

Broward County Sheriff's Office

17-00818MMIDA Booking Report





591700382 BCCN # 887764						Olifein	Booking Sheet Control Date and Time					
608246783 Print Clearance 09/01/17 20 43 27 Prints Yes DN 1700382 Offense Report # 02-1708-003361					Yes	09/01/17 23 43 45 Agency DANIA BEACH						
					W. C.							
TROP	, ADAI	N III	CIPA	CICIAI	CILLA	MIT THE	AL CHIPA	SSN#	FIRM P	TOTAL CL		
Sex	Height	Weight	Eyes	Haır	Comp	Age Admitted	DOB	Place of Birth	State	FDLE		
М	601	190	BRO	BRO	LGT	53	8/10/1964	MIAMI	FLORIDA	0		
1219 LINCOL	LN STRE	ET HW) FL 330)19	DIBL	HEFITIAL DE	DEFILIAL			in the		
09/01/17 19	57 00	WIII P	lace of A	rrest 1	219 LINC	OLN STREET	Arres	ting Officer 16817 A	RMSTRONG	111		
6	TROP Sex M 1219 LINCOL	TROP, ADAI Sex Height M 601	### TROP, ADAM Sex Height Weight M 601 190 1219 LINCOLN STREET HWD	DN 1700382 Offense Report TROP, ADAM Sex Height Weight Eyes M 601 190 BRO	Print Clearance 09/ DN 1700382 Offense Report # TROP, ADAM Sex Height Weight Eyes Hair M 601 190 BRO BRO 1219 LINCOLN STREET HWD FL 33019	### Print Clearance	## DN 1700382	## Print Clearance	## 1219 LINCOLN STREET HWD FL 33019 Print Clearance	Sex Height Weight Eyes Hair Comp Age Admitted DOB Place of Birth State M 601 190 BRO BRO LGT 53 8/10/1964 MIAMI FLORIDA Months of Residence 240 MIAMI Sex Months of Residence 240 MIAMI Sex Months of Residence 240 MIAMI Sex Months M		

Intake Comments SP-CO 29/11589 WC/17834

Alias Last name, First, Middle, DOB

Warrants Officer Id bs17834

Scars, Marks, Tattoos

Release Date/Time		Release Reason	Release Authorized By					
Charge No	Charge Initiation Date	Statute	Warrant/Capias	Level	МС	B Type	Bond Amount	
Elle 1 Th	09/01/17 23 29	784 03-1a1(HG)		1M	D	HOLD FOR MAG	\$0 00	
Charges T	OUCH OR STRIKE/BATTER	Y/DOMESTIC VIOL	Comments					
Booking Off	ID bs12228	County		Judge	05			

* End of Report *



BROWARD COUNTY

Sp/c0/29-11589

SHADED FIFLDS MUST BE ANSWERED IF DEFENDANT NOT IN CUSTODY

ARREST #	17	- N	_00		V.D.	-07	06	113#				
Filing Agency BRQW 4RD COUN		fense Report 02-1708-0	003361	Local 3D #	FDLE	Lin.	FBI	38	3#	Min.		
Defendant's Last Name	1130	02-1700-0	First	Mid	die SUF	Alias	/Street Name	- (0	110,	Citizenship		
TROP .			AD4	AD4M								
Race Sex Hgt Wgt Hall			Eyes		ge DOB		Birth Place					
W M	6'01 190	$O \mid GR4Y$	BRO	W LIGHT	53 08/10/19		s warks TT	- 1/2	- HU			
1219 LINCOLN S	T. HOLLYW	00D, FL	33019			400			10	THE STATE OF THE S		
Residence Type (1) City	(2) County	Local		1219 LINCOL	NSΓ.	Fiace	e of Employment	d	The same	Length		
(3) Flori	ida (4) Out of S	State		HOLLYWOOL		1,00		44.	Thy.	ale.		
How long defendant in	Reading	Place of Arres			Date/Time Arrested Arresting Orficer(s) CCN							
Broward County 20	I Hart Zana	. Deat	Chift	Trans Unit	PMD Y N X		09/01/2017 19 57			11\1 (16817)		
Officer Injured Y N X	Unit Zone	Beat	Shift	Trans Unit	PMD Y LINE	Transp	porting Officer/CCN	Pick-L	up Time Tim	ne Arrived/BSO		
TYPE / ACTIVITY	Type	E Heroin	415	P Paraphernalia/	Activity	Traffic	M Manufacture/	1111	Indication of	Y N UK		
dilla Cillia	N N/A A Amphetamine	► Hallucin M Mariiuai		Equipment S Synthetic		Smuggle Deliver	Produce/Cultiva K Dispense/	ate	Alcohol Intiuence			
	B Barbiturate C Cocaine	O Opium/[erv U Unknown S Sell E Us			Use Distribute Dug Influence D 🔀 🗔					
- 10 CO	C Cocaine	-	(2)	Z Other	B Buy		Z Other	777.	7 4 7	4000		
Attach	Defendant's V	ehicle Make	·	<u>T</u> 3	ype Y	ear'	Color	VIN #				
Defendant's	Vehicle Tow	red To	100	JUBI.	The same	_ Tag) #	Other ide	ntifiers or rem	arks.		
Photo		76			7(1)							
1, 10, 10, 1												
Nama of water (c) / f carrage	otion overtication	nors and state	of wearns	2444)	16. 10		Ch.	May 1	Ma	· Va		
Stin Jahr	187.	- 45		IBL.	alle all	1	The Thirty	3	37/1/2	- Carrier		
Count #	-0,00	- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10)" O	- A			100000000000000000000000000000000000000		50 0			
Count #	CU. CIDILLI		Offenses C			-+	VVC# / Citation # (if appl	icable)	FS or Capias/Warrant #			
T TOCCH	OKSTRIKEB.	HILIATON	T.SHC.L	(OL		5	784.03-1 \(\text{1(HG)}\)					
					A - 110.		The Market	30.7	764	1977		
	<u> </u>		10 m		- 	4	7 (1)	Tally.	401	7 60		
				Drob	able Cause Affid	1						
	allie.	L DI JOLE	VIV. C. III.	/ L		avit	E CIP					
Before me this date perso		7 6		(11111)1 (108)	17	11/2/	who being first	duly sworr	n deposes and s	says that on		
the above named defenda	nt committed th	ne above offe	enses char	ged and the facts	showing probable	cause to	believe the same are as fo	ollows	(cum	ne location)		
							e victim`s res		e They	have		
							s However, th			nave		
							ment in the fi			he		
							entionally gra					
							n sustained ab					
scratches to	her left	t and r	right	elbow whi	ch was ble	edin	g She also su			11		
/_/_	< //>	dillin	7.7	, (III)	707	× (1)	E	* * *	Continu			
Under penalties of periup	declare that I	have read th	ne foregoir	ng and that the fa	cts stated therein ar	e true an	d correct to the best of my	/ knowledge	e and belief	All		
1). 7					BRIITANY (168	317)	Offin Chi.	<u> </u>	Danta Bea	ch		
Officer/Affiairt's Signature	9			Officer's Name	CCN		The Hillian	Officer's D	vision C	- 1.7		
STATE OF FLORIDA COUNTY OF BROWARD	100									\$ -		
				6 . 0				5 5	べる	2		
Sworn to (or affirmed) and				/ day of	September		(year)	E	-06117			
by IRMS	SIRONG, BR	WIIIVI		(name and t	itle), who is person.	ally known	n to me or has produced	33	7 3			
-/	- ((1)		- 11		7. 6.	~	as identification	2	7.			
-11	11 " "	W.	C . L.	111	GIL.	DRA	WH 17814	The C	37			
Notary Public Departy Clerk of	or the Court or Ass	sistant Slate A	ttorney			Title	/Rank and CCN	175				
A W	(180)			1				L1	SEP Lang. 2	111		
Print Type or Stamp Commis	ssic ed anie ut	/0- PJ3	6.01	The line			(SEAL)					
Seventeenth Judicial Circ	0 1			C FIRST AT	CADANCE ACCE	T 50 01:	The state of the s					
Broward County	CEILIN.			FIRST APF	PEARANCE ARRES	IFORM			Orig 2nd	Court State Artorney		
State of Florida	(SHO	ULD ADDITIO	NAL SPAC	E BE NEEDED US	F THE PROBABLE CA	AUSE AFF	IDAVIT CONTINUATION (BS	O DB#2a))	3rd	Filing Agency		
BSO DB #2 (Revised 05/00)	10.70				WET COR		TOP THE		4th	Arresting Agency		
				~ ~	MIDT COD	V						

W/C-17834

☐ COMPLAINT AFFIDAVIT M ARREST FORM PROBABLE CAUSE AFFIDAVIT CONTINUATION BROWARD COUNTY OBTS# ARREST # Local ID# SS# Offense Report 02-1708-003361 FDLE F81 Filing Agency

BROWARD COUNTY SO Middle SUF Alias/St eet Name Citizenship Defendant's Last Name Fist TROP ' ADAM Name of victim(\$) (if corporation exact legal name and state of inco poration) Offenses Charged WC# / Citation # (if applicable) FS or Capias/Warrant # Count # SEE PAGE **Probable Cause Affidavit** Before me this date personally appeared 4RMS FRONG BRITT IN 116817) who being first duly sworn deposes and says that on lugust , (year) 2017 (crime location) the above named defendant committed the above offenses charged and the facts showing probable cause to believe the same are as follows scratch to her left leg. The defendant was subsequently arrested and transported to BSO Main Jail I sweathe above statement is correct and true to the best of my knowledge and belief ARMSTRONG, BRITTANY (16817) Dania Beach Officer/Affiant's Signature Officer's Name/CCN

Notary Public D Clerk of the Court or Assistant State Attorney Pri it, Type oi Stama Commissioned Na

Sworn to (or affirmed) and subscribed before me this

ARMSTRONG, BRITT IN

(SEAL)

September

(name and title) who is personally known to me or has produced

as identification

Title/Rank and CCN

day of

Seventeenth Judicial Circuit **Broward County**

State of Florida

9SO DB #2a (Revised 05/00)

STATE OF FLORIDA COUNTY OF BROWARD

FIRST APPEARANCE/ARREST FORM

Court State Attorney Filing Agency Arresting Agency

COURT COPY