

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06		16-1495																	
Charge Type Check as many as apply <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized		Enter Type		Multiple Clearance Indicator 0		1																	
Location of Arrest (Including Name of Business) 1501 S W Street Lake Worth Fl 33428				Location of Offense (Including Name of Business) 1501 Railroad Avenue Lake Worth, FL, 33460																					
Date of Arrest 11/16/16		Time of Arrest 1445		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle													
Name (Last, First, Middle) Smith Kayla						Alias (Name, DOB, Soc. Sec. #, Etc.)																			
Race W - White I - American Indian B - Black O - Oriental/Asian W		Sex F		Date of Birth 12/21/1990		Height 5'3		Weight 130		Eye Color BRN		Hair Color BRN		Complexion LIGHT		Build SMALL									
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NA				Marital Status SINGLE		Religion NA		Indication of Alcohol Influence Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk <input checked="" type="checkbox"/>																	
Local Address (Street, Apt. Number) 7147 VIA GENOVA				City Delray Beach		State FL		Zip 33446		Phone		Residence Type: 1. City 2. County 3. Florida 4. Out of State 1													
Permanent Address (Street, Apt. Number)				City		State		Zip		Phone		Address Source DL													
Business Address (Street, Apt. Number)				City		State		Zip		Phone		Occupation NO JOB													
D/L Number, State S530-507-90-961-0		Social Security Number		INS Number		Place of Birth NY, NY		Citizenship U.S.A																	
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/>		3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile <input type="checkbox"/>													
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/>		3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile <input type="checkbox"/>													
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other		Name (Last, First, Middle)										Phone													
Address (Street, Apt. No.)				City		State		Zip		Business Phone															
Notified By (Name)				Date		Time		Juvenile Disposition: 1. Handled/Processed within Dept. and Released 2. TOT HRS/DYS 3. Incarcerated																	
Released To (Name)				Relationship		Date		Time																	
The above address was provided by <input type="checkbox"/> defendant and/or <input type="checkbox"/> defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 561 355-2526) informed of any address change <input type="checkbox"/> Yes, by (Name) <input type="checkbox"/> No (Reason)				School Attended		Grade																			
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property								Value of Property															
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Dispense/ Distribute		M. Manufacture/ Produce Cultivate		Z. Other		Drug Type N. N/A A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana		P. Paraphernalia/ Equipment		U. Unknown Z. Other					
Charge Description Sale of heroin				Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 893.13(1A1)		Violation or ORD. #															
Drug Activity S		Drug Type E		Amount/Unit 0.3 GRAMS		Offense # 16-1495		Warrant/Capias Number		Bond															
Charge Description				Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number		Violation or ORD. #															
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond															
Charge Description				Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number		Violation or ORD. #															
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond															
Charge Description				Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number		Violation or ORD. #															
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond															
Location (Court, Address, Room Number) To be set																									
Court Date and Time Month _____ Day _____ Year _____ Time _____ AM <input type="checkbox"/> PM <input type="checkbox"/>																									
I AGREE TO APPEAR AT THE ABOVE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT I SHOULD WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.																									
Signature of Defendant (or Juvenile and Parent/Custodian)										Date Signed															
HOLD for Other Agency				Signature of Arresting Officer				Name Verification (Printed by Arrestee)																	
Name <input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other								PRINT)										Page							
Intake Deputy		ID #		Pouch #														1 of 1							
Witness here if subject signed with an "X"																									

OBTS Number		PROBABLE CAUSE AFFIDAVIT					
Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06 - 16-1495		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias <input type="checkbox"/> Juvenile <input type="checkbox"/>	
Charge Type: <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance Check as many <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other as apply.				Special Notes:			
Defendant's Name (Last, First, Middle) Smith, Kayla, Grace				Race W	Sex F	Date of Birth 12/21/1990	
Charge Description Sale of heroin		Charge Description					
Charge Description		Charge Description					
Victim's Name (Last, First, Middle) State of Florida				Race	Sex	Date of Birth	
Victim's Local Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone	Address Source	
Victim's Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation	
The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The Person taken into custody...							
<input checked="" type="checkbox"/> committed the below acts in my presence.		<input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.					
<input type="checkbox"/> confessed to _____ admitting to the below facts.		<input type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.					
On the 18th day of October, 2016 at 12:00 <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest).							

NARRATIVE:

_____ and I were working in an undercover capacity within the City Limits of Lake Worth. We held a briefing regarding him and I attempting to purchase narcotics from street level drug dealers. We would audio/video record the attempted transactions utilizing a covert recording device. Agent Hood and Agent Sanford were assigned to provide security for us. After this meeting was completed _____ and I left the area utilizing a PBSO unmarked vehicle and drove to Federal Highway/18th Avenue South. At approximately 1410 hours we observed a white female standing on the corner in her mid-20's, who was wearing a black/white dress with black boots. _____ gave a head nod to the white female and rolled down his driver's side window. _____ asked the female if she was working, which is common street terminology for prostitution services. The female replied yes and asked what we needed. The female walked to the passenger side rear door and entered the back seat of our vehicle. After brief discussion the female said her name was Kayla and I asked her if she could get me some "caps". Caps is common street terminology for capsules containing heroin. The female said yes and asked how much I wanted and I replied 60 dollars' worth. The entire conversation can be referred to verbatim from the audio/video recording. The female directed us to drive over to and park on 15th Avenue South near South K Street at approximately 1415 hours. I handed her \$60.00 worth of PBSO investigative funds and she walked east bound to 1501 Railroad Avenue out of our sight. These bills were three 20's, which were bearing serial numbers jl 33433410f, je47118903e and ml3581968e. After approximately 4-5 minutes the female returned to our vehicle and reentered the rear passenger seat. The female asked how much I was going to give her for picking up the heroin and I replied \$10 dollars, she stated she was fine with that. I handed her one \$10 bill of PBSO investigative funds, which was bearing serial number ml50504863a and she handed me three clear bags containing suspected heroin. This is identifiable based on my training and experience. The female asked to be dropped off in the area of 15th Avenue and South N Street along with providing her telephone # to us for future drug transactions. _____ drove over to this location and she exited the vehicle without further incident at approximately 1425 hours. _____ and I left the area and drove to a predetermined location. I later weighed the suspected heroin at

NARRATIVE CONTINUATION

approximately 0.3 grams and did not test it based on the fact that it may possibly contain Fentanyl. Utilizing investigative techniques I was able to come up with the name Kayla Grace Smith (12/21/1990). I was able to positively identify her utilizing her D.A.V.I.D photograph. Based on the investigation probable cause exist for the sale of heroin, violation of F.S.S 893.13(1A1).

[Redacted]	[Redacted]
Name of Notary Public / Clerk of Court / Officer (F.S.S 117.10) 11/10/2016	Name of Officer (Please Print) 11/10/2016
Date	Date

NOT A CERTIFIED COPY