

0484170

2020 F004327 AMB # 3334

ARREST / NOTICE TO APPEAR

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias

1

JUVENILE

OBTS Number	Agency ORI Number 0500800		Agency Name West Palm Beach Police Department		Agency Report Number (N.T.A.'s only) 9 4 2020-0008114	
Charge Type: Check as many as apply <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type NOT APPLICABLE		Multiple Clearance Indicator
Location of Arrest (including Name of Business) 375 S ROSEMARY AVE, WPB, FL			Location of Offense (Business Name, Address) 375 S ROSEMARY AVE, WEST PALM BEACH, FL 33401			
Date of Arrest 05/20/2020	Time of Arrest 18:37	Booking Date 05/20/2020	Booking Time 18:47	Jail Date	Jail Time	Location of Vehicle
Name (Last, First, Middle) KILAV, HAROLD HOSEP			Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White B - Black	1 - American Indian O - Asian	Sex M	Date of Birth 04/21/1978	Height 5'11	Weight 165	Eye Color BROWN
Hair Color BROWN		Complexion LIGHT		Build Medium		
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)			Marital Status S	Religion N/A		Indication of Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>
Local Address (Street, Apt. Number) 1400 CARDINAL LN, LANTANA, FL 33462			(City)	(State)	(Zip)	Home Phone
Permanent Address (Street, Apt. Number) 1400 CARDINAL LN, LANTANA, FL 33462			(City)	(State)	(Zip)	Mobile Phone
Business Address (Name, Street) NONE			(City)	(State)	(Zip)	Work Phone
D/L Number, State K410348781410 / FL		Soc. Sec. Number	INS Number	Place of Birth (City, State) SILVER SPRINGS, FL US		Citizenship
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile	
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile	
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ Name (Last, First, Middle)			Residence Phone			
<input type="checkbox"/> Legal Custodian			Business Phone			
Address (Street, Apt. Number) (City) (State) (Zip)			Business Phone			
Notified by: (Name)			Date	Time	JUVENILE DISPOSITION 1. Handled/Process within Department and Released 2. TOT JAC 3. Incarcerated	
Released To: (Name)			Relationship	Date	Time	
The above address was provided by <input type="checkbox"/> defendant and/or <input type="checkbox"/> defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.			School Attendat			Grade
<input type="checkbox"/> Yes, by: _____ <input type="checkbox"/> No			Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Description of Property
Value of Property						
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Disperse/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other
Drug Type N. N/A A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetic	U. Unknown Z. Other	
Charge Description POSSESSION OF SCHEDULE I SUBSTANCES			Statute Violation Number 893.13(6)(A)		Violation of ORD #	
Drug Activity P	Drug Type A	Amount / Unit .06 gm	Offense #	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number
Bond						
Charge Description			Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number
Bond						
Charge Description			Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number
Bond						
Health / Apparent Physical Condition of Defendant			Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries			
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond			<input checked="" type="checkbox"/> I.O.T. County Jail		PROPERTY - Received By	
Released By			Released To		2020 MAY 21	
Transported By			Date Transported	Time Transported	Other	
<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court			Location (Court, Room)		No Photo Available	
<input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.			Court Date and Time		AM 5:57	
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. 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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.			Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed	
I CONSENT TO RECEIVE REMINDERS OF COURT DATE(S) AND TIMES FOR THIS CASE BY TEXT MESSAGE TO THE NUMBER IDENTIFIED HERE. I UNDERSTAND THAT STANDARD TEXT MESSAGE RATES MAY APPLY AND THAT I MAY REVOKE THIS CONSENT VIA THE TEXT MESSAGE SYSTEM IF I CHOOSE			Name Verification (Printed by Arrestee)		INITIAL	
HOLD for Other Agency			Signature of Arresting Officer		Name of Arresting Officer (Print)	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other			REKDAHL, CHRISTOPHER		I.D.# 01995	
Intake Deputy 06 TOMMY			Pouch #		Transporting Officer REKDAHL	
			I.D.# 1995		Agency WPB	
			Witness here if subject signed with an "X".		PAGE 1 OF 1	

PROBABLE CAUSE AFFIDAVIT

1. Arrest
2. N.T.A
3. Request for Warrant
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1 JUVENILE

OBTS Number		
Agency ORI Number FL 0500800	Agency Name WEST PALM BEACH POLICE DEPARTMENT	Agency Report Number 9 4 2020-0008114
Charge Type: Check as many as apply. <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		Special Notes:

Name (Last, First, Middle) KILAV, HAROLD HOSEP	Alias	Race W	Sex M	Date of Birth 04/21/1978
Charge Description 893.13(6)(A)	Charge Description			
Charge Description	Charge Description			

Victim's Name (Last, First, Middle) State Of Florida	Race	Sex	Date of Birth
Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source	
Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation	

The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.
 The Person taken into custody ...
 committed the below acts in my presence. was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
 confessed to _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.
 On the 20 day of May, 2020 at 19:19 (Specifically include facts constituting cause for arrest.)

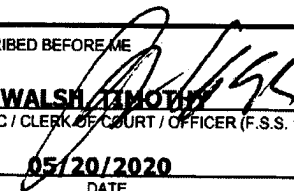

On 5/20/2020 at approximately 1800 hours I was flagged down at 375 S Rosemary Ave, Publix grocery store by an employee in reference to two white males who they believed were stealing as they went inside the males public restroom.

I entered the male public restroom inside of Publix which was empty for exception of the handicap stall . I observed two white male subjects (later identified as Harold Kilav and Jeremy Luke) inside of the stall at the same time hearing the sound of sniffing coming from the same stall the Kilav and Luke were inside of.

I peeked over the top of the stall partitioner when I observed both Kilav and Luke in possession of a white piece of paper which when unfolded by Kilav. I observed a white hard like substance which from my training and experience I believed it to be crack cocaine. Let it be noted that the paper that the suspected crack cocaine which was wrapped in was registration paperwork with Harold Kilav's name on it. It should also be noted I observed Kilav actually "sniff" through his nose the suspected crack cocaine that was wrapped in the same aforementioned paper before both subjects were detained.

The suspected crack cocaine was weighed at 0.6 grams with the piece of paper and NIK tested positive for crack cocaine.

Due to the above facts and observations I find probable cause to charge Harold Kilav with one count of F.S.S 893.13 (6) (a) possession of schedule 1.

SWORN AND SUBSCRIBED BEFORE ME  WALSH, TIMOTHY NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <u>05/20/2020</u> DATE	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER REKDAHL, CHRISTOPHER (01995) NAME OF OFFICER (PLEASE PRINT) <u>05/20/2020</u> DATE
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Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2020013087	Date: 05/20/20
	Specialist Name/ID: J. Beck/9007