

0487511

NT

17MM 521695

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report1. Arrest  
2. N.T.A.  
3. Request for Warrant  
4. Request for Capias

1 Juvenile

N

OBTS Number		Agency ORI Number		Agency Name		Agency Report Number (N.T.A.'s only)					
FLO 500000		PALM BEACH COUNTY SHERIFF'S OFFICE		06-		17070933					
Charge Type: Check as many as apply. 1. Felony 2. Traffic Felony		3. Misdemeanor 4. Traffic Misdemeanor		5. Ordinance 6. Other		Weapon Seized / Type 2 1. Yes 2. No		Multiple Clearance Indicator 01			
Location of Arrest (Including Name of Business) 2300 N. Dixie Highway Lake worth		FL 33460		Location of Offense (Business Name, Address) 2300 N. Dixie Highway		FL 33460					
Date of Arrest 04/29/2017		Time of Arrest 8:14		Booking Date		Booking Time		Jail Date			
								Jail Time			
								Location of Vehicle			
Race W - White 1 - American Indian B - Black 0- Oriental/Asian		Sex W M		Date of Birth 03/02/1993		Height 6'01		Weight 160			
								Eye Color Brown			
								Hair Color Brown			
								Complexion Fair			
								Build Thin			
Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description) Tattoos on right arm				Marital Status Married		Religion NONE		Indication of: Y N Alcohol Influence Drug Influence			
Local Address (Street, Apt. Number) 512 Big Green Rd		(City) (State) W.P.B FL 33405		(Zip)		Phone (561) 4202574		Residence Type: 1. City 2. County 3. Florida 4. Out of State			
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone			
Business Address (Name, Street)		(City)		(State)		(Zip)		Phone			
D/L Number, State R362161930820		Soc. Sec. Number		INS Number				Place of Birth (City, State) Cuba			
								Citizenship Resident			
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth			
								<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large			
								<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile			
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth			
								<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large			
								<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile			
Parent Legal Custodian Other:		Name (Last) (First) (Middle)						Residence Phone ( )			
Address (Street, Apt. Number)		(City)		(State)		(Zip)		Business Phone ( )			
Notified by: (Name)		Date 04/29/2017		Time		Juvenile Disposition 1. Handled/processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated					
Released To: (Name)		Relationship						Date Time			
The above address 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 (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)								Grade			
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> 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. Dispense/ 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. Synthetics	U. Unknown Z. Other
CHARGE	Charge Description SOLICITING ANOTHER TO COMMIT PROSTITUTION				Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 796.07 (4A1).		Violation of ORD #		
CHARGE	Drug Activity N/A	Drug Type	Amount / Unit	Offense # 17070933			Warrant / Capias Number		Bond		
CHARGE	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #		
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #			Warrant / Capias Number		Bond		
CHARGE	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #		
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #			Warrant / Capias Number		Bond		
CHARGE	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #		
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #			Warrant / Capias Number		Bond		
NOTICE TO APPEAR	Location (Court, Room Number, Address) CRIMINAL JUSTICE COMPLEX 3228 GUN CLUB ROAD WBB FL 30										
NOTICE TO APPEAR	Court Date and Time Month May Day 16 Year 2017 Time 8:30 AM ✓ CPM AH										
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											
ADMIN	Signature of Defendant (or Juvenile and Parent /Custodian) Date Signed										

