

## **Broward County Sheriff's Office**

## 21-16455MUIDA MP





| CIS#  | 122100  | 789   | BCCN# 946295  |   |   |          |   |                          | į   | Booking Sheet Control Date and Time |                           |                     |                                |           |  |
|---|---|---|---|---|---|----------|---|--------------------------|---|-------------------------------------|---------------------------|---------------------|--------------------------------|-----------|--|
| OBTS  | 60729790  | 3   | Print   | Clearance   | e 11/15   | /21 04 4 | 43 21   | Prints '                 | Yes                                       | 11/15/21 07 45 06                   |                           |                     |                                |           |  |
| Arrest #  | DR 2100   | 789   | Offer   | nse Repor   | t# 1  | 0-2111-  | -002346                                       |                          |   | Age                                 | ency                      | DEERFIELD           | D BEACH                        |           |  |
| Last Name<br>First<br>Middle  | t JO  | HNSON,  | DAMIA   | N HAM   | ILTON   |          |   |                          |   | SSN                                 | N#                        |                     |                                | P         |  |
| Race  |   | ex Height   | Weight  | Eyes  | Haır  | Comp     | Age Adr                                       | mitted                   | DOB                                       | Plac                                | ce of Birth               | Sta                 | te                             | FDLE      |  |
| <i>N</i>  | ı   | 1 507   | 165   | BLU   | BRO   | RUD      | 25  | -                        | 7/29/1996                                 | NASH                                | IVILLE                    | TEN                 | NESSEE                         | 0         |  |
| Permanent<br>Address  |   | ESAPEAKE  | E CIRCLE  | BOYTO   | N BEACH   | FL 334   | 36  |                          |   |                                     | Months o                  | of Residence        |                                |           |  |
| Arrest Date   | e 11/15/2   | 1 03 01 00  | F   | Place of A  | rrest 175<br>DEE<br>334   | ERFIEL   | LSBORO<br>D BEACH                             |                          | Arrest                                    | ing Offic                           | cer 1740                  | 02 WALKER           |                                |           |  |
| Inmate Log  | ged Date  | 11/15   | /21 04 27 2   | 22  | nmate Log   | у Туре   | FULL IN                                       | NTAKE                    | F   | Place Ac                            | imitted                   | MAÏŅ                | 7021                           |           |  |
| intake Com  | nments SF   | /CO/ 29/54  | -8075 W   | C-18599   |   |          |   |                          |   |                                     |                           |                     | AON LO                         | £~        |  |
| Aliae Laeti   | name, First   | Middle, Do  | ОВ  |   |   |          |   |                          |   |                                     |                           |                     | 717                            | Z<br>C    |  |
| Milas Last  |   |   |   |   |   |          |   |                          |   |                                     |                           |                     | , ഗി                           | ~>        |  |
|   | Officer Id bs   | 18599   |   |   |   |          |   |                          |   |                                     |                           |                     |                                | r -       |  |
| Warrants O  | Officer Id bs   | 18599   |   |   |   |          |   |                          |   |                                     |                           |                     | PH H                           | <u> </u>  |  |
| Warrants O  |   | 18599   | Arm, upp  | oer right   |   | .EO SYI  | MBOL  |                          |   |                                     |                           | Valcon L            | க் -ம                          | CHIRAL    |  |
| Warrants C<br>Scars,Mark  | ks,Tattoos  | 18599   | Arm, upp  | 07  | L   | .EO SYI  | MBOL  |                          |   |                                     | Relea                     | se Authorize        | PM 3:54                        | CHIRAL    |  |
| Warrants C<br>Scars,Mark<br>Tattoos   | ate/Time  | 18599<br>arge Initiat<br>11/15/21   | on Date   | Release<br>Statu  | Reason  |          | MBOL<br>Warrant/O                             | Capias                   | Level<br>4M                               | M C<br>Y                            | Relea  B Type BOND        |                     | PH 3: 54                       | Amount    |  |
| Warrants C Scars,Mark Tattoos Release Da Charge No  | ate/Time  DUI ALC   | irge Initiat<br>11/15/21<br>OHOL OR   | on Date<br>07 11  | Release<br>Statu<br>316 1   | Reason<br>ute<br>193-2a2a   | ,        |   | -                        |   |                                     | В Тур                     |                     | PH 3: 54                       | Amount    |  |
| Warrants C Scars,Mark Tattoos Release Da Charge No  | ate/Time  | irge Initiat<br>11/15/21<br>OHOL OR   | on Date<br>07 11  | Release<br>Statu<br>316 1   | Reason<br>ute<br>193-2a2a<br>:NSE   | ,        | Warrant/0                                     | -                        |   | Υ                                   | В Тур                     |                     | PH 3: 54                       | Amount    |  |
| Warrants C<br>Scars, Mark<br>Tattoos<br>Release Da<br>Charge No<br>1<br>Charges<br>Booking C<br>Charge No   | ate/Time  DUI ALC  Off ID bs:   | irge Initiat<br>11/15/21<br>OHOL OR<br>4833<br>irge Initiat   | on Date<br>07 11<br>DRUGS 1   | Statu<br>316 1<br>ST OFFE<br>Cour   | Reason ute 193-2a2a :NSE nty  | ,        | Warrant/0                                     | ts                       | 4M<br>Judge<br>Level                      | Y<br>M C                            | B Type                    | е                   | PH 3: 54 ad By  Bond 4 \$500 0 | Amount 0  |  |
| Warrants C<br>Scars, Mark<br>Tattoos<br>Release Da<br>1<br>Charges<br>Booking C<br>Charge No  | ate/Time  DUI ALC  Off ID bs:   | arge Initiat<br>11/15/21<br>OHOL OR<br>4833<br>arge Initiat<br>11/15/21                                     | on Date<br>07 11<br>DRUGS 1<br>ion Date<br>07 12                        | Statu<br>316 1<br>ST OFFE<br>Cour<br>Statu<br>316 1   | Reason  Ite  193-2a2a  INSE  Inty  Ite  193-3c1                             | 1        | Warrant/C<br>Comment<br>Warrant/C             | ts<br>Capias             | 4M<br>Judge                               | Y<br>e                              | B Type<br>BOND            | е                   | PM 3: 54 ad By  Bond 4 \$500 0 | Amount 0  |  |
| Warrants O Scars, Mark Tattoos Release Da Charge No 1 Charges Booking O Charge No 2 Charges   | ate/Time  DUI ALC  Off ID bs:   | 11/15/21<br>OHOL OR<br>4833<br>Irge Initiat<br>11/15/21   | on Date<br>07 11<br>DRUGS 1<br>ion Date<br>07 12                        | Statu<br>316 1<br>ST OFFE<br>Cour<br>Statu<br>316 1   | Reason  ite 193-2a2a  :NSE  ity  ite 193-3c1  F ANOTHE                      | 1        | Warrant/C                                     | ts<br>Capias             | 4M<br>Judge<br>Level                      | Y<br>M C<br>Y                       | B Type                    | е                   | PH 3: 54 ad By  Bond 4 \$500 0 | Amount 0  |  |
| Warrants C Scars, Mark Tattoos Release Da Charge No 1 Charges Booking C Charge No 2 Charges Booking C   | ate/Time  DUI ALC  Off ID bs:  DUI W/D  Off ID bs:                        | 11/15/21<br>OHOL OR<br>4833<br>Irge Initiat<br>11/15/21   | on Date 07 11 DRUGS 1 ION Date 07 12 OP OR PE                           | Statu<br>316 1<br>ST OFFE<br>Cour<br>Statu<br>316 1<br>ERSON O<br>Cour                                      | Reason  Ite 193-2a2a  NSE  Inty Ite 193-3c1  F ANOTHE                       | ER       | Warrant/C<br>Comment<br>Warrant/C             | ts<br>Capias<br>ts       | 4M Judge Level 4M Judge                   | Y<br>M C<br>Y                       | B Type BOND  B Type BOND  | е                   | Bond A \$1,000                 | Amount 0  |  |
| Warrants O Scars, Mark Tattoos Release Da Charge No 1 Charges Booking O Charges Booking O Charges Booking O Charge No 3   | DUI ALC Off ID bs DUI W/D Off ID bs                                       | arge Initiat<br>11/15/21<br>OHOL OR<br>4833<br>arge Initiat<br>11/15/21<br>AM TO PR<br>4833<br>arge Initiat | on Date 07 11 DRUGS 1 Ion Date 07 12 OP OR PE Ion Date 07 16            | Statu<br>316 1<br>ST OFFE<br>Cour<br>Statu<br>316 1<br>ERSON O<br>Cour<br>Statu<br>316 1                    | Reason  Ite 193-2a2a  NSE  Inty Ite 193-3c1  F ANOTHE                       | ER       | Warrant/C<br>Comment<br>Warrant/C             | Capias ts Capias         | Judge<br>Level<br>4M<br>Judge<br>Level    | Y  M C  Y                           | B Type BOND  B Type BOND  | e                   | Bond A \$1,000                 | Amount 00 |  |
| Warrants O Scars, Mark Tattoos Release Da Charge No 1 Charges Booking O Charges Booking O Charge No 3 Charges   | DUI ALC Off ID bs DUI W/D Off ID bs                                       | arge Initiat 11/15/21 OHOL OR 4833 arge Initiat 11/15/21 AM TO PR 4833 arge Initiat 11/15/21                | on Date 07 11 DRUGS 1 Ion Date 07 12 OP OR PE Ion Date 07 16            | Statu<br>316 1<br>ST OFFE<br>Cour<br>Statu<br>316 1<br>ERSON O<br>Cour<br>Statu<br>316 1                    | Reason  Ite 193-2a2a INSE INSE 193-3c1 F ANOTHE Inty Ite 1936(2)(A)         | ER       | Warrant/C Comment Comment Comment             | Capias ts Capias         | Judge<br>Level<br>4M<br>Judge<br>Level    | M C Y                               | B Type BOND  B Type BOND  | e                   | Bond A \$1,000                 | Amount 00 |  |
| Warrants C Scars, Mark Tattoos Release Da Charge No 1 Charges Booking C Charges Booking C Charge No 3 Charges Booking C Charges Charges Charges Charges Charges Charges Charges | ate/Time  DUI ALC  Off ID bs:  DUI W/D  Off ID bs  Chi  POSS O  Off ID bs | arge Initiat 11/15/21 DHOL OR 4833 arge Initiat 11/15/21 AM TO PR 4833 arge Initiat 11/15/21 F OPEN CO 4833 | on Date 07 11 DRUGS 1 ION Date 07 12 OP OR PE ION Date 07 16 DNT IN M/  | Statu<br>316 1<br>ST OFFE<br>Cour<br>Statu<br>316 2<br>ERSON O<br>Cour<br>Statu<br>316 2<br>V DRIVE<br>Cour | Reason  ite 193-2a2a  INSE inty  ite 193-3c1  F ANOTHE inty  ite 1936(2)(A) | ER       | Warrant/C Comment Comment Comment             | Capias Capias            | Judge Level 4M Judge Level 0I Judge Level | M C Y                               | B Type BOND  B Type NOT A | e<br>e<br>PPLICABLE | Bond A \$1,000                 | Amount 00 |  |
| Warrants C Scars, Mark Tattoos Release Da Charge No 1 Charges Booking C Charges Booking C Charge No 3 Charges Booking C   | ate/Time  DUI ALC  Off ID bs:  DUI W/D  Off ID bs:  Cha                   | 11/15/21<br>OHOL OR<br>4833<br>11/15/21<br>AM TO PR<br>4833<br>11/15/21<br>11/15/21<br>F OPEN CO            | ion Date 07 11 DRUGS 1 ion Date 07 12 OP OR PE ion Date 07 16 DNT IN M/ | Release  Statu 316 1 ST OFFE  Cour  Statu 316 2 ERSON O  Cour  Statu 316 2 V DRIVE  Cour  Statu 316 3       | Reason  Ite 193-2a2a  INSE INSE 193-3c1  F ANOTHE Inty Ite 1936(2)(A)       | ER       | Warrant/C Comment Warrant/C Comment Warrant/C | Capias Capias tts Capias | Judge Level Judge Level OI Judge          | M C<br>Y                            | B Type BOND  B Type NOT A | e<br>e<br>PPLICABLE | Bond A \$1,000                 | Amount 00 |  |

## ☐ COMPLAINT AFFIDAVIT

SHADED FIELDS MUST BE ANSWERED IF DEFENDANT NOT IN CUSTODY

☑ ARREST FORM

| BROWARD COUNT                           | Υ           |                          |            | SHA  | DEO FIELD   | 2 MO21 RE                | ANSW                                  | EKED IF DE                    | FEND          | ANIN           | OT IN COSTODY                        |              |                           | LA AR          | REST FORM                             |
|---|-------------|--------------------------|------------|--|-------------|--------------------------|---------------------------------------|-------------------------------|---------------|----------------|--------------------------------------|--------------|---------------------------|----------------|---------------------------------------|
| ARREST #                                |             |                          |            |  |             |                          |                                       |                               |               |                |                                      | OBTS#        |                           |                |                                       |
| Filing Agency                           |             |                          | Offense    | e Report   |             | (Local ID)#              |                                       | EDLE.                         |               | 460 S          | (FBI)                                | 200          | SS#                       |                | 1010                                  |
| BROWARD COUNTY SO 10-2111-00            |             |                          |            | Control of the Contro |             |                          |                                       |                               |               |                |                                      |              |                           |                |                                       |
| 1                                       |             |                          |            |  | First       |                          | Aiddle                                | SUF                           |               | Alias/S        | Street Name                          |              |                           |                | мисополир                             |
|   | JOHNSON     |                          |            | Hair   |             | AN HAMIL                 | · · · · · · · · · · · · · · · · · · · | ров                           |               | Dorth D        |                                      |              |                           |                |                                       |
| Race Sex                                | Hgt         | 8 150                    |            | BLO  | BLU         | Comp<br>L6T              | Age                                   | 1 .                           | ,,,,,         | Birth Pi       | race                                 |              |                           |                |                                       |
| W M Permanent Address                   | 5'0         | 0 110                    |            | DLU  | Dea         | 1601                     | 25                                    | 07/29/                        | 1990          | Score          | Marks TT                             |              | <del>-</del>              |                |                                       |
| 3628 CHESAF                             | DEAKE       | CIRE                     | ROVN'      | TON R  | EACH E      | 1 33436                  |                                       |                               | Ì             | Scars          | WILLIAS II                           |              |                           |                |                                       |
|   | ) City      | (2) Co                   |            |  |             | 628 CHESA                | 4 D.C. 4                              | VE CIR                        |               | Place o        | of Employment                        |              |                           |                | Length                                |
| 11                                      | ) Florida   |                          | t of State | 9  |             |                          |                                       |                               |               |                | . ,                                  |              |                           |                |                                       |
| 14-1                                    |             |                          | D. //C     | CN   |             | OYNTON I                 |                                       | H, FL 33                      | 436           | 7              | T A                                  | - 14         | 0.5                       | (-) <u>001</u> | <u> </u>                              |
| How long defendant in<br>Broward County | ,           | reathalys                | SED@0      |  | Reading     | Place of An              |                                       | ORO BLVI                      |               |                | Time Arrested                        |              | esting Officer            | • •            | (17402)                               |
| · · · · · · · · · · · · · · · · · · ·   | NXU         |                          |            | Beat   | Shift       | Trans Unit               |                                       | ID Y N                        |               |                | 1/15/2021 03 0<br>orting Officer/CCN | <del></del>  | WALKER, J<br>Pick-up Time |                | Arrived/BSO                           |
| omeer injured ,                         |             |                          | 1010       | 200.   | ALPH        | Trans orm                | ' ''                                  |                               | . اٿ          | тапоро         | orang omocnoon                       | ["           | ick-up fillie             | I sine         | Arriveu/630                           |
| TYPE / ACTUATY                          | <del></del> |                          | 1          | E-Heroin   |             | P-Paraphernalia          | y Ac                                  | tivity                        |               |                | M-Manufacture/                       | ]            | 1 1-4-4                   |                | V 11 1111                             |
| TYPE / ACTIVITY                         | N-N         | N/A                      | H          | H-Hallucin   | ogen        | Equipment                | N-1                                   | A/N                           | T-Tra<br>A-Sm | inic<br>luggle | Produce/C                            |              | Indication<br>Alcohol I   | nfluence [     | Y NUK  <br>XI D D                     |
|   |             | Amphetami<br>Barbiturate |            | M-Marıjuar<br>D-Opium/(  |             | S-Synthetic<br>J-Unknown | - 1                                   | Possess<br>Sell               | D-De          |                | K-Dispense/<br>Distribute            |              | Drug Influence            |                |                                       |
|   |             | Cocaine                  |            | o opianii  |             | Z-Other                  | B-E                                   |                               | E-Use         | е              | Z-Other                              |              | 5.49                      |                |                                       |
|   | 100         | fendant                  | h (Volta)  | alo Metr   | · ''@       | MC .                     | Tivroe                                | na ·                          | Voca          | 201            | 17 Color BU                          |              | m<br>m                    |                | W.                                    |
| Attach                                  |             | Telloality               | S.Veill    | E LANGE  |             |                          | llybe i                               | To annual community of        | negio         |                |                                      | s Amil       | <i>P</i> _                |                | · · · · · · · · · · · · · · · · · · · |
| Defendant's                             | \           | /ehicle T                | owed 1     | То <u>Е</u> т  | eralds      |                          |                                       |                               |               | • Veg(         | #:                                   | @ic          | ridenilliers o            | or cement      | e:                                    |
| Photo                                   | ,           | 4 44 65                  |            |  |             |                          |                                       |                               | The state of  |                |                                      |              |                           |                |                                       |
|   |             |                          | 314 TI     |  |             |                          |                                       |                               |               |                |                                      | A 1 224      |                           |                |                                       |
| Name of victim(s) (if co                |             |                          |            |  |             |                          |                                       |                               |               |                |                                      |              |                           |                |                                       |
| State Of Florida                        |             |                          |            |  |             |                          |                                       |                               |               |                |                                      |              |                           |                |                                       |
|   |             |                          |            |  |             |                          |                                       |                               |               | ^              |                                      |              |                           |                |                                       |
| Count #                                 |             |                          |            | C  | ffenses Cha | arged                    |                                       |                               | . <           | - I            | WC# / Citation # (if a               | pplicable)   | FS or                     | Capias/\       | Narrant #                             |
|   | UALCO       | HOL OR                   | DRUC       |  |             |                          |                                       |                               |               |                | AAXX5ZE                              | pp           |                           | 316 193-2      |                                       |
| 1                                       |             | _                        |            |  | OF ANOTI    | IFR                      |                                       |                               |               |                | AFOURYE                              |              |                           | 316 193-       |                                       |
|   |             |                          |            |  |             | LCOHOL IN/O              | ON VEI                                | HCLE                          |               |                | AFOURZE                              |              |                           | 316 193        |                                       |
|   |             | ONG LA                   |            |  |             |                          |                                       |                               |               |                | AFDUSDE                              | ·            |                           | 316 08         | 1-1                                   |
|   |             |                          | •          |  |             |                          |                                       |                               |               |                |                                      |              | <u></u>                   |                |                                       |
|   |             |                          |            |  |             | Pro                      | bable                                 | Cause Aff                     | iďávii        | t 🐠            |                                      |              |                           |                |                                       |
| Before me this date p                   | ersonali    | lv appear                | red 14     | VALKEI   | R. JARROL   | 0 (17402)                | PUZZ-BIA SON                          | WHEN MAIN WARE AND A STATE OF | or restrict   | <u> </u>       | who being                            | first dulv s | worn deposes              | and sav        | s that on                             |
| 15 day of No                            | _           | =                        | •          |  |             |                          |                                       |                               |               |                |                                      |              | <b></b>                   | •              | location)                             |
| the above named def                     |             |                          |            |  | nses charge | ed and the fac           | cts show                              | wing probab                   | e caus        | se to be       | elieve the same are a                | s follows    |                           | (6111116       | iocation)                             |
| En-Route 0                              |             |                          |            |  |             |                          |                                       |                               |               |                |                                      |              |                           |                |                                       |
|   |             | •                        |            |  |             |                          | -                                     |                               | Bos           | ah             | Broward Co                           | רם .         | orida                     |                |                                       |
| Responded                               | 10          | 1/34                     | nes        | C HII  | .ISDOIC     | , biva,                  | Dee                                   | rrrera                        | Dea           | icii,          | BIOWAIG CC                           | , , ,        | Offua                     |                |                                       |
|   |             | 4                        |            |  |             | ,                        |                                       |                               |               |                |                                      |              | 3                         |                | <b>.</b>                              |
|   |             |                          |            |  |             |                          |                                       | -                             |               |                | rol at the                           |              |                           |                |                                       |
|   |             |                          |            |  |             | -                        |                                       |                               |               |                | y Trl to go                          |              |                           |                |                                       |
| Blvd when                               | I ob        | serve                    | ed a       |  |             | also 1                   | n th                                  | e left                        | lar           | ne t           | o go east d                          | on Hıl       | .lsboro                   | Blvd           |                                       |
|   | 7           |                          |            |  |             |                          |                                       |                               |               |                | _                                    |              |                           |                | <u>d * * *</u>                        |
| Under penalties of pe                   | erjury, I d | leclare th               | at I hav   | read th  | e foregoing | and that the             | facts st                              | ated therein                  | are tru       | ue and         | correct to the best of               | my knowl     | edge and beli             | ef             |                                       |
| 1. 1                                    |             |                          |            |  | J           | WALKER, JA               | ARRO                                  | D (17402)                     |               |                |                                      |              | Deerfi                    | eld Bea        | ch                                    |
| Officer/Affiant's Sign                  | ature       | > "                      |            |  |             | Officer's Nam            | ne/CCN                                |                               |               |                |                                      | Office       | r's Division              |                |                                       |
| STATE OF FLORIDA                        |             |                          |            |  |             |                          |                                       |                               |               |                |                                      |              |                           |                |                                       |
| COUNTY OF BROW                          |             |                          |            |  |             |                          |                                       |                               |               |                |                                      |              |                           |                |                                       |
| C to (an affirman                       | d\d         | . Laaribad               | l hafara   | ma thia  | 15          | dougl                    |                                       | Novemb                        | a=            |                | 2021 (year)                          |              | :                         | ~              |                                       |
| Sworn to (or affirmed                   | •           |                          |            |  |             |                          |                                       |                               |               |                |                                      |              | r_,                       | 3              |                                       |
| by                                      | WAL         | KER, J                   | AKKU       | <i>υ</i>   |             | (name an                 | d title)                              | who is persi                  | onally i      | known          | to me or has produce                 |              | - A                       | *******        |                                       |
| -                                       |             |                          | .,         |  |             |                          |                                       |                               |               |                | as identificati                      | on<br>"21 N  | udiic.                    | Ā. · ·         | 1.00                                  |
| Ston II. N                              | صمع         |                          |            |  |             |                          |                                       |                               | 1             | leo.           | 1890.3                               | Ziff         | MX £J RM                  | 47-20          |                                       |
| Notary Public Deputy C                  | Clerk of th | e Court o                | r Assista  | int State A  | ttorney     | -                        |                                       |                               | -             | Title/F        | Rank and CCN                         | _            | ; <u>-</u>                | J              | $\circ$                               |
| / /                                     | -           |                          |            |  |             |                          |                                       |                               |               |                |                                      |              | 7 7                       |                |                                       |
| SBALLI                                  | MOR         | Ē_                       |            |  |             |                          |                                       |                               |               |                |                                      |              | 148                       |                |                                       |
| Print Type or Stamp Co                  | ommission   | ned Name                 | of Notar   | y Public   |             | •                        |                                       |                               |               |                | (SEAL)                               |              | 밀티움                       | دت             | න                                     |
| Seventeenth Judicia                     | l Circuit   |                          |            |  |             | CIDOT A                  |                                       | 0 A NICE /A DO                | COTO          | ODAA           |                                      | :            | 4 C                       |                | Court                                 |
| Broward County                          |             |                          |            |  |             | FIRSTA                   | FEAT                                  | RANCE/ARF                     | COIF          | OKW            |                                      |              | 글들                        |                | Court<br>State Attorney               |
| State of Florida                        |             | 19                       | SHOULF     | ADDITIC  | NAL SPACE   | BE NEEDED                | USE TH                                | E PROBABI F                   | CAUS          | E AFFI         | DAVIT CONTINUATION                   | (BSO DB#     | 그<br>(2a))                | 3rd -          | Filing Agency                         |
|   |             | ٠,                       |            |  |             | ,                        |                                       |                               |               |                |                                      | ,            |                           | 4th -          | Arresting Agency                      |

COURT COPY PVD 12954-8075 NC-18599

BSO DB-#2 (Revised 05/00)

| BROWARD COUNTY              |   |   |             | COMPLAINT PROBABLE CAUSE AFFIDAN  | 🖾 ARREST FO |                                |            |                          |  |
|-----------------------------|---|---|-------------|---|-------------|--------------------------------|------------|--------------------------|--|
| ARREST #                    |   | 0#                                      |             | Commence of the second |             | OBT                            |            |                          |  |
| BROWARL                     | Filing Agency Offense Repo<br>BROWARD COUNTY SO 10-2111 |   |             | Local ID(I).  |             | ar III                         | SS.        |                          |  |
| Defendant's Last N  JOHNSON | lame  |   | First       | Middle SUF  | Alia        | as/Street Name                 |            | Citizenship              |  |
| <del> </del>                | (if corporation exact lega                              | al name and state of                    |             |   |             |                                |            |                          |  |
|                             |   |   |             |   |             |                                |            | <del></del> .            |  |
| Count #                     |   | Offe                                    | nses C      | Charged   |             | WC# / Citation # (if applica   | ible)      | FS or Capias/Warrant #   |  |
|                             |   |   |             |   |             |                                |            |                          |  |
|                             |   | <del></del>                             | * 1         | * * SEE PA(   | F           | 1 * * *                        |            |                          |  |
|                             |   |   |             | ODD XIII  |             |                                |            |                          |  |
|                             |   |   | <del></del> | TO JOSE OF SECTION SECTIONS   | D. T. WATEL | . 2                            |            |                          |  |
|                             |   |   |             | Probable Gause A  | fidaviti    |                                |            |                          |  |
|                             | date personally appear                                  |   |             | OD (17402)  |             | who being first of             | iuly sworn | deposes and says that on |  |
|                             | November, (year)  |   |             | arged and the facts showing probab  | le cause    | to helieve the same are as fol | lows       | (crime location)         |  |
|                             | ning at the   |   |             |   | 00050       | slowly moving                  |            | ss the                   |  |
| _                           | _   | _                                       |             | opposite side of t  | he r        |                                |            |                          |  |
|                             |   |   |             | y emergency lights  |             | _                              |            |                          |  |
|                             |   |   |             | by bushes and came  |             |                                |            |                          |  |
|                             | _   | _                                       |             | its arrived I atte  |             |                                |            |                          |  |
|                             |   |   | _           | s and giving loud   | _           |                                |            |                          |  |
| _                           |   |   |             | the driver unrespo  |             |                                |            | <del>-</del>             |  |
|                             | _   |   |             | five attempts were  |             |                                |            |                          |  |
|                             |   | _                                       |             | eral attempts to ga   |             |                                |            |                          |  |
|                             |   |   |             | to the driver bei   |             |                                |            |                          |  |
|                             |   |   |             | all in drive Afte   |             |                                | _          |                          |  |
| _                           |   | )                                       |             | placed in park Th   |             |                                |            | _                        |  |
|                             |   |   |             | the rear driver s   |             | > <del>-</del>                 |            |                          |  |
|                             | _   | _                                       |             | cement's safety, a  | _           | _                              |            |                          |  |
|                             |   |   |             | ting at a table of  |             | <del>-</del>                   |            |                          |  |
| the vehi                    | _   | scanders,                               | 510         | cing at a cable of  | CITE        | IISCEG AGGIESS                 | , 111 6    | ine pachway or           |  |
| cile veili                  | CIE   |   |             |   |             |                                |            |                          |  |
| During m                    | v encounter   | with the                                | def         | fendant, I observed   | l the       | followings sign                | ıs of      | impairment               |  |
| _                           | -   |   | , ,         | oling out of the ve   |             |                                |            | -                        |  |
|                             |   |   |             | ed skin The defend  |             |                                |            |                          |  |
|                             |   |   |             | to Lake Worth, Wh   |             |                                | _          |                          |  |
|                             |   |   |             | was advised that h  |             |                                |            |                          |  |
|                             |   |   |             | i to walk away afte   |             |                                |            |                          |  |
|                             |   | N N - N - N - N - N - N - N - N - N - N |             | ne would like to su   |             | -                              |            |                          |  |
|                             | stated no   |   |             |   |             | 23 4 22014 500                 |            |                          |  |
| 31. 110                     |   |   |             |   |             |                                |            | Q                        |  |

|  |   | " " Concinued " " "                                      |
|--|---|--|
| sewear-the above statement is correct and true to the best of m      | y knowledge and belief  |  |
|  | WALKER, JARROD (17402)  | Deerfield Beach  |
| Officer/Affiant's Signature  | Officer's Name/CCN  | Officer's Division                                       |
| STATE OF FLORIDA<br>COUNTY OF BROWARD                                |   |  |
| Sworn to (or affirmed) and subscribed before me this                 | 15 day of <u>November</u> , <u>2021</u> (year)                  | 2021   |
| by WALKER, JARROD  | (name and title), who is personally known to me or has produced | 2  |
|  | as identification   | 7 8 A  |
| Strallinose  | Dep. 18903  |  |
| Notary Public Deputy Clerk of the Court or Assistant State Attorney  | Yitle/Rank and CCN  | -1 50  |
| -5. GALLIMORE Print Type or Stamp Commissioned Name of Notary Public | (SEAL)  | LINI.  |
| Seventeenth Judicial Circuit Broward County State of Florida         | FIRST APPEARANCE/ARREST FORM                                    | Ong - Court  2007 - State Attorney  3007 - Filing Agency |
| BSO DB-#2a (Revised 05/00)   | COURT COPY  | 4th - Arresting Agency                                   |

BSO DB-#2a (Revised 05/00)

## ☐ COMPLAINT AFFIDAVIT

☑ ARREST FORM

PROBABLE CAUSE AFFIDAVIT CONTINUATION

| BROWARD CC                  | DUNIY                  | <u> </u>                      | TROBROLL                     | - ONOGE ALL IDAY                      | DOMINIONION           |  | E ANNEST TON                            |
|-----------------------------|------------------------|-------------------------------|------------------------------|---------------------------------------|-----------------------|--|---|
| ARREST #                    |                        |                               |                              |                                       |                       | OBTS#  |   |
| Filing Agency               | D COUNTY SO            | Offense Report 10-2111-002346 | (Local ID #) C. A.           | FDLE                                  | FBI S                 |  | S##                                     |
| Defendant's Last            |                        | First                         | , (64kHg) 4 Junior 2 (230 C) | ldle SUF                              | Alias/Street Name     | MAKE THE PROPERTY OF THE PERSON OF THE PERSO | CHIZENSIIIO                             |
| JOHNSON                     |                        | 1                             | MIAN HAMILT                  |                                       | Allasiotreet Haine    |  | Ottizeristiip                           |
|                             |                        | al name and state of incor    |                              |                                       |                       |  |   |
|                             | <u> </u>               |                               |                              |                                       |                       |  |   |
|                             |                        |                               |                              |                                       |                       |  |   |
| Count #                     |                        | Offenses                      | s Charged                    | · · · · · · · · · · · · · · · · · · · | WC# / Citatio         | n # (if applicable)  | FS or Capias/Warrant #                  |
|                             | <u> </u>               |                               | -                            |                                       | 77007010              | - ( upp  | 100 ocupado trantane s                  |
|                             |                        | *                             | * * CE                       | TE DAC                                | T 1 * *               | *  |   |
|                             |                        |                               | 3E                           | EPAG                                  |                       |  |   |
|                             |                        |                               |                              |                                       |                       |  |   |
|                             | <u> </u>               |                               |                              |                                       | <u> </u>              |  |   |
|                             |                        |                               | <b>JPro</b>                  | bable Cause Affid:                    | vit -                 |  |   |
| Before me this              | date personally appea  | red <i>WALKER, JAI</i>        | RROD (17402)                 |                                       | wh                    | no beina first duly swo  | rn deposes and says that on             |
|                             | November (year)        |                               |                              |                                       |                       |  | (crime location)                        |
|                             |                        | ed the above offenses         | charged and the fac          | ts showing probable ca                | use to believe the sa | me are as follows  | (chine location)                        |
|                             |                        |                               | -                            |                                       |                       |  |   |
| Should h                    | ne noted the           | re was damag                  | to buel                      | hes at the a                          | hove mentic           | med locatio  | on from the                             |
|                             | nt`s vehicle           | 3                             | ge co busi                   | ico de che d                          | Dove mencio           | ned rocacro  | in from the                             |
| derendar                    | ic s venicle           | •                             |                              |                                       |                       | 1/2  |   |
|                             |                        |                               |                              |                                       |                       |  |   |
| 1 asked                     | the defenda            | nt the follo                  | owing quesi                  | tions and re                          | ceived the            | rollowing i  | responses                               |
|                             |                        |                               |                              |                                       |                       |  |   |
|                             |                        | nt takes any                  | -                            |                                       |                       |  |   |
| defendar                    | nt if he nee           | ded fire re                   | scue in whi                  | ich he refus                          | ed to get m           | edical atte  | ention                                  |
|                             |                        |                               |                              |                                       |                       |  |   |
| Next, I                     | determined             | there was p                   | robable cau                  | use to arres                          | t the defen           | dant for DU  | JI After                                |
| being ha                    | andcuffed, I           | asked the                     | defendant 1                  | to submit to                          | a breath t            | est  |   |
| -                           |                        |                               |                              |                                       |                       |  |   |
| The defe                    | endant refus           | ed to take                    | the breath                   | test, at wh                           | ich time I            | read the Fl  | orıda Implied                           |
|                             |                        | prepared for                  |                              |                                       |                       |  | <del>-</del>                            |
|                             | nt 0156 Hour           |                               |                              |                                       |                       |  | , |
| derendar                    | ic oibo nour           | .5                            |                              |                                       |                       |  |   |
| 0 b                         |                        | inventory to                  |                              | alad the def                          | andont                |  | on of two                               |
|                             |                        |                               |                              | ared the der                          | endant was            | in possessi  | On OI two                               |
| empty be                    | er cans or             | Bud Light 1:                  | ZOZ                          |                                       |                       | , [-   | 71                                      |
|                             |                        |                               |                              |                                       |                       | , - ~  | 121                                     |
| Vehicle                     | was removed            | by Emerald                    | s Towing                     |                                       |                       | •  | T 2                                     |
|                             |                        |                               |                              |                                       |                       | J.   |   |
| BWC                         |                        |                               |                              |                                       |                       | •  | - 3                                     |
|                             |                        |                               |                              |                                       |                       | - ,  | i 01 D                                  |
|                             |                        |                               |                              |                                       |                       | 7 - 5  | الحراق ال                               |
|                             |                        |                               |                              |                                       |                       | ごせき  |   |
|                             |                        |                               |                              |                                       |                       | #S   | ္ ႏ                                     |
| swear the abov              | e statement is correct | and true to the best of       | my knowledge and             | belief                                |                       | 7 73   | ST F                                    |
|                             |                        |                               | WALKED                       | 14BBOD (1740)                         |                       | 7  | Descripted Reach                        |
| Officer/Affiant's           | Signature              |                               | WALNEK, . Officer's Name     | <i>JARROD (17402</i> )<br>JCCN        |                       | Officer's D  | Deerfield Beach                         |
|                             |                        |                               | Ciliosi 3 Hallie             |                                       |                       | CCC. 3 L   | =.=!?                                   |
| STATE OF FLO<br>COUNTY OF B |                        |                               |                              |                                       |                       |  |   |
|                             | irmed) and subscribed  | before me this                | 15 day of                    | November                              | 2021                  | (year),  |   |
|                             | WALKER, J              |                               |                              | title), who is personally             |                       | <b>=</b>   |   |
| by                          |                        |                               | (name and                    |                                       |                       | entification   |   |
|                             |                        |                               |                              |                                       | as ide                | J  |   |

Public Deputy Clerk of the Court or Assistant State Attorney

GALLIMORE

Print Type or Stamp Commissioned Name of Notary Public

Seventeenth Judicial Circuit **Broward County** 

State of Florida

BSO DB-#2a (Revised 05/00)

Title/Rank and CCN

(SEAL)

FIRST APPEARANCE/ARREST FORM

**COURT COPY** 

Orig - Court 2nd - State Attorney

3rd - Filing Agency 4th - Arresting Agency