

CRIMINAL REPORT AFFIDAVIT / NOTICE TO APPEAR

GRID # _____

COURT CASE/ J.F. ID # 19CF015776 SAO # _____ OBTS # _____
AGENCY REPORT # 19-30 AGENCY NAME DIFS ORI # FL0371700
LOCATION OF OFFENSE HILLSBOROUGH County DATE OF OFFENSE 10-19-18 TIME OF OFFENSE _____
WITHIN:
TAMPA ☐ PLANT CITY ☐ TEMPLE TERRACE ☐ UNINCORPORATED AREA ☐ SUPPLEMENTAL CRA ATTACHED ☐
COURT:
TAMPA COURT ☐ PLANT CITY CT ☐
LOCATION OF ARREST 4906 SYDNEY Rd, TAMPA, FL DATE OF ARREST 11-20-19 TIME OF ARREST 0812
BOOKING # 2019-38991 SOID # _____ WEAPON TYPE _____ WEAPON SEIZED Yes ☐ No ☐

ARREST
☐ Probable Cause ☒ Adult
☐ Capias ☐ Juvenile
☐ Fugitive Warrant ☐ Delinquency
☐ VOP/VOCC ☐ Dependency
☒ Warrant ☒ Felony
☐ Juvenile Pickup ☐ Misdemeanor
☐ Traffic MISD
☐ Traffic FEL
☐ Ordinance
☐ Pickup
☐ Other
REQUEST FOR:
☐ Direct File/SAO Review
☐ Warrant
☐ Summons
☐ Juvenile Pickup
NOTICE TO APPEAR:
☐ Arresting officer
☐ Booking supervising officer

NAME BOZEMAN SHALEENA SIERRA ALIAS _____
RACE: Last First Middle
W-White ☒ A-American Indian/Alaskan Native ☐ HW-Hispanic White ☐ HB-Hispanic Black ☐ B-Black ☐ O-Oriental/Asian ☐
Race W SEX F D.O.B. 09 04 1985 MO / DAY / YEAR APPROXIMATE AGE 34
COMPLEXION FAIR BUILD Med
HEIGHT 4-09 WEIGHT 130
COLOR: EYES BLU HAIR BLU
LOCAL ADDRESS (Street, Apt. #, City, State, Zip) 4906 SYDNEY Rd. TAMPA, FL 33566 Ph #: 813-863-3213
Permanent Address (Street, Apt. #, City, State, Zip) 4906 SYDNEY Rd. TAMPA, FL 33566 Ph #: 813-863-3213
Business Address (Street, Apt. #, City, State, Zip) _____ Ph #: _____
Driver's License No. B255-797-85-824-0 State FL SS # _____ PLACE OF BIRTH OHIO DOC # _____
Gang Member: Yes ☐ No ☒ Gang Name _____
SCARS, MARKS, TATOOS, _____
UNIQUE FEATURES (Loc., Type, Desc.) _____
IF JUVENILE:
School Name _____
Mother/Guardian _____ Address _____
Father/Guardian _____ Address _____
Released To: JAC ☐ Parent ☐ Guardian ☐ Other Relationship ☐ _____

Co-Defendant (Last, First, Middle) _____ Sex: _____ Race: _____ DOB: _____
Arrested ☐ At Large ☐ Capias/Warrant Requested ☐ Felony ☐ Misdemeanor ☐ Juvenile ☐
Co-Defendant (Last, First, Middle) _____ Sex: _____ Race: _____ DOB: _____
Arrested ☐ At Large ☐ Capias/Warrant Requested ☐ Felony ☐ Misdemeanor ☐ Juvenile ☐

STATUTE (subsec.) / ORD #	DV	CP	CHARGE STATUS	BOND SET	CHARGE	TRAFFIC CITATION #	DRUG ACT/TYPE
<u>817.234(1)(A)</u>	☒	☒	<u>3F</u>	<u>2,000</u>	<u>FRAUDULENT INSURANCE APPLICATION < \$20,000</u>		

CHARGE STATUS: F-Felony M-Misdemeanor T-Traffic O-Ordinance FT-Felony Traffic DV-Domestic Violence CP-Child Present
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
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

A LIST OF TANGIBLE EVIDENCE (If none, write "None") (Evidence List must be provided for all NOTICES TO APPEAR)

DESCRIPTION/AMOUNT PER UNIT	RECOVERED BY	GIVEN TO	PRESENT LOCATION

Mandatory Appearance in Court ☐ You need not appear in Court, but must comply with instructions on Reverse Side. ☐
COURT INFORMATION: You must appear in County Court at the:
COURTHOUSE TOWER ANNEX, 801 E. TWIGGS STREET ☐ COUNTY OFFICE BUILDING, MICHIGAN & REYNOLDS STREET ☐
(Corner of Jefferson & Twiggs Street), TAMPA, FLORIDA 33602 PLANT CITY, FLORIDA 33566
Division _____ COURTROOM # _____ ON _____, 20 _____, AT _____ a.m. ☐ p.m. ☐
I agree to appear at the time and place designated above to answer for the offense(s) charged or to pay the fine subscribed. I understand that if I willfully fail to appear before the Court as required by the Notice to Appear, I may be held in contempt of Court and a warrant for my arrest shall be issued. You may also be charged with the crime of Failure to Appear, F.S. 843.15. I certify that my address as listed above is correct and I further understand that I have a continuing duty to advise the Court of any changes in my address as set forth above.
Signature of Defendant/Juvenile _____ Parent or Guardian (If Juvenile) _____
White - Clerk of Court Green - State Attorney Canary - Arresting Agency Pink - Central Booking/Detention Center Goldenrod - Defendant

AGENCY NAME DIFS REPORT # 19-30

VICTIM NOTIFICATION PROBABLE CAUSE STATEMENT

2037415

AGENCY REPORT # 19-30

AGENCY NAME DIFS

State facts to establish probable cause that a crime was committed by the defendant or that the child is dependant.

ON 10-19-18 SUSPECT PRESENTED AN INVALID PROOF OF INSURANCE AFTER
A TWO VEHICLE CRASH

* PER ACTIVE WARRANT # 22240394

Judgement requested against defendant for agency investigative cost per Florida Statute 938.27: \$ _____

OFFICER William B. Whitley

I.D. # 00453 / 00300 Dist. & Squad DIFS
(Please Print The Above Information)

SWORN TO AND SUBSCRIBED BEFORE ME THIS
20th DAY OF November, 2019

NAME/Title of Person Authorized to Administer Oath
William B. Whitley

POLICE REPORT WRITTEN: Yes ☐ No ☐ Dist. & Squad _____
OFFICER _____ I.D. # _____

I SWEAR THAT THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. FOR NOTICES TO APPEAR, I ALSO CERTIFY THAT A COMPLETE LIST OF WITNESSES AND EVIDENCE KNOWN TO ME IS ATTACHED.

AFFIANT, Signature William B. Whitley
AFFIANT, Print/Type Name WILLIAM B. WHITLEY

NOTE: The WHITE COPY of VICTIM'S / WITNESSES goes to the Clerk's Office ONLY on Notices To Appear. In all other cases, it should be removed. The Jail or JAC personnel will determine this for all defendants turned over to them. In all Notices To Appear issued by the Arresting Officer, the Arresting Officer should leave the WHITE copy of VICTIM'S / WITNESSES attached.