

# ARREST / NOTICE TO APPEAR

Umm 5435

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

1

JUVENILE

OBTS Number	Agency ORI Number <b>0500400</b>		Agency Name <b>Delray Beach Police Department</b>		Agency Report Number (N.T.A.'s only) <b>4 0 21-008886</b>	
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		Multiple Clearance Indicator <b>2</b>	
Location of Arrest (Including Name of Business) <b>35 SE 6TH AVE DELRAY BEACH FL</b>			Location of Offense (Business Name, Address) <b>35 SE 6TH AVE, DELRAY BEACH, FL 33483</b>			
Date of Arrest <b>07/24/2021</b>	Time of Arrest <b>02:07</b>	Booking Date <b>07/24/2021</b>	Booking Time <b>02:17</b>	Jail Date <b>// : :</b>	Jail Time	
Name (Last, First, Middle) <b>ZAKHEIM, LAURA CLAIRE</b>			Alias (Name, DOB, Soc. Sec. #, Etc.) Alias:			
Race W - White B - Black O - Oriental/Asian <b>W</b>	Sex <b>F</b>	Date of Birth <b>05/18/1991</b>	Height <b>4'11</b>	Weight <b>115</b>	Eye Color <b>BLUE</b>	
Hair Color <b>BROWN</b>		Complexion <b>MEDIUM</b>	Build <b>SMALL</b>			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)			Marital Status <b>U</b>	Religion <b>NOT INDICA</b>	Indication of: Alcohol Influence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/> Drug Influence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>	
Local Address (Street, Apt. Number) <b>14861 ENCLAVE PRESERVE CIR C4, DELRAY BEACH, FL 33484</b>			Phone <b>(954) 594-2936</b>			
Permanent Address (Street, Apt. Number) <b>14861 ENCLAVE PRESERVE CIR C4, DELRAY BEACH, FL 33484</b>			Phone <b>(954) 594-2936</b>			
Business Address (Name, Street) <b>14861 ENCLAVE PRESERVE CIR C4, DELRAY BEACH, FL 33484</b>			Occupation <b>FL DL</b>			
D/L Number, State <b>Z250523916780 / FL</b>		Soc. Sec. Number <b>[REDACTED]</b>	INS Number		Place of Birth (City, State) <b>NEW YORK, NY, United US</b>	
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	
Parent: <input type="checkbox"/> Legal Custodian		Name (Last, First, Middle)			Residence Phone	
Address (Street, Apt. Number)		(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 N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Disperses/ 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 <b>ASSAULT/BATTERY ON OFFICER, FIREFIGHTER, EMT, ETC.</b>			Statute Violation Number <b>784.07(2A)</b>		Violation of ORD #	
Drug Activity	Drug Type <b>N</b>	Amount / Unit <b>/</b>	Offense # <b>21-008886</b>	Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
			Warrant / Capias Number		Bond	
Charge Description <b>RESIST/OBSTRUCT OFFICER W/O VIOLENCE</b>			Statute Violation Number <b>843.02</b>		Violation of ORD #	
Drug Activity	Drug Type <b>N</b>	Amount / Unit <b>/</b>	Offense # <b>21-008886</b>	Counts <b>2</b>	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 checked="" 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"/> Delirium <input type="checkbox"/> Injuries			
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health			PROPERTY - Received By			
Transported By			Date Transported <b>// : :</b>	Time Transported	Other	
<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.			Location (Court, Room) <b>South County 200 W Atlantic Ave Delray Beach, FL 33444</b> Court Date and Time <b>8/19/21 0830</b>			
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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.			No Photo Available			
Signature of Defendant (or Juvenile and Parent/Custodian)			Date Signed			
HOLD for Other Agency			Signature of Arresting Officer <b>[Signature]</b>		Name Verification (Printed by Arresting Officer)	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other			Name of Arresting Officer (Print) <b>PAGE, KAYLEE J</b>		I.D. # <b>1109</b>	
Int. Deputy <b>Cpl HONNEAL 7206</b>			Transporting Officer <b>PAGE</b>		I.D. # <b>1109</b>	
			Agency <b>DBPD</b>		Witness here if subject signed with	

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P.T.O. ☐ DEFENDANT

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OBT Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 NTA		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 <b>FL 0500400</b>	Agency Name <b>DELRAY BEACH POLICE DEPARTMENT</b>	Agency Report Number <b>4   0   21-008886</b>						
	Charge Type Check as many as apply. <div style="display: flex; justify-content: space-between; font-size: small;"> <div><input type="checkbox"/> 1. Felony</div> <div><input checked="" type="checkbox"/> 3. Misdemeanor</div> <div><input type="checkbox"/> 5. Ordinance</div> </div> <div style="display: flex; justify-content: space-between; font-size: small;"> <div><input type="checkbox"/> 2. Traffic Felony</div> <div><input type="checkbox"/> 4. Traffic Misdemeanor</div> <div><input type="checkbox"/> 6. Other</div> </div>		Special Notes:						
	Name (Last, First, Middle) <b>ZAKHEIM, LAURA CLAIRE</b>					Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>05/18/1991</b>	
	Charge Description <b>843.02 RESIST/OBSTRUCT OFFICER W/O VIOLENCE</b>		Charge Description <b>784.07(2A) ASSAULT/BATTERY ON OFFICER, FIREFIGHTER</b>						
	Victim's Name (Last, First, Middle) <b>State Of Florida</b>		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> <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> committed the below acts in my presence.  <input type="checkbox"/> confessed to _____              admitting to the below facts.         </div> <div> <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.  <input type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.         </div> </div> <p>On the <b>24</b> day of <b>July</b>, <b>2021</b> at <b>02:07</b> (Specifically include facts constituting cause for arrest.)</p> <p>The following incident occurred in the City of Delray Beach, Palm Beach County, Florida              On 07/24/2021 at 0141 hours, officers were dispatched to 640 E Atlantic Ave in reference to a black Kia FL TAG: LATQ90 backing into a chain that was enclosing the parking lot of 35 SE 6th Ave Delray Beach. Upon arrival, I observed the Kia (FL TAG: LATQ90) with rear end damage. The sole occupant of the vehicle was Laura Zakheim (DOB 05/18/1991). I explained to Zakheim the reason that officers responded to the area. I asked her for her license, registration, and insurance. She continued to ignore my requests and eventually provided her FL Drivers License (Z250523916780). I asked her numerous times to get out of the vehicle so I could conduct a Driving Under the Influence investigation. I once again expressed that this was the last time I would ask her to get out of her vehicle at her own will, she refused and stated that she wouldn't talk to officers and was uncooperative. Officer Morales, Officer Ferreiro, and I got Zakheim out of the vehicle where she actively resisted the entire time by pulling away and tensing up. Zakheim was placed in handcuffs then placed into the back of my patrol vehicle. I transported her to the Delray Beach Police Department.</p> <p>While in the back of my patrol vehicle, Zakheim removed her handcuffs and got free. Officer Morales opened the door to remove Zakheim from the vehicle to place the handcuffs back on her. At this time, Zakheim brought one of her knees to her chest as in a motion as if she was going to kick Officer Morales. She continued to tense up and not allow officers to place the handcuffs on without a struggle.</p> <p>Based on the stated facts, Probable Cause exist to charge the defendant Laura Zakheim with two counts of Resisting officers without violence in accordance to FSS 843.02 and one count of assault on Law Enforcement Officer FSS 784.07(2A).</p>									
	SWORN AND SUBSCRIBED BEFORE ME <div style="text-align: center;">   <b>LEON, OSCAR</b>  <small>NOTARY PUBLIC / CLERK OF COURT / OFFICER FSS 117.0)</small>  <b>07/24/2021</b>  <small>DATE</small> </div>		<div style="text-align: center;">   <small>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</small>  <b>PAGE, KAYLEE J (1109)</b>  <small>NAME OF OFFICER (PLEASE PRINT)</small>  <b>07/24/2021</b>  <small>DATE</small> </div>						



**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)
<b>L/E Exemptions</b>	<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.	
<b>Public Info. Exemptions</b>	<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.	
<b>Florida Rules of Judicial Administration 2.420 (Rule of 23)</b>	<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"/>			
<b>Other</b>	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

**REVIEW COMPLETED BY**

<b>Booking Number:</b> 2021018348	<b>Date:</b> 7/25/2021
	<b>Specialist Name/ID:</b> T Howard/7185