

0482680

667

| OBTS Number                                                                                                                                                                                                                                                                                                        |  | ARREST / NOTICE TO APPEAR<br>Juvenile Referral Report                                   |  | 1. Arrest<br>2. N.T.A.                                                                |  | 3. Request for Warrant<br>4. Request for Capias                                                                                                         |  | Juvenile                                                                              |  |                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                   |  |                                                                             |  |                                                    |  |                                                |  |                                                                              |  |                                                                                                                       |  |                    |  |                                                                                                              |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------|--|----------------------------------------------------|--|------------------------------------------------|--|------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------|--|--------------------|--|--------------------------------------------------------------------------------------------------------------|--|
| Agency ORI Number<br>FLO 502600                                                                                                                                                                                                                                                                                    |  | Agency Name<br>PALM BEACH GARDENS POLICE DEPT.                                          |  | Agency Report Number (N.T.A.'s only)<br>78116100590411                                |  |                                                                                                                                                         |  |                                                                                       |  |                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                   |  |                                                                             |  |                                                    |  |                                                |  |                                                                              |  |                                                                                                                       |  |                    |  |                                                                                                              |  |
| Charge Type:<br>Check as many as apply.<br><input checked="" type="checkbox"/> 1. Felony<br><input type="checkbox"/> 2. Traffic Felony<br><input type="checkbox"/> 3. Misdemeanor<br><input type="checkbox"/> 4. Traffic Misdemeanor<br><input type="checkbox"/> 5. Ordinance<br><input type="checkbox"/> 6. Other |  | If Weapon Seized<br>Enter Type <u>Glock 23</u>                                          |  | Multiple Clearance Indicator <u>1</u>                                                 |  |                                                                                                                                                         |  |                                                                                       |  |                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                   |  |                                                                             |  |                                                    |  |                                                |  |                                                                              |  |                                                                                                                       |  |                    |  |                                                                                                              |  |
| Location of Arrest (Including Name of Business)<br><u>3412 Primrose CT, PBG, FL 33418</u>                                                                                                                                                                                                                          |  | Location of Offense (Business Name, Address)<br><u>PGA Blvd / Lake Victoria Gardens</u> |  |                                                                                       |  |                                                                                                                                                         |  |                                                                                       |  |                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                   |  |                                                                             |  |                                                    |  |                                                |  |                                                                              |  |                                                                                                                       |  |                    |  |                                                                                                              |  |
| Date of arrest<br><u>11.2.1.619.09</u>                                                                                                                                                                                                                                                                             |  | Booking Date                                                                            |  | Booking Time                                                                          |  | Jail Date                                                                                                                                               |  | Jail Time                                                                             |  | Location of Vehicle                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                   |  |                                                                             |  |                                                    |  |                                                |  |                                                                              |  |                                                                                                                       |  |                    |  |                                                                                                              |  |
| Name (Last, First, Middle)<br><u>HaberKorn, Jack, Michael</u>                                                                                                                                                                                                                                                      |  | Alias (Name, DOB, Soc. Sec. #, Etc.)                                                    |  |                                                                                       |  |                                                                                                                                                         |  |                                                                                       |  |                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                   |  |                                                                             |  |                                                    |  |                                                |  |                                                                              |  |                                                                                                                       |  |                    |  |                                                                                                              |  |
| Race<br>W - White<br>B - Black                                                                                                                                                                                                                                                                                     |  | Sex<br><u>M</u>                                                                         |  | Date of Birth<br><u>09.01.94</u>                                                      |  | Height<br><u>6'6"</u>                                                                                                                                   |  | Weight<br><u>220</u>                                                                  |  | Eye Color<br><u>Brn</u>                                                                                               |  | Hair Color<br><u>Blk</u>                                                                                                                                                                                                                                                                                                                          |  | Complexion<br><u>Tan</u>                                                    |  | Build<br><u>Mid</u>                                |  |                                                |  |                                                                              |  |                                                                                                                       |  |                    |  |                                                                                                              |  |
| Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)<br><u>Right shoulder, Left upper chest</u>                                                                                                                                                                                           |  | Marital Status<br><u>S</u>                                                              |  | Religion<br><u>N/A</u>                                                                |  | Indication of:<br>Alcohol Influence<br>Drug Influence<br><input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Unk. |  | Residence Type:<br>1. City<br>2. County<br>3. Florida<br>4. Out of State<br><u>11</u> |  | Address Source<br><u>FL-OL</u>                                                                                        |  | Occupation<br><u>Real Estate</u>                                                                                                                                                                                                                                                                                                                  |  | Citizenship<br><u>U.S.</u>                                                  |  |                                                    |  |                                                |  |                                                                              |  |                                                                                                                       |  |                    |  |                                                                                                              |  |
| Local Address (Street, Apt. Number)<br><u>10881 Magnolia St</u>                                                                                                                                                                                                                                                    |  | (City)<br><u>PBG</u>                                                                    |  | (State)<br><u>FL</u>                                                                  |  | (Zip)<br><u>33418</u>                                                                                                                                   |  | Phone<br><u>(561) 320 9332</u>                                                        |  | Permanent Address (Street, Apt. Number)<br><u>( )</u>                                                                 |  | (City)<br><u>( )</u>                                                                                                                                                                                                                                                                                                                              |  | (State)<br><u>( )</u>                                                       |  | (Zip)<br><u>( )</u>                                |  |                                                |  |                                                                              |  |                                                                                                                       |  |                    |  |                                                                                                              |  |
| Business Address (Name, Street)<br><u>( )</u>                                                                                                                                                                                                                                                                      |  | (City)<br><u>( )</u>                                                                    |  | (State)<br><u>( )</u>                                                                 |  | (Zip)<br><u>( )</u>                                                                                                                                     |  | Phone<br><u>( )</u>                                                                   |  | Place of Birth (City, State)<br><u>Chicago, IL</u>                                                                    |  | Citizenship<br><u>U.S.</u>                                                                                                                                                                                                                                                                                                                        |  | D/L Number, State<br><u>H162433943210</u>                                   |  | Soc. Sec. Number<br><u>( )</u>                     |  |                                                |  |                                                                              |  |                                                                                                                       |  |                    |  |                                                                                                              |  |
| Co-Defendant Name (Last, First, Middle)<br><u>( )</u>                                                                                                                                                                                                                                                              |  | Race<br><u>( )</u>                                                                      |  | Sex<br><u>( )</u>                                                                     |  | Date of Birth<br><u>( )</u>                                                                                                                             |  | <input type="checkbox"/> 1. Arrested<br><input type="checkbox"/> 2. At Large          |  | <input type="checkbox"/> 3. Felony<br><input type="checkbox"/> 4. Misdemeanor<br><input type="checkbox"/> 5. Juvenile |  | Co-Defendant Name (Last, First, Middle)<br><u>( )</u>                                                                                                                                                                                                                                                                                             |  | Race<br><u>( )</u>                                                          |  | Sex<br><u>( )</u>                                  |  | Date of Birth<br><u>( )</u>                    |  | <input type="checkbox"/> 1. Arrested<br><input type="checkbox"/> 2. At Large |  | <input type="checkbox"/> 3. Felony<br><input type="checkbox"/> 4. Misdemeanor<br><input type="checkbox"/> 5. Juvenile |  |                    |  |                                                                                                              |  |
| <input type="checkbox"/> Parent<br><input type="checkbox"/> Legal Custodian<br><input type="checkbox"/> Other:                                                                                                                                                                                                     |  | Name (Last)<br><u>( )</u>                                                               |  | (First)<br><u>( )</u>                                                                 |  | (Middle)<br><u>( )</u>                                                                                                                                  |  | Residence Phone<br><u>( )</u>                                                         |  | Address (Street, Apt. Number)<br><u>( )</u>                                                                           |  | (City)<br><u>( )</u>                                                                                                                                                                                                                                                                                                                              |  | (State)<br><u>( )</u>                                                       |  | (Zip)<br><u>( )</u>                                |  | Business Phone<br><u>( )</u>                   |  | Notified by: (Name)<br><u>( )</u>                                            |  | Date<br><u>( )</u>                                                                                                    |  | Time<br><u>( )</u> |  | Juvenile Disposition<br>1. Handled/Processed within Dept. and Released.<br>2. TOT HRS/DYS<br>3. Incarcerated |  |
| Released To: (Name)<br><u>( )</u>                                                                                                                                                                                                                                                                                  |  | Relationship<br><u>( )</u>                                                              |  | Date<br><u>( )</u>                                                                    |  | Time<br><u>( )</u>                                                                                                                                      |  | School Attended<br><u>NOV 13 AM 2:42</u>                                              |  | Grade<br><u>( )</u>                                                                                                   |  | 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.<br><input type="checkbox"/> Yes, by: (Name)<br><input type="checkbox"/> No: (Reason) |  | Property Crime?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |  | Description of Property<br><u>( )</u>              |  | Value of Property<br><u>( )</u>                |  |                                                                              |  |                                                                                                                       |  |                    |  |                                                                                                              |  |
| Drug Activity<br>N. N/A<br>P. Possess                                                                                                                                                                                                                                                                              |  | S. Sell<br>T. Traffic                                                                   |  | R. Smuggle<br>D. Deliver<br>E. Use                                                    |  | K. Dispense/<br>Distribute                                                                                                                              |  | M. Manufacture/<br>Produce/<br>Cultivate                                              |  | Z. Other                                                                                                              |  | Drug Type<br>N. N/A<br>A. Amphetamine                                                                                                                                                                                                                                                                                                             |  | B. Barbiturate<br>C. Cocaine<br>E. Heroin                                   |  | H. Hallucinogen<br>M. Marijuana<br>O. Opium/Deriv. |  | P. Paraphernalia/<br>Equipment<br>S. Synthetic |  | U. Unknown<br>Z. Other                                                       |  |                                                                                                                       |  |                    |  |                                                                                                              |  |
| Charge Description<br><u>Aggravated Assault w/ Firearm</u>                                                                                                                                                                                                                                                         |  | Counts<br><u>1</u>                                                                      |  | Domestic Violence<br><input type="checkbox"/> Y <input checked="" type="checkbox"/> N |  | Statute Violation Number<br><u>78.4102.1.1(1)(A)</u>                                                                                                    |  | Violation of ORD #<br><u>( )</u>                                                      |  | Drug Activity<br><u>( )</u>                                                                                           |  | Drug Type<br><u>( )</u>                                                                                                                                                                                                                                                                                                                           |  | Amount / Unit<br><u>( )</u>                                                 |  | Offense #<br><u>16-005906</u>                      |  | Warrant / Capias Number<br><u>( )</u>          |  | Bond<br><u>NONE</u>                                                          |  |                                                                                                                       |  |                    |  |                                                                                                              |  |
| Charge Description<br><u>Carrying a Concealed Firearm</u>                                                                                                                                                                                                                                                          |  | Counts<br><u>1</u>                                                                      |  | Domestic Violence<br><input type="checkbox"/> Y <input checked="" type="checkbox"/> N |  | Statute Violation Number<br><u>79.0110.1.1(12)</u>                                                                                                      |  | Violation of ORD #<br><u>( )</u>                                                      |  | Drug Activity<br><u>( )</u>                                                                                           |  | Drug Type<br><u>( )</u>                                                                                                                                                                                                                                                                                                                           |  | Amount / Unit<br><u>( )</u>                                                 |  | Offense #<br><u>16-005906</u>                      |  | Warrant / Capias Number<br><u>( )</u>          |  | Bond<br><u>3000</u>                                                          |  |                                                                                                                       |  |                    |  |                                                                                                              |  |
| Charge Description<br><u>Poss. of Schedule IV Narcotics</u>                                                                                                                                                                                                                                                        |  | Counts<br><u>1</u>                                                                      |  | Domestic Violence<br><input type="checkbox"/> Y <input checked="" type="checkbox"/> N |  | Statute Violation Number<br><u>89.3113.1(1)(A)</u>                                                                                                      |  | Violation of ORD #<br><u>( )</u>                                                      |  | Drug Activity<br><u>P</u>                                                                                             |  | Drug Type<br><u>( )</u>                                                                                                                                                                                                                                                                                                                           |  | Amount / Unit<br><u>1.6 grams</u>                                           |  | Offense #<br><u>16-005906</u>                      |  | Warrant / Capias Number<br><u>( )</u>          |  | Bond<br><u>3000</u>                                                          |  |                                                                                                                       |  |                    |  |                                                                                                              |  |
| Charge Description<br><u>Improper Exhibition of Firearm</u>                                                                                                                                                                                                                                                        |  | Counts<br><u>1</u>                                                                      |  | Domestic Violence<br><input type="checkbox"/> Y <input checked="" type="checkbox"/> N |  | Statute Violation Number<br><u>79.0110.1.1(1)</u>                                                                                                       |  | Violation of ORD #<br><u>( )</u>                                                      |  | Drug Activity<br><u>( )</u>                                                                                           |  | Drug Type<br><u>( )</u>                                                                                                                                                                                                                                                                                                                           |  | Amount / Unit<br><u>( )</u>                                                 |  | Offense #<br><u>16-005906</u>                      |  | Warrant / Capias Number<br><u>( )</u>          |  | Bond<br><u>OK</u>                                                            |  |                                                                                                                       |  |                    |  |                                                                                                              |  |
| <input type="checkbox"/> Instruction No. 1<br>Mandatory Appearance in Court<br><input type="checkbox"/> Instruction No. 2<br>You need not appear in Court but must comply with instructions on Reverse Side.                                                                                                       |  | Location (Court, Room Number, Address)<br><u>( )</u>                                    |  |                                                                                       |  |                                                                                                                                                         |  |                                                                                       |  |                                                                                                                       |  | Court Date and Time<br>Month <u>( )</u> Day <u>( )</u> Year <u>( )</u> Time <u>( )</u> A.M. <u>( )</u> P.M. <u>( )</u>                                                                                                                                                                                                                            |  |                                                                             |  |                                                    |  |                                                |  |                                                                              |  |                                                                                                                       |  |                    |  |                                                                                                              |  |
| 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)<br><u>( )</u>                |  |                                                                                       |  |                                                                                                                                                         |  |                                                                                       |  |                                                                                                                       |  | Date Signed<br><u>( )</u>                                                                                                                                                                                                                                                                                                                         |  |                                                                             |  |                                                    |  |                                                |  |                                                                              |  |                                                                                                                       |  |                    |  |                                                                                                              |  |
| HOLD for other Agency<br>Name:<br><u>( )</u>                                                                                                                                                                                                                                                                       |  | Signature of Arresting Officer<br><u>( )</u>                                            |  | Name Verification (Printed by Arrestee)<br><u>( )</u>                                 |  | Name of Arresting Officer (Print)<br><u>W. YACIOTHE</u>                                                                                                 |  | ID #<br><u>460</u>                                                                    |  | Intake Deputy<br><u>W08/830</u>                                                                                       |  | I.D. #<br><u>( )</u>                                                                                                                                                                                                                                                                                                                              |  | Pouch #<br><u>( )</u>                                                       |  | Transporting Officer<br><u>( )</u>                 |  | I.D. #<br><u>( )</u>                           |  | Witness here if subject signed with "X"<br><u>( )</u>                        |  | PAGE<br><u>1</u> OF <u>1</u>                                                                                          |  |                    |  |                                                                                                              |  |

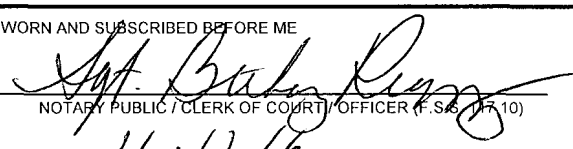
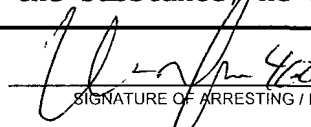
# PROBABLE CAUSE AFFIDAVIT

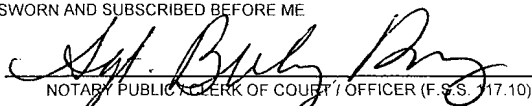
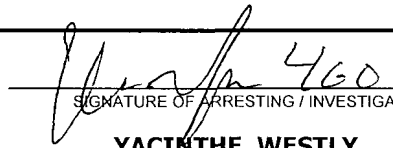
1. Arrest  
2. N.T.A.  
3. Request for Warrant  
4. Request for Capias

1

JUVENILE

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|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------|---------|----------------------------------------------------------------------------|-----------------|
| OBTS Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Agency ORI Number<br><b>FL 0502600</b>                                                      |  | Agency Name<br><b>PALM BEACH GARDENS POLICE</b>                                                       |         | Agency Report Number<br><b>7   8   16-005906</b>                           |                 |
| Charge Type:<br>Check as many as apply.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input checked="" type="checkbox"/> 1. Felony<br><input type="checkbox"/> 2. Traffic Felony |  | <input checked="" type="checkbox"/> 3. Misdemeanor<br><input type="checkbox"/> 4. Traffic Misdemeanor |         | <input type="checkbox"/> 5. Ordinance<br><input type="checkbox"/> 6. Other |                 |
| Special Notes:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                             |  |                                                                                                       |         |                                                                            |                 |
| Name (Last, First, Middle)<br><b>HABERKORN, JACK MICHAEL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                             |  |                                                                                                       |         | Race<br><b>W</b>                                                           | Sex<br><b>M</b> |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                             |  |                                                                                                       |         | Date of Birth<br><b>09/01/1994</b>                                         |                 |
| Charge Description<br><b>784.021(1)(A)- AGGRAVATED ASSAULT W/ DEADLY WEAPON</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                             |  | Charge Description<br><b>790.01(2) - CARRY CONCEALED FIREARM</b>                                      |         |                                                                            |                 |
| Charge Description<br><b>893.13(6)(A)- POSSESSION OF SCHEDULE 4 NARCOTICS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                             |  | Charge Description<br><b>790.10 WEAPON - IMPROPER EXHIBIT FIREARM OR DANGER</b>                       |         |                                                                            |                 |
| Victim's Name (Last, First, Middle)<br><b>ODELL, BETHANY</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                             |  |                                                                                                       |         | Race<br><b>W</b>                                                           | Sex<br><b>F</b> |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                             |  |                                                                                                       |         | Date of Birth                                                              |                 |
| Local Address (Street, Apt. Number)<br><b>10500 N MILITARY TRL, PALM BEACH GARDENS, FL 33410</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                             |  | (City)                                                                                                | (State) | (Zip)                                                                      | Phone           |
| Business Address (Name, Street)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                             |  | (City)                                                                                                | (State) | (Zip)                                                                      | Phone           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                             |  |                                                                                                       |         | Occupation                                                                 |                 |
| <p>The undersigned certifies and swears that he/she has just and resonable 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> <p><input type="checkbox"/> committed the below acts in my presence.</p> <p><input type="checkbox"/> confessed to _____</p> <p><input checked="" type="checkbox"/> was observed by <b>OFFICER ODELL</b> who told <b>OFFICER YACINTHE</b> that he/she saw the arrested person committ the below acts.</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>admitting to the below facts.</p> <p>On the <b>12</b> day of <b>November</b>, <b>2016</b> at <b>23:09</b> (Specifically include facts constituting cause for arrest.)</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                             |  |                                                                                                       |         |                                                                            |                 |
| <p>On Saturday, November 12, 2016, at approximately 5:52 P.M. I was dispatched to the intersection of PGA BLVD and Lake Victoria Gardens, Palm Beach Gardens, Palm Beach County, FL, in reference to a male who pointed a firearm at another driver while driving, the caller was Officer Bethany O'Dell, an off-duty Palm Beach Gardens Police Officer. Palm Beach Gardens Police Dispatch advised the vehicle description and responding officers canvassed the area.</p> <p>Responding officers subsequently located the vehicle, a 2014 white Volkswagen Jetta bearing Florida license plate number Y081MQ, parked in the vicinity of 3412 Primrose CT, Palm Beach Gardens, Palm Beach County, FL.</p> <p>Officers staged in the area near the vehicle and discovered the registered owner, Jack Haberkorn, and two other individuals, Brandon Little, and Jalil Talley near the mail box area of the community. All three subjects were positively identified by their Florida driver's licenses and detained pending an investigation.</p> <p>I made contact with the Victim, Officer O'Dell, an off duty Palm Beach Gardens Police Officer _____ who advised the following:</p> <p>On the above date, at the above time, she was traveling east bound on PGA BLVD when the suspect vehicle cut in front of her. The vehicle continuously slammed on its brakes, in an attempt to "brake check" the victim. O'Dell then pulled up along side the suspect vehicle and said "REALLY.. REALLY?" at which time the suspect reached over to the passenger side floor and garnished a firearm and pointed it at her. She advised the suspect's finger was on the trigger as he screamed " YOU BETTER WATCH WHO THE FUCK YOU'RE FUCKING WITH." She continued behind the vehicle, notifying Palm Beach Gardens Dispatch of the event. Once the suspect realized O'Dell was behind him, he ran the red light to go north bound on Lake Victoria Gardens and PGA Blvd. She did not follow the</p> |                                                                                             |  |                                                                                                       |         |                                                                            |                 |
| <p>SWORN AND SUBSCRIBED BEFORE ME</p> <p><i>[Signature]</i><br/>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)<br/><b>11-12-16</b><br/>DATE</p> <p><i>[Signature]</i><br/>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER<br/><b>YACINTHE, WESTLY (460)</b><br/>NAME OF OFFICER (PLEASE PRINT)<br/><b>11/12/2016</b><br/>DATE</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                             |  |                                                                                                       |         |                                                                            |                 |

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| A<br>D<br>M<br>I<br>N<br><br>D<br>E<br>F<br><br>P<br>R<br>O<br>B<br>A<br>B<br>L<br>E<br><br>C<br>A<br>U<br>S<br>E<br><br>S<br>T<br>A<br>T<br>E<br><br>M<br>E<br>N<br>T<br><br>A<br>D<br>M<br>I<br>N<br>I<br>S<br>T<br>R<br>A<br>T<br>I<br>V<br>E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | OBTS Number                                                                                                                                                                                                                                                                                                    |  | PROBABLE CAUSE AFFIDAVIT<br>SUPPLEMENT          |  | 1. Arrest<br>2. N.T.A.                                                                                                                                                                                                         | 3. Request for Warrant<br>4. Request for Capias | <b>1</b>        | JUVENILE                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Agency ORI Number<br><b>FL 0502600</b>                                                                                                                                                                                                                                                                         |  | Agency Name<br><b>PALM BEACH GARDENS POLICE</b> |  | Agency Report Number<br><b>7   8   16-005906</b>                                                                                                                                                                               |                                                 |                 |                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Charge Type:<br>Check as many as apply: <input checked="" type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance<br><input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other |  |                                                 |  |                                                                                                                                                                                                                                | Special Notes:                                  |                 |                                    |
| Name (Last, First, Middle)<br><b>HABERKORN, JACK MICHAEL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                |  |                                                 |  | Race<br><b>W</b>                                                                                                                                                                                                               |                                                 | Sex<br><b>M</b> | Date of Birth<br><b>09/01/1994</b> |
| <p>vehicle because it was not safe to do. O'Dell advised the vehicle was occupied by 3-4 people. She advised the passenger was a black male with dreads. O'Dell provided a sworn statement indicating she wishes to prosecute.</p> <p>O'Dell positively identified Jack Haberkorn as the male driver that garnished the firearm and pointed it at her. The two individuals, Brandon Little, and Jalil Talley, were released from the scene due to Officer O'Dell not recognizing them as being in the vehicle. My investigation found them to have no involvement. Prior to Brandon Little leaving the scene, he advised he did observe a firearm in the apartment with Haberkorn just prior to coming outside.</p> <p>Upon a search incident to arrest, a firearm, later identified as a loaded Glock 23 .40 caliber (serial # BAWF367) with extended 28 round magazine. This was discovered in Haberkorn's waist band. A small baggie containing unknown green powder, suspected to be Alprazolam (Xanax), was discovered in the suspect's right front pocket. The suspect advised the powder was Xanax, however, due to officer safety, the powder was not field tested and will be sent to PBSO lab. The firearm and suspected Alprazolam were packaged and subsequently submitted into evidence.</p> <p>Palm Beach Gardens Police K-9 Officer Shane Burns conducted a walk around of the suspect vehicle with his narcotics trained K-9 who positively alerted on the vehicle. Given the totality of circumstances and the vehicle being involved in a felony assault, the vehicle was impounded and transported to the Palm Beach Gardens Police Department rear parking lot for processing. In plain view was a black lock box, black leather gloves, a crow bar, and a large duffle bag.</p> <p>Based on the results of my investigation I find probable cause to charge Jack Haberkorn with the following:</p> <ul style="list-style-type: none"> <li>- Aggravated Assault with a firearm in accordance with Florida State Statue 784.021(1)(a), in that he intentionally and unlawfully threatened, either by words or act to violence to Officer O'Dell. At the time Haberkorn appeared to have the ability to carry out the threat. The act of Haberkorn created in the mind of Officer O'Dell a well founded fear that the violence was about to take place and the assault was made with a deadly weapon.</li> <li>- Carrying a concealed firearm in accordance with Florida State Statue 790.01(2), in that he knowingly carried about his person a firearm. The firearm was concealed inside his waistband from view.</li> <li>- Possession of schedule 4 narcotics in accordance with Florida State Statue 893.13(6)(a), in that he knew the presence of the substance, he exercised control or</li> </ul> |                                                                                                                                                                                                                                                                                                                |  |                                                 |  |                                                                                                                                                                                                                                |                                                 |                 |                                    |
| SWORN AND SUBSCRIBED BEFORE ME<br><br>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)<br>11-12-16<br>DATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                |  |                                                 |  | <br>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER<br><b>YACINTE, WESTLY (460)</b><br>NAME OF OFFICER (PLEASE PRINT)<br>11/12/2016<br>DATE |                                                 |                 |                                    |

| A                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | D                                                                                           |  | M                                                                                                     |  | I                                                                          |  | N                                  |  | D        |  | E |  | F |  |  |  |
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| OBTS Number                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | PROBABLE CAUSE AFFIDAVIT<br>SUPPLEMENT                                                      |  | 1. Arrest<br>2. N.T.A.                                                                                |  | 3. Request for Warrant<br>4. Request for Capias                            |  | 1                                  |  | JUVENILE |  |   |  |   |  |  |  |
| Agency ORI Number<br><b>FL 0502600</b>                                                                                                                                                                                                                                                                                                                                                                                                          |  | Agency Name<br><b>PALM BEACH GARDENS POLICE</b>                                             |  | Agency Report Number<br><b>7   8   16-005906</b>                                                      |  |                                                                            |  |                                    |  |          |  |   |  |   |  |  |  |
| Charge Type:<br>Check as many<br>as apply.                                                                                                                                                                                                                                                                                                                                                                                                      |  | <input checked="" type="checkbox"/> 1. Felony<br><input type="checkbox"/> 2. Traffic Felony |  | <input checked="" type="checkbox"/> 3. Misdemeanor<br><input type="checkbox"/> 4. Traffic Misdemeanor |  | <input type="checkbox"/> 5. Ordinance<br><input type="checkbox"/> 6. Other |  | Special Notes:                     |  |          |  |   |  |   |  |  |  |
| Name (Last, First, Middle)<br><b>HABERKORN, JACK MICHAEL</b>                                                                                                                                                                                                                                                                                                                                                                                    |  | Alias                                                                                       |  | Race<br><b>W</b>                                                                                      |  | Sex<br><b>M</b>                                                            |  | Date of Birth<br><b>09/01/1994</b> |  |          |  |   |  |   |  |  |  |
| <p>ownership over that substance, the substance is suspected to be Alprazolam (Xanax).</p> <p>- Improper exhibition of a firearm in accordance with Florida State Statue 790.10, in that Haberkorn carried a firearm, exhibited the firearm in a rude, careless, angry, and threatening manner. Haberkorn did so in the presense of persons.</p> <p>A body warn camera was utilized during the duration of the interview and investigation.</p> |  |                                                                                             |  |                                                                                                       |  |                                                                            |  |                                    |  |          |  |   |  |   |  |  |  |
| NOT A CERTIFIED COPY                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                             |  |                                                                                                       |  |                                                                            |  |                                    |  |          |  |   |  |   |  |  |  |
| SWORN AND SUBSCRIBED BEFORE ME                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                             |  |                                                                                                       |  |                                                                            |  |                                    |  |          |  |   |  |   |  |  |  |
| <br>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 17.10)                                                                                                                                                                                                                                                                                                  |  |                                                                                             |  |                                                                                                       |  |                                                                            |  |                                    |  |          |  |   |  |   |  |  |  |
| 11-12-16<br>DATE                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                             |  |                                                                                                       |  |                                                                            |  |                                    |  |          |  |   |  |   |  |  |  |
| <br>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER                                                                                                                                                                                                                                                                                                          |  |                                                                                             |  |                                                                                                       |  |                                                                            |  |                                    |  |          |  |   |  |   |  |  |  |
| <b>YACINTE, WESTLY (460)</b><br>NAME OF OFFICER (PLEASE PRINT)                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                             |  |                                                                                                       |  |                                                                            |  |                                    |  |          |  |   |  |   |  |  |  |
| 11/12/2016<br>DATE                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                             |  |                                                                                                       |  |                                                                            |  |                                    |  |          |  |   |  |   |  |  |  |
| PAGE<br>3 OF 3                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                             |  |                                                                                                       |  |                                                                            |  |                                    |  |          |  |   |  |   |  |  |  |

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.