

0501004 21MM1195 NB4-11
ARREST / NOTICE TO APPEAR

OBTS Number	Agency ORI Number 0500700		Agency Name Riviera Beach Police Department		Agency Report Number (N.T.A.'s only) 814 21-01108		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Copies	1	JUVENILE
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	If Weapon Seized Rate Type: Hands/fists/feet/teeth		Multiple Clearance Indicator		1		
Location of Arrest (Including Name of Business) 2401 OCEAN AVE RIVIERA BEACH FL 33404					Location of Offense (Business Name, Address) 2401 OCEAN AVE, RIVIERA BEACH, FL 33404					
Date of Arrest 02/12/2021	Time of Arrest 21:05	Booking Date 02/12/2021	Booking Time 21:15	Jail Date // : : :	Jail Time	Location of Vehicle N/A				

Name (Last, First, Middle) WILLIAMSON, KALA										Alias:																																																																															
Race W - White B - Black B										Sex F										Date of Birth 11/30/1990										Height 5'08										Weight 130										Eye Color BROW										Hair Color BLACK										Complexion LIGHT										Build MEDIUM									
Local Address (Street, Apt. Number) 441 CEDARVILLE ST APT 2, PITTSBURGH, PA 15224										(City)										(State)										(Zip)										Phone (412) 822-4964										Residence Type: 1. City 2. County 3. Florida 4. Out of State 4																																							
Permanent Address (Street, Apt. Number) 441 CEDARVILLE ST APT 2, PITTSBURGH, PA 15224										(City)										(State)										(Zip)										Phone (412) 822-4964										Address Source D.L.																																							
Business Address (Name, Street)										(City)										(State)										(Zip)										Phone										Occupation																																							
DL Number, State 29367305 / PA										Social Security Number										DNS Number										Place of Birth (City, State) PITTSBURGH, PA										Citizenship US																																																	

Co-Defendant Name (Last, First, Middle)										Race										Sex										Date of Birth										<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile									
Co-Defendant Name (Last, First, Middle)										Race										Sex										Date of Birth										<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile									
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian										Name (Last, First, Middle)										Residence Phone																													
Address (Street, Apt. Number)										(City)										(State)										(Zip)										Business Phone									
Notified by: (Name)										Date										Time										JUVENILE DISPOSITION 1. Handled/Processed 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 Attended										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	S. Sell	R. Seizure	K. Disposal	M. Manufacture/Production/Cultivate	Z. Other	Drug Type	B. Barbiturate	H. Hallucinogen	P. Pharmaceutical/Equipment	U. Unknown
N. N/A	B. Buy	D. Deliver	D. Distribute			N. N/A	C. Cocaine	M. Marijuana	O. Opioid/Drug	Z. Other
P. Possess	T. Traffic	E. Use				A. Amphetamine	E. Heroin		S. Synthetic	

Charge Description DISORDERLY CONDUCT - DISORDERLY INTOXICATION										State Violation Number 856.011										Violation of ORD #									
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Copies Number	Bond																						
	N	/	21-01108	1	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N		1																						
Charge Description										State Violation Number										Violation of ORD #									
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Copies Number	Bond																						
					<input type="checkbox"/> Y <input type="checkbox"/> N		3																						
Charge Description										State Violation Number										Violation of ORD #									
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Copies Number	Bond																						
					<input type="checkbox"/> Y <input type="checkbox"/> N		9																						

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"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail										PROPERTY - Received By										Released By										Released To									
<input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health										Date Transported										Time Transported										Other									
Transported By										// : : :																													

<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court										Location (Court, Room) North County PALM BEACH GARD										No Photo Available									
<input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.										Court Date and Time 03/18/2021 08:30:00																			
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) Reuse																				Date Signed SCANNED									

HOLD for Other Agency										Signature of Arresting Officer TOPPING, C. M.										Name of Arresting Officer (Print) TOPPING, C. M.									
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest										Name of Transporting Officer C. TOPPING										LD. # 6427									
<input type="checkbox"/> Suicidal <input type="checkbox"/> Other										Transporting Agency RBPB										Agency RBPB									
Issuing Deputy D. M. G. 666										LD. # 6427										Agency RBPB									
Witness here if subject signed with an "X".																													

SCANNED
FEB 14 2021 10:10 AM

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

OBTs Number		Agency ORI Number FL FL0500700		Agency Name Riviera Beach Police Department		Agency Report Number 8 4 21-01108	
Charge Type: Check as many as apply.		Special Notes:					
<input type="checkbox"/> 1. Felony		<input checked="" 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			

Name (Last, First, Middle) WILLIAMSON, KALA				Race B	Sex F	Date of Birth 11/30/1990
Charge Description 856.011 DISORDERLY CONDUCT - DISORDERLY INTOXICATION		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 12 day of February, 2021 at 21:05 (Specifically include facts constituting cause for arrest.)

On February 12, 2021 at approximately 8:47 PM, officers were dispatched to 2401 Ocean Ave (Johnny Longboats) in reference to customers not paying their bill and trying to leave the restaurant. Upon arrival on scene, officers utilized their body worn cameras and made contact with a black female identified as Kala Williamson (D.O.B. 11/30/1990) who was standing in the middle of the roadway. It should be noted that Williamson was pointed out by management as causing a disturbance inside the restaurant and wished for Williamson to be trespassed (ref. R.B.P.D. case #21-01105).

As officers made contact and asked Williamson for her identification. Williamson became irate, yelling at officers, and refusing to provide identification. Officers attempted numerous times to calm Williamson down in order to speak with her, however, Williamson would calm down briefly, then become loud and disorderly again; yelling and attempting to argue with officers. As officers were attempting to calm her down, Officer Topping could smell the odor of alcohol emanating from her person. Williamson was having difficulty following instructions, forgetting simple directions, and speaking over officers. Williamson eventually handed officers her driver's license.

While Williamson was yelling at officers, Officer Topping observed a large crowd forming on the sidewalk stopping to observe Williamson. Due to the above described incident, Officer Topping placed Kala Williamson (D.O.B. 11/30/1990) under arrest for one count of Disorderly Intoxication. Williamson was transported to the Riviera Beach Police Department for processing, and later to the Palm Beach County Jail for booking purposes.

SCANNED
FEB 14 2021

SWORN AND SUBSCRIBED BEFORE ME		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER	
<u>DODSON, MICHAEL W</u> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 17.10)		<u>TOPPING, CHRISTOPHER MICHAEL</u> NAME OF OFFICER (PLEASE PRINT)	
<u>02/12/2021</u> DATE		<u>02/12/2021</u> DATE	
			PAGE 1 OF 1



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"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2021003708	Date: 2/13/2021	SCANNED FEB 14 2021
	Specialist Name/ID: J. Beck/9007	