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ADMINISTRATION AGENCY ORI Number FLO 5 0 2 6 0 0 Change 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 Location of Arrest (Including Name of Business) 2525 PGA BLVD (BANK OF AMERICA) Date of Arrest 06.15.21 Time of Arrest 03.18 Booking Date Booking Time Jail Date Jail Time Location of Vehicle 2525 PGA BLVD (BANK OF AMERICA)		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		Juvenile <input checked="" type="checkbox"/>	
		Agency Name PALM BEACH GARDENS POLICE DEPT.		Agency Report Number (N.T.A.'s only) 7 8 12 110.0.2.5.9.7(1)		If Weapon Seized Enter Type		Multiple Clearance Indicator	
DEFENDANT Name (Last, First Middle) ICKES, KATHLEEN J Race W - White B - Black I - American Indian O - Oriental Sex F Date of Birth 03.14.85 Height 5'5 Weight 140 Eye Color HZL Hair Color BLONDE Complexion LIGHT Build SMALL Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) SUN TATTOO - RIGHT SHOULDER Local Address (Street, Apt. Number) 4844 ARTHUR PALM BEACH GARDENS FL 33418 Permanent Address (Street Number) 4844 ARTHUR PALM BEACH GARDENS FL 33418 Business Address (Name Street) (City) (State) (Zip) Phone 562 267-5552 Address Source VERBAL Occupation BARTENDER D/L Number, State I-220-510-85-594-0 Soc. Sec. Number [REDACTED] INS Number [REDACTED] Place of Birth LANSING MI Citizenship US		Alias (Name, DOB, Soc. Sec. #, Etc.)							
		Marital Status SINGLE Religion JNK Indication of Alcohol Influence Drug Influence Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Link <input type="checkbox"/>		Residence Type: 1. City 2. County 3. Florida 4. Out of State 1					
CO-DEF Co-Defendant Name (Last, First, Middle) [REDACTED] Race Sex Date of Birth [REDACTED] Co-Defendant Name (Last, First, Middle) [REDACTED] Race Sex Date of Birth [REDACTED]		1. Arrested 2. At Large 3. Felony 4. Misdemeanor 5. Juvenile		1. Arrested 2. At Large 3. Felony 4. Misdemeanor 5. Juvenile					
		Parent Name (Last) (First) (Middle) Legal Custodian Other: Address (Street), Apt. Number 11000 (City) (State) (Zip) Residence Phone Business Phone							
JUVENILE Notified by: (Name) Date Time Released to: Relationship The above address was provided by <input type="checkbox"/> defendant and / or defendant's parent. The child and / or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No (Reason) Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No Description of Property Value of Property		School Attended Grade		2. TOT DCF 3. Incarcerated					
		Drug Activity S. Sell N/A P. Possess T. Traffic R. Smuggle B. Buy E. Use K. Dispense/ Distribute M. Manufacturer Produce/ Cultivate Z. Other Drug Type N/A A. Amphetamine B. Barbiturate C. Cocaine F. Heroin H. Hallucinogen M. Marijuana O. Opium/deriv. P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other							
CHARGE Charge Description POSS. CONTROLLED SUBSTANCE (Cocaine) Drug Activity P Drug Type Z Amount / Unit Offense # Counts Domestic Violence Y <input type="checkbox"/> N <input type="checkbox"/>		Statute Violation Number 893113 Warrant / Capias Number 116A		Violation of ORD#					
		Bond							
CHARGE Charge Description Drug Activity Drug Type Amount / Unit Offense # Counts Domestic Violence Y <input type="checkbox"/> N <input type="checkbox"/>		Statute Violation Number Warrant / Capias Number		Violation of ORD# Bond					
		Bond							
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		Bond							
NOTICE TO APPEAR <input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court <input type="checkbox"/> Instruction No. 2 You need not appear in Court but must comply with instructions on the Reverse side Location (Court, Room Number, Address) Court Date and Time Month Day Year I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED TO BY ME OR TO PAY THE FINE SUBSCRIBED TO BY MY PARENT OR GUARDIAN. IF I 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. Signature of Defendant (or Juvenile and Parent / Custodian) Date Signed		<div style="border: 2px solid black; padding: 5px; text-align: center;"> FILED JUN 15 2021 CIRCUIT & COUNTY COURTS ORANGE COUNTY, FLORIDA CRIMINAL DIV. </div>							
		Name Verification (Printed by Arrestee) (Print) SCANNED WITNESS here if signed with an "X"							
ADMIN HOLD for other Agency Name: <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other: Intake Deputy Dorey 6820 I.D. # Pouch #		Signature of Arresting Officer James Lovett 523 Name of Arresting Officer (Print) James Lovett 523 Transporting Officer James Lovett 523 I.D. # Agency PBGPD		Name Verification (Printed by Arrestee) (Print) SCANNED WITNESS here if signed with an "X"					
		Signature of Arresting Officer James Lovett 523 Name of Arresting Officer (Print) James Lovett 523 Transporting Officer James Lovett 523 I.D. # Agency PBGPD		Name Verification (Printed by Arrestee) (Print) SCANNED WITNESS here if signed with an "X"					

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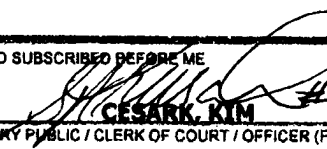
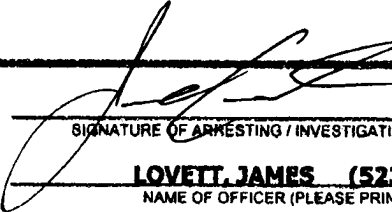
WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - JAIL

JUN 15 2021

OBT Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE	
A D M I N I S T R A T I V E	Agency ORI Number FL 0502600		Agency Name Palm Beach Gardens Police Department		Agency Report Number 7 8 21-002597					
	Charge Type: <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:				
D E F	Name (Last, First, Middle) ICKES, KATHLEEN JEANNE					Race W		Sex F		Date of Birth 03/14/1985
	Alias									
C H A R G E S	Charge Description 893.13(6)(A) DRUGS - CONTROLLED SUBST W/O PRESCRIPTION					Charge Description				
	Charge Description					Charge Description				
V I C T I M	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		
<p>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.</p> <p>The Person taken into custody ...</p> <p><input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> confessed to _____</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>15</u> day of <u>June</u>, <u>2021</u> at <u>04:10</u> (Specifically include facts constituting cause for arrest)</p> <p>On June 15th, 2021, at approximately 2:50 a.m. I initiated a traffic stop on a silver Ford SUV bearing FL tag LWHX07 at 2525 PGA Blvd. (Bank of America) in the City of Palm Beach Gardens, Palm Beach County, FL. Prior to the traffic stop I observed the vehicle violate a traffic control device (Department of Transportation sign designating no turns) and make an illegal left turn out of PGA Plaza into the northbound lanes of Prosperity Farms Blvd.</p> <p>I made contact with the driver and sole occupant of the vehicle Kathleen Ickes, who verbally identified herself. Ickes verbally identified herself because she stated she did not have any identification on her. A records check of Ickes revealed that she was driving with a suspended license. While I was conducting the records check, Ofc. Anthony Luciano observed Ickes conceal her identification card in the center console. I then approached the vehicle again and asked Ickes if there was any narcotics in the car. Ickes responded no and that I could search the vehicle. I confirmed Ickes' consent by asking her if it was okay if I searched the vehicle and she agreed. While conducting the search, Ofc. Thomas Gorman located a small clear bag containing a white powdery substance in between the passenger seat and the passenger door on the floor. Based on my training and experience I identified this as narcotics, possibly cocaine or fentanyl. Field testing was attempted on the white powdery substance, but the results were inconclusive. It is noted that all of Ickes' belongings were on the passenger seat, and she moved the belongings several times during the stop.</p> <p>Kathleen Ickes was placed under arrest and charged with possession of a controlled substance pursuant to F.S.S. 893.13(6)(A). Ickes was transported to the Palm Beach County Jail without incident. There is nothing further to report from this officer. My body-worn camera was utilized throughout this event.</p>										
A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME					SIGNATURE OF ARRESTING / INVESTIGATING OFFICER				
	 CESARI, KIM NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)					 LOVETT, JAMES (523) NAME OF OFFICER (PLEASE PRINT)				
	<u>06/15/2021</u> DATE					<u>06/15/2021</u> DATE				
						<div style="text-align: right;"> PAGE 1 OF 1 </div>				

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

 SCANNED
 JUN 15 2021



**PALM BEACH COUNTY
SHERIFF'S OFFICE**
Florida State Statute Exemption Sheet

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(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: 2021014539	Date: 6/15/2021
	Specialist Name/ID: M. Tooks #8557

SCANNED
JUN 15 2021