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ARREST / NOTICE TO APPEAR


ADMINISTRATIVE	OBTS Number		1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias		1 JUVENILE	
	Agency ORI Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N.T.A.'s only) 3 2 2017-011611	
	Charge Type: Check as many as apply: <input checked="" type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type: None/not Applicable		Multiple Clearance Indicator	
	Location of Arrest (Including Name of Business) 1300 SW 1ST AVE		Location of Offense (Business Name, Address) 1300 SW 1ST AVE, BOCA RATON, FL 33432			
DEFENDANT	Date of Arrest 08/18/2017	Time of Arrest 18:45	Booking Date 08/18/2017	Booking Time 18:55	Jail Date	Jail Time
	Location of Vehicle EMERALD TOWING					
	Name (Last, First, Middle) VALVANO, CHRISTINA MARIE					
	Alias (Name, DOB, Soc. Sec. #, Etc.) Alias:					
DEFENDANT	Race W - White 1 - American Indian B - Black O - Oriental/Asian	Sex W F	Date of Birth 01/08/1999	Height 4'11	Weight 90	Eye Color BLUE
	Complexion LIGHT		Build Small		Hair Color BLONDE	
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT R ANKLE / LOTUS FLOWER; TATT R CHEST / SERATONIN		Marital Status S		Religion CHRISTIAN	
	Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>		Residence Type: 1. City 3. Florida 2. County 4. Out of State			
DEFENDANT	Local Address (Street, Apt. Number) 1255 NW 102ND WAY, CORAL SPRINGS, FL 33071		(City) (State) (Zip)		Phone	
	Permanent Address (Street, Apt. Number) 1255 NW 102ND WAY, CORAL SPRINGS, FL 33071		(City) (State) (Zip)		Phone	
	Business Address (Name, Street) SINGER ORTHODONTICS, CORAL SPRINGS		(City) (State) (Zip)		Phone	
	Occupation Worker		Citizenship US			
DEFENDANT	D/L Number, State VA15113995080 / FL		Sec. Sec. Number		INS Number	
	Place of Birth (City, State) PLANTATION, FL,		Citizenship US			
	Co-Defendant Name (Last, First, Middle)		Race		Sex	
	Co-Defendant Name (Last, First, Middle)		Race		Sex	
JUVENILE	Name (Last, First, Middle)		Residence Phone		Business Phone	
	Address (Street, Apt. Number)		(City) (State) (Zip)		Notified by: (Name)	
	Date		Time		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated	
	Released To: (Name)		Relationship		Date	
JUVENILE	The above address was provided by <input type="checkbox"/> defendant and/or <input type="checkbox"/> 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.		School Attended		Grade	
	Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property	
	Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle K. Disperse/ Distribute E. Use	
	M. Manufacture/ Produce/ Cultivate		Z. Other		B. Barbiturate C. Cocaine E. Heroin	
CHARGE	Charge Description POSSESS MARIJUANA (LESS THAN 20G)		Statute Violation Number 893.13(6B)		Violation of ORD #	
	Drug Activity P		Drug Type M		Amount / Unit 7.9 / gm	
	Offense # 2017-011611		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
	Warrant / Capias Number		Bond OR			
CHARGE	Charge Description POSS DRUG PARAPHENALLA		Statute Violation Number 893.147(1)		Violation of ORD #	
	Drug Activity P		Drug Type P		Amount / Unit 1 / ea	
	Offense # 2017-011611		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
	Warrant / Capias Number		Bond OR			
CHARGE	Charge Description POSSESSION OF SCHEDULE IV SUBSTANCE		Statute Violation Number 893.13(6A),,,,,,		Violation of ORD #	
	Drug Activity P		Drug Type Z		Amount / Unit 2.8 gm	
	Offense # 2017-011611		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
	Warrant / Capias Number		Bond 4500			
INTAKE	Health / Apparent Physical Condition of Defendant GOOD		Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries		Explain:	
	Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health		PROPERTY - Received By RAFALKO		Released By RAFALKO	
	Transported By RAFALKO		Date Transported 08/19/2017		Time Transported 00:30	
	Released To PBCJ		Released To PBCJ			
NOTICE TO APPEAR	<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input checked="" type="checkbox"/> 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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.		Signature of Defendant (or Juvenile and Parent/Custodian)			
	Date Signed		Signature of Arresting Officer RAFALKO, TRAVIS			
	Name of Arresting Officer (Print) RAFALKO, TRAVIS		I.D. # 779			
ADMINISTRATIVE	HOLD for Other Agency		Name Verification (Printed by Arrestee) (PRINT)		PAGE 1 OF 2	
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Transporting Officer RAFALKO		I.D. # 779	
	Agency BRPD		Witness here if subject signed with an "X".		PAGE 1 OF 2	
	Signature of Defendant (or Juvenile and Parent/Custodian) Thomas Tide		Signature of Arresting Officer RAFALKO			

**ARREST / NOTICE TO APPEAR  
Additional Charge List**

Agency ORI Number <b>0500200</b>		Agency Name <b>Boca Raton Police Department</b>			Agency Report Number (N.T.A.'s only) <b>3   2   2017-011611</b>						
CHARGE	Drug Activity	S. Sell	R. Smuggle	K. Disperses/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type	B. Barbiturate	H. Hallucinogen	P. Paraphernalia/ Equipment	U. Unknown
	N. N/A	B. Buy	D. Deliver				N. N/A	C. Cocaine	M. Marijuana	S. Synthetic	Z. Other
	P. Possess	T. Traffic	E. Use				A. Amphetamine	E. Heroin	O. Opium/Deriv.		
CHARGE	Charge Description <b>TRAFFICKING IN LSD</b>							Statute Violation Number <b>893.135(1L1A)</b>		Violation of ORD # <b>NO BIND</b>	
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number		Bond		
	<b>7</b>	<b>H</b>	<b>7</b> / <b>gm</b>	<b>2017-011611</b>	<b>1</b>	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N					
CHARGE	Charge Description <b>CONTRIBUTE TO DELINQUENCY OF A CHILD</b>							Statute Violation Number <b>827.04(1A)</b>		Violation of ORD # <b>OK</b>	
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number		Bond		
			/	<b>2017-011611</b>	<b>1</b>	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N					

**NOT A CERTIFIED COPY**

OBT Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		<b>1</b>	JUVENILE
Agency ORI Number	Agency Name		Agency Report Number						
<b>FL 0500200</b>	<b>BOCA RATON POLICE DEPARTMENT</b>		<b>3   2   2017-011611</b>						
Charge Type: Check as many as apply.			Special Notes:						
<input checked="" type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other									
Name (Last, First, Middle)					Race		Sex		Date of Birth
<b>VALVANO, CHRISTINA MARIE</b>					<b>W</b>		<b>F</b>		<b>01/08/1999</b>
Charge Description					Charge Description				
<b>893.13(6B) POSSESS MARIJUANA (LESS THAN 20G)</b>					<b>893.147(1) POSS DRUG PARAPHENALIA</b>				
Charge Description					Charge Description				
<b>893.13(6A) POSSESSION OF SCHEDULE IV SUBSTAN</b>					<b>893.135(1L1A) TRAFFICKING IN LSD</b>				
Victim's Name (Last, First, Middle)					Race		Sex		Date of Birth
<b>STATE OF FLORIDA,</b>									
Local Address (Street, Apt. Number)					(City)		(State)		(Zip)
<b>100 NW 2ND AVE, BOCA RATON, FL 33432</b>									
Business Address (Name, Street)					(City)		(State)		(Zip)
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...									
<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 checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.									
On the <b>18</b> day of <b>August</b> , <b>2017</b> at <b>18:45</b> (Specifically include facts constituting cause for arrest.)									
<p>Charge #5 Contributing to the delinquency of a child contrary to F.S.S 827.04(1) (A)</p> <p>Victim #2 [REDACTED] (12/7/2000)</p> <p>On 8/18/17 at 1805 hours, I responded to 1300 SW 1st Ave in reference to a welfare check. While en-route BRPD Communications advised that, the caller, W/M [REDACTED], believed that his daughter, W/F/J [REDACTED] (16 years old), was at this location and was using narcotics with a friend. Upon my arrival, I made contact with BRFD who were treating [REDACTED] for LSD consumption. [REDACTED] was transported by BRFD to West Boca Medical Center for treatment and she did not meet the criteria for a Baker Act. [REDACTED] advised that she was with her friend, W/F Christina Valvano (18 years old), who had provided her with LSD and that she ingested two LSD laced gummies along with Valvano.</p> <p>When [REDACTED] arrived on scene, he pointed out a 2008 silver Mazda 4 door bearing FL tag IHEZ16 as being the vehicle that Valvano drives. I knocked on the driver's window and the driver/sole occupant of the vehicle, W/F Christina Valvano, opened the door. I immediately smelled a strong odor of marijuana emanating from the vehicle. I had Valvano exit the vehicle and read Valvano her constitutional rights from a preprinted card, which she advised that she understood and that she wished to speak with me.</p> <p>Valvano advised that she smoked marijuana at 1800 hours and ingested LSD laced gummies at 1300 hours. Valvano advised that she had a bag of marijuana in the glove box and LSD laced gummies in her black purse on the front passenger seat. I then proceeded to search the vehicle and found a clear pouch, which contained two bags of marijuana in the glove box. I field-tested the marijuana with a Quick Check test kit. The field test was positive for THC by turning purple. I placed the marijuana on a digital scale. The marijuana weighed 7.9 grams. I found a glass pipe in the cup holder by the center console, which Valvano admitted to using to smoke her marijuana.</p>									
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>SWORN AND SUBSCRIBED BEFORE ME</p> <p><b>GRAHAM, KEITH T</b> #74</p> <p>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p><b>08/19/2017</b></p> <p>DATE</p> </div> <div style="width: 45%;"> <p>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p><b>RAFALKO, TRAVIS (779)</b></p> <p>NAME OF OFFICER (PLEASE PRINT)</p> <p><b>08/19/2017</b></p> <p>DATE</p> </div> </div>									

OBTIS 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						
<b>FL 0500200</b>	<b>BOCA RATON POLICE DEPARTMENT</b>		<b>3   2</b>		<b>2017-011611</b>				
Charge Type: <input checked="" type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other				Special Notes:					
Name (Last, First, Middle)				Alias		Race	Sex	Date of Birth	
<b>VALVANO, CHRISTINA MARIE</b>						<b>W</b>	<b>F</b>	<b>01/08/1999</b>	
<p>Inside of Valvano's black purse which was on the front passenger seat were two small plastic bags which contained 6 white tablets and 1 green tablet which weighed 2.8 grams. I contacted poison control and spoke with Sergio regarding poison control case number 3567043 who advised that based upon the description of the pills that I provided to him, that all of the tablets were 2 MG's of Alprazolam which he advised is a schedule four substance. Valvano advised that she did not have a prescription for Alprazolam. I also located a plastic bag inside of Valvano's purse which contained two multicolored gummies that Valvano advised were laced with LSD, which weighed 7 grams including packaging. I tested the gummies using a NARK II test kit. The field test was positive for LSD by turning purple.</p> <p>Valvano unlawfully provided [REDACTED] with LSD, which did cause [REDACTED] to become a child in need of services, contrary to F.S.S. 827.04(1)(A). Valvano was knowingly in constructive possession of 7 grams of lysergic acid diethylamide (LSD), contrary to F.S.S. 393.135(1)(1)1a.</p> <p>Based on my investigation, Valvano is being charged with Possession of Marijuana &lt;20 grams F.S.S. 893.13(6B), Possession of Paraphernalia F.S.S. 893.147(1), F.S.S. 893.13(6A) possession of a controlled substance (Xanax), Possession of LSD contrary to F.S.S. 393.135(1)(1)1a, and contributing to the delinquency of a child contrary to F.S.S. 827.04(1)(A). Valvano was TOT PBCJ after she was medically cleared at BRRH.</p> <p>I submitted the marijuana, the glass pipe, the Alprazolam, and the LSD into BRPD Evidence. Detective Baker responded to interview Valvano and [REDACTED]. [REDACTED] was released to her father after she spoke with Detective Baker. The incident was not captured on mobile video (video evidence reviewer). Valvano's vehicle was towed to Emerald Towing.</p>									
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>SWORN AND SUBSCRIBED BEFORE ME</p> <p style="text-align: center;"><b>GRAHAM, KEITH T</b></p> <p style="text-align: center;">NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p style="text-align: center;"><b>08/19/2017</b></p> <p style="text-align: center;">DATE</p> </div> <div style="width: 45%;"> <p style="text-align: center;"></p> <p style="text-align: center;">SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p style="text-align: center;"><b>RAFALKO, TRAVIS (779)</b></p> <p style="text-align: center;">NAME OF OFFICER (PLEASE PRINT)</p> <p style="text-align: center;"><b>08/19/2017</b></p> <p style="text-align: center;">DATE</p> </div> </div>									