50-2023-CF-000809.AMB

ARREST / NOTICE TO APPEAR

1 Arrest (No Warrant) 3 Request for Warrant
2 Arrest (Warrant) 4 Request for Capias
2 N.T.A. 5 Juvenile Referral

1 JUVENILE

ADMINISTRATION

OBTS Number:

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
0500200	Boca Raton Police Department	3 2 2023-001178

Charge Type: Check as many as apply
☒ 1 Felony ☐ 2 Traffic Felony ☒ 3 Misdemeanor ☐ 4 Traffic Misdemeanor ☐ 5 Ordinance ☐ 6 Other

If Weapon Seized — Enter Type: UNARMED

Multiple Clearance Indicator:

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
~~6100 NW 2ND AVE~~, 6100 NW 2ND AVE, BOCA RATON, FL 33487	6100 NW 2ND AVE, BOCA RATON, FL 33487

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
01/25/2023	05:31	01/25/2023	05:41	01/25/2023	05:36	SCENE

DEFENDANT

Name (Last, First, Middle): MURPHY, SABRINA KATHLEEN
Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:

Race (W White, B Black, I American Indian, O Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	04/12/1997	5'03	145	BROWN	BLONDE	LIGHT	Medium

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description):

Marital Status	Religion	Indication of Alcohol Influence / Drug Influence
S	CHRISTIAN	Yes ☐ No ☒ Unk. ☐

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type (1 City, 2 County, 3 Florida, 4 Out of State)
6100 NW 2ND AVE 123, BOCA RATON, FL 33487				(561) 654-6022	1

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
6100 NW 2ND AVE 123, BOCA RATON, FL 33487				(561) 654-6022	FL DL

Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation
					Bartender

D.L. Number, State	S.S. No.	INS Number	Place of Birth (City, State)	Citizenship
M610791976320 / FL	[redacted]		LONG ISLAND, NY,	US

CO-DEFENDANT

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	1 Arrested, 2 At Large, 3 Felony, 4 Misdemeanor, 5 Juvenile
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	1 Arrested, 2 At Large, 3 Felony, 4 Misdemeanor, 5 Juvenile

JUVENILE

☐ Parent ☐ Other ☐ Legal Custodian — Name (Last, First, Middle):

Residence Phone:

Address (Street, Apt. Number): (City) 1,3,0,0,0 (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: J. OR Date: Time:

The above address was provided by ☐ defendant and/or ☐ 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.
☐ Yes, by ☐ No

School Attended: Grade:

Property Crime? ☐ Yes ☒ No — Description of Property: Value of Property:

CODE

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

Charge Description	Statute Violation Number	Violation of ORD #
POSSESSION OF COCAINE	893.13(6)(A) COCAINE	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
POSSESS AND/OR USE DRUG PARAPHERNALIA	893.147(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health - Apparent Physical Condition of Defendant: FAIR/ GOOD

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By	Released By	Released To
M HENDERSON	M. HENDERSON	MAIN JAIL

Transported By:	Date Transported	Time Transported	Other

NOTICE TO APPEAR

☐ INSTRUCTION NO. 1 - Mandatory appearance in court
☒ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): South County 200 W Atlantic Ave Delray Beach, FL 33444
Court Date and Time:

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

ADMIN

HOLD for Other Agency:
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Signature of Arresting Officer:
Name of Arresting Officer (Print): HENDERSON, M. E. ID #: 865

Name Verification (Printed by Arrestee) (PRINT):

Witness here if subject signed with an "X":

Intake Deputy: ID # Pouch #

Transporting Officer: Fowler ID # 764 Agency

PAGE 1 OF 1

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

0537732 Fowler #764 541

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PROBABLE CAUSE AFFIDAVIT

OBTS Number:

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

JUVENILE:

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2023-001178

Charge Type (Check as many as apply): [X] 1. Felony [ ] 2. Traffic Felony [ ] 3. Misdemeanor [ ] 4. Traffic Misdemeanor [ ] 5. Ordinance [ ] 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
MURPHY, SABRINA KATHLEEN		W	F	04/12/1997

CHARGES

Charge Description	Charge Description
893.13(6A) COC POSSESSION OF COCAINE	893.147(1) POSSESS AND/OR USE DRUG PARAPHERNALIA
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
State Of Florida			

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source

Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.
The Person taken into custody:

[X] committed the below acts in my presence.
[X] confessed to OFC HENDERSON admitting to the below facts.
[X] was observed by OFC. HENDERSON who told _____ that he/she saw the arrested person committ the below acts
[X] was found to have committed the below acts, resulting from my (described) investigation.

On the 25 day of January, 2023 at 04:04 (Specifically include facts constituting cause for arrest.)

On 01/25/2023 at approximately 0404 hours while conducting routine patrol in the area of 6100 NW 2nd Ave I observed a black in color Chevy parked in the community parking lot with its front and rear lights on. Upon approach of the vehicle`s passenger window, I observed the defendant put a small gray spoon with a white powdery substance to her nose, while using her right hand. I continued to watch the defendant place the spoon on her lap next to a small baggie of unknown substance; she was sitting in the driver seat of the vehicle while committing these acts.

I then approached the vehicle`s driver side window and alerted the defendant of my presence. As I spoke to the defendant, I observed her slide the small baggie and spook off her lap and place it down towards the left side of her body. The defendant was immediately removed from the vehicle and detained at the rear of my marked police vehicle.

Post Miranda the defendant stated the substance she put to her nose as well as the substance in the small baggie was in fact cocaine. Search incident to arrest the small baggie containing a white powdery substance was located in the bottom part of the driver`s side door panel, along with a small gray metal gray spoon with residue of a white powdery substance.

The substance in the baggie was field tested using a BRPD issued cocaine test kit and yielded a positive result for cocaine (blue color notification). The baggie containing the substance came to a weight of 0.3 grams.

Once it was determined the defendant would be placed under arrest a search was conducted of her persons and another small gray metal spoon was located on the left side of her bra (this item had white powdery substance residue on it as well).

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

1/25/23
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

HENDERSON, MARVIN EUGENIA JR
NAME OF OFFICER (PLEASE PRINT)

01/25/2023
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2023-001178

Charge Type (Check as many as apply): [X] 1 Felony [ ] 2 Traffic Felony [ ] 3 Misdemeanor [ ] 4 Traffic Misdemeanor [ ] 5 Ordinance [ ] 6 Other

Special Notes

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
MURPHY, SABRINA KATHLEEN		W	F	04/12/1997

PROBABLE CAUSE STATEMENT

The defendant was placed under arrest for possession of cocaine and possession/ use of drug paraphernalia.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

DATE 1/25/23

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

HENDERSON, MARVIN EUGENIA JR

NAME OF OFFICER (PLEASE PRINT)

01/25/2023

DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2023002362	**Date:** 01/26/2023
	Specialist Name/ID: T.Howard/7185