

J# 0504804

19MM/0600

NB P# 1320

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

1. Arrest 3. Request For Warrant  
2. M.T.A. 4. Request For Copies  1 Juvenile  N

Agency ORI Number <b>FLO 600000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>			Agency Report Number <b>06 18-128349</b>	
Charge Type Check as many as apply <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Used		Multiple Charges Indicated <input type="checkbox"/> 0 <input type="checkbox"/> 1		
Location of Arrest (Including Name of Business) <b>Jog Road/Hood Road Palm Beach Gardens</b>			Location of Offense (Including Name of Business) <b>Jog Road/Hood Road Palm Beach Gardens</b>			
Date of Arrest <b>Jan 24, 2019</b>	Time of Arrest <b>0630</b>	Booking Date <b>Jan 24, 2019</b>	Booking Time	Jail Date <b>Jan 24, 2019</b>	Jail Time <b>East Coast Towing</b>	
Name (Last, First, Middle) <b>Leveritt Camryn M</b>			Alias (Name, DOB, Soc. Sec. #, Etc.) <b>590192381</b>			
Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>05/21/1990</b>	Height <b>5'03</b>	Weight <b>170</b>	Eye Color <b>BRO</b>	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>UNK</b>		Marital Status <b>SINGLE</b>	Religion <b>UNK</b>	Complexion <b>TAN</b>	Build <b>MED</b>	
Local Address (Street, Apt. Number) <b>23A Ullian Trail Palm Coast FL 32164</b>		State	Zip <b>32164</b>	Phone <b>219-628-1710</b>		
Permanent Address (Street, Apt. Number) <b>SAME ABOVE</b>		State	Zip	Phone		
Business Address (Street, Apt. Number) <b>N/A</b>		State	Zip	Phone		
DL Number, State <b>L-143-113-90-681-0</b>		Social Security Number		Place of Birth <b>Oakland, CA</b>		
Citizenship <b>US</b>		Date of Birth				
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		
Parent Legal Guardian Name (Last, First, Middle)		Phone				
Address (Street, Apt. No.)		City	State	Zip	Business Phone	
Notified By (Name)		Date	Time	Juvenile Detention 1. Held/Processed within Dept. and Released 2. TOY HRSDYS 3. Summated		
Released To (Name)		Relationship		Date	Time	
This above address was provided by: <input type="checkbox"/> defendant's mother <input type="checkbox"/> defendant's parents. This child's mother/parent was told to keep the Juvenile Court Clerk's Office (Phone 561 385-3535) informed of any address change. <input type="checkbox"/> Yes, by (Name) <input type="checkbox"/> No (Reason)		School Attended				
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property			Value of Property	
Drug Activity M. Marijuana P. Possession T. Traffic	S. Sell B. Buy D. Deliver	K. Dispense/ Distribute	M. Manufacture/ Prepare Cultivate	Z. Other	Drug Type W. Marijuana A. Amphetamines	
Charge Description <b>Possession of Marijuana under 20grams</b>		Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number <b>893.13(6b)</b>	Violation or Ord. #	
Drug Activity <b>P</b>	Drug Type <b>M</b>	Amount/Unit	Offense # <b>18-128349</b>	Warrant/Copies Number	Bond <b>OR</b>	
Charge Description <b>Possession of Drug Paraphernalia</b>		Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number <b>893.147 (2)</b>	Violation or Ord. #	
Drug Activity <b>P</b>	Drug Type <b>M</b>	Amount/Unit	Offense #	Warrant/Copies Number	Bond <b>OR</b>	
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation or Ord. #	
Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Copies Number	Bond	
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation or Ord. #	
Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Copies Number	Bond	
Location (Court, Address, Room Number) <b>3228 Gun Club Road, WPB, FL 33406</b>						
Court Date and Time Month <b>2</b> Day <b>27</b> Year <b>19</b> Time <b>1330</b> AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>						
I AGREE TO APPEAR AT THE ABOVE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT I SHOULD 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.						
Signature of Defendant (or Juvenile and Parent/Guardian)			Date Signed			
Name <input type="checkbox"/> Dangerous <input type="checkbox"/> Substantial <input type="checkbox"/> Other		Name of Arresting Officer <b>D/S Bell</b>		ID# <b>28976</b>	(PRINT)	
Initials Deputy <b>ID P DEAR</b>		ID# <b>9131</b>	Agency <b>PSO</b>	Page <b>1 of 1</b>		

2019 JAN 25 AM 9:44

Witness here if subject signed with an 'X'

OBTs Number		<b>PROBABLE CAUSE AFFIDAVIT</b>				1. Arrest	3. Request For Warrant	1	Juvenile	N
Agency ORI Number <b>FLO 600000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>			Agency Report Number <b>06</b>		<b>18-128349</b>			
Charge Type Check as many as apply		<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes				
Defendant Name (Last, First, Middle) <b>Leveritt Carmyn</b>										
			<b>M</b>		<b>W</b>		<b>F</b>		Date of Birth <b>05/21/1990</b>	
Charge <b>Possession of Marijuana under 20grams</b>					Charge <b>Possession of Drug Paraphernalia</b>					
Victim Name (Last, First, Middle) <b>State of Florida</b>										
Local Address (Street, Apt. Number)			City		State		Zip		Phone	
Business Address (Street, Apt. Number)			City		State		Zip		Phone	
The undersign 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...										
<input type="checkbox"/> committed the below acts in my presence.					<input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.					
<input type="checkbox"/> confessed to admitting to the below facts.					<input type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.					
On the <u>24</u> day of <u>January</u> 20 <u>19</u> at <u>0630</u> <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM										

On the above date and time, I was in service in Palm Beach County, as a Deputy Sheriff. I was dispatched to a vehicle crash in the area of Jog Road North and Old Marsh Road, Palm Beach Gardens. Upon my arrival, I observed fire rescue on the side walk talking with a white female who appeared impaired but not injured. There were no other occupants in the vehicle at the time of crash and no other vehicles were involved. The driver was identified on scene as Carmyn Leveritt, DOB 05/21/1990, W/F. Ms. Leveritt provided me her information verbally before she was transported to Palm Beach Gardens Medical Center for precaution per Fire Rescue #64, RUN# 19-752. While conducting an inventory of Ms. Leveritt's vehicle, a blue in color Kia Forte, D/S Feddon #31910 observed a small glass jar filled with a green leafy substance and a blue pipe. The items were located in the center console of the vehicle. Once we cleared the scene, we traveled to the hospital to speak with Ms. Leveritt. While at the hospital, I informed Ms. Leveritt that I was no longer investigating the crash, I was now conducting a criminal investigation. I immediately read her Miranda Warnings in the presence of D/S Feddon #31910. She advised that she understood her Miranda Warnings. I asked her if she would answer any questions and she stated "yes". I asked Ms. Leveritt what vehicle she owned, and she stated a Kia Forte. I asked her if there was marijuana in the vehicle during the crash and she stated "yes". I asked her where it was located and she stated "in the center console". I also asked her about the blue pipe and she advised it was hers. Ms. Leveritt was informed that upon her release from the hospital, she would be transported to the Palm Beach County Jail for Possession of Marijuana under 20 grams, F.S. 893.13(6b) and Possession of Drug Paraphernalia, 893.147 (2). Ms. Leveritt was arrested for these charges. The green leafy substance with an odor of marijuana was field tested positive with a Duquenois Levine Reagent for Marijuana.

The foregoing instrument was sworn to and affirmed before me this <u>24</u> day of <u>January</u> 20 <u>19</u> by:	
<u>D/S P. Bell</u> 9131	<u>D/S Bell</u> 28976
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Name of Arresting/Investigating Officer
<u>[Signature]</u>	<u>[Signature]</u>
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Signature of Arresting/Investigating Officer
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**Palm Beach County Sheriff's Office – Arrests Only**

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

**REVIEW COMPLETED BY**

Booking Number: 2019002753	Date: 1/24/2019
	Specialist Name/ID: J. Beck/9007