

17CF4929Bxx

Rough Arrest Only

ADMINISTRATION		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias		3		Juvenile	
OBTS Number		Agency ORI Number FL0500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06-17-593			
Charge Type: Check as many as apply.		☒ 1. Felony ☐ 2. Traffic Felony		☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		Weapon Seized/Type ☐ Yes ☐ No Multiple Clearance Indicator	
Location of Arrest (Including Name of Business)		4325 Ixora Circle, Lake Worth		Location of Offense (Business Name, Address)		4325 Ixora Circle, Lake Worth		Type:	
Date of Arrest		Time of Arrest		Booking Date		Booking Time		Jail Date	
								Jail Time	
								Location of Vehicle	
Name (Last, First, Middle)		Lemons, Amber		Alias (Name, DOB, Soc. Sec. #, Etc.)					
Race W- White I- American Indian B- Black O- Oriental/Asian		W		Sex F		Date of Birth Apr 6, 1979		Height 5'5	
						Weight 130		Eye Color Bro	
								Hair Color Bro	
								Complexion Med	
								Build Med	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status S		Religion Unk		Indication of: Alcohol Influence ☐ Y ☐ N ☐ Unk Drug Influence ☐ Y ☐ N ☐ Unk	
Local Address (Street, Apt. Number)		4325 Ixora Circle		(City) Lake Worth		(State) Florida		(Zip) (561) 324-9004	
Permanent Address (Street, Apt. Number)				(City)		(State)		(Zip)	
Business Address (Street, Apt. Number)				(City)		(State)		(Zip)	
D/L Number, State		L552004796260		Soc. Sec. Number		INS Number		Place of Birth WPB, FL	
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth	
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth	
☐ Parent ☐ Legal Custodian ☐ Other		Name (Last)		(First)		(Middle)		Residence Phone	
Address (Street, Apt. Number)				(City)		(State)		(Zip)	
Notified by: (Name)				Date		Time		Juvenile Disposition 1. Handled/Processed within Dept. and Released 2. TOT HRS/CYF 3. Incarcerated	
Released To: (Name)				Relationship		FCIC/NCIC		Date	
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 informed of any change of address:		☐ Yes, by: (Name)		☐ No: (Reason)		School Attended		Grade	
Recovery Information		0. N/A 1. Voluntary 2. Located Not Returned 3. Hospitalized 4. HRS Custody 5. Law Enforcement Custody 6. Returned to Parent 7. Deceased 8. Other							
Drug Activity		S. Sell R. Smuggle K. Dispense/ Distribute M. Manufacture Produce/ Cultivate		Z. Other		Drug Type N. N/A A. Amphetamine E. Heroin		B. Barbituate C. Cocaine H. Hallucinogen M. Marijuana O. Opium/deriv. P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other	
Charge Description		Possession of Heroin		Counts 1		Domestic Violence ☐ Yes ☒ No		Statute Violation Number 893.13	
Drug Activity		Possess		Drug Type Heroin		Amount/Unit 2.5 grams		Offense #	
Charge Description		Offer To Commit Prostitution		Counts 1		Domestic Violence ☐ Yes ☒ No		Statute Violation Number 796.07(2)(E)	
Drug Activity				Drug Type		Amount/Unit		Offense #	
Charge Description				Counts		Domestic Violence ☐ Yes ☐ No		Statute Violation Number	
Drug Activity				Drug Type		Amount/Unit		Offense #	
Charge Description				Counts		Domestic Violence ☐ Yes ☐ No		Statute Violation Number	
Drug Activity				Drug Type		Amount/Unit		Offense #	
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					
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.				Month		Day		Year	
				Time					
Signature of Defendant (or Juvenile and Parent/Custodian)				Date Signed					
HOLD for other Agency Name:				Signature of Arresting Officer X		Name Verification (Printed by Arrestee) (PRINT)			
☐ Dangerous ☐ Suicidal		☐ Resisted Arrest ☐ Other:		Name of Arresting Officer (Print) J. Fortwangler		I.D. # 8401		PAGE	
Intake Deputy		I.D. #		Pouch #		Transporting Officer		I.D. #	
						Agency		Witness here if subject signed with an "X".	
								1 OF 1	

PROBABLE CAUSE AFFIDAVIT

1 Arrest
2 NTA
3 Request for Warrant
4 Request for Capias

Juvenile

3

ADMIN	OBTS Number		Agency ORI Number FLO. 5. 0. 0. 0. 0. 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 17-593	
	Charge Type Check as many as apply ☐ 1 Felony ☐ 2 Traffic Felony		☒ 3 Misdemeanor ☐ 4 Traffic Misdemeanor		☐ 5 Ordinance ☐ 6 Other		Special Notes	
DEF	Name (Last, First, Middle) Lemons, Amber				Alias		Race W	Sex F
CHARGES	Charge Description Offer to Commit Prostitution				Charge Description Possession of Heroin			
	Charge Description				Charge Description			
	Charge Description				Charge Description			
VICTIM	Victim's Name (Last, First, Middle) State of Florida				Race		Sex	Date of Birth 4/6/79
	Local Address (Street, Apt Number)				(City)	(State)	(Zip)	Phone
	Business Address (Name, Street)				(City)	(State)	(Zip)	Phone
					(City)	(State)	(Zip)	Phone
PROBABLE CAUSE STATEMENT	The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law The Person taken into custody ☐ committed the below acts in my presence. ☒ confessed to J. Fortwangler admitting to the below facts. ☐ was observed by _____ who told _____ ☐ that he/she saw the arrested person commit the below acts. was found to have committed the below acts, resulting from my (described) investigation. On the 18 day of May 20 17 at 0100 ☒ A.M ☐ P.M (Specifically include facts constituting cause for arrest.)							
	Agents received information that Amber Dawn Lemons was actively advertising on escort web sites as a prostitute. I made contact with Lemons at phone number 561-324-9224, and Lemon's directed me to meet her at 4325 Ixora Cir., Lake Worth, FL., 33461. Lemons informed me that the fee for an hour was \$250 (USC) and she instructed me to send her a picture of myself prior to arriving. At approximately 21:15hrs on 5/17/17, I arrived in an undercover capacity and knocked on the door of the residence. Lemons answered the door and I instantly recognized her by digital photographs that I had viewed of her earlier in this investigation. At this time, I entered the residence and Lemons walked me to a bedroom towards the rear of the house. While in the bedroom, Lemons agreed to provide oral and vaginal sex in exchange for the \$250. While in the bedroom with Lemons, I observed in plain view, a small capsule partially filled with a brown/white substance. Based upon my training and experience, I immediately recognized this capsule as being consistent with the method heroin is contained. It should also be noted that a recent heroin overdose occurred inside of this residence. I then handed Lemons \$200 in US Currency, that was derived from PBSO Investigative Funds. Explaining to Lemons that I needed to retrieve the rest of the money agreed upon I walked out of the residence and gave the pre-determined take-down signal, that probable cause was established for prostitution and illegal narcotics possession. Lemons was inside the residence along with Joseph Maira (12/20/58) who is the owner of the residence. A search warrant was authored and Judge Sesser signed the warrant at which time agents began conducting a search of the residence. A search of the room Lemons was in when the offer of prostitution occurred revealed that Lemons was in possession of approximately 2.5 grams of heroin. Lemons was read her Miranda Rights and agreed to speak with me at which time she admitted the knowledge of the heroin in her room and that she currently uses heroin. At this time PC does exist for Lemons for Possession of Heroin and Offer to Commit Prostitution.							
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH							
	(Signature of Arresting Investigative Officer)							
The foregoing instrument was sworn to or affirmed and subscribed before me this 18 day of May 20 17 by _____ _____, Type of identification produced Police								
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