	
5	Florida Driver License (FL DL) or Florida Identification (FL ID) Card Number		If (a) FL DL or FL ID, then provide number.	Last 4 digits of Social Security Number ☐ I have NONE of these numbers.
6	Last Name	First Name	Middle Name	Name Suffix (Jr., Sr., I, II, etc.)
7	Address Where You Live (legal residence-no P.O. Box)		City	County
8	Mailing Address (if different from above address)		City	State or Country
9	Address Where You Were Last Registered to Vote		City	State
10	Former Name (if name is changed)	Gender	State or Country of Birth	Telephone No. (optional)
11	☐ Email me SAMPLE BALLOTS if option is available in my county. (See Public Notice above) My email address is:			
Party Affiliation (Check only one. If left blank, you will be registered without party affiliation)		Race/Ethnicity (Check only one)		I will need assistance with voting.
☐ Florida Democratic Party ☐ Republican Party of Florida ☒ No party affiliation ☐ Minor party (print party name):		☐ American Indian/Alaskan Native ☐ Asian/Pacific Islander ☒ Black, not of Hispanic Origin ☐ Hispanic ☐ White, not of Hispanic Origin ☐ Multi-racial ☐ Other		
I do solemnly swear (or affirm) that I will protect and defend the Constitution of the United States and the Constitution of the State of Florida, that I am qualified to register as an elector under the Constitution and laws of the State of Florida, and that all information provided in this application is true.		SIGN HERE		I am an active duty Uniformed Services or Merchant Marine member I am a spouse or a dependent of an active duty uniformed services or merchant marine member I am a U.S. citizen residing outside the U.S.
				Date



Show Signature



Date Image Scanned
02/12/2020



████████ Mitchell, Dawane (Read Only)



DocImages Activity Elections Audit Vote-by-Mail Comms Eligibility Maint

ID ██████████ Mitchell, Dawane

2000 NW 1St Ter, Pompano Beach, 33060

Last Voter Activity Date	Nov/03/2020	pre-FVRS Regn Number	
Date Last Voted	Nov/03/2020	Registration Code	8
Date of Last Status Change	Feb/11/2022	Date Last Voter Card Printed	Jan/31/2020
Record Creation Date		Number of Times Voted	
Registration Date	Jan/23/2020		

Last Transaction

Date	Operator



Mitchell, Dawane 2000 NW 15th Ter, Pompano Beach, 33060

Elec#	Date	Name	Status/History
0000	11/3/2020	2020 General Election	Voted

Preview Sample Ballot

COMPREHENSIVE CASE INFORMATION SYSTEM

Harvey R. Pomeroy, Clerk of the Circuit and County Courts
MIAMI-DADE COUNTY



We are agents of change
and advocates of innovation.
We apply appropriate
strategic, technological,
process and people

CCIS

Search Reports TCATS Help

Logout

kalen.mercer@dos.myflorida.com

Back

Expand All

Case Number	Filed Date	Disposition Date	County	Case Type	Status	Contested
131993CF026777001XX [F03026777]	08/10/1993	09/12/1995	MIAMI-DADE	FELONY	REOPENED	No

Charge Seq #	Description	Date	Phase	Trial
00001	BURGLARY/ARMED - PBL	09/15/1997	Court:Adjudicated Guilty	Jury Trial
00002	SEXUAL BATTERY/WITH A DEADLY WEAPON/SER INJURY	09/15/1997	Court:Adjudicated Guilty	Jury Trial

Date	Action	Statute / Text
Offense: 07/27/1993	Trial Jury Trial	
Initial: 07/27/1993	Charged	
Prosecutor: 08/10/1993	Filed	794.011(3) / SEXUAL BATTERY/WITH A DEADLY WEAPON/SER INJURY
Court: 09/15/1997	Adjudicated Guilty	794.011(3) / SEXUAL BATTERY/WITH A DEADLY WEAPON/SER INJURY

00003	SEXUAL BATTERY/WITH A DEADLY WEAPON/SER INJURY	09/15/1997	Court:Adjudicated Guilty	Jury Trial
00004	ROBBERY/ARMED/WEAPON	09/15/1997	Court:Adjudicated Guilty	Jury Trial

Party Name	Party Type	Attorney	Bar ID
HIRSCH, MILTON	JUDGE		
MISSET, LYNN M	DEFENDANT ATTORNEY		
POTH, JEFFREY	STATE ATTORNEY		
MITCHELL, DAWANE G	DEFENDANT	MISSET, LYNN A MALKOFF	396435

DOB: 01/13/1978

Race: Black

License:

Address: 532 SW 2ND ST APT: 5 POMPANO BEACH, FL, 33069826

Place of Birth:

Gender: Male

Juvenile: No

Domestic Violence:

+ Dockets

+ Judge Assignment History

+ Court Events

+ Sentences

- Financial Summary

Financial Summary					
Assessment	Total: \$255.00	Paid to Date: \$0.00	Balance Due: \$255.00		
Restitution	Total: \$0.00	Paid to Date: \$0.00	Balance Due: \$0.00		

Financial Details					
Count	Assessment Due	Assessment Paid to Date	Restitution Due	Restitution Paid to Date	Last Payment Date
	\$255.00	\$0.00	\$0.00	\$0.00	

This information reflects the financial obligations shown on the Florida Comprehensive Case Information System (CCIS) for THIS CASE ONLY. For the current balances of your financial obligations, you should contact the Clerk of the Court in the county where the financial obligation was imposed. Nothing in CCIS alters any financial obligation imposed by a court.

+ Reopen History

Florida Department of Law Enforcement - Sexual Offender / Predator



DAWANE GODSKYLL MITCHELL

Date of Image : 01/05/2022

Primary Information	
Designation :	Sexual Offender
Name :	DAWANE GODSKYLL MITCHELL
Status :	Released - Subject to Registration
Dept of Correction# :	467531
Date Of Birth :	01/13/1978
Race :	Black
Sex :	Male
Hair :	Black
Eyes :	Brown
Height :	5'10"
Weight :	220 lbs

DAWANE GODSKYLL MITCHELL is registered as a Sexual Offender. Positive identification cannot be established unless a fingerprint comparison is made.

Aliases					
Not Available					
Scars, Marks & Tattoos					
Type	Body Location	Count			
None Reported					
Address Information					
Address	Address Source information		Map Link		
2000 Nw 1st Ter Pompano Beach, FL 33060-5009 Broward County	Source: REG Received Date: 01/12/2021 Address Type: Permanent		N/A		
Crime Information - Qualifying Offense					
Adjudication Date	Crime Description	Court Case Number	Jurisdiction & State	Adjudication	
07/27/1993	SEX BAT/ WPN. OR FORCE; F.S. 794.011(3)	93026777	Miami-Dade, FL	Guilty/convict	
Victim Information					
Gender	Minor				
Unknown	No				
Vehicle Information					
Vehicle Make	Vehicle Type	Vehicle Color	Vehicle Year	Vehicle Body	Tag Number
No registered/owned vehicle information on file for this subject					

Vessel Information						
Vessel Make	Vessel Type	Vessel Color	Motor Type	Hull Material	Vessel Year	Registration Number
No registered/owned vessel information on file for this subject						

Link to FDLE



FDLE Mobile App



Subject's Flyer



If further information is needed, please contact the Florida Department of Law Enforcement EIS-MPOR Offender Registration and Data Management at (1-888-357-7332) between the hours of 8:00am and 5:00pm, Monday through Friday.

Positive identification cannot be established unless a fingerprint comparison is made. Any person who misuses public records information relating to a sexual predator, as defined in this section, or a sexual offender, commits a misdemeanor of the first degree. Please see 775.21(10)(c) for more information.



(<http://www.dc.state.fl.us/index.html>)

Florida Department of Corrections

(<http://www.dc.state.fl.us/index.html>)

"Inspiring Success by Transforming One Life at a Time"



Ron DeSantis, Governor

Ricky D. Dixon, Secretary

Offender Search ([/OffenderSearch/InmateInfoMenu.aspx](http://www.dc.state.fl.us/OffenderSearch/InmateInfoMenu.aspx))

Visit an Inmate (<http://www.dc.state.fl.us/ci/visit.html>)

Correctional Institutions (<http://www.dc.state.fl.us/ci/index.html>)

Probation Services (<http://www.dc.state.fl.us/cc/index.html>)

FDC Jobs (<http://www.fldocjobs.com>)

Newsroom (<http://www.dc.state.fl.us/comm/index.html>)

Statistics (<http://www.dc.state.fl.us/pub/index.html>)

Corrections Offender Network

Inmate Release Information Detail

(This information was current as of 11/18/2005)



DC Number:	467531
Name:	MITCHELL, DAWANE G
Race:	BLACK
Sex:	MALE
Birth Date:	01/13/1978
Custody:	CLOSE
Release Date:	11/01/2005

Stated Residence Upon Release:

4907 N. W. 15TH AVENUE
MIAMI, FLORIDA 33142

Aliases:

DAWANE G MITCHELL, DAWANE GODSKYLL MITCHELL

Current Prison Sentence History:

Offense Date	Offense	Sentence Date	County	Case No.	Prison Sentence Length
07/27/1993	BURGLARY, ARMED W/EXP. OR WEAPO	09/12/1995	MIAMI-DADE	9326777	17Y 0M 0D
07/27/1993	SEX BAT/ WPN. OR FORCE	09/12/1995	MIAMI-DADE	9326777	17Y 0M 0D
07/27/1993	SEX BAT/ WPN. OR FORCE	09/12/1995	MIAMI-DADE	9326777	17Y 0M 0D
07/27/1993	ROBB. GUN OR DEADLY WPN	09/12/1995	MIAMI-DADE	9326777	17Y 0M 0D

Note: The offense descriptions are truncated and do not necessarily reflect the crime of conviction. Please refer to the court documents or the Florida Statutes for further information or definition.

Incarceration History:

Date In-Custody	Date Out-Custody
09/20/1995	11/01/2005

First Previous Next Last Return to List

New Search

Record: 1 of 1

The Florida Department of Corrections updates this information regularly, to ensure that it is complete and accurate, however this information can change quickly. Therefore, the information on this site may not reflect the true current location, status, release date, or other information regarding an inmate.

This database contains public record information on felony offenders sentenced to the Department of Corrections. This information only includes offenders sentenced to state prison or state supervision. Information contained herein includes current and prior offenses. Offense types include related crimes such as attempts, conspiracies and solicitations to commit crimes. Information on offenders sentenced to county jail, county probation, or any other form of supervision is not contained. The information is derived from court records provided to the Department of Corrections and is made available as a public service to interested citizens. The Department of Corrections makes no guarantee as to the accuracy or completeness of the information contained herein. Any person who believes information provided is not accurate may contact the Department of Corrections.

For questions and comments, you may contact the Department of Corrections, Bureau of Admission and Release, at (850) 488-9167 or go to [Frequently Asked Questions About Inmates for more information](http://prod.fdc-wpws001.fdc.myflorida.com/ci/index.html) (http://prod.fdc-wpws001.fdc.myflorida.com/ci/index.html). This information is made available to the public and law enforcement in the interest of public safety.

Search Criteria: (/OffenderSearch/search.aspx?TypeSearch=IR) Last Name: Mitchell First Name: Dawane Search Aliases: YES Offense Category: Release Facility: ALL Stated County of Residence Upon Release: ALL County of Commitment: ALL

[Return to Corrections Offender Information Network \(/OffenderSearch/InmateInfoMenu.aspx\)](#)

About Us

(<http://www.dc.state.fl.us/about.html>)

As Florida's largest state agency, and the third largest prison system in the

Quick Links

[Contact an Inmate](#)

(<http://www.dc.state.fl.us/ci/ContactInmate.aspx>)

[Public Records](#)

(<http://www.dc.state.fl.us/comm/PRR.htm>)

[Victim Services](#)

(<http://www.dc.state.fl.us/vict/index.html>)

[Inmate and Offender](#)

[Programming](#)

Contact Us

(<http://www.dc.state.fl.us/o>)

501 South Calhoun Street
Tallahassee, FL 32399-2500

country, FDC employs
24,000 members,
incarcerates approximately
80,000 inmates and
supervises nearly 146,000
offenders in the community.

<u>Volunteer</u>	http://www.dc.state.fl.us/development/index.html	(850) 488-5021
<u>File a Complaint</u>	http://www.dc.state.fl.us/volunteer/index.html	Corrections Foundation
<u>Organization</u>	https://www.correctionsfoundation.org/	Phone Directory
<u>Regulatory Plan</u>	http://www.dc.state.fl.us/apps/IGcomplaints/index.html	http://www.dc.state.fl.us/org/contact.html
<u>2018.pdf</u>	https://www.fcor.state.fl.us/index.shtml	Citizen Services
	http://www.dc.state.fl.us/org/orgchart.html	http://www.dc.state.fl.us/citizen/index.html
	http://www.dc.state.fl.us/pub/regulatory/	Inspector General
	http://www.dc.state.fl.us/PREA/index.html	Prison Rape Elimination Act



STATE OF FLORIDA
OFFICE OF EXECUTIVE CLEMENCY

RON D. DeSANTIS, GOVERNOR, CHAIRMAN
ASHLEY B. MOODY, ATTORNEY GENERAL
JIMMY T. PATRONIS, JR., CHIEF FINANCIAL OFFICER
NICOLE FRIED, COMMISSIONER OF AGRICULTURE
and CONSUMER SERVICES

S. MICHELLE WHITWORTH, COORDINATOR

4070 Esplanade Way, Tallahassee, Florida 32399-2450
Phone: (850) 488-2952 Fax: (850) 488-0695
Toll Free: 1-800-436-8286

STATE OF FLORIDA,
COUNTY OF LEON

I HEREBY CERTIFY that I, S. Michelle Whitworth, am Coordinator of the Office of Executive Clemency of the State of Florida. I further attest that this seal is the official seal of the State of Florida. As Coordinator of the Office of Executive Clemency, I am custodian of the records of the clemency office. Staff has made a diligent search of the clemency records and there is no record of restoration of civil rights; restoration of alien status under Florida law; specific authority to own, possess or use firearms; or a pardon of any kind, having been granted by the Governor and Cabinet of the State of Florida to **DAWANE GODSKYLL MITCHELL A/K/A DAWANE MITCHELL A/K/A DWANE MITCHELL, DOB: 01/13/1978**, in connection with a conviction in the State of Florida. In addition, there is no application pending for clemency at this time for the above-named person.



S. Michelle Whitworth
S. Michelle Whitworth, Coordinator
Office of Executive Clemency of the State of Florida

July 29, 2022



Florida Department of
Law Enforcement

Criminal Investigations and Forensic Science
Miami Regional Operations Center
1030 NW 111th Avenue
Miami, FL 33172
1-800-226-3023
www.fdle.state.fl.us

Ron DeSantis, *Governor*
Ashley Moody, *Attorney General*
Jimmy Patronis, *Chief Financial Officer*
Nikki Fried, *Commissioner of Agriculture*

July 27, 2022

Office of Executive Clemency
4070 Esplanade Way
Tallahassee, Florida 32399-2450
FAX: (850) 488-0695

The State of Florida is seeking enhancement under Florida Statute 775.084 and/or 775.087 on the below-listed defendant. Please provide a certificate with seal and business records certification, signed by the custodian of records reflecting whether the individual has received clemency.

Defendant's name: Dawane Mitchell

Alias name(s): Dwane Mitchell

Date of birth: 01/13/1978

Social Security #: [REDACTED]

FDLE, FBI or Department of Corrections (DOC) # 467531: FDLE SID# 03787379

(Note to requester: Any one of the three identifiers above is sufficient)

US Citizen: Y x / N _____ Alien Registration #:

County/ Case # of the defendant's instant offense: Miami-Dade F93026777

Number of Gold Seal Certificates: _____1_____

Sincerely,

Michelle Cabrera
Special Agent
Florida Department of Law Enforcement
Miami Regional Operations Center
1030 NW 111 Avenue
Miami, Florida 33172

Florida Department of Law Enforcement - Sexual Offender / Predator



DAWANE GODSKYLL MITCHELL

Date of Image : 01/05/2022

Primary Information	
Designation :	Sexual Offender
Name :	DAWANE GODSKYLL MITCHELL
Status :	Released - Subject to Registration
Dept of Correction# :	467531
Date Of Birth :	01/13/1978
Race :	Black
Sex :	Male
Hair :	Black
Eyes :	Brown
Height :	5'10"
Weight :	220 lbs

DAWANE GODSKYLL MITCHELL is registered as a Sexual Offender. Positive identification cannot be established unless a fingerprint comparison is made.

Aliases					
Not Available					
Scars, Marks & Tattoos					
Type	Body Location	Count			
None Reported					
Address Information					
Address	Address Source information		Map Link		
2000 Nw 1st Ter Pompano Beach, FL 33060-5009 Broward County	Source: REG Received Date: 01/12/2021 Address Type: Permanent		N/A		
Crime Information - Qualifying Offenses					
Adjudication Date	Crime Description	Court Case Number	Jurisdiction & State	Adjudication	
07/27/1993	SEX BAT/ WPN. OR FORCE; F.S. 794.011(3)	93026777	Miami-Dade, FL	Guilty/convict	
Victim Information					
Gender	Minor				
Unknown	No				
Vehicle Information					
Vehicle Make	Vehicle Type	Vehicle Color	Vehicle Year	Vehicle Body	Tag Number

Vessel Information						
Vessel Make	Vessel Type	Vessel Color	Motor Type	Hull Material	Vessel Year	Registration Number
No registered/owned vessel information on file for this subject						

Link to FDLE



FDLE Mobile App



Subject's Flyer



If further information is needed, please contact the Florida Department of Law Enforcement EIS-MPOR Offender Registration and Data Management at (1-888-357-7332) between the hours of 8:00am and 5:00pm, Monday through Friday.

Positive identification cannot be established unless a fingerprint comparison is made. Any person who misuses public records information relating to a sexual predator, as defined in this section, or a sexual offender, commits a misdemeanor of the first degree. Please see 775.21(10)(c) for more information.

COMPREHENSIVE CASE INFORMATION SYSTEM

Harvey Rubin, Clerk of the Circuit and County Courts
MIAMI-DADE COUNTY



We are open to all people
and advocates of innovation.
We apply technology
efficiently, respectfully,
process and people.

CCIS

Search Reports TCATS Help

Logout

kalen.mercer@dos.myflorida.com

Back

Expand All

Case Number	Filed Date	Disposition Date	County	Case Type	Status	Confidential
131993CF0267770001XX [7901267]	08/10/1993	09/12/1995	MIAMI-DADE	FELONY	REOPENED	

Charge Seq #	Description	Date	Phase	Trial
00001	BURGLARY/ARMED - PBL	09/15/1997	Court Adjudicated Guilty	Jury Trial
00002	SEXUAL BATTERY/WITH A DEADLY WEAPON/SEX INJURY	09/15/1997	Court Adjudicated Guilty	Jury Trial
	Date	Action	Status	
Charge	09/15/1997	Trial Jury Trial		
Final	09/15/1997	Charged		
Prosecutor	08/10/1993	Filed		
Defendant	09/15/1997	Adjudicated Guilty		
00003	SEXUAL BATTERY/WITH A DEADLY WEAPON/SEX INJURY	09/15/1997	Court Adjudicated Guilty	Jury Trial
00004	ROBBERY/ARMED WEAPON	09/15/1997	Court Adjudicated Guilty	Jury Trial

Party Name	Party Type	Attorney	Bar ID
HIRSCH, MILTON	DEFENDANT		
MISSET, LYNN M	DEFENDANT		
POTH, JEFFREY	DEFENDANT		
MITCHELL, DAVANE G	DEFENDANT	MISSET, LYNN A MALKOFF	306436

DOB: 01/13/1970

Race: Black

License:

Address: 532 SW 2ND ST APT 6 POMPANO BEACH, FL 330606626

Place of Birth:

Gender: Male

Juvenile: No

Domestic Violence:

+ Dockets

+ Judge Assignment History

+ Court Events

+ Sentences

- Financial Summary

Financial Summary					
Assessment	Total: \$255.00	Paid to Date: \$0.00	Balance Due: \$255.00		
Restitution	Total: \$0.00	Paid to Date: \$0.00	Balance Due: \$0.00		
Financial Details					
Court	Assessment Due	Assessment Paid to Date	Restitution Due	Restitution Paid to Date	Total Payment Due
	\$255.00	\$0.00	\$0.00	\$0.00	

This information reflects the financial obligations shown on the Florida Comprehensive Case Information System (CCIS) for THIS CASE ONLY. For the current balances of your financial obligations, you should contact the Clerk of the Court in the county where the financial obligation was imposed. Nothing in CCIS rel. to any financial obligation imposed by a court.

+ Reopen History

IN THE CIRCUIT AND COUNTY COURTS OF THE ELEVENTH JUDICIAL CIRCUIT OF FLORIDA
IN AND FOR MIAMI-DADE COUNTY

I, HARVEY RUVIN, CLERK OF THE CIRCUIT AND COUNTY COURT OF THE ELEVENTH JUDICIAL CIRCUIT OF FLORIDA, IN AND FOR MIAMI-DADE COUNTY, DO HEREBY CERTIFY THAT A DILIGENT EXAMINATION OF THE FELONY FILES AND RECORDS IN MY OFFICE REGARDING:

NAME: MITCHELL, DAWANE G
DATE OF BIRTH: 01/13/1978
RACE: BLACK SEX: MALE
YEARS RESEARCHED: 1993 - 1993

INDICATES THE FOLLOWING:

CITATION/ ARREST / FILE				
CASE NUMBER	DATE	CHARGES	DISPOSITION	DISPO DATE

MITCHELL, DAWANE G				
F93026777	07/27/1993	BURGLARY/ARMED - PBL	CONV AND SENT	09/15/1997
		SEXBAT/WEAP/SER INJ	CONV & SENT-CONCUR	09/15/1997
		SEXBAT/WEAP/SER INJ	CONV & SENT-CONCUR	09/15/1997
		RBRY/ARM/WPN/10/19	CONV & SENT-CONCUR	09/15/1997

PURSUANT TO FLORIDA RULES OF COURT, RULE 2.430, COURT RECORDS THAT ARE NOT PERMANENTLY RECORDED MAY BE UNAVAILABLE, OR DISPOSED OF BY THE CLERK, IN ACCORDANCE WITH THE APPLICABLE RETENTION SCHEDULE REQUIRED BY SAID RULE. (10 YEARS FOR FELONY, MISDEMEANOR AND CRIMINAL TRAFFIC VIOLATIONS IN WHICH THE DEFENDANT WAS ADJUDICATED NOT GUILTY). PLEASE SEE FLORIDA RULES OF COURT, RULE 2.430, FOR A COMPLETE LISTING OF RECORDS RETENTION REQUIREMENTS.

WITNESS MY HAND AND THE SEAL OF THE COURT AT MIAMI, MIAMI-DADE COUNTY, FLORIDA, THIS 28 DAY OF JULY, 2022.

HARVEY RUVIN, CLERK
CIRCUIT AND COUNTY COURTS
IN AND FOR MIAMI-DADE COUNTY, FLORIDA

PAGE: 001

BY:

DEPUTY CLERK



Harvey Ruvin, Clerk
Circuit and County Courts
In and for Miami-Dade County, Florida

GRAND JURY INDICTMENT

AUG 10 1993

CIRCUIT COURT DADE COUNTY - CRIMINAL DIVISION
SECTION F014 CASE NO F93026777MITCHELL, DAWANE GODSKYLL 1/13/78
3254 NW 181 ST B/M
MIAMI FL 33056 9719702

NEW ADDRESS

DATE ADDRESS

ADJUDGED INSOLVENT - APPT. P.D.

AUG 16 1993

NOV 18 1993

SEP 29 1995

Costs
Costs (Appeal)

CASE/INFO DISMISSED

NO INFORMATION

NOLLE PROS

SEP 19 1995

APPEAL

(J & S)

DOA MANDATE AFFIRMING

FILED ON

JUL 27 1997

BOND RELEASE 3/13/94 PTR 4/4/94 PTR

BOND ESTREATURE

TO BE ARRESTED ON

(CAPIAS - A/C - A/W - P/W)

JUDGE/CLERK	RP/SJR	RP/SJR	ML	RP	EL/SJR	EL	RP
DATE	AUG 16 1993	AUG 23 1993	OCT 07 1993		OCT 21 1993	OCT 22 1993	
GUILTY							
NOT GUILTY	✓ to Ct.						
WAIVER OF JURY							
STATE	G. Cholakos	J. Bruce	A. Neilson		DO	DO	
DEFENSE	R. El-Agnaf	V. Dunn	Adelstein		DO	DO	
INTERPRETER							
REPORTER	J. Gonzalez	T. Stubbs	T. Mocco				

CLERK'S MINUTES

DEFT - ACTION
DATEORAL
NOTICE

CONTINUED TO/FOR

S

D

C

AUG 16 1993 discovery, 15 days into
Ct. ordered PDR

AUG 23 1993 The Ct heard the following

Arthur Hrg - State witnesses:

① Det. Torres sworn & testified.

② Det. Torres sworn & testified.

③ Ofc. Margarejo sworn & testified.

④ Victor Alpinar sworn & testified.

⑤ Det. Torres det. testimony.

AUG 13 1993

AUG 16 1993

AUG 23 1993

AUG 27 1993

OCT 07 1993

8-13-93

8-16-93

10-18-93 tel

10-14-93 PDR

8-20-93 Auth. Hrg.

10-18-93 tel

10-14-93 PDR

10-18-93 tel

**CLOSED CASE
JURY — NON-JURY TRIAL — PV HEARINGS**

JUDGE/CLK	EL	RS	EL/SR	EL/PB	EL/SR
DATE	JAN 24 1995	JAN 25 1995	JAN 26 1995	JAN 27 1995	JAN 31 1995
STATE	ES. Townsend, S. P. H.	do	DO	DO	DO
DEFENSE	S. Adelstein M. Malters	do	DO	DO	DO
INTERPRETER					
REPORTER	V. WMS	du	DO	DO	K. J. J. J.
Clerks Minutes	JAN 24 1995	ACQUITTED (COURT) (JURY)			
DEFT. SWORN & VOIR DIRE RE PLEA.					
☐ SCORE SHEET SUBMITTED ☐ NOT SUBMITTED.					
☐ DEFT. WAIVES PSI					
C GUIDELINES DEPARTURE					
JAN 24 1995 See jury minutes					
The following jurors were selected and sworn in - Encl:					
1 - #677 Henry Lawrence					
2 - #925 Joseph Yates Jr.					
3 - #929 Mae Darity					
4 - #954 Mervyn Serbin					
5 - #997 Cecil McGlohan					
6 - #1498 Patricia Capps					
Alt - #1648 Wendy March					
JAN 25 1995 See jury minutes					
JAN 26 1995 See jury minutes					
JAN 27 1995 See jury minutes					
JAN 31 1995 See jury minutes					
FEB 01 1995 See jury minutes					
FEB 02 1995 See jury minutes					
FEB 03 1995 See jury minutes					
FEB 04 1995 See jury minutes					
CT. COST WAIVED 2-6-95 IMPOSED					
LFCJTF (27.3455) \$					
CAA (960.20) \$					
ST. LETTF (943.25(3)) \$					
CTY. LETTF (943.25(13)) \$					
ELDERLY VICT. (939.015) \$					
CERT. COPY INFO (del/mailed) DATE					

FINDING OF GUILT (FEB 06 1995) (JURY)
ADJ FEB 06 1995 WH
ADJ DELINQUENT PURSUANT TO
SENT SEP 12 1995 17 yrs 5/11/95 232 days
DCJ CTS w/ 3 yr min mand, cts + min
mands conc. TIME SERVED IN DCJ TO WIT: DAYS.
☐ NO CTS.
(DA/MO) IN DCJ. SENT. TO BEGIN FROM DATE OF INCARCERATION.
NOV 29 1995
Amended
598 day CTS. Nunc Pro
Tunc 9-12-95. LOG # 2350
STAY OF EXECUTION UNTIL
W/H & (MO/YR) PROB.
W/H & (MO/YR) C.C.
SP. COND.: OF (SENT/PROB./C.C.)

CIRCUIT COURT DADE COUNTY

FORWARD FROM INSERT #

CRIMINAL DIVISION

THE STATE OF FLORIDA

VS. NO. 93-26777

JUDGE/CLERK	EL/SR EL RB EL RB EL/SR
DATE	NOV 14 1993 NOV 18 1993 NOV 23 1993 NOV 24 1993
GUILTY	
NOT GUILTY	
WAIVER OF JURY	
STATE	E. Saari A. Neiland J. Gonzalez T. Gonzalez
DEFENSE	S. Adelman do do do
INTERPRETER	
REPORTER	T. Moccia do K. Fisher do

CLERK'S MINUTES	DEFT - ACTION DATE	ORAL NOTICE	CONTINUED TO/FOR	S	D
Ruthie Mae Curtiss sworn & testified	OCT 14 1993 EL		12-20-93 TR	Joint	P R
Defence notes, Ct finds PE+PG,	OCT 21 1993 EL		10-22-93 and treatment		
Ct sets no bond.	OCT 22 1993 EL		10-26-93 do		
SEP 9 1993 Off Cal for Arthur King	OCT 26 1993 EL		12-20-93 TR		
OCT 07 1993 See Substitution of	NOV 04 1993		12-20-93 TR		
Counsel Ct. gr'd Deft's	NOV 18 1993 EL		12-20-93 TR		
Oim for medical treatment	NOV 23 1993 EL		12-24-93 TR		
OCT 21 1993 %m to transfer deft. to	NOV 24 1993		12-24-93 TR		
juvenile hall - MR			12-8-93 DUA analysis		
OCT 22 1993 Ruthie M. Curtiss	DEC 10 1993 EL		12-24-93 TR		
Sworn & Test. oim to house	DEC 20 1993 EL		12-22-93 TR		
Deft in Juvenile Court. deferred	DEC 22 1993		12-30-93 TR date ✓		
Ct. gr'd Deft's mtal to	DEC 28 1993		12-30-93 TR		
transport to Juvenile for	DEC 29 1993		2-22-94 TR		
(housing).	DEC 30 1993 EL		2-22-94 TR		
NOV 04 1993 See ntr for funeral	FEB 10 1994 EL		2-22-94 TR		
funeral -> Grt. (8:00am to 7:00pm	FEB 22 1994		3-14-94 TR ✓		
for Nov. 6, 1993), ntr to provide order	MAR 02 1994 EL		3-14-94 TR		
NOV 18 1993 See ntr to AdS.	MAR 03 1994 EL		3-14-94 TR		
Deft in Solient for Post-grt	MAR 14 1994 EL		04-04-94 TR ✓		
CAP of: 500. for Depas	APR 1 1994		6-6-94 TR ✓		
and 750. for Investigator.			4-11-94 bond status		
NOV 24 1993 %m for DUA analysis ->			4-18-94 TR		
Grt.	APR 11 1994 EL ✓		6-6-94 TR		
DEC 22 1993 %m state court -> Ct.			4-13-94 TR		

JUDGE	EL/SR	EL	SP	EL/SR	EL/SR	EL/SR	EL/SR
DATE	FEB 01 1995	FEB 02 1995	FEB 03 1995	FEB 06 1995	MAY 09 1995		
STATE	L. Thompson	DO	DO	DO	J. Roth	DO	
DEFENSE	M. Hollis	DO	DO	DO	J. Kohnbaum	DO	
INTERPETER							
REPORTER	K. Fisher	DO	DO	B. Kling	V. Wino.	B. Kling	

JURY — NON-JURY TRIAL — P.V. HEARING

All Witnesses (& Defendant) Sworn

Rule Invoked (State) (Defendant)

INDICATE THE OFFENSE WHEN REDUCED OR A LESSER INCLUDED

FEB 06 1995 Ct. Ordered PSI
Returnable 4-10-95.

Finding of Guilt (Court) _____ (Jury) _____

O/M For a New TRIAL... denied.

MAY 09 1995 Ct. ordered PDR returnable
8-26-95 - diff eligible for PSI
per Ct because Court took place
prior to 10/94.

Adjudication _____

JUL 14 1995 The Court heard the follow-
ing sentencing hearing:-

Sentence _____

- ① Kevin Cooper sworn + testified.
 - ② Angelina Blount sworn + testified.
 - ③ Robert Mae Artis sworn + testified.
 - ④ [REDACTED] sworn + testified.
 - ⑤ Jesse Jones sworn + testified.
- The Court reset the hearing for
8-26-95.

JUL 19 1995 Ct. set a Funeral for
ON 7-22-95 at 10 AM to 7 PM to be
held at LCI.

JUL 24 1995 diff surrendered per
corrections

Acquitted (Court) _____ (Jury) _____

AUG 02 1995 Ct interviewed jurors & found
no interaction between jurors
expressed. Ct found Ct denied rtr
for retrial.

Custody Probation Officer _____ Yrs. _____

CERT. COPY INFO (Del/Mailed) Date _____

Discharge From Probation _____

CIRCUIT COURT DADE COUNTY

FORWARD FROM INSERT # _____

CRIMINAL DIVISION

THE STATE OF FLORIDA

VS. NO.

93-26777

JUDGE/CLERK	EL/SIR	EL/SIR	EL/SIR	EL	RB
DATE	DEC 22 1993	DEC 28 1993	DEC 29 1993	FEB 10 1994	
GUILTY					
NOT GUILTY					
WAIVER OF JURY					
STATE	T. Gonzalez	DO	DO	DO	
DEFENSE	Slidelstein	DO	DO	DO	
INTERPRETER					
REPORTER	B. Scott	T. Nochia	DO	J. O'Connell	

CLERK'S MINUTES	DEPT. ACTION DATE	ORAL NOTICE	CONTINUED TO/FOR	S	D
DEC 28 1993 %m to transfer deft to DCJ from youth hall → NR	APR 28 1994	EL	5-3-94 status		
DEC 29 1993 %m transfer deft to DCJ → Denied.	MAY 23 1994	EL	5-4-94		
FEB 10 1994 See mtn	JUN 02 1994		9-19-94 tel		
FEB 22 1994 %m state court → Gt %m to exclude evidence to release deft → NR	SEP 14 1994		9-14-94 plea		✓
MAR 02 1994 See mtn for funeral Jurlough → Gt.			11-21-94 tel		✓
APR 04 1994 %m deft. court → Gt, %m to release deft to house arrest → Gt w ankle bracelet, att. bond no bond, Ct ordered JMA screening returnable 4-18-94.	OCT 27 1994	EL	11-17-94 plea		
APR 13 1994 Charmaine Montague, (Victim Present). See mtn.	OCT 31 1994		10-31-94		
	NOV 04 1994	EL	11-4-94 bond status		
	NOV 21 1994	EL	11-21-94 TR		
	DEC 08 1994		1-23-95 tel	✓	✓
	JAN 19 1995	EL	1-19-95 plea		
	JAN 23 1995	EL	1-23-95 TR		
	JAN 24 1995		1-24-95 NW		
	JAN 26 1995	✓	1-25-95 @ 1:15 PM		11:01
	JAN 27 1995		1-27-95 mtn/tel		
	JAN 30 1995	EL	1-31-95 mtn/tel		
	JAN 31 1995	EL	2-1-95 tel		
	FEB 01 1995	EL	2-2-95 DO		
	FEB 02 1995	EL	2-3-95 DO		
	FEB 03 1995	EL	4-10-95 RE + Sent.		
	APR 10 1995	EL	5-9-95 sent.		
	MAY 09 1995	EL	6-26-95 re POR		

JUDGE	EL/SR	EL	RB	EL/SR	EL/SR	EL/SR	EL
DATE	JUL 14 1995	JUL 19 1995	JUL 24 1995	AUG 02 1995	SEP 12 1995	SEP 29 1995	EL
STATE	J. Poth	P. Manratta	Alston	J. Poth	DO	A. Ashton	
DEFENSE	J. Brantbaum		DUAP	J. Brantbaum	DO	M. Mendez	
INTERPETER							
REPORTER	BWno	DO	K. Ziskur	V. Wno	DO	DO	

JURY — NON-JURY TRIAL — P.V. HEARING

INDICATE THE OFFENSE WHEN REDUCED OR A LESSER INCLUDED

All Witnesses (& Defendant) Sworn
Rule Invoked (State) (Defendant)

SEP 12 1995 The Court heard the following sentencing hearing with witnesses:
 ① Chairman Montague sworn + testified.
 Defense witnesses—
 ① Edie Gordon sworn + testified.
 ② Alvin Bulard sworn + testified.
 ③ Catrina Forbes sworn + testified.
 ④ David Forbes sworn + testified.
 ⑤ Al Jenkins (act. services) sworn + testified.
 See order imposing adult sanctions pursuant to FS 390.059.

Finding of Guilt (Court) _____ (Jury) _____

Adjudication _____

Sentence _____

SEP 29 1995 See mtn to Decline Def insolvent for purposes of Appeal - g. t.

SEP 24 1995 See mtn to miti-
~~stated as untimely. Denied~~
 on merits.

Acquitted (Court) _____ (Jury) _____

2.6.03 See Act P.D. Se
 for Basic B.A. Time Denied
 W/O or Hg request
 for direct appeal or gov
 time

Custody Probation Officer _____ Yrs. _____

CIRCUIT COURT DADE COUNTY FORWARD FROM INSERT

CRIMINAL DIVISION

THE STATE OF FLORIDA

VS. NO. 93-26777
with - in

JUDGE/CLERK	EL/STR	EL/STR	EL/STR	EL	RR
DATE	FEB 22 1994	MAR 02 1994	APR 04 1994	APR 11 1994	
GUILTY					
NOT GUILTY					
WAIVER OF JURY					
STATE	T. Gonzalez	E. Hill	T. Gonzalez	E. Garza	
DEFENSE	Stadler	Do	Do	Do	
INTERPRETER					
REPORTER	f. Gonzalez	V. Wines	N. Brantly	T. Moccia	

CLERK'S MINUTES	DEPT - ACTION DATE	ORAL NOTICE	CONTINUED TO/FOR	S	D
APR 13 1994 be held in Contempt of Court if defts Viol. the Custody Release. All App's must be approved by PTS first. Stay away from [REDACTED] Ct. App'd Dr. m. Haber for full eva 1 returnable 4-28-94	JUN 28 1995		6-28-95		
def't and not appear on 5-3-94	JUN 28 1995	jail	7-14-95 PDR/ntus		
JUN 02 1994 o/m def't cont → Gnt.	JUL 14 1995	EL	8-2-95 ntus/ptd.		
SEP 14 1994 o/m def't cont → Gnt	JUL 19 1995	EL	8-2-95 DO		
OCT 27 1994 Court - gave notice to Defense Atty S. Adelstein	JUL 24 1995		8-2-95 DO		
OCT 31 1994 o/m to take def't into custody based on juv. arrest 2 of 10-1-94 → Gnt. Gnt took def't into custody o/m to have def't held at juvenile → Gnt.	AUG 02 1995	DNP	9-12-95 DO		
NOV 04 1994 o/m K. Gilbert to Rescind PTS Release - Denied. Lois Samuel S, Sworn & Test.	SEP 12 1995				
DEC 08 1994 o/m joint cont → Gnt, Ct re-ordw PDR returnable 1-19-96	SEP 29 1995	EL	off		
	NOV 14 1995	EL	off calendar		
	NOV 29 1995	EL	off CAL		
	JAN 31 1996	EL	off CAL		
	SEP 15 1997	DNP	9-24-97 ntus		
	SEP 24 1997	EL	off		
	SEP 23 2003	DNP	See back		
	OCT 18 2004	dup	See back		

JUDGE	EL	SEL	RB	D. Miller ms	D. Miller	W. Miller Jr
DATE	NOV 29 1995	SEP 24 1997	2/6/03	4.8.03	SEP 23 2003	
STATE	A. A. Sh... A. A. Sh...	A. A. Sh...				
DEFENSE	A. Genova	AA/O	In	IN	M. P... Prose	
INTERPETER		MATISA	Chambers	Chambers		
REPORTER	N. WMS	T. Stubbs			B. M. Keith	

JURY — NON-JURY TRIAL — P.V. HEARING

INDICATE THE OFFENSE WHEN REDUCED OR A LESSER INCLUDED

All Witnesses (& Defendant) Sworn
Rule Invoked (State) (Defendant)

Finding of Guilt (Court) _____ (Jury) _____

Adjudication _____

Sentence _____

Acquitted (Court) _____ (Jury) _____

Custody Probation Officer _____ Yrs. _____

4/8.03 PRO SE motion
for basic gain time
denied w/o a hearing

SEP 23 2003 See mtn to correct
illegal sentence - Denied
w/o Prejudice

OCT 18 2004 See in chambers
see PRO SE mtn to correct illegal
sentence - denied

11-15-04 In chambers - See
PRO SE Motion dtd 10-18-04 to
correct illegal sentence - denied

CERT. COPY INFO (Del/Mailed) Date _____

Discharge From Probation _____

CIRCUIT COURT DADE COUNTY

FORWARD FROM INSERT # _____

CRIMINAL DIVISION

THE STATE OF FLORIDA

VS. NO.

93-26777

JUDGE/CLERK	EL AB	EL/SR	EL/SR	EL AB
DATE	APR 13 1994	JUN 02 1994	SEP 14 1994	OCT 27 1994
GUILTY				
NOT GUILTY				
WAIVER OF JURY				
STATE	T. Gonzalez	K. Gilbert	DO	DO
DEFENSE	S. Adelstein V. Farrington PIS	DO	M. Mollaro for S. Adelstein	DO
INTERPRETER				
REPORTER	T. Moccia	N. Forrester	J. Gough	V. WMS.

CLERK'S MINUTES

DEFT - ACTION
DATEORAL
NOTICE

CONTINUED TO/FOR

S

D

JUDGE

DATE

STATE

DEFENSE

INTERPETER

REPORTER

D. Miller / J. Miller
OCT 15 2004 10-11-584
Chambers
Chambers

JURY — NON-JURY TRIAL — P.V. HEARING

All Witnesses (& Defendant) Sworn

Rule Invoked (State) (Defendant)

**INDICATE THE OFFENSE WHEN REDUCED
OR A LESSER INCLUDED**

Finding of Guilt (Court) _____ (Jury) _____

Adjudication _____

Sentence _____

Acquitted (Court) _____ (Jury) _____

Custody Probation Officer _____ Yrs. _____

CERT. COPY INFO (Del/Mailed) Date _____

Discharge From Probation _____

FORWARD FROM INSERT # _____

THE STATE OF FLORIDA

VS. NO. 93-26777

[illegible]

JUDGE

DATE

STATE

DEFENSE

INTERPETER

REPORTER

JURY — NON-JURY TRIAL — P.V. HEARING

All Witnesses (& Defendant) Sworn

Rule Invoked (State) (Defendant)

**INDICATE THE OFFENSE WHEN REDUCED
OR A LESSER INCLUDED**

Finding of Guilt (Court) _____ (Jury) _____

Adjudication _____

Sentence _____

Acquitted (Court) _____ (Jury) _____

Custody Probation Officer _____ Yrs. _____

CERT. COPY INFO (Del/Mailed) Date _____

Discharge From Probation _____

FORWARD FROM INSERT # _____

THE STATE OF FLORIDA

VS. NO. 93-26777

JUDGE/CLERK	EL/STR			
DATE				
GUILTY				
NOT GUILTY				
WAIVER OF JURY				
STATE				
DEFENSE				
INTERPRETER				
REPORTER				

[illegible]

JUDGE

DATE

STATE

DEFENSE

INTERPETER

REPORTER

JURY — NON-JURY TRIAL — P.V. HEARING

All Witnesses (& Defendant) Sworn

Rule Invoked (State) (Defendant)

**INDICATE THE OFFENSE WHEN REDUCED
OR A LESSER INCLUDED**

Finding of Guilt (Court) _____ (Jury) _____

Adjudication _____

Sentence _____

Acquitted (Court) _____ (Jury) _____

Custody Probation Officer _____ Yrs. _____

CERT. COPY INFO (Del/Mailed) Date _____

Discharge From Probation _____

JUVENILE " R 11-4-94 **COMPLAINT/ARREST AFFIDAVIT**

OBTS Number _____ Police Case No. **93-26777**

☒ Felony ☐ Misdemeanor ☐ Traffic ☐ Juvenile ☐ Warrant

IPS No. _____ Agency Code **30** Municipal P.D. Def. ID No. _____ MDPD Records and ID No. _____ Court Case No. **93-26777**

DEFENDANT'S NAME Last First Middle DOB mo/day/yr Sex Race Ethnic Height Weight Hair Eyes
MITCHELL DAWANE G 01/13/88 M B S 5'10" 145 BL BRN

LOCAL ADDRESS Street City State Zip Phone Alias
4907 N.W. DAVE. MIAMI, FLA 33182-134 "MAN"

PERMANENT ADDRESS Street City State Zip Phone Address Source ☐ Verbal ☐ Voter's I.D.
S/A ABOVE ☐ Driver's License ☐ Other

BUSINESS ADDRESS Street City State Zip Phone Occupation Place of Birth
15 N.W. 167 ST. MIAMI, FLA 33170-9835 NERVE PARKWAY MIAMI, FLA

DRIVER'S LICENSE NO. State **FLA** **NONE** Cars, Tattoos, Unique Physical Features
UPPER RIGHT ARM 3-GOLD TEETH

Weapon Seized? Type ☐ Yes ☒ No Arrest Date mo/day/yr **10/13/94** Arrest Time **9:40** ☐ A.M. ☒ P.M. Arrest Location (include name of business) **M. J.B. CT. RM 4-9**

If Def. has Concealed Weapons Permit ☐ Yes ☒ No For Robbery, Burglary, or Viol. Suspected history of drug involvement? ☐ Yes ☒ No No. Cases Cleared ☐ Yes ☒ No Influence of Drugs ☐ Yes ☒ No Influence of Alcohol ☐ Yes ☒ No Citizenship ☐ U.S. ☒ Other **U-S**

PERMIT # **W-** CO-DEFENDANTS Last First Middle DOB mo/day/yr

1. Last First Middle DOB mo/day/yr ☐ In Custody ☐ Felony ☐ Juvenile ☐ At Large ☐ Misdemeanor

2. Last First Middle DOB mo/day/yr ☐ In Custody ☐ Felony ☐ Juvenile ☐ At Large ☐ Misdemeanor

CHARGES	Activity	Type	Counts	STATUTE	D.V.	OAC	CAPAS	BW	QFW	PWS	CITE	VIOLATION OF SECT.
BURGLARY/ARMED	N	N	1								93-26777	FILED FOR RECORD
SEX BAT READY WEAP	N	N	2								"	FILED FOR RECORD
ROBBERY/ARMED	N	N	1								"	FILED FOR RECORD

The undersigned certifies and swears that the facts just and reasonable grounds to believe, and does believe that the above named defendant
 On the **31** day of **OCTOBER**, 19 **94** at **9:40** ☐ A.M. ☒ P.M. (Time) **M. J.B. CT. RM 4-9** (Location, include name of business)

committed the following violation of law: Narrative: (Be specific)
DEF. ORDERED INTO CUSTODY, CASE CONTINUED TO 11-4-94 FOR REPORT, DEF. IS TO BE HOUSED IN YOUTH HALL.
NO BOND
PER JUDGE LEESFIELD

Hold for Other Agency _____

Agency _____ Verified by _____

I swear that the above Statement is correct and true to the best of my knowledge and belief.

Officer's Name (Print) **E. HURTADO**

Officer's Signature **E. HURTADO**

Officer's Title **1614 CT**

Sworn to and subscribed before me, the undersigned authority, this **31** day of **OCTOBER**, 19 **94** at **M. J.B. CT. RM 4-9**

Deputy of the Court or Notary Public

I understand that should I willfully fail to appear before the court as required by this notice to appear that I may be held in contempt of court and a warrant for my arrest shall be issued. Furthermore, I agree that notice concerning the time, date, and place of all court hearings should be sent to the above address. I agree that it is my responsibility to notify Clerk of the Court (Juveniles notify Family Division Juvenile Section) anytime that my address changes.

You need not appear in court, but must comply with the instructions on the reverse side hereof.

PAGE **1** OF **1**

TO BE COMPLETED BY OFFICER FOR A JUVENILE DEFENDANT ONLY:

PARENT'S OR GUARDIAN'S NAME	Home Address (City)	(State)	(Zip)	Home Phone
PARENT'S OR GUARDIAN'S BUSINESS (Name)	Address (City)	(State)	(Zip)	Business Phone

INFORMATION BELOW DOUBLE LINES TO BE COMPLETED BY THE COURT

WAIVER OF PRELIMINARY HEARING

I have been advised of my right to a Preliminary Hearing in Case No. (s) _____ in which I am the defendant, and I desire to waive and do hereby waive my right to such Preliminary Hearing concerning all of the charges against me in said case(s).

Defendant

CASE NO. _____
ARRAIGNMENT, JUDGMENT, SENTENCE, AND ORDER

CASE NO. _____
ARRAIGNMENT, JUDGMENT, SENTENCE, AND ORDER

Said Defendant was arraigned for trial on _____
and entered a plea of _____ guilty to the charge as set forth herein.
After hearing the evidence and duly considering the same, the Court finds
you, the Defendant, _____ guilty of said charge; AND IT IS ORDERED
AND ADJUDGED that you, the Defendant, are _____ guilty as charged
of said offense as set forth herein.

IT IS, THEREFORE, the judgment, Order, and Sentence of the Court that you, the Defendant, be imprisoned in the County Jail of Dade County, Florida, for a term of _____ days, and pay a fine of \$ _____ and \$ _____ the cost herein; and in default of such payment that you, the Defendant, stand committed to the County Jail of Dade County, Florida, for a term of _____ days.

DONE, ORDERED, AND ADJUDGED in open Court at Dade County, Florida,
on _____

Said Defendant was arraigned for trial on _____
and entered a plea of _____ guilty to the charge as set forth herein
After hearing the evidence and duly considering the same, the Court finds
you, the Defendant, _____ guilty of said charge, AND IT IS ORDERED
AND ADJUDGED that you, the Defendant, are _____ guilty as charged
of said offense as set forth herein.

IT IS THEREFORE the judgment, Order, and Sentence of the Court that you, the Defendant, be imprisoned in the County Jail of Dade County, Florida, for a term of _____ days, and pay a fine of \$ _____ and \$ _____ the cost herein; and in default of such payment that you, the Defendant, stand committed to the County Jail of Dade County, Florida, for a term of _____ days.

DOE, ORDERED, AND ADJUDGED in open Court at Dade County, Florida.

Judge _____
County Court in and for Dade County, Florida

Judge _____
County Court in and for Dade County, Florida

COUNTY COURT, MAGISTRATE DIVISION, ACTION, AND OTHER ORDERS

[illegible]

BOND: Amount \$ _____ CASH/SURETY: Receipt No. _____

Estimated by _____ JUDGE

DATE _____

DEPT. OF AGRICULTURE, TECHNICAL ASSISTANCE DIVISION
 UNITED STATES GOVERNMENT, WASHINGTON, D. C. 20250
 OFFICE OF THE DIRECTOR, TECHNICAL ASSISTANCE DIVISION
 UNITED STATES GOVERNMENT, WASHINGTON, D. C. 20250

R. 4-11-94

(14)

COMPLAINT/ARREST AFFIDAVIT

OBS Number		☒ Felony ☐ Misdemeanor ☐ Traffic		Jail No. 29572		Police Case No.	
IDS No.		Agency Code 60		Municipal P.D. Def. ID No.		MDPD Records and ID No.	
DEFENDANT'S NAME		Last First Middle		DOB mo/day/yr		Sex Race Ethnic Height Weight Hair Eyes	
LOCAL ADDRESS		Street City State Zip		Phone		Altas	
PERMANENT ADDRESS		Street City State Zip		Phone		Address Source ☐ Verbal ☐ Voter's I.D. ☐ Driver's License ☐ Other	
BUSINESS ADDRESS		Street City State Zip		Phone		Occupation Place of Birth	
DRIVER'S LICENSE NO.		State		cars, Tattoos, Unique Physical Features		IDENT - FLA.	

Weapon Seized? Type		Arrest Date mo/day/yr 04/04/94		Arrest Time 11:30		Arrest Location (include name of business) Youth Hall	
☐ Yes ☒ No		For Robbery/Burglary, Viol. Suspected history of drug involvement?		No. Cases Cleared ☐ Yes ☒ Unk		Influence of Drugs ☐ Yes ☒ Unk	
If Def. has Concealed Weapons Permit.		PERMIT # W-		Citizenship		Resid. Type: ☐ City ☐ Dade ☐ Out of State	
CO-DEFENDANTS		Last First Middle		DOB mo/day/yr		☐ In Custody ☐ Felony ☐ Juvenile ☐ At Large ☐ Misdemeanor	

DRUG ACTIVITY		S. Sell N. N/A P. Possess		R. Smuggle D. Deliver E. Use		K. Dispense/ Distribute Z. Other		M. Manufacture/ Produce/ Cultivate		DRUG TYPE N N/A A. Amphetamines		B. Barbiturate G. Cocaine E. Heroin		H. Hallucinogen M. Marijuana C. Opium/ Deriv.		P. Paraphernalia/ Equipment S. Synthetic		U. Unknown Z. Other	
CHARGES		Activity		Type		Counts		STATUTE		D.V. ☐ DAC ☐ CAPIAS ☐ BW ☐ FW ☐ PW ☐ CITY ☐ VIOLATION OF SECT.									
1. ARMED BURGLARY																			
2. ARMED ROBBERY																			
3. SEXUAL BATT. (CRIMINALLY UNLAWFUL) (2CTs)																			

The undersigned certifies and swears that he has just and reasonably grounds to believe, and does believe that the above named Defendant

On the 4 day of April, 1994, at 11:30 AM (Time)

(Location, include name of business) Youth Hall

committed the following violation of law. Narrative: (Be specific)

I ARRESTED ON ABOVE CHARGES AND CASE # PER COURT ORDER

Held for Other Agency

Agency

I swear that the above statement is correct and true to the best of my knowledge and belief.

Officer's Name (Print)

Officer's Signature

Deputy's Name



☐ I understand that should I willfully fail to appear before the court as required by this notice to appear that I may be held in contempt of court and a warrant for my arrest shall be issued. Furthermore, I agree that notice concerning the time, date and place of all court hearings should be sent to the above address. I agree that it is my responsibility to notify Clerk of the Court (Juveniles notify Family Division Juvenile Section) anytime that my address changes.

☐ You need not appear in court, but must comply with the instructions on the reverse side hereof.

TO BE COMPLETED BY OFFICER FOR A JUVENILE DEFENDANT ONLY:

PARENT'S OR GUARDIAN'S NAME Home Address (City) (State) (Zip) Home Phone
 PARENT'S OR GUARDIAN'S BUSINESS (Name) Address (City) (State) (Zip) Business Phone

INFORMATION BELOW DOUBLE LINES TO BE COMPLETED BY THE COURT

WAIVER OF PRELIMINARY HEARING

I have been advised of my right to a Preliminary Hearing in Case No. (s) _____ in which I am the defendant, and I desire to waive and do hereby waive my right to such Preliminary Hearing concerning all of the charges against me in said case(s).

Defendant

CASE NO. _____
 ARRAIGNMENT, JUDGMENT, SENTENCE, AND ORDER

CASE NO. _____
 ARRAIGNMENT, JUDGMENT, SENTENCE, AND ORDER

Said Defendant was arraigned for trial on _____ and entered a plea of _____ guilty to the charge as set forth herein. After hearing the evidence and duly considering the same, the Court finds you, the Defendant, _____ guilty of said charge, AND IT IS ORDERED AND ADJUDGED that you, the Defendant, are _____ guilty as charged of said offense as set forth herein.

IT IS, THEREFORE, the judgment, Order, and Sentence of the Court that you, the Defendant, be imprisoned in the County Jail of Dade County, Florida, for a term of _____ days, and pay a fine of \$ _____ and \$ _____ the cost herein; and in default of such payment that you, the Defendant, stand committed to the County Jail of Dade County, Florida, for a term of _____ days.

DONE, ORDERED, AND ADJUDGED in open Court at Dade County, Florida, on _____

Said Defendant was arraigned for trial on _____ and entered a plea of _____ guilty to the charge as set forth herein. After hearing the evidence and duly considering the same, the Court finds you, the Defendant, _____ guilty of said charge, AND IT IS ORDERED AND ADJUDGED that you, the Defendant, are _____ guilty as charged of said offense as set forth herein.

IT IS, THEREFORE, the judgment, Order, and Sentence of the Court that you, the Defendant, be imprisoned in the County Jail of Dade County, Florida, for a term of _____ days, and pay a fine of \$ _____ and \$ _____ the cost herein; and in default of such payment that you, the Defendant, stand committed to the County Jail of Dade County, Florida, for a term of _____ days.

DONE, ORDERED, AND ADJUDGED in open Court at Dade County, Florida, on _____

Judge _____
 County Court in and for Dade County, Florida

Judge _____
 County Court in and for Dade County, Florida

COUNTY COURT, MAGISTRATE DIVISION, ACTION, AND OTHER ORDERS

CHARGE	ACTION	DATE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

BOND: Amount \$ _____ CASH/SURETY: Receipt No. _____

Estreated by _____
 JUDGE

DATE

NAME

1993-8-9-305

1993-8-9-304

1993-8-9-305

1993-8-9-305

U 10

☐ I understand that should I willfully fail to appear before the court as required by this notice to appear that I may be held in contempt of court and a warrant for my arrest shall be issued. Furthermore, I agree that notice concerning the time, date and place of all court hearings should be sent to the above address. I agree that it is my responsibility to notify Clerk of the Court (Juveniles notify Family Division Juvenile Section) anytime that my address changes.

☐ You need not appear in court, but must comply with the instructions on the reverse side hereof.

Signature of Defendant / Juvenile and Parent or Guardian -

TO BE COMPLETED BY OFFICER FOR A JUVENILE DEFENDANT ONLY:

PARENT'S OR GUARDIAN'S NAME	Home Address (City)	(State)	(Zip)	Home Phone
PARENT'S OR GUARDIAN'S BUSINESS (Name)	Address (City)	(State)	(Zip)	Business Phone

INFORMATION BELOW DOUBLE LINES TO BE COMPLETED BY THE COURT

WAIVER OF PRELIMINARY HEARING

I have been advised of my right to a Preliminary Hearing in Case No. (s) _____ in which I am the defendant, and I desire to waive and do hereby waive my right to such Preliminary Hearing concerning all of the charges against me in said case(s).

Defendant

CASE NO. _____
ARRAIGNMENT, JUDGMENT, SENTENCE, AND ORDER

CASE NO. _____
ARRAIGNMENT, JUDGMENT, SENTENCE, AND ORDER

Said Defendant was arraigned for trial on _____
and entered a plea of _____ guilty to the charge as set forth herein.
After hearing the evidence and duly considering the same, the Court finds
you, the Defendant, _____ guilty of said charge; AND IT IS ORDERED
AND ADJUDGED that you, the Defendant, are _____ guilty as charged
of said offense as set forth herein.

IT IS, THEREFORE, the Judgment, Order, and Sentence of the Court that
you, the Defendant, be imprisoned in the County Jail of Dade County, Florida, for
a term of _____ days, and pay a fine of \$ _____ and \$ _____
the cost herein; and in default of such payment that you, the Defendant, stand
committed to the County Jail of Dade County, Florida, for a term of _____ days.

DONE, ORDERED, AND ADJUDGED in open Court at Dade County, Florida,
on _____

Said Defendant was arraigned for trial on _____
and entered a plea of _____ guilty to the charge as set forth herein.
After hearing the evidence and duly considering the same, the Court finds
you, the Defendant, _____ guilty of said charge; AND IT IS ORDERED
AND ADJUDGED that you, the Defendant, are _____ guilty as charged
of said offense as set forth herein.

IT IS, THEREFORE, the Judgment, Order, and Sentence of the Court that
you, the Defendant, be imprisoned in the County Jail of Dade County, Florida, for
a term of _____ days, and pay a fine of \$ _____ and \$ _____
the cost herein; and in default of such payment that you, the Defendant, stand
committed to the County Jail of Dade County, Florida, for a term of _____ days.

DONE, ORDERED, AND ADJUDGED in open Court at Dade County, Florida,
on _____

Judge _____
County Court in and for Dade County, Florida

Judge _____
County Court in and for Dade County, Florida

COUNTY COURT, MAGISTRATE DIVISION, ACTION, AND OTHER ORDERS

CHARGE	ACTION	DATE
--------	--------	------

BOND: Amount \$ _____ CASH/SURETY: Receipt No. _____

Estreated by _____
JUDGE

DATE

COMPLAINT/ARREST AFFIDAVIT

OATS Number		☐ Felony ☐ Misdemeanor ☐ Traffic ☐ Juvenile ☐ Warrant		167996		Police Case No.				
ID# No.	Agency Code	Municipal P.D. Div. ID No.		MDPD Records and ID No.		Out of State? ☐ Yes ☒ No				
DEFENDANT'S NAME		Last	First	Middle	DOB mo/day/yr	Sex	Race Ethnic			
LOCAL ADDRESS		Street	City	State	Zip	Phone	Alias			
PERMANENT ADDRESS		Street	City	State	Zip	Phone	Address Source ☐ Verbal ☐ Voter's I.D. ☐ Driver's License ☐ Other			
BUSINESS ADDRESS		Street	City	State	Zip	Phone	Occupation Place of Birth			
DRIVER'S LICENSE NO.		State		Tans, Tattoos, Unique Physical Features None						
Weapon Seized? Type	Arrest Date mo/day/yr	Arrest Time		Last Location (include name of business) 3254 N.W. - 181 ST						
☐ Yes ☒ No	07/27/93	☐ A.M. ☒ P.M.								
If Def. has Conc. Weapons Permitt.	No. of Cases Cleared	Influence of Drugs		Influence of Alcohol		Citizenship				
		☐ Yes ☒ No ☐ Unknown		☐ Yes ☒ No ☐ Unknown		Residence Type: ☐ City ☐ Dade Out of State ☐ At Large ☐ Misdemeanor				
PERMIT #		☐ Yes ☒ No ☐ Unknown		☐ Yes ☒ No ☐ Unknown		☐ In Custody ☐ Felony ☐ Juvenile ☐ At Large ☐ Misdemeanor				
CO-DEFENDANTS	Last	First	Middle	DOB mo/day/yr		☐ In Custody ☐ Felony ☐ Juvenile ☐ At Large ☐ Misdemeanor				
1.										
2.										
CODE	DRUG ACTIVITY	S. Sell	R. Smuggle	K. Disperse/	M. Manufacture/	DRUG TYPE	B. Barbiturate	H. Hallucinogen	P. Paraphernalia	U. Unknown
	N. N/A	B. Buy	D. Deliver	Z. Other	Produce/	N. N/A	C. Cocaine	M. Marijuana	Equipment	S. Synthetic
	P. Possess	T. Traffic	E. Use		Cultivate	A. Amphetamine	E. Heroin	O. Opium/Deriv.	S. Synthetic	Z. Other
CHARGES		Activity	Type	Counts	STATUTE	D.V. IGA	CAPIAS OR BOND	VIOLATION OF SECT.		
1. Armed Sexual Battery		N	N	2	794.011(3)					
2. Armed Robbery		N	N	1	812.13(2)					
3. Armed Burglary		N	N	1	810.02(3)					
PERSONS ENGAGED IN CRIMINAL		N	N	1	790.07(2)					
4. OFFENSE HAVING FIREARM		N	N	1	790.07(2)					
The undersigned certifies and swears that he has just and reasonable grounds to believe, and does believe that the above named Defendant On the 12 day of August, 1993, at 3300 N.W. 27 AVE (Location, include name of business)										

committed the following violation of law: Narrative: (Be specific)

Ordered To Dade County Jail
By Judge D. Bruce Levy

DC# 93-5183

PAGE ____ OF ____

Hold for Other Agency

Agency _____ Verified by _____
 I swear that the above Statement is correct and true to the best of my knowledge and belief.

Officer's Name (Print)

Officer's Signature

Department Name

Court ID Number/Loc. Code

Sworn to and subscribed before me, the undersigned authority, this _____ day of _____, 1993.

Deputy of the Court Clerk



I understand that should I willfully fail to appear before the court as required by this notice to appear that I may be held in contempt of court and a warrant for my arrest shall be issued. Furthermore, I agree that notice concerning the time, date, and place of all court hearings should be sent to the above address. I agree that it is my responsibility to notify Clerk of the Court (Juvies notify Family Division/Juvenile Section) anytime that my address changes.

You need not appear in court, but must comply with the instructions on the reverse side hereof.

Signature of Defendant / Juvenile and Parent or Guardian

TO BE COMPLETED BY OFFICER FOR A JUVENILE DEFENDANT ONLY:

PARENT'S OR GUARDIAN'S NAME Home Address (City) (State) (Zip) Home Phone
PARENT'S OR GUARDIAN'S BUSINESS (Name) Address (City) (State) (Zip) Business Phone

INFORMATION BELOW DOUBLE LINES TO BE COMPLETED BY THE COURT

WAIVER OF PRELIMINARY HEARING

I have been advised of my right to a Preliminary Hearing in Case No. (s) _____ in which I am the defendant, and I desire to waive and do hereby waive my right to such Preliminary Hearing concerning all of the charges against me in said case(s).

Defendant

CASE NO. _____
ARRAIGNMENT, JUDGMENT, SENTENCE, AND ORDER

Said Defendant was arraigned for trial on _____ and entered a plea of _____ guilty to the charge as set forth herein. After hearing the evidence and duly considering the same, the Court finds you, the Defendant, _____ guilty of said charge; AND IT IS ORDERED AND ADJUDGED that you, the Defendant, are _____ guilty as charged of said offense as set forth herein.

IT IS, THEREFORE, the judgment, Order, and Sentence of the Court that you, the Defendant, be imprisoned in the County Jail of Dade County, Florida, for a term of _____ days, and pay a fine of \$ _____ and \$ _____ the cost herein; and in default of such payment that you, the Defendant, stand committed to the County Jail of Dade County, Florida, for a term of _____ days.

DONE, ORDERED, AND ADJUDGED in open Court at Dade County, Florida, on _____

CASE NO. _____
ARRAIGNMENT, JUDGMENT, SENTENCE, AND ORDER

Said Defendant was arraigned for trial on _____ and entered a plea of _____ guilty to the charge as set forth herein. After hearing the evidence and duly considering the same, the Court finds you, the Defendant, _____ guilty of said charge; AND IT IS ORDERED AND ADJUDGED that you, the Defendant, are _____ guilty as charged of said offense as set forth herein.

IT IS, THEREFORE, the judgment, Order, and Sentence of the Court that you, the Defendant, be imprisoned in the County Jail of Dade County, Florida, for a term of _____ days, and pay a fine of \$ _____ and \$ _____ the cost herein; and in default of such payment that you, the Defendant, stand committed to the County Jail of Dade County, Florida, for a term of _____ days.

DONE, ORDERED, AND ADJUDGED in open Court at Dade County, Florida, on _____

Judge _____
County Court in and for Dade County, Florida

Judge _____
County Court in and for Dade County, Florida

COUNTY COURT, MAGISTRATE DIVISION, ACTION, AND OTHER ORDERS

CHARGE	ACTION	DATE

BOND: Amount \$ _____ CASH/SURETY: Receipt No. _____

Estimated by _____
JUDGE

DATE

WITNESSES

COMPLAINT/ARREST AFFIDAVIT

JCTS Number		☒ Felony ☐ Misdemeanor ☐ Traffic ☐ Juvenile ☐ Warrant		Jail No.	Police Case No. 379599-N
JOS No.		Agency Code 30	Municipal P.D. Def. ID No.	MDPD Records and ID No.	Court Case No.
DEFENDANT NAME Last First Middle MITCHELL, DAWANE GODSKYLL			DOB mo/day/yr 01/13/78	Sex M	Race B
LOCAL ADDRESS Street City State Zip 3254 NW 181 STREET, MIAMI FLORIDA 33056			Phone 621-5030	Height 5'9"	Weight 140
PERMANENT ADDRESS Street City State Zip SAME			Phone	Address Source ☒ Verbal ☐ Voter's I.D. ☐ Driver's License ☒ Other MOTHER	
BUSINESS ADDRESS Street City State Zip NONE			Phone	Occupation STUDENT	Place of Birth MIA FL
DRIVER'S LICENSE NO. NONE			Scars, Tattoos, Unique Physical Features SCAR ON RT UPPER ARM		
Weapon Seized? Type ☐ Yes ☒ No	Arrest Date mo/day/yr 07/27/93	Arrest Time ☐ A.M. ☒ P.M. 1:00	Arrest Location (include name of business) 3254 NW 181 STREET		
Def. has Concealed Weapons Permit ☐ Yes ☒ No	For Robbery, Burglary, F/A Viol: Suspected history of drug involvement? ☐ Yes ☒ Unk	No. Cases Cleared 1	Influence of Drugs ☐ Yes ☒ No ☒ Unk	Influence of Alcohol ☐ Yes ☒ No ☒ Unk	Citizenship U.S.
PERMIT # W- CO-DEFENDANTS	Last First Middle	DOB mo/day/yr	☐ In Custody ☐ Felony ☐ Juvenile	☐ At Large ☐ Misdemeanor	
			☐ In Custody ☐ Felony ☐ Juvenile	☐ At Large ☐ Misdemeanor	
CHARGES			Activity	Type	Counts
1. ARMED SEXUAL BATTERY			N	N	2
2. ARMED ROBBERY			N	N	1
3. ARMED BURGLARY			N	N	1
4. PERSONS ENGAGED IN CRIMINAL OFFENSE, HAVING FIREARM			N	N	1
The undersigned certifies and swears that he has just and reasonable grounds to believe and does believe that the above named Defendant			STATUTE		
On the 27 day of JULY , 19 93 , At 3-4 (Time)			3244 NW 181 STREET (Location, include name of business)		

THE VICTIM IS A [REDACTED] YEAR OLD FEMALE. THE DEFENDANT IS A 15 YEAR OLD MALE WHO RESIDES IN THE VICTIM'S NEIGHBORHOOD. THE VICTIM STATED THAT SHE AND HER SON WERE ASLEEP IN HER SON'S BEDROOM. SHE AWOKE AND OBSERVED THE DEFENDANT WEARING A SKI MASK AND ARMED WITH A HANDGUN STANDING IN THE BEDROOM DOORWAY. THE DEFENDANT FORCED THE VICTIM AT GUNPOINT INTO ANOTHER BEDROOM AND MADE HER REMOVE HER UNDERPANTS. HE GOT ON TOP OF HER AND ATTEMPTED TO INSERT HIS PENIS INTO HER VAGINA BUT WAS UNABLE TO OBTAIN AN ERECTION. THE DEFENDANT GOT OFF THE VICTIM AND DEMANDED HER JEWELRY AT GUNPOINT. THE VICTIM HANDED TWO RINGS VALUED AT \$141.00 TO THE DEFENDANT. THE DEFENDANT AGAIN FORCED THE VICTIM ONTO THE BED AT GUNPOINT. THE DEFENDANT FORCED THE VICTIM TO ENGAGE IN SEXUAL INTERCOURSE. THE DEFENDANT THEN SEARCHED THE HOUSE AND FLED VIA THE UTILITY ROOM DOOR.

PAGE 1 OF 2

Held for Other Agency

Agency _____ Verified by _____
(Swear that the Above Statement is correct and true to the best of my knowledge and belief)

☐ HOLD FOR BOND HEARING DO NOT BOND OUT (Officer Must Appear at Bond Hearing)

Sworn to and subscribed before me, the undersigned

authority, this **27** day of **JULY**, 19 **93**

DETECTIVE JERRY TODD
Office (Name & Title)

[Signature]

[Signature]

☐ I understand that should I willfully fail to appear before the court as required by this notice to appear that I may be held in contempt of court and a warrant for my arrest shall be issued. Furthermore, I agree that notice concerning the time, date, and place of all court hearings should be sent to the above address. I agree that it is my responsibility to notify Clerk of the Court (Jewelry not by Family Division Juvenile Section) any time that my address changes.

☐ You need not appear in court, but must comply with the instructions on the reverse side hereof.

**COMPLAINT/ARREST AFFIDAVIT
CONTINUATION**

DBTS Number		☒ Felony ☐ Misdemeanor ☐ Traffic		Jail No.	Police Case No.
JOS No.		☐ Juvenile ☐ Warrant		379599-N	
Agency Code		Municipal P.D. Def. ID No.		MDPD Records and ID No.	Court Case No.
DEFENDANT'S NAME Last First Middle				DOB mo/day/yr	
MITCHELL, DAWANE GODSKYLL				01/13/78	878097
ADDITIONAL CHARGES		Activity	Type	Counts	STATUTE
5.					
6.					
7.					
8.					
					OF THE CODE OF

INVESTIGATION REVEALED THAT ENTRY TO THE RESIDENCE WAS MADE BY REMOVING THE SOUTH WINDOW OF THE UTILITY ROOM.

THE VICTIM STATED THAT ALTHOUGH THE DEFENDANT WORE A SKI-MASK AND GLOVES SHE RECOGNIZED HIS VOICE AS BELONGING TO A NEIGHBOR. SHE POINTED OUT HIS RESIDENCE AND STATED HIS FIRST NAME WAS DAWANE. SHE HAS KNOWN HIM FOR APPROXIMATELY 12 YEARS.

THE VICTIM WAS EXAMINED AT THE RAPE TREATMENT CENTER BY DOCTOR RAO. SHE OBSERVED A 1 TO 5 COUNT OF NON-MOTILE SPERM.

THE VICTIM PROVIDED A SWORN FORMAL STATEMENT AND ALSO IDENTIFIED THE DEFENDANT FROM A PHOTO DISPLAY.

THE DEFENDANT WAS ARRESTED AND HIS ATTORNEY INSTRUCTED THIS INVESTIGATOR NOT TO QUESTION THE DEFENDANT.

7-27-92
C. J. J.

STATE OF ILLINOIS
CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR THE COUNTY OF COOK
JAN 13 1978
CLERK OF COURT

PAGE ____ OF ____

Hold for Other Agency

Agency _____ Verified by _____
I swear that the above Statement is correct and true to the best of my knowledge and belief.

DETECTIVE JERRY TODD

Officer's (Name Print)

Officer's Signature

☐ HOLD FOR BOND HEARING. DO NOT BOND OUT (Officer Must Appear at Bond Hearing).

Sworn to and subscribed before me, the undersigned authority, this _____ day of _____, 19____.

Deputy of the Court or Notary Public

☐ I understand that should I willfully fail to appear before the court as required by this notice to appear that I may be held in contempt of court and a warrant for my arrest shall be issued. Furthermore, I agree that notice concerning the time, date and place of all court hearings should be sent to the above address. I agree that it is my responsibility to notify Clerk of the Court (Juvoniles notify Family Division Juvenile Section) anytime that my address changes.

☐ You need not appear in court, but must comply with the instructions on the reverse side hereof.

☒ IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT IN AND FOR DADE COUNTY, FLORIDA. ☐ IN THE COUNTY COURT IN AND FOR DADE COUNTY, FLORIDA.		153
DIVISION	JUDGMENT	CASE NUMBER
☒ CRIMINAL ☐ OTHER	☐ Probation Violator ☐ Community Control Violator	93-26777
	☐ Retrial ☐ Resentence	

The Defendant, DAWANE GODSKYLL MITCHELL being personally before this Court represented by M. MATTERS & S. ADELSTEIN his attorney of record, and the State represented by L. TOWNSEND & J. POTH, Assistant State's Attorney, and having:

[illegible]

Defendant

Lauren Mitchell

Case Number

93-26777**CHARGES/COSTS**

The Defendant is hereby ordered to pay the following sum if checked:

- ☐ Fifty dollars (\$50.00) pursuant to F.S. 960.20 (Crimes Compensation Trust Fund).
- ☐ Three dollars (\$3.00) as a court cost pursuant to F.S. 943.25(3) (Criminal Justice Trust Fund).
- ☐ Two dollars (\$2.00) as a court cost pursuant to F.S. 943.25(13) Criminal Justice Education by Municipalities and Counties.
- ☐ A fine in the sum of \$ _____ pursuant to F.S. 775.0835. (This provision refers to the optional fine for the Crimes Compensation Trust Fund, and is not applicable unless checked and completed. Fines imposed as a part of a sentence to F.S. 775.083 are to be recorded on the Sentence page(s).)
- ☐ Twenty dollars (\$20.00) pursuant to F. S. 939.015 (Handicapped and Elderly Security Assistance Trust Fund).
- ☐ A 10 percent surcharge in the sum of \$ _____ pursuant to 775.0836 (Handicapped and Elderly Security Assistance Trust Fund).
- ☐ A sum of \$ _____ pursuant to 27.3455 (Local Government Criminal Justice Trust Fund).
- ☐ Restitution in accordance with attached order.
- ☐ Other _____

Judge

FINGERPRINTS OF DEFENDANTELLEN L. LEESFIELDFingerprints taken by: Deborah CO

Name

Title

I HEREBY CERTIFY that the above and foregoing are the fingerprints of the Defendant,
and that they were placed thereon by said Defendant in my presence in Open Court this date.

DONE AND ORDERED in Open Court in Dade County, Florida this 12th day of SEPTEMBER, 1995

JUDGE

ELLEN L. LEESFIELD

10X# 14-123

Defendant Wayde Mitchell Case Number 93-26777

CHARGES/COSTS

The Defendant is hereby ordered to pay the following sum if checked:

- ☒ Fifty dollars (\$50.00) pursuant to F.S. 980.20 (Crimes Compensation Trust Fund).
- ☒ Three dollars (\$3.00) as a court cost pursuant to F.S. 943.25(3) (Criminal Justice Trust Fund)
- ☒ Two dollars (\$2.00) as a court cost pursuant to F.S. 943.25(13) Criminal Justice Education by Municipalities and Counties.
- ☐ A fine in the sum of \$ _____ pursuant to F.S. 775.0835. (This provision refers to the optional fine for the Crimes Compensation Trust Fund, and is not applicable unless checked and completed. Fines imposed as a part of a sentence to F.S. 775.083 are to be recorded on the Sentence page(s).)
- ☐ Twenty dollars (\$20.00) pursuant to F. S. 939.015 (Handicapped and Elderly Security Assistance Trust Fund).
- ☐ A 10 percent surcharge in the sum of \$ _____ pursuant to 775.0836 (Handicapped and Elderly Security Assistance Trust Fund).
- ☒ A sum of \$ 200.00 pursuant to 27.3455 (Local Government Criminal Justice Trust Fund).
- ☐ Restitution in accordance with attached order.
- ☐ Other _____

[Signature]
Judge

FINGERPRINTS OF DEFENDANT

[Signature]
ELLEN L. LEESFIELD

Fingerprints taken by: _____
Name Title

I HEREBY CERTIFY that the above and foregoing are the fingerprints of the Defendant, _____
and that they were placed thereon by said Defendant in my presence in Open Court this date _____

DONE AND ORDERED in Open Court in Dade County, Florida this 6th day of FEBRUARY, 19 95

[Signature]
JUDGE
ELLEN L. LEESFIELD

259
261

258

IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT
IN AND FOR DADE COUNTY, FLORIDA.

CRIMINAL DIVISION

SENTENCE

(AS TO COUNT 1,2,3 & 4)

CASE NUMBER

93-26777
OBT'S NUMBER

THE STATE OF FLORIDA VS.

DAWANE GODSKYLL MITCHELL

PLAINTIFF

DEFENDANT

T. MARTIN

FILED

SEP 12 1995

CLERK

The defendant, being personally before this Court, accompanied by his attorney, J. ROSENBAUM, and having been adjudicated guilty herein, and the Court having given the defendant an opportunity to be heard and to offer matters in mitigation of sentence, and to show cause why he should not be sentenced as provided by law, and no cause being shown and the Court having:

☒ on FEBRUARY 6, 1995 deferred imposition of sentence until this date.

(Check one) ☐ previously entered a judgment in this case on the defendant now resentsences the defendant.

☐ placed the defendant on Probation/Community Control and having subsequently revoked the defendant's Probation/Community Control.

IT IS THE SENTENCE OF THE COURT that the defendant:

☐ pay a fine of \$ _____, pursuant to F.S. 775.083, plus \$ _____ as the 5% surcharge required by F.S. 960.25.

☒ is hereby committed to the custody of the Department of Corrections.

☐ is hereby committed to the custody of the Sheriff of Dade County, Florida.

☐ is sentenced as a youthful offender in accordance with F.S. 958.04.

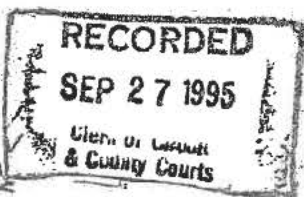
TO BE IMPRISONED (check one; unmarked sections are inapplicable)

☐ for a term of Natural Life.

☒ for a term of SEVENTEEN (17) YEARS

☐ said SENTENCE IS SUSPENDED for a period of _____ subject to conditions set forth in this Order.

☐ IT IS FURTHER ORDERED that the entry of sentence be suspended as to count(s) _____ of this case.



yo 9-14-95

Defendant DE. J. GODSKYLL MITCHELL

Case Number 93-26777

If "split" sentence, complete either of paragraphs

Followed by a period of _____ on Probation/Community Control under the supervision of the Department of Corrections according to the terms and conditions of supervision set forth in a separate order entered herein.

However, after serving a period of _____ imprisonment in _____, the balance of such sentence shall be suspended and the Defendant shall be placed on Probation/Community Control for a period of _____ under supervision of the Department of Corrections according to the terms and conditions of Probation/Community Control set forth in a separate order entered herein.

In the event the defendant is ordered to serve additional split sentences, all incarceration portions shall be satisfied before the defendant begins service of the supervision terms.

SPECIAL PROVISIONS

(As to Count 1, 2, 3 & 4)

By appropriate notation, the following provisions apply to the sentence imposed:

MANDATORY/MINIMUM PROVISIONS:

FIREARM

X

It is further ordered that the three year minimum imprisonment provisions of Florida Statute 775.087(2) are hereby imposed for the sentence specified in this count.

DRUG TRAFFICKING

It is further ordered that the _____ mandatory minimum imprisonment provisions of Florida Statute 893.135(1) are hereby imposed for the sentence specified in this count.

CONTROLLED SUBSTANCE
WITHIN 1000 FEET
OF SCHOOL

It is further ordered that the three year minimum imprisonment provisions of Florida Statute 893.13(1)(e)1, are hereby imposed for the sentence specified in this count.

HABITUAL FELONY
OFFENDER

The Defendant is adjudicated a habitual felony offender and has been sentenced to an extended term in this sentence in accordance to the provisions of Florida Statute 775.084(4). The requisite findings by the court are set forth in a separate order or stated on the record in open court.

HABITUAL VIOLENT
OFFENDER

The Defendant is adjudicated a habitual violent felony offender and has been sentenced to an extended term in accordance with the provisions of Florida Statute 775.084(4). A minimum term of _____ year(s) must be served prior to release. The requisite findings by the court are set forth in a separate order or stated on the record in open court.

LAW ENFORCEMENT
PROTECTION ACT

It is further ordered that the defendant shall serve a minimum of _____ years before release in accordance with Florida Statute 775.0823.

CAPITAL OFFENSE

It is further ordered that the Defendant shall serve no less than 25 years in accordance with the provisions of Florida Statute 775.082(1).

SHORT-BARRELED
RIFLE, SHOTGUN,
MACHINE GUN

It is further ordered that the five-year minimum provisions of Florida Statute 790.221(2) are hereby imposed for the sentence specified in this court.

CONTINUING CRIMINAL
ENTERPRISE

It is further ordered that the 25 year mandatory minimum sentence provisions of Florida Statute 893.20 are hereby imposed for the sentence specified in this count.

Case Number 93-26777

**Rule 3.988(j)
SENTENCING GUIDELINES SCORESHEET**

FILED

SEP 12 1993

1. Primary Docket # 93-26777	2. Additional Docket #'s Not Applicable	3. OBTS # 0005656952	4. Category-1 ☐ 2 ☒ 3 ☐ 4 ☐ CLERK
5. Name (Last Name First) Mitchell, Dawane		6. Date of Birth 01/13/78	7. Sex: ☒ M ☐ F
		8. Race: ☒ B ☐ W ☐ O ☐ H	9. Viol ☐ P ☐ R ☐ C ☐ B
10. CTY Dade			
11. Judge at Sentencing Ellen L. Leesfield	12. Date of Offense 7/27/93	13. Date of Sentence Unknown	14. Plea Trial ☐ ☒ X
		15. DOC # 467531	

OFFICE

USE ONLY

I. PRIMARY OFFENSE AT CONVICTION

DESCRIPTION

POINTS

2 Life 794.011(3) 775.807

Armed Sexual Battery

I. 314

II. ADDITIONAL OFFENSE AT CONVICTION

DESCRIPTION

1 FEL 1Pbl 810.02(2)(b) 812.13

**Armed Burglary
Armed Robbery**

II. 48

USE SEPARATE PAGE IF NECESSARY

III. A. PRIOR RECORD

COUNTS FEL/MISD DEGREE STATUTE

DESCRIPTION

1 MISD 1 843.02

Resist Officer W/O Violence

III.A 5

USE SEPARATE PAGE IF NEEDED

III. B. SAME CATEGORY PRIORS (categories 3, 5 & 6 only)

III.B 0

III. C. PRIOR DUI CONVICTIONS (category 1 only)

III.C 0

IV. LEGAL STATUS AT TIME OF OFFENSE

X (1) no restrictions (2) legal constraint

IV. 0

V. VICTIM INJURY

Number of Scoreable Victim Injuries

Degree of Injury

One x 20

none or no contact

One x 40

slight or contact but no penetration

moderate or penetration

severe or death

V. 60

TOTAL POINTS = 427

RECOMMENDED SENTENCE 17-22 yrs S.P.

PERMITTED SENTENCE 12-27 yrs S.P.

TOTAL SENTENCE IMPOSED

REASONS FOR DEPARTURE

JUDGE Ellen L. Leesfield

PREPARED Roger Pickles

OFFICE USE ONLY

10/12/93

1000000110 40

Rule 3.988(j)

SENTENCING GUIDELINES SCORESHEET

261

CLK/CT449

1. Primary Docket Number 93-26777	2. Additional Docket Numbers	3. OBTS Number	4. Category ☐ 1 ☒ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9
5. Name (Last Name First) MITCHELL, DAWANE Godskyll	6. Date of Birth 01/13/78	7. Sex: ☒ M ☐ F	8. Race: ☒ B ☐ W ☐ Other
9. Violation ☐ Prob ☒ CE	10. County DADE	11. Judge at Sentencing Leestfield	12. Date of Offense 07/27/93
13. Date of Sentence 9/12/95	14. ☐ Plea ☒ Trial	15. DOC Number	

OFFICE USE ONLY

POINTS

I. PRIMARY OFFENSE AT CONVICTION

Counts Degree Statute

2 1st DBI 744 011(3)

Description

Armed Sexual Battery 314

II. ADDITIONAL OFFENSES AT CONVICTION

Counts Fel/Misd Degree Statute

1 F 1st DBI 910.02(2)

Description

Armed Burglary

1 F 1st DBI 912.12(2)

Armed Robbery

(Continue on Separate Page)

ii. **48**

III. A. PRIOR RECORD

Counts Fel/Misd Degree Statute

Description

(Continue on Separate Page)

III. B. SAME CATEGORY PRIORS (categories 3,5 and 6 only)

III. C. PRIOR DUI CONVICTIONS (category 1 only)

IV. LEGAL STATUS AT TIME OF OFFENSE

(1) if no restrictions (2) legal constraint

V. VICTIM INJURY

Number of Scoreable Victim Injuries

Degree of Injury

none or no contact

slight or contact but no penetration

moderate or penetration

severe or death

1 20

1 40

RECORDED

SEP 25 1995

Clerk of Circuit & County Courts

RECOMMENDED SENTENCE

12-17

PERMITTED SENTENCE

9-22

TOTAL SENTENCE IMPOSED

17 yrs State Prison

3 yr Firearm min man

REASON FOR DEPARTURE

JUDGE **LEESTFIELD**

PREPARER

J. Poth

OFFICE USE ONLY

T.S.

C.C.

Prob.

C.J.

OFFERED

16930PENTON

52

OFFICE BKT

Defendant Dwayne Mitchell Case Number 93-26777

CHARGES/COSTS

The Defendant is hereby ordered to pay the following sum if checked:

- ☒ Fifty dollars (\$50.00) pursuant to F.S. 860.20 (Crimes Compensation Trust Fund).
- ☒ Three dollars (\$3.00) as a court cost pursuant to F.S. 943.26(3) (Criminal Justice Trust Fund)
- ☒ Two dollars (\$2.00) as a court cost pursuant to F.S. 943.25(13) Criminal Justice Education by Municipalities and Counties.
- ☐ A fine in the sum of \$ _____ pursuant to F.S. 775.0835. (This provision refers to the optional fine for the Crimes Compensation Trust Fund, and is not applicable unless checked and completed. Fines imposed as a part of a sentence to F.S. 775.083 are to be recorded on the Sentence page(s).)
- ☐ Twenty dollars (\$20.00) pursuant to F. S. 939.015 (Handicapped and Elderly Security Assistance Trust Fund).
- ☐ A 10 percent surcharge in the sum of \$ _____ pursuant to 775.0836 (Handicapped and Elderly Security Assistance Trust Fund).
- ☒ A sum of \$ 200.00 pursuant to 27.3455 (Local Government Criminal Justice Trust Fund).
- ☐ Restitution in accordance with attached order.
- ☐ Other _____

us
Judge

FINGERPRINTS OF DEFENDANT ELLEN L. LEESFIELD

Fingerprints taken by _____ Name _____ Title _____

I HEREBY CERTIFY that the above and foregoing are the fingerprints of the Defendant, _____ and that they were placed thereon by said Defendant in my presence in Open Court this date, _____

DONE AND ORDERED in Open Court in Dade County, Florida this 6th day of FEBRUARY, 1995

ELLEN L. LEESFIELD JUDGE

IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT
IN AND FOR DADE COUNTY, FLORIDA.

258

CRIMINAL DIVISION	SENTENCE (AS TO COUNT <u>1,2,3&4</u>)	CASE NUMBER 93-26777 OBTS NUMBER
THE STATE OF FLORIDA VB.		FILED SEP 12 1995 CLERK
DAWANE GODSKYLL MITCHELL		
PLAINTIFF	DEFENDANT	

The defendant, being personally before this Court, accompanied by his attorney, J. ROSENBAUM, and having been adjudicated guilty herein, and the Court having given the defendant an opportunity to be heard and to offer matters in mitigation of sentence, and to show cause why he should not be sentenced as provided by law, and no cause being shown and the Court having:

☒ on FEBRUARY 6, 1995 deferred imposition of sentence until this date.

(Check one) ☐ previously entered a judgment in this case on the defendant now resentsences the defendant.

☐ placed the defendant on Probation/Community Control and having subsequently revoked the defendant's Probation/Community Control.

IT IS THE SENTENCE OF THE COURT that the defendant:

☐ pay a fine of \$ _____ pursuant to F.S. 775.083, plus \$ _____ as the 5% surcharge required by F.S. 980.25.

☒ is hereby committed to the custody of the Department of Corrections.

☐ is hereby committed to the custody of the Sheriff of Dade County, Florida.

☐ is sentenced as a youthful offender in accordance with F.S. 958.04.

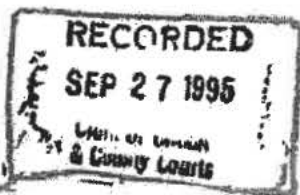
TO BE IMPRISONED (check one; unmarked sections are inapplicable)

☐ for a term of Natural Life.

☒ for a term of SEVENTEEN (17) YEARS

☐ said SENTENCE IS SUSPENDED for a period of _____ subject to conditions set forth in this Order.

☐ IT IS FURTHER ORDERED that the entry of sentence be suspended as to count(s) _____ of this case.



Defendant DAWANE GODSKILL MITCHELL

Case Number 93-26777

If "split" sentence,
complete either of
paragraphs

_____ Followed by a period of _____ on Probation/Community Control under the supervision of the Department of Corrections according to the terms and conditions of supervision set forth in a separate order entered herein.

_____ However, after serving a period of _____ imprisonment in _____ the balance of such sentence shall be suspended and the Defendant shall be placed on Probation/Community Control for a period of _____ under supervision of the Department of Corrections according to the terms and conditions of Probation/Community Control set forth in a separate order entered herein.

In the event the defendant is ordered to serve additional split sentences, all incarceration portions shall be satisfied before the defendant begins service of the supervision terms.

SPECIAL PROVISIONS

(As to Count 1, 2, 3 & 4)

By appropriate notation, the following provisions apply to the sentence imposed:

MANDATORY/MINIMUM PROVISIONS:

FIREARM

X

It is further ordered that the three year minimum imprisonment provisions of Florida Statute 775.087(2) are hereby imposed for the sentence specified in this count.

DRUG TRAFFICKING

_____ It is further ordered that the _____ mandatory minimum imprisonment provisions of Florida Statute 893.135(1) are hereby imposed for the sentence specified in this count.

CONTROLLED SUBSTANCE
WITHIN 1000 FEET
OF SCHOOL

_____ It is further ordered that the three year minimum imprisonment provisions of Florida Statute 893.13(1)(e)1, are hereby imposed for the sentence specified in this count.

HABITUAL FELONY
OFFENDER

_____ The Defendant is adjudicated a habitual felony offender and has been sentenced to an extended term in this sentence in accordance to the provisions of Florida Statute 775.084(4). The requisite findings by the court are set forth in a separate order or stated on the record in open court.

HABITUAL VIOLENT
OFFENDER

_____ The Defendant is adjudicated a habitual violent felony offender and has been sentenced to an extended term in accordance with the provisions of Florida Statute 775.084(4). A minimum term of _____ year(s) must be served prior to release. The requisite findings by the court are set forth in a separate order or stated on the record in open court.

LAW ENFORCEMENT
PROTECTION ACT

_____ It is further ordered that the defendant shall serve a minimum of _____ years before release in accordance with Florida Statute 775.0823.

CAPITAL OFFENSE

_____ It is further ordered that the Defendant shall serve no less than 25 years in accordance with the provisions of Florida Statute 775.082(1).

SHORT-BARRELED
RIFLE, SHOTGUN,
MACHINE GUN

_____ It is further ordered that the five-year minimum provisions of Florida Statute 790.221(2) are hereby imposed for the sentence specified in this count.

CONTINUING CRIMINAL
ENTERPRISE

_____ It is further ordered that the 25 year mandatory minimum sentence provisions of Florida Statute 893.20 are hereby imposed for the sentence specified in this count.

Defendant DAVANE GODSKYLL MITCHELL

Case Number 93-26777

OTHER PROVISIONS

RETENTION OF JURISDICTION _____

The Court retains jurisdiction over the defendant pursuant to Florida Statutes 947.16(3).

JAIL CREDIT _____ X _____

It is further ordered that the Defendant shall be allowed a total of 232 days as credit for time incarcerated prior to imposition of this sentence.

PRISON CREDIT _____

It is further ordered that the Defendant be allowed credit for all time previously served on this count in the Department of Corrections prior to resentencing.

**CONSECUTIVE/
CONCURRENT AS TO
OTHER COUNTS** _____ X _____

It is further ordered that the sentence imposed for count(s) 1, 2, 3 & 4 shall run (check one) ☐ consecutive to ☒ concurrent with the sentence set forth in count(s) 1, 2, 3 & 4 of this case.

**CONSECUTIVE/
CONCURRENT AS TO
OTHER CONVICTIONS** _____

It is further ordered that the composite term of all sentences imposed for the counts specified in this order shall run ☐ consecutive to ☐ concurrent with the following:

_____ Any active sentence being served.

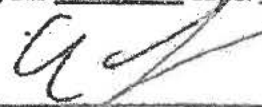
_____ Specific sentences: _____

In the event the above sentence is to the Department of Corrections, the Sheriff of Dade County, Florida, is hereby ordered and directed to deliver the defendant to the Department of Corrections at the facility designated by the Department together with a copy of this Judgment and Sentence and any other documents specified by Florida Statutes.

The defendant in Open Court was advised of his right to appeal from this sentence by filing notice of appeal within thirty days from this date with the Clerk of this Court, and the defendant's right to the assistance of counsel in taking said appeal at the expense of the State upon showing of indigence.

In imposing the above sentence, the Court further recommends _____

DONE AND ORDERED in Open Court at Dade County, Florida, this 12th day of SEPTEMBER, 1995



JUDGE
ELLEN L. LEESFIELD

LOG# 2350

☒ IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT IN AND FOR DADE COUNTY, FLORIDA.
☐ IN THE COUNTY COURT IN AND FOR DADE COUNTY, FLORIDA.

DIVISION
☒ CRIMINAL
☐ TRAFFIC
☐ OTHER

ORDER
 AMENDING SENTENCE

CASE NUMBER
 93-26777

THE STATE OF FLORIDA VS.

DAWANE GODSKYLL MITCHELL

CLOCK IN

FILED

NOV 27 1995

PLAINTIFF

DEFENDANT

IT IS HEREBY ORDERED AND ADJUDGED that the sentence imposed upon the Defendant on
 SEPTEMBER 12, 1995, be and the same is hereby amended as follows:

IT IS FURTHER CONSIDERED, ORDERED AND ADJUDGED that the Defendant be given credit for time incarcerated
 prior to the imposition of this sentence, to-wit: FIVE HUNDRED AND NINETY-EIGHT (598) DAYS.

DONE AND ORDERED at Miami, Florida this 29th day of NOVEMBER, 1995.

NUNC PRO TUNC: SEPTEMBER 12, 1995
 (Now For Then) Date

RECORDED

DEC 08 1995

Clerk of Circuit
 & County Courts

JUDGE

ELLEN L. LEESFIELD

AJ 11-30-95

OFF REC CK

17013PG5421



FLORIDA
DEPARTMENT of
CORRECTIONS

Governor

RON DESANTIS

Secretary

RICKY D. DIXON

501 South Calhoun Street, Tallahassee, FL 32399-2500

www.dc.state.fl.us

OFFENDER INFORMATION REQUEST COVER PAGE

DATE: July 25, 2022
TO: DARYL MCCORMICK
(407) 245-0880
RE: RIYAZ JUMMANI
DC#B50743

INFORMATION PROVIDED

N/A

COMMENTS

The above referenced person has never served time in the Florida Department of Corrections, only on Active Probation.

If you have any questions or need additional information, please contact the number listed below:

OFFICE OF COMMUNITY OF CORRECTIONS

Email: co-supervision@fdc.myflorida.com

Contact Number: (850) 717-3444

JUMMANI, RIYAZ A (Maint)

OFA

JUMMANI, RIYAZ A

2610 ATHERTON DR ORLANDO 32824

Last
JUMMANI

First
RIYAZ

Middle
A

Driver License

Source

Sec Den Num

Source
F,Form

RD
2610

Sub

St
ATHERTON

Type
DR

Dr Sub

Unit Type

City Name
ORLANDO

County
ORANGE

Zip Code
32824

State

State Zip Code

Country

Email Address

☐ Receive Sample Ballots by Email

Language Preference None

Sex
M

Race
2,Asian or Pacific Isl

Party
DEM,Florida Democratic Party

Pty Org Reg Dis
11

Regn Date
07/04/1994

☐ See Comms

Person Interest
E(P) Civil Rights Etc.

Date of Birth
08/10/1948

Birth Place
IL

Telephone

☐ Assistance?

☐ EW Interest?

☐ Addr Protect?

☐ Fed Elections Only

☐ ID Required to Vote

☐ Photo Id Seen

☐ EVID Special Handling

Phone Number

Districts

Fed	St	Org	Sen	Rep	GO	SB	Gov	County
429S00	10	10	43	2	3			

NAME: JUMMANI, RIYAZ A, 2610 ATHERTON DR, ORLANDO, FL 32824



Dat

NOT A POWER OF ATTORNEY 3/2020

ORA 113226446 JUMMANI, RIYAZ A

VOTER'S CERTIFICATE

Read all instructions carefully before marking ballot and completing the Voter's Certificate.

I do solemnly swear or affirm that I am a qualified and registered voter of Orange County, Florida, and that I have not and will not vote more than one ballot in this election. I understand that if I commit or attempt to commit any fraud in connection with voting, vote a fraudulent ballot, or vote more than once in an election, I can be convicted of a felony of the third degree and fined up to \$5,000 and/or imprisoned for up to 5 years. I also understand that failure to sign this certificate will invalidate my ballot.

CERTIFICADO DEL VOTANTE

Lea todas las instrucciones cuidadosamente antes de marcar la papeleta y completar el Certificado del Votante.

Yo juro o afirmo solemnemente que soy un votante calificado e inscrito en el Condado de Orange, Florida, y no he votado ni votará con más de una papeleta en esta elección. Entiendo que si cometo o intento cometer cualquier fraude en conexión con la votación, si voto con una papeleta fraudulenta, o voto más de una vez en una elección, puedo ser condenado a un delito grave de tercer grado y ser multado hasta \$5,000 y/o ser encarcelado por hasta 5 años. También entiendo que el no firmar este certificado, invalidará mi papeleta.

NOTE: POWER OF ATTORNEY CANNOT SIGN FOR VOTER.

AVISO: APODERADO LEGAL NO PUEDE FIRMAR POR EL VOTANTE.

VOTER MUST SIGN IN BOX:

VOTANTE DEBE FIRMAR ENCASILLADO:

SIGN HERE FIRME/AQUI X	
DATE/FECHA	

Email/Correo electrónico: _____ (Optional/Opcional)
 Cell number/Núm. celular: _____ (Optional/Opcional)
 Home phone/Tel. residencial: _____ (Optional/Opcional)

PCT 428000
 428191G-1 4280000-2
 428
 31050

RIYAZ A JUMMANI



01910000466 230 Nov 3 2020 2020 GENERAL ELECTION

Scan Date = 10/07/2020

VP Systems, Inc. Fax: 975 1/2020 11 11 4 55
 Copyright © 2020

JUMMANI, RIYAZ A (Audit)

ORA JUMMANI, RIYAZ A

2610 ATHERTON DR, ORLANDO 32824

Date	Cnty	Operator	Field	New Value	Old Value
5/25/2022 8:56 AM		soeokb1	Comm-Out	Mailed Notice of Final Ineligibility	Sch'd by soetsw1
5/24/2022 3:27 PM	ORA	soetsw1	AbExp	1/1/1880 12:00:00 AM	12/31/2022 12:00:00 AM
5/24/2022 3:27 PM	ORA	soetsw1	FvrsLCD	05/24/2022 15:27:09:00	06/01/2020 10:35:50:00
5/24/2022 3:27 PM	ORA	soetsw1	FvrsLCD	05/24/2022 15:27:09:00(BU02)	06/01/2020 10:35:50:00
5/24/2022 3:27 PM	ORA	soetsw1	Reasn	E (E(P) Civil Rights Etc.)	1 (1(A) Active Voter)
5/24/2022 3:27 PM	ORA	soetsw1	Sttus	P	A
5/24/2022 3:27 PM		soetsw1	Comm-Out	Voter No Response by expiry of allowable time	No Voter Response.
4/24/2022 12:00 AM		soetsw1	Comm-Out	Published Notice	Notice Published.
3/7/2022 8:08 AM		soeokb1	Comm-Out	Felon Letter FVRS	Sch'd by soe_svc_VF
10/7/2020 10:12 PM	ORA	soe_svc_vf	ActyDt	10/7/2020 10:12:53 PM	8/18/2020 12:00:00 AM
10/7/2020 3:33 PM		soevbm28	Abs-Return	230 2020 GENERAL ELECTION	Ballot=(191G)496
10/7/2020 2:27 PM		soeobm1	Comm-In	Vote By Mail Return Envelope	Absentee Envelope Image for Election 230 2020 GENERAL ELECTION Nov/1
9/5/2020 3:07 PM		soeolc1	Abs-Mail	230 2020 GENERAL ELECTION	Ballot=(191G)496
8/12/2020 1:48 PM	ORA	soe_svc_vf	ActyDt	8/12/2020 1:48:27 PM	7/8/2020 12:00:00 AM
8/12/2020 1:42 PM		soevbm31	Abs-Return	229 2020 PRIMARY ELECTION	Ballot=(166D)167
8/12/2020 11:22 AM		soeods1	Comm-In	Vote By Mail Return Envelope	Absentee Envelope Image for Election 229 2020 PRIMARY ELECTION Aug/1
7/8/2020 11:52 AM	ORA	soecsd4	ActyDt	7/8/2020 11:52:25 AM	6/1/2020 12:00:00 AM
7/8/2020 11:52 AM		soecsd4	Comm-In	Phone Call From Voter	407-856-3714 vbm
6/25/2020 10:52 PM		soeolc1	Abs-Mail	229 2020 PRIMARY ELECTION	Ballot=(166D)167
6/1/2020 10:41 AM	ORA	soe_svc_vf	ActyDt	6/1/2020 10:41:25 AM	6/1/2020 12:00:00 AM



Maint DocImages Activity Elections Audit Vote-by-Mail Comms Eligibility Maint

ORA [REDACTED] Jummani, Riyaz A

2610 Alherton Dr, Orlando, 32824 [REDACTED]

Last Style First Middle Driver License Source Soc Sec Num Source
Jummani [REDACTED] Riyaz [REDACTED] [REDACTED] [REDACTED] [REDACTED] F,Form

Nbr Suf Dir Street Name Type Dir Unit Type Nbr City Name County Zip Code
2610 [REDACTED] [REDACTED] Alherton Dr [REDACTED] [REDACTED] [REDACTED] Orlando ORANGE 32824

Mail
[REDACTED]
[REDACTED]
City State Zip Code Country
[REDACTED] [REDACTED] [REDACTED] [REDACTED]

Email Address [REDACTED] ☐ Receive Sample Ballots by Email Language Preference None

Sex Race Party Pty Chg Req Die Regn Date Reason(Status)
M 2,Asian or Pacific Isl DEM,Florida Democratic Par [REDACTED] 07/04/1994 ☐ See Comms (EP) Civil Rights Felon

Date of Birth Birth Place Telephone Ext
08/10/1946 [REDACTED] [REDACTED] [REDACTED]

- ☐ Assistance? ☐ EVV Interest?
☐ Addr Protect? ☐ Photo ID Seen?

Photo ID Type
[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Districts
Precinct Cng Sen Hse CC SB
429S00 10 15 48 4 3

NOTE: SIGN OF RIDER ON THE IN BOX BECOMES VOIDED WITHOUT SIGNATURE OF I

[REDACTED]

Dat

ABSENTEE BALLOT REQUEST

Check the election for which you are requesting a ballot.

- ☒ Primary, Part II - 4/5/10 A/C
- ☒ General Election - November 2, 2010
- ☐ Runoff Election

NAME:

LAST: JUMMANI FIRST: RIYAZ SUFFIX: DR

Residence Address: 2717 ECHO LANE CITY: ORLANDO STATE: FL ZIP: 32839

Mobile Phone: 407-856-3744 (Area Code)

Ballot Type: 08/10/10 (Date)

Signature: [Signature]

Deadline to request an absentee ballot: 15 days prior to the election.



Florida Voter Registration Application

PLEASE COMPLETE THE APPLICATION BELOW. PLEASE PRINT USING A BLACK BALLPOINT PEN.

1. I am a resident of the State of Florida.

2. I am at least 18 years old on the day of the election.

3. I am a U.S. citizen.

4. I am not currently serving a term of imprisonment in a Florida state or federal prison.

5. I am not currently serving a term of probation or parole in Florida.

6. I am not currently serving a term of supervised release in Florida.

7. I am not currently serving a term of community control in Florida.

8. I am not currently serving a term of conditional release in Florida.

9. I am not currently serving a term of probation or parole in any other state.

10. I am not currently serving a term of supervised release in any other state.

11. I am not currently serving a term of community control in any other state.

12. I am not currently serving a term of conditional release in any other state.

13. I am not currently serving a term of probation or parole in any other country.

14. I am not currently serving a term of supervised release in any other country.

15. I am not currently serving a term of community control in any other country.

16. I am not currently serving a term of conditional release in any other country.

17. I am not currently serving a term of probation or parole in any other country.

18. I am not currently serving a term of supervised release in any other country.

19. I am not currently serving a term of community control in any other country.

20. I am not currently serving a term of conditional release in any other country.

FLORIDA VOTER REGISTRATION APPLICATION

1. I am a resident of the State of Florida.

2. I am at least 18 years old on the day of the election.

3. I am a U.S. citizen.

4. I am not currently serving a term of imprisonment in a Florida state or federal prison.

5. I am not currently serving a term of probation or parole in Florida.

6. I am not currently serving a term of supervised release in Florida.

7. I am not currently serving a term of community control in Florida.

8. I am not currently serving a term of conditional release in Florida.

9. I am not currently serving a term of probation or parole in any other state.

10. I am not currently serving a term of supervised release in any other state.

11. I am not currently serving a term of community control in any other state.

12. I am not currently serving a term of conditional release in any other state.

13. I am not currently serving a term of probation or parole in any other country.

14. I am not currently serving a term of supervised release in any other country.

15. I am not currently serving a term of community control in any other country.

16. I am not currently serving a term of conditional release in any other country.

17. I am not currently serving a term of probation or parole in any other country.

18. I am not currently serving a term of supervised release in any other country.

19. I am not currently serving a term of community control in any other country.

20. I am not currently serving a term of conditional release in any other country.



Show Signature



Date Image Scanned
05/05/2010

ABSENTEE BALLOT REQUEST

Check the election(s) for which you are requesting a ballot

- ☐ Primary Election - August 24, 2010
☐ General Election - November 2, 2010
☐ Both 2010 Elections

PRINT:

Name JUMMANI RYAZ		
Residence Address 2717 EAGLE LAKE DR		
Mailing Address (if different) ORLANDO - FL - 32837		
Birth Date 08/10/1946	Voter I.D. Number (if known)	Daytime Phone 407-856-3714
Signature [redacted]		

RECEIVED

APR 19 2010

BILL COMBES
SUPERVISOR OF ELECTIONS

Show Signature

Date Image Scanned
05/05/2010

Deadline to request an Absentee Ballot: 6:00 p.m. six (6) days prior to the Election.



Florida Voter Registration Application

TO REGISTER, YOU MUST:

- Be a citizen of the United States of America. (Box 2)
- Be a Florida resident. (Box 3)
- Be 18 years old. (You may pre-register if you are 17 or if you have a valid driver's license before your 17th birthday.) (Box 5)
- Not be adjudicated mentally incapacitated with respect to voting unless that right is restored. (Box 4)
- Not be a convicted felon unless you have had your civil rights restored. (Box 3)
- Provide your current and valid Florida driver's license number or Florida identification card number. If you do not have a current and valid Florida driver's license or Florida identification card, you must provide the last four digits of your Social Security number. If you do not have a Florida driver's license number, Florida identification card number or Social Security number, write "NONE" in the box. (Box 6)
- Complete all information in the black boxes on the application. (Boxes 2, 3, 4, 5, 6, 7, 8, 10)

YOU CAN USE THIS FORM TO:

- Register to vote in the State of Florida
- Change name or address
- Register your delayed, lost or stolen Voter Information Card
- Register with a political party or change party affiliation
- Update your signature

DEADLINE INFORMATION

If this is a new registration application in Florida, the date the completed application is postmarked or hand delivered to a driver's license office, a voter registrar, an agency, an armed forces recruiter, office, the Division of Elections, or the office of any supervisor of elections in the state will be your registration date. You must be registered for at least 24 days before you can vote in an election. If your application is complete and you are qualified as a voter, a voter information card will be mailed to you.

PARTY AFFILIATION (BOX #12)

If you wish to register with a major political party, place an "X" in the box next to the desired major party. If you wish to register with a minor political party, place an "X" in the box preceding "minor party" and then print the name of the desired minor party. For a list of all political parties registered in Florida, go to the Division of Elections' web site: <http://election.dos.state.fl.us/online/parties.shtml>. If you do not wish to register with

any political party, place an "X" in the box preceding "None." Florida is a closed primary election state. Therefore, to vote in a primary election for partisan candidates, you must be a registered voter in the party for which a primary is being held. Regardless of party affiliation, all registered voters can vote on issues and non-partisan candidates.

NOTICE

The office at which you register or your decision not to register, your SSN, your F.D.L.# and your FL ID card will remain confidential and will be used only for voter registration purposes.

NOTE

If the information on this application is not true, the applicant can be convicted of a felony of the third degree and fined up to \$5,000 and/or imprisoned for up to five years.

QUESTIONS

Contact the office of your county supervisor of elections for additional information. Contact information is on the website for the Division of Elections: <http://election.dos.state.fl.us/county/index.shtml>.

INFORMACIÓN EN ESPAÑOL

Si desea obtener más información del supervisor de elecciones de su condado sí le interesa obtener este Formulario en Español



Find



Save



Close



Prior



Alert



Print

Correspondence



Console



Help



Exit

Main | Document Images | Activity | Elections | Audit | Vote-by-Mail | Comms | Eligibility Maint

ORA Jummani, Riyaz A

2510 Altherton Dr, Orlando, 32824

If you do not have a Florida driver's license number, Florida Identification card number or Social Security number, write "NONE" in the box. (Box 5)

Complete all information in the black boxes on the application (Boxes 2, 3, 4, 5, 6, 7, 8, 15)

If you wish to register with a minor political party, place an "X" in the box preceding "minor party" and then print the name of the desired minor party. For a list of all political parties registered in Florida, go to the Division of Elections' web site: <http://elections.dos.state.fl.us/on-line/parties.shtml>. If you do not wish to register with

dos.state.fl.us/county/index.shtml.

INFORMACIÓN EN ESPAÑOL

Si usted desea registrarse con una oficina del supervisor de elecciones de su condado o le interesa obtener este formulario en español.

PLEASE COMPLETE THE APPLICATION BELOW. PLEASE PRINT USING A BLACK BALLPOINT PEN.

1) Black boxes must be completed on the application below for registration to be valid. 2) Return this completed application to the office of your supervisor of elections. 3) If you are a first-time voter in this state applying by mail to register to vote and you have not been issued a FL DL, FL ID, or SSN, include a copy of your ID with the application (see Special Identification Requirements for additional information required). 4) Mail with first-class stamp.

REVISED 1/09

FLORIDA VOTER REGISTRATION APPLICATION

1	Check boxes that apply: ☒ New Registration ☐ Address Change ☐ Party Change ☐ Name Change ☐ Card Replacement ☐ Signature Update	OFFICIAL USE ONLY DS DE 39 1/09 POSTMARK 4/16/2010 APR 16 2010 BILL COSTALES SUPERVISOR OF ELECTIONS	
2	Are you a citizen of the United States of America? Yes ☒ No ☐ (If NO, you cannot register to vote)		
3	Are you a naturalized citizen of the United States? Yes ☒ No ☐ (If NO, you cannot register to vote)		
4	Are you a naturalized citizen of the United States? Yes ☒ No ☐ (If NO, you cannot register to vote)		
IF YOU ANSWERED NO TO QUESTION 2, OR IF YOU ARE UNABLE TO AFFIRM THE STATEMENTS IN BOXES 3 AND 4, YOU ARE INELIGIBLE TO REGISTER TO VOTE. DO NOT COMPLETE THIS APPLICATION.			
5	Date of Birth: 08/10/1946		
6	If you have a current and valid FL DL or FL ID card, you must provide the number in this box. If you do not have a FL DL or FL ID card, you must provide the last 4 digits of your SSN. If you have not been issued a FL DL, FL ID card, or SSN, write "NONE".		
7	Last Name: JUMMANI	First Name: RYAZ	Include if changed
8	Address Where You Live (No Legal Residence Requirements)	City: ORLANDO	County of Legal Residence: ORANGE
9	Mailing Address (If Different From Above)	City:	County:
10	Address Last Registered to Vote	City:	County:
11	Former Name (If Making Name Change)	Day Phone Number (optional)	
12	Party Affiliation (Check only one): ☒ Democratic Party ☐ Republican Party ☐ minor party (print registered party name) ☐ NONE		
13	Race/Ethnicity (Check only one): ☒ American Indian/Alaskan Native ☒ Asian/Pacific Islander ☐ Black, not Hispanic ☐ Hispanic ☐ White, not Hispanic		
14	Sex: ☒ M ☐ F Do you need voting assistance at the polls? Yes ☐ No ☒ Are you interested in being a poll worker? Yes ☐ No ☒ State or Country of Birth:		
15	Are You: ☐ Active Duty Military/Member of Reserve ☐ Dependent of Active Duty Military/Member of Marine ☐ U.S. Citizen Currently Residing Outside the U.S.		
16	SIGNATURE: Sign or mark or line in box below. (Sign without signature or mark of applicant)		
	Date: 4/16/2010		



Show Signature

Date Image Scanned
05/05/2010