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2018mm 001329

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1 Arrest 2 NTA.		3. Request for Warrant 4. Request for Capias		1		Juvenile									
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number 18032753													
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 Seized		Enter Type		Multiple Clearance Indicator													
Location of Arrest (including Name of Business) 1133 ROYAL PALM BEACH BLVD, 33411						Location of Offense (Business Name, Address) 1133 ROYAL PALM BEACH BLVD, 33411													
Date of arrest 01/30/18		Time of Arrest 1651		Booking Date		Booking Time		Jail Date		Jail Time									
Name (Last, First, Middle) DIVINE DAWN M.																			
Alias (Name, DOB, Soc. Sec. #, Etc.)																			
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex F		Date of Birth 06/13/73		Height 5'4		Weight 135		Eye Color BLO		Hair Color GRE		Complexion FAIR		Build MED			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE						Marital Status SINGLE		Religion NONE		Indication of: Alcohol Influence Drug Influence		<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk.							
Local Address (Street, Apt. Number) 134 SOUTH DR				(City) LAKE WALES		(State) FL		(zip) 33859		Phone ()		Residence Type: 1. City 2. County 3. Florida 4. Out of State		3					
Permanent Address (Street, Apt. Number)				(City)		(State)		(zip)		Phone		Address Source DAVID							
Business Address (Name, Street)				(City)		(State)		(zip)		Phone		Occupation NONE							
D/L Number, State D150-173-73-713-1				Soc. Sec. Number				INS Number		Place of Birth (City, State) FLORIDA		Citizenship US							
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					
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other		Name (Last) (First) (Middle)				Residence Phone ()													
Address (Street, Apt. Number)		(City)		(State)		(zip)		Business Phone ()											
Notified by: (Name)				Date		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 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. Yes, by (Name) No: (Reason)						School Attended				Grade									
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property				Value of Property													
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/ U. Unknown Equipment S. Synthetic Z. Other	
Charge Description DISORDERLY INTOXICATION				Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 856.011(1)				Violation of ORD #							
Drug Activity N		Drug Type N		Amount / Unit		Offense # 18032753		Warrant / Capias Number				Bond							
Charge Description				Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number				Violation of ORD #							
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number				Bond							
Charge Description				Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number				Violation of ORD #							
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number				Bond							
Charge Description				Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number				Violation of ORD #							
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number				Bond							
Location (Court, Room Number, Address) 3228 GUN CLUB RD, WPB, FL 33406																			
Court Date and Time Month 02 Day 20 Year 2018 Time 9:30 AM.																			
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																			
Signature of Defendant (or Juvenile and Parent/ Custodian)										Date Signed									
HOLD for other Agency Name				Signature of Arresting Officer X				Name Verifier (Printed by Arrestee) SCANNED											
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) C. HERNANDEZ				I.D. # 6635		(FRONT)									
Intake Deputy D/S C. GILYARD		I.D. # #7392		Pouch #		Transporting Officer D/S C. FLORES 8478		I.D. # PBSC		Agency									
Witness here if suspect signed with an "X"										PAGE 1 OF 1									

D/S C. GILYARD #7392

PBSO 4958

2018 JAN 30 AM 9:16
PALM BEACH COUNTY
SHERIFF'S OFFICE
CLERK

SCANNED
FEB 02 2018

PROBABLE CAUSE AFFIDAVIT

1 Arrest
2 NTA

3 Request for Warrant
4 Request for Capias

1

Juvenile

OBTS Number	PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 NTA	3 Request for Warrant 4 Request for Capias	1	Juvenile
Agency ORI Number FLO 5 0 0 0 0 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 18032753				
Charge Type Check as many as apply	<input type="checkbox"/> 1 Felony	<input checked="" type="checkbox"/> 3 Misdemeanor	<input type="checkbox"/> 5 Ordinance	Special Notes		
	<input type="checkbox"/> 2 Traffic Felony	<input type="checkbox"/> 4 Traffic Misdemeanor	<input type="checkbox"/> 6 Other			

Name (Last, First, Middle) DIVINE DAWM M.	Alias	Race W	Sex F	Date of Birth 06/13/73
Charge Description DISORDERLY INTOXICATION	Charge Description			
Charge Description	Charge Description			

Victim's Name (Last, First, Middle) STATE OF FLORIDA	Race	Sex	Date of Birth
Local Address (Street, Apt Number) (City) (State) (Zip)	Phone ()	Address Source	
Business Address (Name, Street) (City) (State) (Zip)	Phone ()	Occupation	

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 _____ admitting to the below facts.

was observed by Linda Griffiths who told D/S Hernandez #6635
 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 30th day of January 20 18 at 4:17 A.M P.M (Specify include facts constituting cause for arrest.)

On the above date and time I was dispatched to 1133 Royal Palm Beach Blvd., Dollar Value Store in regards to a disorderly person complaint. Deputy Flores (8478) and I made contact with a white female later identified through DAVID as Dawn Divine in front of this store.

Divine was taking off her pants and saying that he had urinated herself. Divine was asked why she didn't leave the area when asked by the property manager Linda Griffiths, who was also present during this incident. Divine was asked numerous times to leave the premises and she refused. Divine was asked numerous times to identify herself and she refused all verbal requests made by me in front of Deputy Flores and Linda Griffiths.

Divine was asked approximately five times to leave the area and identify herself. Divine was under the influence of alcohol. Her breath had a strong odor of alcohol and her clothes also had a strong odor of alcohol. Her clothes were wet due to her urinating herself.

Based on the above described investigation there's Probable Cause to charge Dawn Divine with Disorderly Intoxication, contrary to FSS 856.011 (1).

PROBABLE CAUSE STATEMENT

NOTARIAL PUBLIC

STATE OF FLORIDA COUNTY OF PALM BEACH	<i>[Signature]</i>
(Signature of Arresting/Investigative Officer)	
The foregoing instrument was sworn to or affirmed and subscribed before me this <u>30th</u> day of <u>January</u> 20 <u>18</u> by <u>Deputy Hernandez 6635</u>	
(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced _____	Known SCANNED
<u>D/S C. Proctor 5474</u>	
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)	PAGE 1
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