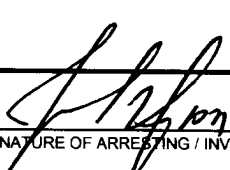


A D M I N I S T R A T I O N	OBTS Number		ARREST / NOTICE TO APPEAR		17-013961		JUVENILE				
	Agency ORI Number 0500400		Agency Name Delray Beach Police Department		Agency Report Number (N.T.J. only) 4 0 17-013961						
D E F E N D A N T	Charge Type: Check as many as apply: <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input 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: None/not Applicable		Multiple Clearance Indicator 3						
	Location of Arrest (Including Name of Business) 1 SW 12TH AVE DELRAY BEACH FL 33444		Location of Offense (Business Name, Address) 1 SW 12TH AVE, DELRAY BEACH, FL 33444								
J U V E N I L E	Date of Arrest 09/03/2017	Time of Arrest 01:37	Booking Date 09/03/2017	Booking Time 01:47	Jail Date / /	Jail Time :	Location of Vehicle				
	Name (Last, First, Middle) KONTOS, DEAN W		Alias: Alias (Name, DOB, Soc. Sec. #, Etc.)								
C O D E	Race W - White B - Black O - Oriental/Asian	Sex M	Date of Birth 10/25/1963	Height 5'08	Weight 181	Eye Color GREEN	Hair Color WHITE	Complexion LIGHT	Build MEDIUM		
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status NOT INDICA		Religion		Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
C O D E	Local Address (Street, Apt. Number) 5340 LAS VERDES CIR 307, DELRAY BEACH, FL 33484		(City) DELRAY BEACH		(State) FL		(Zip) 33484		Phone (561) 507-6790		
	Permanent Address (Street, Apt. Number) 5340 LAS VERDES CIR 307, DELRAY BEACH, FL 33484		(City) DELRAY BEACH		(State) FL		(Zip) 33484		Phone (561) 507-6790		
C O D E	Business Address (Name, Street) 5340 LAS VERDES CIR 307, DELRAY BEACH, FL 33484		(City) DELRAY BEACH		(State) FL		(Zip) 33484		Phone (561) 507-6790		
	D/L Number, State K64541578610636 / NJ		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) JERSEY CITY, NJ,		Citizenship US		
C O D E	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile		
	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile		
J U V E N I L E	<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ <input type="checkbox"/> Legal Custodian		Name (Last, First, Middle)		Residence Phone						
	Address (Street, Apt. Number)		(City)		(State)		(Zip)		Business Phone		
J U V E N I L E	Notified by: (Name)		Date		Time		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated				
	Released To: (Name)		Relationship		Date		Time				
C O D E	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. <input type="checkbox"/> Yes, by: _____ <input type="checkbox"/> No: _____		School Attended		Grade						
	Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property						
C O D E	Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Disperses/ 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. Synthetic	U. Unknown Z. Other
	Charge Description POSSESSION OF COCAINE		Statute Violation Number 893.13 (6 A)		Violation of ORD #						
C H A R G E	Drug Activity P	Drug Type C	Amount / Unit 1.00 / GM	Offense # 17-013961	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number		Bond		
	Charge Description RESIST/OBSTRUCT OFFICER W/O VIOLENCE		Statute Violation Number 843.02		Violation of ORD #						
C H A R G E	Drug Activity N	Drug Type N	Amount / Unit /	Offense # 17-013961	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number		Bond		
	Charge Description TAMPER/DESTROY EVIDENCE		Statute Violation Number 918.13(1A)		Violation of ORD #						
I N T A K E	Health / Apparent Physical Condition of Defendant		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		PROPERTY - Received By		Released By		Released To				
N O T I C E T O A P P E A R	Transported By		Date Transported / /		Time Transported		Other				
	<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input 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						
A D M I N	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) [Signature]		Date Signed 2017 SEP 03		No Photo Available				
	HOLD for Other Agency		Signature of Arresting Officer [Signature]		Name Verification (Printed by Arrestee) [Signature]						
A D M I N	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Name of Arresting Officer (Print) KRATZ, JOSEPH R.		I.D. # 1077						
	Intake Deputy I.D. #		Pouch #		Transporting Officer KRATZ		I.D. # 1077		Agency DBPD		
								PAGE 1 OF 1			

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 N.T.A. 3 Request for Warrant 4 Request for Capias		1	JUVENILE
Agency ORI Number FL 0500400	Agency Name DELRAY BEACH POLICE DEPARTMENT	Agency Report Number 4 0 17-013961					
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		Social Notes:					
Name (Last, First, Middle) KONTOS, DEAN W						Race W	Sex M
						Date of Birth 10/25/1963	
Charge Description 893.13 (6 A) POSSESSION OF COCAINE		Charge Description 843.02 RESIST/OBSTRUCT OFFICER W/O VIOLENCE					
Charge Description 918.13(1A) TAMPER/DESTROY EVIDENCE							
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	
<p>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.</p> <p>The Person taken into custody . . .</p> <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> committed the below acts in my presence. <input checked="" type="checkbox"/> confessed to OFC KRATZ admitting to the below facts. </div> <div> <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation. </div> </div> <p>On the 3 day of September, 2017 at 02:31 (Specifically include facts constituting cause for arrest.)</p> <p>The following incident occurred in the City of Delray Beach, Palm Beach County, Florida.</p> <p>On 9/3/17 at approximately 0136 hours, members of the Bravo POP team observed a silver Jeep (NJ Tag: T42EVU) run the westbound stop sign at SW 2nd St and SW 12th Ave. A traffic stop was conducted on the vehicle in the 1st block of SW 12th Ave. As I approached the passenger side of the vehicle, I observed the driver (defendant) attempting to conceal something in his right hand. When I began to order him not to move, he dropped a piece of a white rocklike substance onto the front passenger seat. I again ordered him not to move. The defendant then picked up the rocklike substance and dropped it down between his driver's seat and the center console. Sgt DeBree then took the defendant out of the vehicle.</p> <p>When I conducted a search of the vehicle, I located a piece of a white rocklike substance under the defendant's driver's seat. Based on my training, knowledge and experience I suspected the substance to be crack cocaine. Sgt DeBree also located a piece of the same white rocklike substance in the center cup holder of the vehicle. Ofc B Brown field tested the suspected cocaine using a Lynn and Peavey cocaine test kit, in which it yielded a positive reaction by turning blue in color. I read the defendant his Miranda Warning verbatim from my department issued Miranda card. Post Miranda, the defendant admitted to purchasing one "rock" of crack cocaine and attempted to hide it from officers because he did not want to get in trouble. This was captured on my Body Worn Camera.</p> <p>Based on the above stated facts, probable cause exists to charge Dean Kontos with one count of Possession of Cocaine pursuant to FSS 893.13(6A), one count of Tampering with Evidence pursuant to FSS 918.13(1A), and one count of Resisting without Violence pursuant to FSS 843.02.</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;">DEBREE, MICHAEL</p> <p style="text-align: center;">NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p style="text-align: center;">09/03/2017</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;">KRATZ, JOSEPH R (1077)</p> <p style="text-align: center;">NAME OF OFFICER (PLEASE PRINT)</p> <p style="text-align: center;">09/03/2017</p> <p style="text-align: center;">DATE</p> </div> </div>							
						PAGE 1 OF 1	

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

SEP