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2020mm02980AMB

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

1

Juvenile

ADMINISTRATIVE	OBTS Number		Agency ORI Number FLO 505000		Agency Name LAKE CLARKE SHORES POLICE DEPARTMENT		Agency Report Number 5.8 2.0 2.0 0.7 3.2 1	
	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		Weapon Seized / Type 1. Yes 2. No		Multiple Clearance Indicator			
	Location of Arrest (Including Name of Business) 7531 Edgewater Cir, Lake Clarke Shores, FL 33406				Location of Offense (Business Name, Address) same			
DEFENDANT	Date of arrest 040620		Time of Arrest 1530		Booking Date		Booking Time	
	Name (Last, First, Middle) Peterson, Kelly M		Alias (Name, DOB, Soc. Sac #, Etc)					
	Race W - White I - American Indian B - Black O - Oriental/Asian W		Sex F		Date of Birth 10/05/92		Height 5'2	
	Weight 130		Eye Color blue		Hair Color Brown		Complexion Fair	
	Build ave		Marital Status single		Religion		Indication of Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>	
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) Both arms, neck, wrist							
	Local Address (Street, Apt. Number) 7531 Edgewater Cir		(City) (State) (zip) Lake Clarke Shores FL 33406		Phone (561) 907-2470		Residence Type 1. City 2. County 3. Florida 4. Out of State	
	Permanent Address (Street, Apt. Number)		(City) (State) (zip)		Phone		Address Source	
	Business Address (Name, Street)		(City) (State) (zip)		Phone		Occupation	
	D/L Number, State		Soc. Sec. Number		INS Number		Place of Birth Stonehm, MA	
CO-DEF	Co-Defendant Name (Last, First, Middle)			Race		Sex		
	Co-Defendant Name (Last, First, Middle)			Race		Sex		
JUVENILE	- Parent Legal Custodian Name (Last) (First) (Middle)			Residence Phone				
	Address (Street, Apt Number) (City) (State) (zip)			Business Phone				
	Notified by: (Name)			Date		Time		
	Released To: (Name)			Relationship		Date		
	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 820-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)			School Attended		Grade		
CHARGE	Drug Activity		S. Sell N. N/A P. Possess		R. Smuggle D. Deliver T. Traffic		K. Dispense/ 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 Prescription Drugs	
	Counts 1		<input checked="" type="checkbox"/> FSS <input type="checkbox"/> ORD		Statute Violation Number 499 03		Violation of ORD #	
	Drug Type Zoloft		Amount / Unit 1 pill		Offense #		Warrant / Capias Number	
CHARGE	Charge Description Possession of Paraphernalia		Counts 1		<input checked="" type="checkbox"/> FSS <input type="checkbox"/> ORD		Statute Violation Number 893 147	
	Drug Activity		Drug Type		Amount / Unit		Offense #	
	Charge Description		Counts		<input type="checkbox"/> FSS <input type="checkbox"/> ORD		Statute Violation Number	
	Drug Activity		Drug Type		Amount / Unit		Offense #	
	Charge Description		Counts		<input type="checkbox"/> FSS <input type="checkbox"/> ORD		Statute Violation Number	
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 Reverse Side.		Location (Court, Room Number, Address) 3227 Gun G 1013 RD W-P.B. P.C. 33415					
	Court Date and Time Month June Day 30 Year 2020 Time 830 <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M.		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 A - REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED					
ADMIN	Signature of Defendant (or Juvenile and Parent/ Custodian)			Date Signed				
	Name: X			Signature of Arresting Officer		Name Verification (Printed by Arrestee) APR 07 2020		
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:			Name of Arresting Officer (Print) Cpl. Loiacono		ID # 325		
	Take Deputy Pouch #			Transporting Officer I.D. # Ofc. Dominguez 326		Agency # 58		

APR 07 2020

DISCO 47370

PROBABLE CAUSE AFFIDAVIT

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

FL0505000	LAKE CLARKE SHORES POLICE DEPARTMENT	1	Juvenile
Case No. 58 - 202000732			
Charge Type <input type="checkbox"/> Felony <input checked="" type="checkbox"/> Misdemeanor <input type="checkbox"/> Ordinance	<input type="checkbox"/> Traffic Felony <input checked="" type="checkbox"/> Traffic Misdemeanor <input type="checkbox"/> Other	Special Notes:	
Name Last First MI: Peterson Kelly M	Alias: Alias	Race: W	Sex: F
Birth Date: 10/05/92			
Charge: Possession of Paraphernalia FSS 893.147(1)B		Charge: Possession of Perscription Drugs FSS 499.03(1)3	
Victim's Name Last First MI: State of Florida		Race:	Sex:
Birth Date:			
Local Address	City	State	Zip
Phone	Address Source		
Business Address	City	State	Zip
Phone	Address Source		
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....			
<input checked="" 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	
<input checked="" type="checkbox"/> confessed to <u>Cpl Loiacono and Officer Cruz</u> admitting to the below facts		<input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my described investigation.	
On the <u>6</u> day of <u>April</u> 200 <u>20</u> @ <u>1530</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)			

On the above date and time, Joseph Boccherg (complainant) responded to the police station regarding a disturbance between him and two of his roommates Devin Donaldson and Kelly Peterson. During the interview we noticed the complainant had visible injuries to his hand stating he was pushed upon Donaldson slamming a door on his fingers. He was bleeding profusely from his left ring finger and pinky finger. His pinky nail appeared ripped off. He informed Officer Cruz and me the following verbally: He stated the argument was in reference to Devin Donaldson and Kelly Peterson not paying rent and taking a small refrigerator from him without permission. During this argument he stated Donaldson pushed him out of the doorway of the room rented to Donaldson and Peterson and slammed the door on his fingers. Boccherg also stated that during the argument Donaldson threatened to put him in the ground. Boccherg stated he interpreted this as a threat to kill him and now he is scared to return home as he is in fear for his life. We responded to 7531 Edgewater Drive and announced ourselves as police officers yelling Lake Clarke Shores Police but no one cooperated. We were granted permission to enter the main house by Boccherg. After yelling several times we knocked on the door of the room rented to Devin Donaldson and Kelly Peterson. It was clear they were delaying and avoiding us. They finally decided to exit their locked room and speak to us. Per our training and experience their delay is consistent with hiding criminal activity from the police. We explained to them the complaint. Their statements concurred with Boccherg's statements with the exception of Boccherg denying pushing or threatening Boccherg. However he did say the door accidentally was closed on Boccherg's fingers. They stated Boccherg could have his refrigerator back and apologized. During our investigation we asked for consent to search for weapons and drugs from Devin Donaldson and Kelly Peterson, they granted us permission several times. During our search we located 5 pills of Suboxone which was on top of a dresser inside a plastic coffee container with no lid. Inside this plastic container was nothing else except a medical insurance card. A further search of a small trash can on the south end of the room to the left of the bed revealed an empty baggy used to store heroin, a burned spoon also used for heroin and a pill container with no labeling consisting of one single pill of Zoloft. To the right of the bed which is the Northside we located a large black garbage bag containing 12 used syringes, 2 burnt spoons and 7 clear baggies. Miranda warning was explained to both suspects, they stated they understood and signed the rear of the cards acknowledging so. Donaldson stated he illegally purchased the Suboxone from a coworker only known as Tom. He stated he bought 8 pills for \$80 and used about 3. He further stated the syringes were used to inject himself and Peterson with heroin. He specifically stated the syringes were in a large black garbage bag in his room next to his bed. He stated he injected himself in the neck this morning and Peterson in the arm this morning. Donaldson had a fresh track mark on his neck. We then spoke to Peterson who stated she bought the syringes from 1800 Forest Hill Blvd Pharmacy of Americas. She further stated she injected herself yesterday. In her presence I emptied the large garbage bag and showed her the items 12 used syringes, 2 burnt spoons and 7 clear baggies she stated these items are used for her and Donaldson to inject themselves with Heroin. I showed her the orange pill bottle with the capsule and she stated it was her Zoloft. She claimed to have been prescribed Zoloft and Suboxone in the past but she did not present us with a prescription or labeled prescription bottle. Both subjects referenced an incident where I responded that occurred about 2 years ago where Peterson overdosed and almost died. Peterson stated she started using again about two months. They also stated another roommate uses crack cocaine on a regular basis. Based on the above facts, admissions, evidence and investigation we found probable cause to arrest the suspects as follows: Donaldson per FSS 893.147(1)B possession of paraphernalia and FSS 893.13(6)A Possession of schedule III. Peterson was arrested per FSS 893.147(1)B possession of paraphernalia and per FSS 499.03(1)3 Possession of schedule III.

<p>SWORN AND SUBSCRIBED BEFORE ME</p> <p><u>[Signature]</u> NOTARY PUBLIC / CLERK OF COURTS / POLICE OFFICER</p> <p><u>04/06/2020</u> DATE</p>	<p><u>[Signature]</u> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p><u>Loiacono 375</u> NAME OF OFFICER (PLEASE PRINT)</p> <p><u>4-6-20</u> DATE</p>
Copies to: Court Copy - State Attorney - Agency - Agency	
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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(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: 2020010027	Date: 04/06/20
	Specialist Name/ID: J. Beck/9007