

J# 0517288

JOCF5575

3153

| | | | | | | | | | | | | | | | | | | | | | |
|--|--|---|--|---|--|--|--|---|--|---|--|--|--|---|--|---|--|--|--|----------------------------------|--|
| OBTS Number | | ARREST / NOTICE TO APPEAR Juvenile Referral Report | | 1. Arrest 2. N.T.A. | | 3. Request for Warrant 4. Request for Capias | | 1 | | Juvenile | | N | | | | | | | | | |
| Agency ORI Number FL0 5 0 0 6 0 0 | | Agency Name PALM BEACH POLICE DEPARTMENT | | | | Agency Report Number (N.T.A.'s only) 7, 6 1 2, 0 1 0, 0 0, 7, 6 4 1 1 1 1 | | | | | | | | | | | | | | | |
| Charge Type: Check as many as apply. | | <input checked="" 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 Enter Type | | Multiple Clearance Indicator 1 1 1 1 | | | | | | | | | | | |
| Location of Arrest (Including Name of Business) ROYAL PALM WAY/S OCEAN BLVD, PALM BEACH, FL, 33490 | | | | | | Location of Offense (Business Name, Address) ROYAL PALM WAY/S OCEAN BLVD PALM BEACH FL, 33490 | | | | | | | | | | | | | | | |
| Date of arrest 0.7.04.20 | | Time of Arrest 0.0.5.11 | | Booking Date | | Booking Time | | Jail Date | | Jail Time | | Location of Vehicle | | | | | | | | | |
| Name (Last, First, Middle) PRICE, LISA LYNN | | | | | | | | | | Alias (Name, DOB, Soc. Sec. #, Etc.) | | | | | | | | | | | |
| Race W - White B - Black | | I - American Indian O - Oriental | | Sex M F | | Date of Birth 0.8.01.70 | | Height 5'5" | | Weight 130 | | Eye Color BRN | | Hair Color BLOND | | Complexion GGT | | Build SMAX | | | |
| Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) ROSE LEFT HIP | | | | | | | | | | Marital Status D | | Religion CATH | | Indication of: Alcohol Influence Drug Influence | | Y <input type="checkbox"/> | | N <input type="checkbox"/> | | Unk. <input type="checkbox"/> | |
| Local Address (Street, Apt. Number) 300 E ROYAL PALM WAY APT 31A, POMPANO BEACH FL 33432 | | | | | | (City) | | (State) | | (Zip) | | Phone (561) 854 2154 | | Residence Type: 1. City 2. County 3. Florida 4. Out of State 5 | | | | | | | |
| Permanent Address (Street, Apt. Number) | | | | | | (City) | | (State) | | (Zip) | | Phone | | Address Source JGCBAC | | | | | | | |
| Business Address (Name, Street) | | | | | | (City) | | (State) | | (Zip) | | Phone | | Occupation | | | | | | | |
| D/L Number, State P7 3884767359 702/NJ | | | | Soc. Sec. Number | | | | INS Number | | | | Place of Birth (City, State) PASSAIC, NJ | | 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 | | | | | | | |
| Parent Legal Custodian Other: Name (Last) (First) (Middle) | | | | | | Address (Street, Apt. Number) (City) (State) (Zip) | | | | | | Residence Phone () () () Business Phone () () () | | | | | | | | | |
| Notified by: (Name) | | | | | | Date | | Time | | Juvenile Disposition 1. Handled/Processed within Dept. and Released 2. TOT DCF 3. Incarcerated | | | | 1 | | | | | | | |
| Released To: (Name) | | | | | | Relationship | | | | | | Date | | Time | | | | | | | |
| The above address was provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> 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) | | | | | | | | | | School Attended | | | | Grade | | | | | | | |
| Property Crime? <input type="checkbox"/> Yes <input 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. Dispense/ Distribute | | M. Manufacture/ Produce/ Cultivate | | Z. Other | | Drug Type N. 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 Description POSS. SCHEDULE II w/o (OXYCODONE) | | | | Counts 1 | | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | | Statute Violation Number 8, 9, 3, 1, 1, 3, 1, 1, 6, a, 1 | | | | Violation of ORD # | | | | | | | | | |
| Drug Activity P | | Drug Type 2 | | Amount / Unit 1 DU | | Offense # 20-000764 | | Warrant / Capias Number | | | | Bond 1,000 | | | | | | | | | |
| Charge Description POSS. SCHEDULE II w/o (HYDROCODONE) | | | | Counts 1 | | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | | Statute Violation Number 8, 9, 3, 1, 1, 3, 1, 1, 6, a, 1 | | | | Violation of ORD # | | | | | | | | | |
| Drug Activity P | | Drug Type 2 | | Amount / Unit 13 DU | | Offense # 20-000764 | | Warrant / Capias Number | | | | Bond 1,000 | | | | | | | | | |
| Charge Description POSS. MARIJUANA < 20 | | | | Counts 1 | | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | | Statute Violation Number 8, 9, 3, 1, 1, 3, 1, 1, 6, b, 1 | | | | Violation of ORD # | | | | | | | | | |
| Drug Activity P | | Drug Type M | | Amount / Unit | | Offense # 20-000764 | | Warrant / Capias Number | | | | Bond 500 | | | | | | | | | |
| Charge Description | | | | Counts | | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | | Statute Violation Number | | | | Violation of ORD # | | | | | | | | | |
| Drug Activity | | Drug Type | | Amount / Unit | | Offense # | | Warrant / Capias Number | | | | Bond | | | | | | | | | |
| Instruction No. 1 Mandatory Appearance in Court | | | | | | Location (Court, Room Number, Address) | | | | | | | | | | | | | | | |
| Instruction No. 2 You need not appear in Court but must comply with instructions on Reverse Side. | | | | | | Court Date and Time Month Day Year Time A.M. 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 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. | | | | | | | | | | | | SCANNED | | | | | | | | | |
| Signature of Defendant (or Juvenile and Parent / Custodian) | | | | | | | | | | Date Signed JUL 4 2020 | | | | | | | | | | | |
| HOLD for other Agency Name: | | | | | | Signature of Arresting Officer X [Signature] | | | | | | Name of Arresting Officer (Print) JUL 4 AM 3:43 | | | | | | | | | |
| <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal | | | | | | <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other | | | | | | Name of Arresting Officer (Print) ARDON I.D.# 0068 | | | | | | | | | |
| Intake Deputy [Signature] | | I.D.# | | Pouch # | | Transporting Officer ARDON I.D.# 0068 | | Agency PBP2 | | Witness here if subject signed with an "X" | | | | | | | | | | | |

ARDON 0068

Probable Cause Affidavit
Palm Beach Police Department
Agency ORI# FLO 500600

| | |
|--|--------------------------------|
| Defendant: Lisa Lynn Price | Police Case # 20-000764 |
| Race/Sex: W/F | DOB: 08/01/1970 |
| Charges: 2 counts of Possession of Schedule II Drug W/O Pursuant to F.S.S. 893.13(6)(a) Possession of Marijuana Under 20 Grams Pursuant to F.S.S. 893.13(6)(b) | |

On 07/04/2020 at approximately 0001 hours, I observed a black Chevrolet bearing FL tag BWCD68 traveling eastbound in the 100 block of Royal Palm Way. The vehicle then stopped at the stop sign located at Royal Palm Way and S Ocean Blvd and not move for approximately 30 seconds. It should be noted at this time there is also a curfew between the hours of 2200 to 0600 hours. I then conducted a traffic stop on the vehicle due to these infractions. Upon speaking with the driver identified via NJ DL Lisa L Price W/F DOB 8/1/70 I advised her of these infractions, which she stated she was lost. I then asked Price if she could provide me her identification, at which point she opened her beige wallet to provide it.

Upon Price opening her wallet her hands began to shake and her eyes widen as if she was nervous. As she was looking in her wallet that she pulled her ID out of, I observed a clear zip lock bag containing yellow pills, which I knew immediately to be Oxycodone. When Price was asked what was in the zip lock bag she ripped the bottom of the bag and yanked it out of her wallet, at this point the pills fell out throughout the car.

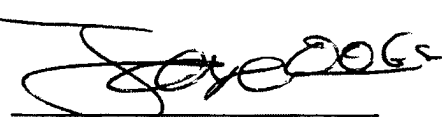
Price was then asked out of the vehicle and asked if she had anything illegal in the vehicle, which she stated "no". I then asked if she would consent to a vehicle search, which she stated she would. A search of the vehicle was conducted and 13 tablets of Acetaminophen and Oxycodone Hydrochloride, one tablet of Oxycodone, and a small amount of marijuana was found inside the vehicle. All the above pill names and dosage were confirmed by poison control operator Frank (Case Number of M3629985).

Price was then read her Miranda Warnings from a pre-printed card provided to me by the Palm Beach Police Department. Post Miranda Price admitted the pills in the bag was hers that she uses for pain. Price stated the pills were "old". Price advised she had the pills packaged the way due to her being a woman and being alone. Price advised the marijuana was from a friend and that she did not have a medical marijuana card.

The foregoing instrument was sworn to or affirmed
Before me this 4th day of July, 2020
By, Officer Tony Ardon ID 110068,
Who is personally known to me


Signature of Police Officer (F.S.S.117.10)

State of Florida
County of Palm Beach

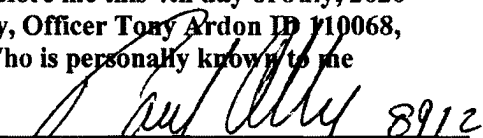

Signature/Arresting Officer

Date: 07/4/2020
JUL - 4 2020

Based on the above facts there is probable cause to arrest Lisa Lynn Price W/F DOB 08/01/1970 with Possession of Schedule II Drug W/O Prescription Pursuant to F.S.S. 893.13(6)(a) 2 counts, Possession of Marijuana Under 20 Grams Pursuant to F.S.S. 893.13(6)(b).

NOT A CERTIFIED COPY

The foregoing instrument was sworn to or affirmed
Before me this 4th day of July, 2020
By, Officer Tony Ardon ID #10068,
Who is personally known to me


Signature of Police Officer (F.S.S.117.10)

State of Florida
County of Palm Beach


Signature/Arresting Officer

Date: 07/4/2020 JUL - 4 2020



**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: 2020016169 | Date: 7/4/2020 |
| | Specialist Name/ID: Gammage/5660 |

SCANNED
JUL - 4 2020