

2026 10576 CICI

IN THE CIRCUIT COURT FOR THE 7TH JUDICIAL CIRCUIT JAN 30 2026
IN AND FOR VOLUSIA COUNTY, FLORIDA

INMATE'S INITIALS JH
OFFICER'S INITIALS MH

JAMES HOLCOMBE, *PRO SE*,
PETITIONER,

CASE NO.: TBD

V.

VOLUSIA COUNTY SHERIFFS OFFICE,
RESPONDENT.

FILED
2026 FEB -5 AM 11:10
CLERK OF CIRCUIT COURT
& CIVIL DIVISION

WRIT OF MANDAMUS

Petitioner, James Holcombe, *pro se*, comes now Pursuant to Fla. R. App. P. 9.100, and request that this court issue a writ of mandamus directed at the respondent of this petition. In support, states the following:

BASIS FOR INVOKING JURISDICTION

Fla. R. App. P. 9.030(c)(3) and Art. V § 5(b) provides this court with jurisdiction to hear original mandamus petitions.

FACTS ON WHICH PETITIONER RELIES

Preliminary Statement

- Petitioner will be referred to as 'Petitioner,' or by his given name, 'James Holcombe.'
- Respondent, the Volusia County Sheriffs Office will be referred to as 'VCSO' or 'Respondent.'
- Petitioner is incarcerated in the Florida Department of Corrections; his DC# is A30051.

- Petitioner is *pro se*, has no formal legal training and asks this court to construe this petition liberally. See Whited v. Fla. Comm'n on Offender Rev., 296 So. 3d 557, 561 (Fla. 2d DCA2020) (“We acknowledge that pro se pleadings are to be liberally construed.”)

Factual History

1. On Sept 18, 2025, Petitioner mailed a public records request to VCSO asking for records of police investigations that may have been related to his prison commitment. Petitioner believes there may be something in these records the State did not disclose to his defense before trial. (Appendix-1).
2. On Oct 15, 2025, Petitioner received an invoice from the VCSO for the amount of \$70.00. (Appendix-2). This was paid the very following day by Petitioner’s mother over the phone with the VCSO.
3. Petitioner received a package from the VCSO postmarked Dec 17, 2025. In this package were several of the requested records and notably, a marked-up copy of Petitioner’s initial records request. (Appendix-3).
4. In the marked-up records request, the official wrote that Petitioner was supposed to receive VP150032836 (VCSO Agency Report Number), however it was not included in the package. Petitioner still has no idea of its contents.
5. In addition to missing one report, another report, VP150011111 (VCSO Agency Report Number), was given in the package, but has no contents because the investigation is still open. (Appendix 4-5).
6. On Jan 8, 2026, Petitioner mailed a second request to the VSCO. (Appendix-6). In this request, Petitioner asked for the missing report and explained that it was not possible for

the investigation in VP150011111 to still be open based on the definition of an active investigation provided by statute.

7. To date of this filing, Petitioner has received no response from VCSO on the second request. Thus, this mandamus petition follows.

ARGUMENT

In order for a court to issue a writ of mandamus, a petitioner must establish that he (1) has a clear legal right to the performance of a clear legal duty by a public officer and (2) that he has no other legal remedies available to him. Hatten v. State, 561 So. 2d 562, 563 (Fla.1990). Here, (1) is met because the Florida Constitution and State Statute require access to public records and places the duty to provide such records on the public officers. See Art. I, § 24, Fla. Const. and § 119, Public Records, Fla. Stat. (2) is met because there is no other way to compel the VCSO to provide the records.

Mandamus is the appropriate vehicle for a person to compel compliance with a public records request under § 119, Fla. Stat. Woodard v. State, 885 So. 2d 444, 445 (Fla. 4th DCA2004); see also Smith v. State, 696 So. 2d 814, 816 (Fla. 2d DCA1997) (recognizing the mandatory nature of the disclosure of public records under chapter 119 for purposes of mandamus relief).

A. Missing Report

VP150032836 was missing from the initial package. It would appear to just be a simple mistake. This report was already paid for and Respondent should mail it out without delay.

B. The ‘Active’ Investigation

The more troubling of the two claims is the supposedly ‘open’ or ‘active’ investigation, VP150011111. The statute violation number listed is “7777777777,” which needless to say, does not exist. The timeframe for this investigation is a ~2.5 month span from early 2015, but is still open despite the statute of limitation on the crimes investigated being long past. See § 775.15, Fla. Stat. (only capital felonies, life felonies, and felonies where a death occurred can be prosecuted after 5 years.) The crimes investigated must have been white collar criminal crimes seeing as how Petitioner is in prison for Racketeering predicated on Dealing in Stolen Property, both of which are subject to time limitations. The same detective who investigated Petitioner’s business dealings, Jayson Paul, is the detective listed. Finally, there is a narrative attached as an additional form to the report (Appendix-5), that was not included in the package (Appendix-3).

It is true that the VCSO does not need to provide public records when there is an active investigation. However, § 119.011(3)(d)2. Fla. Stat., Defines such as: “Criminal investigative information shall be considered “active” as long as it is related to an ongoing investigation which is continuing with *a reasonable, good faith anticipation of securing an arrest or prosecution in the foreseeable future.* (emphasis supplied.) Because any statute of limitation is now long expired there is no good faith anticipation of securing an arrest or prosecution in the foreseeable future.

CONCLUSION AND NATURE OF RELIEF SOUGHT

Petitioner has a clear legal right to the two investigation reports listed above, Respondent has a clear legal duty to provide them, and there is no alternative to this mandamus to compel the VCSO. I request this court order Respondent to provide the full reports for both aforementioned agency report numbers.

Respectfully Submitted,



James Holcombe DC#A30051
500 Ike Steele Road
Wewahitchka, FL 32465

CERTIFICATE OF SERVICE

An exact copy of the foregoing motion and it's appendix was placed into the hands of departmental mail staff at Gulf C.I. on the date indicated by the departmental stamp to be mailed, via USPS, to Volusia County Sheriffs Office, ATTN: LEGAL COUNSEL, PO Box 569, DeLand, FL 32721.

Respectfully Submitted,



**IN THE CIRCUIT COURT FOR THE 7TH JUDICIAL CIRCUIT
IN AND FOR VOLUSIA COUNTY, FLORIDA**

JAMES HOLCOMBE, *PRO SE*,
PETITIONER,

CASE NO.: TBD

V.

VOLUSIA COUNTY SHERIFFS OFFICE,
RESPONDENT.

APPENDIX TO WRIT OF MANDAMUS

Description	Page
Initial public records request.	1
Invoice.	2
Marked-up initial request.	3
VP150011111.	4-5
Second public records request.	6

PROVIDED TO GULF CI
MAILROOM

SEP 18 2025

To:
Custodian of Public Records
123 W Indiana Ave., 4th Floor.
DeLand, FL 32720

INMATE'S INITIALS JS
OFFICER'S INITIALS PO

To the Custodian of Public Records, County Clerk, or whomever it may concern,

James Holcombe, comes now, pursuant to Florida Statutes § 119 Public Records, and requests any and all public records for the following:

1. A copy of **any and all** Volusia County Sheriff's investigation reports, or files, in regards to any of the following person(s) or entity(s) for the years 2013-2015.

- James Dale Holcombe, DOB 11/21/1988.
- David Bradley Lee, DOB 03/30/1988.
- Dale Chester Holcombe, (DOB unknown).
- Paper4plastic LLC (a Sunbiz.org registered business).

I request that this be replied to within 15 days of receipt unless one of the exemptions under F.S. § 119 apply. In the event that an exemption does apply, I request that you reply within 10 days stating which of those statutory exemptions apply.

Thank you for your time and attention in this matter.

Return correspondence to the following address:

James Holcombe #A30051
Gulf Correctional Facility
500 Ike Steele Road
Wewahitchka, FL 32465

A-1

Remit To:

Volusia Sheriff's Office
PO BOX 569
Deland, FL 32721

Bill To:

James Holcombe #A30051
500 Ike Steele Rd
Wewahitchka, FL 32465

I**Invoice Summary**

Invoice No:
Request Reference Number:
Invoice Date:
Due Date:
Status:
Balance Due

INV25-R048164-1
R048164-100225
10/9/2025
10/16/2025
Open
\$70.00

Category	Description	Details	Cost	Unit	Add Overhea	Total Quantit	Quantity Wai	Quantity Cha	Total
Staff Time		FOR REPORTS, RESEARCH TIME, REVEIW AND REDACTION TIME AND THEN SUPERVISOR REVEIW TIME	\$20.00	Per Hour	☐	3.50	0.00	3.50	\$70.00

Comments:**Totals:**

Total:
Payments:
Balance Due

\$70.00
\$0.00
\$70.00

PROVIDED TO GULF CI
MAILROOM

SEP 18 2025

To:
Custodian of Public Records
123 W Indiana Ave., 4th Floor.
DeLand, FL 32720

INMATE'S INITIALS jt
OFFICER'S INITIALS o

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- James Dale Holcombe, DOB 11/21/1988.
- David Bradley Lee, DOB 03/30/1988. No reports
- Dale Chester Holcombe, (DOB unknown).
- Paper4plastic LLC (a Sunbiz.org registered business). Daytona Beach PD

I request that this be replied to within 15 days of receipt unless one of the exemptions under F.S. § 119 apply. In the event that an exemption does apply, I request that you reply within 10 days stating which of those statutory exemptions apply.

Thank you for your time and attention in this matter.

Return correspondence to the following address:

James Holcombe #A30051
Gulf Correctional Facility
500 Ike Steele Road
Wewahatchka, FL 32465

James Holcombe
Cases

VP15001111 - open only can release
report no supplements

VP150034174 - closed

VP150032838 - associated with case #
15001111

Dale Holcombe

VP150032836 - associated to case
15001111

VP15001111 - same as James

VP140004400 - closed - the Def cases
have been closed

VP140002058 - no case

VP150006450 - closed

VP130033292 - closed

VOLUSIA COUNTY SHERIFF'S OFFICE

INCIDENT REPORT

Page 1 of 2 Pages

☐ Juvenile ☐ Gang ☐ Domestic Violence ☐ Endangered / Other	☐ Hate Crime ☐ Elderly Abuse / Exploitation VOR _____	Agency ORI Number FL0640000	Zone # 44	Agency Report Number 150011111	Telephone Handled Call? (T.H.C.)	1. Yes 2. No	2
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Reported: Day Friday	Date 04-24-2015	Time (mil.) 1510	Time Dispatched (mil.) 1510	Time Arrived (mil.) 1510	Time Completed (mil.) 1600	Nature of Call (Report Type) 83 Miscellaneous
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Incident Type: 1. Felony 2. Traffic Felony	3. Misdemeanor 4. Traffic Misdemeanor	5. Ordinance 9. Other	Incident: Day From Sunday	Date 02-01-2015	Time (mil.) 1200	TO Friday	Date 04-24-2015	Time (mil.) 1600	Occurred During: U - Unknown D - Day N - Night
--	--	--------------------------	------------------------------	--------------------	---------------------	--------------	--------------------	---------------------	---

Offense #1 1	Type 1	Statute Violation Number 7777777777	Description All other crimes	A - Attempted C - Committed	C
#2		Statute Violation Number	Description	A - Attempted C - Committed	

Incident Location (Street, Apt. Number) 1691 PROVIDENCE BLVD	City DELTONA	Zip 32725
---	-----------------	--------------

Business Name / Area Identifier DISTRICT FOUR	# Prem. Entored	Drug Related 0. N/A 1. Yes 2. No	Alcohol Related 0. N/A 1. Yes 2. No	Forced Entry 1. Yes 3. Attempted 2. No	Arson-Inhabited 1. Occupied 3. Abandoned 2. Unoccupied	Arson-Attempted 1. Yes 2. No
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Location Type 17	Location Type Codes 01. Residence-Single 02. Apartment/Condo 03. Residence/Other 04. Hotel/Motel	05. Convenience Store 06. Gas Station 07. Liquor Sales 08. Bar/Nightclub	09. Supermarket 10. Dept/Discount Store 11. Specialty Store 12. Drug Store/Hospital	13. Bank/Financial Inst. 14. Commercial/Office Bldg. 15. Industrial/Mfg. 16. Storage	17. Gov't/Public Bldg. 18. School/University 19. Jail/Prison 20. Religious Bldg.	21. Airport 22. Bus/Rail Terminal 23. Construction Site 24. Other Structure	25. Parking Lot/Garage 26. Highway/Roadway 27. Park/Woodlands/Field 28. Lake/Waterway	29. Motor Vehicle 30. Other Mobile 88. Unknown 99. Other
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V/W Code V-Victim W-Witness R-Reporting Person	N-Next of Kin O-Other	Victim/Subject Type 0. N/A 1. Juvenile 2. L.E. Officer 3. Adult	4. Business 5. Government 6. Church 9. Other	Address/Phone Type B. Business/Work C. Cell H. Home	M. Message N. Next of Kin O. Other	P. Pager S. School V. Vacation	Race W-White B-Black I-American Indian	O-Oriental/Asian U-Unknown	Sex M-Male F-Female U-Unknown	Residence Type 0. N/A 1. City 2. County	3. Florida 4. Out-of-State	Residence Status 0. N/A 1. Full Year 2. Per. Year 3. Non-Resident
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Means of Attack F-Firearm K-Knife/Cutting Inst.	O-Other Dangerous H-Hands, Fists, Feet, Etc.	Extent of Injury 00. N/A 01. Gunshot 02. Stabbed	03. Laceration 04. Unconscious 05. Poss. Broken Bones	06. Poss. Internal Injury 07. Loss of Teeth 08. Burns	09. Abrasions/Bruises 10. No Visible Injury 99. Other Serious Injury	Domestic Violence 1. Yes 2. No	Victim Relationship to Offender S-Spouse P-Parent C-Child	B-Sibling O-Other Family H-Co-Habitant Z-Other
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Offense Indicator 1. #1 2. #2 3. Both	V/W Code	#	V. Type	Nature of Call (for Victim, if different from Incident)	Name (Last/Business)	(First)	(Middle)
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Address (Street, Apt. Number)	City	State	Zip	Residence Phone
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Business/School/Other Address (Street, Apt. Number)	City	State	Zip	Address Type	Business/School/Other Phone	Phone Type
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Other Contact Info (Time Available, Interpreter, etc.)	Synopsis of Involvement
--	-------------------------

If Victim Type 1, 2, or 3	Race	Sex	Date of Birth	Age	Ethnicity	Res. Type	Res. Status	Means of Attack	Extent of Injury	Domestic Violence	Relationship
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Offense Indicator 1. #1 2. #2 3. Both	V/W Code	#	V. Type	Nature of Call (for Victim, if different from Incident)	Name (Last/Business)	(First)	(Middle)
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--	----------	---	---------	---	----------------------	---------	----------

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INCIDENT REPORT (CONT.)

Page 2 of 2 Pages

SUBJECT / MISSING SECTION

Offense Indicator 1. #1 2. #2	3. Both	Subject Code S-Suspect D-Defendant	V-Victim (Missing Person)	Code #	Subj. Type	Name (Last)	(First)	(Middle)	Race	Sex	Ethnicity
Date of Birth	Age	To Age	Height	To Height	Weight	To Weight	Eye Color	Hair Color	Maiden Name		
Nickname / Street Name			Place of Birth - City		County	State	Employer/Other/School		Occupation		
Last Known Address (Street, Apt. Number)					City	State	Zip	Address Type	Phone	Phone Type	
Other Address (Street, Apt. Number)					City	State	Zip	Address Type	Phone	Phone Type	
Driver's License State/Number				Social Security Number			Other ID Number		ID Type		
Clothing (Describe)					Scars/Marks/Tattoos (Type/Describe)			Scars/Marks/Tattoos (Type/Describe)			
Hair Length /Style		Skin	Build	Facial Features		Speech/Voice	Deformity	Glasses			
If Subject:	Demeanor	Mask	Weapon Type					If Arrested:	Subject Was Already in Custody?	Warrant From:	
Date of Last Contact		Date of Emancipation		Caution	Caution Reason		Personal Habits (Drugs / Alcohol)				
May Be With:		Physical Condition:		Mental Condition:		Doctor Name:		Dentist Name:			
Incident Type 1. Runaway 2. Parents 3. Involuntary 4. Disabled 5. Endangered		6. Disaster Victim 7. Voluntary Adult 8. Unknown		Foul Play Suspected? 1. Yes 2. No 8. Unknown		Missing Before? 1. Yes 2. No 8. Unknown		Fingerprints Available? 1. Yes 2. No		Photo Available? 1. Yes 2. No	
Dental Record Available? 1. Yes 2. No											
I, _____ (Printed) _____ (Signature) certify that I have reported the above person as a missing person; and this agency has my permission to enter this person in a statewide alert.											

SUBJECT / MISSING SECTION

Offense Indicator 1. #1 2. #2	3. Both	Subject Code S-Suspect D-Defendant	V-Victim (Missing Person)	Code #	Subj. Type	Name (Last)	(First)	(Middle)	Race	Sex	Ethnicity
Date of Birth	Age	To Age	Height	To Height	Weight	To Weight	Eye Color	Hair Color	Maiden Name		
Nickname / Street Name			Place of Birth - City		County	State	Employer/Other/School		Occupation		
Last Known Address (Street, Apt. Number)					City	State	Zip	Address Type	Phone	Phone Type	
Other Address (Street, Apt. Number)					City	State	Zip	Address Type	Phone	Phone Type	
Driver's License State/Number				Social Security Number			Other ID Number		ID Type		
Clothing (Describe)					Scars/Marks/Tattoos (Type/Describe)			Scars/Marks/Tattoos (Type/Describe)			
Hair Length /Style		Skin	Build	Facial Features		Speech/Voice	Deformity	Glasses			
If Subject:	Demeanor	Mask	Weapon Type					If Arrested:	Subject Was Already in Custody?	Warrant From:	
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Incident Type 1. Runaway 2. Parents 3. Involuntary 4. Disabled 5. Endangered		6. Disaster Victim 7. Voluntary Adult 8. Unknown		Foul Play Suspected? 1. Yes 2. No 8. Unknown		Missing Before? 1. Yes 2. No 8. Unknown		Fingerprints Available? 1. Yes 2. No		Photo Available? 1. Yes 2. No	
Dental Record Available? 1. Yes 2. No											
I, _____ (Printed) _____ (Signature) certify that I have reported the above person as a missing person; and this agency has my permission to enter this person in a statewide alert.											

NARRATIVE

1 This is an active investigation.

ADMINISTRATIVE

Final Case Status:	Final Case Status Codes: 1.Arrest/Adult 2.Arrest/Juv. 3.Exceptional/Adult 4.Exceptional/Juv. 5.Closed 6.Unfounded	☐ Victim Advocate ☐ Triad ☐ SA Referral
☐ DCF Hotline ☐ CAC	Date: Time:	☐ FCIC / NCIC Entry ☐ T.T. BOLO ☐ FCIC / NCIC Cancel
Connecting Report Number	Agency	Additional Forms Attached: ☒ Narrative ☐ SA-707 ☐ Persons ☐ Property ☐ Veh/Tow Sheet ☐ Other Describe:
Officer Reporting - Printed Paul, Jayson	Officer Reporting - Signature	ID. Number 8070
Officer Reviewing - Printed (If Applicable)	Officer Reviewing - Signature (If Applicable)	Unit 1F96
		Date 04-24-2015

PROVIDED TO GULF CI
MAILROOM

To:

Custodian of Public Records for Volusia County Sheriffs Office.

123 W Indiana Ave., 4th Floor.

And/or

PO BOX 569

DeLand, FL 32720

DeLand, FL 32721

JAN 08 2026

INMATE'S INITIALS

OFFICER'S INITIALS

MH copy

To the Custodian of Public Records, or whomever it may concern,

On September 18, 2025 I mailed out a public records request (attached) and it was received by your office shortly afterwards. I then received an invoice, INV25-R048164-1 (attached), which was paid. Someone very helpful at your office fulfilled the request and left notes on a copy of my original request. I appreciate the work and these notes made greatly; however I did have two issues with the request and ask to have them corrected.

1. I did not receive report VP150032836 in the mail with the others. It was notated on the paper, but missing from the envelope sent to me. I have already paid for this record with the above-mentioned invoice, so I would request it be mailed to me at your earliest convenience.

2. I have a serious concern about my rights to public records with report VP150011111. The report is still open after more than 10 years and thus the narrative was not sent to me. The dates of this report are 02-01-2015 through 04-24-2015. The statute of limitations for anything investigated is long past, see F.S. § 775.15, and this report should not be kept from me. I request that you contact someone in the chain of command to have this case closed and provide me the full report with the narrative. This is likely the report I am searching for.

Furthermore, F.S. § 119.011(3)(d) defines an active investigation "*as long as it is related to an ongoing investigation which is continuing with a reasonable, good faith anticipation of securing an arrest or prosecution in the foreseeable future.*" Because this is not true for this report, the investigation is not active.

I request that this be replied to within 15 days of receipt unless one of the exemptions under F.S. § 119 apply. In the event that an exemption does apply, I request that you reply within 10 days stating which of those statutory exemptions apply.

Thank you for your time and attention in this matter.

Return correspondence to the following address:

James Holcombe #A30051
Gulf Correctional Facility
500 Ike Steele Road
Wewahitchka, FL 32465

A-6

James Holcombe A30051
500 Ike Steele road
Newahitchka, FL 32465

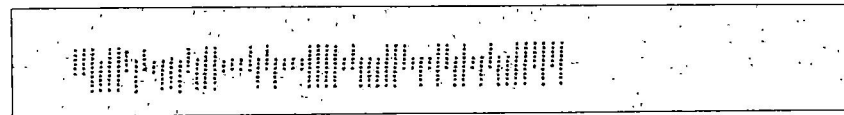
FIRST-CLASS



US POSTAGE^{IMP} PITNEY BOWES

ZIP 32465
02 7H
0006198683 \$ 002.72⁰
JAN 30 2026

Volusia Clerk of Court
PO BOX 6043
DeLand, FL 32721



THIS LETTER
ORIGINATED AT
GULF CORRECTIONAL
INSTITUTION

THIS LETTER
ORIGINATED AT
GULF CORRECTIONAL
INSTITUTION

PROVIDED TO GULF CI
MAILROOM

IAN 30 2026

INMATE'S INITIALS JH
OFFICER'S INITIALS MH