

JF# 0478799

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

10/11/2015

OBTS Number			ARREST / NOTICE TO APPEAR Juvenile Referral Report						Agency Report Number (N.T.A.'s only)				
Agency ORI Number		Agency Name		PALM BEACH COUNTY SHERIFF'S OFFICE						06- 17114470			
ChargeType: Check as many as apply.		<input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type		Multiple Clearance Indicator			
								2 1. Yes 2. No		02			
Location of Arrest (Including Name of Business) 1958 Church Street, West Palm Beach FL 33409				Location of Offense (Business Name, Address) 1958 Church Street, West Palm Beach FL 33409									
Date of Arrest 08/13/2017		Time of Arrest 2333hrs		Booking Date		Booking Time		Jail Date		Jail Time			
Location of Vehicle													
Name (Last, First, Middle) Winter, Jerline, A													
Alias (Name, DOB, Soc. Sec. #, Etc.)													
Race W - White I - American Indian B - Black O - Oriental/Asian Sex W F Date of Birth 12/19/1992 Height 5'09 Weight 160 Eye Color BRN Hair Color RED Complexion LIGHT Build MED													
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) tattoos roses left forearm													
Marital Status Single Religion none Indication of: Alcohol Influence Drug Influence													
Local Address (Street, Apt. Number) 331 SO. FEDERAL HWY, LAKE WORTH FL 33460 (City) (State) (Zip) Phone ()													
Residence Type: 1. City 3. Florida 2. County 4. Out of State													
Permanent Address (Street, Apt. Number) , (City) (State) (Zip) Phone ()													
Address Source FCIC/NCIC													
Business Address (Name, Street) Business Address (Name, Street) (City) (State) (Zip) Phone ()													
Occupation unemployed													
D/L Number, State W536421929590, FL		Soc. Sec. Number [REDACTED]		INS Number				Place of Birth (City, State) georgia		Citizenship yes			
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large			
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large			
<input type="checkbox"/> Parent <input checked="" type="checkbox"/> Legal Custodian <input type="checkbox"/> Other													
Residence Phone ()													
Address (Street, Apt. Number) [REDACTED] (City) (State) (Zip)				Business Phone ()									
Notified by: (Name) [REDACTED]				Date		Time		Juvenile Disposition 1. Handled/ processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated					
Released To: (Name) [REDACTED]				Relationship				Date Time					
The above address provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)						School Attended							
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property				Value of Property							
Drug Activity S. Sell R. Smuggle K. Dispense/ Distribute M. Manufacture/ Produce/ Cultivate Z. Other N. N/A B. Buy D. Deliver E. Use P. Possess T. Traffic													
Drug Type B. Barbiturate H. Hallucinogen N. N/A C. Cocaine M. Marijuana A. Amphetamine E. Heroin O. Opium/Deriv. P. Paraphernalia/ Equipment U. Unknown S. Synthetics Z. Other													
Charge Description R/A without violence				Counts 01		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 843.02				Violation of ORD # N/A	
Drug Activity N		Drug Type N		Amount / Unit 17114470		Offense #		Warrant / Capias Number N/A				Bond N/A	
Charge Description 08/17/2014 486 VIOLATION OF COMMUNITY CONTROL/STREET VIOLATION				Counts 01		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 948.06				Violation of ORD # N/A	
Drug Activity N		Drug Type N		Amount / Unit 17114470		Offense #		Warrant / Capias Number				Bond	
Charge Description				Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number				Violation of ORD #	
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number				Bond	
Charge Description				Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number				Violation of ORD #	
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number				Bond	
Location (Court, Room Number, Address)													
TO BE SET													
Court Date and Time													
Month		Day		Year		Time		AM		PM			
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													
08/13/2017													
Signature of Defendant (or Juvenile and Parent /Custodian)													
Date Signed													
HOLD for other Agency Name: [Signature]				Signature of Arresting Officer [Signature]				Name Verification (Printed by Arrestee)					
<input checked="" type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal				<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other: D/S.D. BELL				(PRINT)					
Intake Deputy [Signature]		I.D. # 8701		Pouch #		Transporting Officer D/S.D. BELL		I.D. # 28976		Agency PBSO			
Witness here if subject signed with an -X"													
PAGE 1 OF 1													

DISTRIBUTION: WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - AGENCY

GOLD - DEFENDANT (N.T.A.'s ONLY)

OBTS Number

PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

N

Agency ORI Number FLO 5 0 0 0 0 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06	17-114470		
Charge Type: Check as many as apply	<input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other _____	Special Notes			
Defendant Name (Last, First, Middle) Winter	Jerline	Angelina	Race W	Sex F	Date of Birth 12/19/1992
Charge <i>RESISTING ARREST</i>	R/A without violence	Charge	Violation of Community Control		
Charge		Charge			
Victim Name (Last, First, Middle) State of Florida			Race	Sex	Date of Birth
Local Address (Street, Apt. Number)	City	State	Zip	Phone	Address Source
Business Address (Street, Apt. Number)	City	State	Zip	Phone	Occupation
<p>The undersigned swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The person taken into custody...</p> <p><input type="checkbox"/> committed the below acts in my presence.</p> <p><input type="checkbox"/> confessed to admitting to the below facts.</p> <p><input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.</p>					
On the <u>13</u> day of <u>August</u> 20 <u>17</u> at <u>6:51</u>	<input type="checkbox"/> AM		<input checked="" type="checkbox"/> PM		

On the above date and time, I was in service in Palm Beach County, FL, located on Okeechobee Boulevard when I was dispatched to a suspicious person call involving a white female that may be overdosing. The female was last seen wearing a black shirt with black and white shorts walking in the shopping plaza located at 1900 Okeechobee Boulevard, West Palm Beach, FL 33409, Palm Beach County. The caller described the female as stumbling back and forth, slurring speech, and smelled of alcohol. Upon my arrival, I did not observe the subject in the plaza, the caller advised that she left walking west on Okeechobee Boulevard. I drove around the area looking for the female. She was later found in the area of Church Street and Okeechobee Boulevard. Residents at the Fern House located at 1958 Church Street, West Palm Beach, FL 33409, advised that she walked into the parking lot attempting to jump the fence to the adjacent property. When I made contact with the subject, she could barely walk straight, she stumbled towards me, her speech was slurred and she smelled of an unknown alcoholic beverage, she was sweating and drooling out of the mouth. I then asked the subject to have a seat on the curb so she doesn't fall. She had cuts and bruises on her legs, she appeared dirty and her shorts were ripped.

I asked the subject for her name and she was argumentative. She then stated that her name was Angelina Stokes and her DOB was 12/13/1992. I provided that information to dispatch and the were no records for that name. I then asked the subject for her name again and she stated Angelina Winters, with the same DOB. There were no records. I asked her if she took any medication or drugs today and she advised that she had Xanax, Bendryl, and an unknown drug. She would not give any information on phone numbers of wear she got the drugs. The subject stated that she did not want to get in trouble and that the ankle monitor on her foot is not active. EMS was called to the scene and they transported her to JFK North Campus hospital for further medical evaluation.

I contacted D/S M. Flores to the hospital to utilize his Bio-Metric RAPID ID System to identify the subject. There was a "HIT" from the system and the subject was identified as Jerline Angelina Winter, DOB 12/19/1992.

Her discharge paperwork was completed from the hospital around 2317 hours and she was placed under arrest at 2333 hours, the handcuffs were checked for proper tightness and double locked.

The foregoing instrument was sworn to and affirmed before me this	<u>13</u> day of <u>August</u> 20 <u>17</u> , by:
D/S M. FLORES 8015	D/S D. Bell 28976
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Name of Arresting/Investigating Officer
<i>40015</i>	<i>1</i>
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Signature of Arresting/Investigating Officer
Page 1 of 2	

OBTS Number

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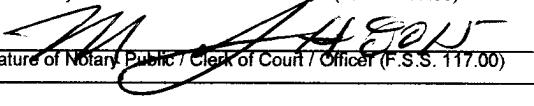
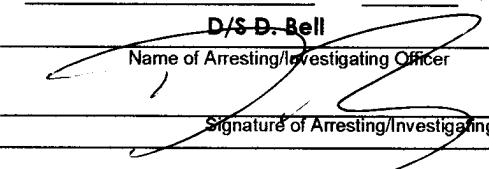
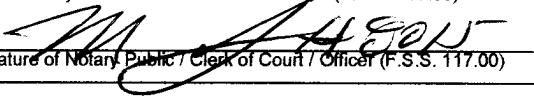
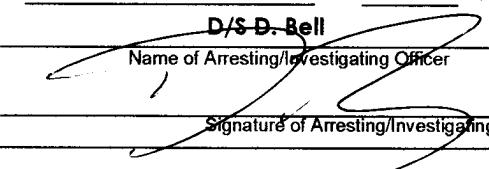
Juvenile

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Agency ORI Number FLO 5 0 0 0 0 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06	17-114470		
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Charge R/A without violence		Charge Violation of Community Control			
Charge			Charge		
Victim Name (Last, First, Middle) State of Florida				Race	Sex
Local Address (Street, Apt. Number)		City	State	Zip	Phone
Business Address (Street, Apt. Number)		City	State	Zip	Phone
The undersigned swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The person taken into custody...					
<input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to admitting to the below facts. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.					
On the <u>13</u> day of <u>August</u> 20 <u>17</u> at <u>6:51</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM					

She was found to have been on Felony Probation for aggravated stalking and violated 2 special conditions, she violated "remain confined to an approved residence", and "alchol and illegal drug use". This is a violation of community control (street violation) pursuant to FSS 948.06. She was also charged with R/A without violence pursuant to FSS 843.02 regarding giving false and inaccurate names when I asked her for her identity.

Street Violation-Administrative hold for Florida Department of Corrections (Probation and Parole) due to arrest in jurisdiction of Palm Beach County. In reference to probation case number 50217CF00486AXXMB.

The foregoing instrument was sworn to and affirmed before me this <u>13</u> day of <u>August</u> 20 <u>17</u> , by: D/S M.FLORES 8015					
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00) 			D/S D. Bell Name of Arresting/Investigating Officer 		
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Page 2 of 2					