Juvenile

П	OBTS Number	1	le Referral R		:	2. N.T.A. 4,	Request for Warrant Request for Capias	1	Juvenile	
TIVE	Agency ORI Number FLO 5 0 0 0 0 0 PALM BEACH COUNTY SHERIFF'S OFFICE O6- Agency Report Number (N.T.A.'s only) 19084353									
ISTRATIVE	Check as many 2. Traffic Felony	Misdemeanor     A. Traffic Misdemeano	<b>=</b>		٤	1. Yes 2. No		Multiple Clearance Indicator	02	
NIMO	Location of Arrest (Including Name of Business) 6800 173rd PLACE NORTH JU	PITER FL 33458		6800 173R			JUPITER	FL 33458		
ľ	Date of Arrest   Time of Arrest   06/20/2019   0742	Booking Date Bo	ooking Time J	ail Date	Jail Time	Location o	f Vehicle			
	Name (Last, First, Middle) DAVIS KIANA				Alias (Name, DOB, Soc. Sec. #, Etc.) DUPRIS					
	that the bank a description to the state of	ate of Birth 1/06/1993	Height 5'05	Weight 150		Eye Color BLUF		NED .	MED	
	Scars, Marks, Tatoos, Unique Physical Features (Location		<u> </u>		Mantal Statu SINGLE		Indication Alcohol In Drug Influ	of: Y	N Unk.	
ANT	Local Address (Street, Apt. Number) 9055 SE MORNING ST	(City) HOBE SOUN	(State)	(Zip)	Phone	<u> </u>	Residence 1. City 2. County	Type: 3. Florida 4. Out of	10	
DEFENDAN	Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	<u>,                                    </u>	Address S FL DL		3,016	
	Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	<u>.                                    </u>	Occupation			
	D/L Number, State Sc D120504939060 FL	oc. Sec. Number		INS Number			ace of Birth (City, St		Citizenship YES	
_	Co-Defendant Name (Last, First, Middle)			Race Sex	Date	or Birth	☐ 1. Arrested	☐ 3. Fel		
CO-DE	Co-Defendant Name (Last, First, Middle)			Race Sex	Date	of Birth	2. At Large  1. Arrested	☐ 5. Ju	venile lony	
Н	Parent Name (Last)	(First)			(«Aladie)		2. At Large	5. Juv Residence Ph	demeanor enile one	
	Legal Custodien Other: Address (Street, Apt. Number) (City)			(S(a)(e) (Zip) Business Phone					ne -	
	Notified by: (Name)		Date	Time	Juve	nile Disposition	within 2 TOT	( )		
Notified by: (Name)  Date  Time  O6/20/2019  Time  1. Handled/ processed within Dept. and Released.  2. TOT HRS / DYS 3. Incarcerated  Date  Released To: (Name)  Released To: (Name)					cerated	Time				
						Grade				
	The above address provided byldefendent and / orldefendent's parents The child and / or to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of addressl Yes, by: (Name)  Property Crime?			Value of Property					1	
w w	Drug Activity S. Sell R. Smuggle K. D. N. N/A B. Buy D. Deliver D.	ispense/ M. Manufach	ure/ Z. Other	Orug Type N. N/A	B. Barl	biturate H.	Halfucinogen	P. Paraphemalia	/ U. Unknown	
CODE	P. Possess T. Traffic E. Use	istribute Produca/ Cultivate	Domestic	N. N/A A. Amphetamine Statute Violation	E. Heri	oin O.		Equipment S. Synthetics Violation	Z. Other on of ORD #	
POSSESSION OF SCHEDULE IV SUBST		Offense #	STANCE 1 Violence		Warrant ! Capias Number		393.13 (6)A		Bond,	
٥	N N Charge Description	19084353							Violation of ORD #	
ARGE	POSSESSION OF DRUG PARA  Drug Activity Drug Type   Amount / Unit	APERNALIA 2	Violence Y Z N	Warrant / Capia	<u></u>	393.147(	1)		23	
E.			I Barrania	` `				Bond	SKERE	
CHARGE	Charge Description	Coums	Domestic Violence Y N	Statute Violation				Violati	on of GRD # .	
СНА	Drug Activity Drug Type Amount I Unit	Offense #		Warrant / Capia				Bond	84 CO	
CHARGE	Charge Description	Counts	Domestic Violence	Statute Violation	n Number			Viola	tion of ORD#	
СНА	Drug Activity Drug Type Amount / Unit	Offense #		Warrant / Capia	s Number		<u>-</u>	Bond	4.1	
Location (Court, Room Number, Address)							-			
APPE	Court Date and Time  Month Day	Vanr		Time		ΔΜ		DM		
Court Date and Time    Month   Day   Year   Time   AM   PM				D THAT SHOUL	LD I WILLFULLY HALL BE ISSUED					
Ñ	Signature of Defendant (or Juvenile and Par	ent /Custodian)				Date Sign	ed			
H	HOLD for other Agency Name:	Signature of Arcelling Of	Micer.		Name Verification (Printed by Arrestee)					
ADMIN	☐ Dangerous ☐ Resisted Arrest	Name of Arresting Office D/S_K. RUSSE	or (Print)	6794	(PR	INT)	71. kw ) ** 12. kw ) **	$\mathbb{Q}(\mathcal{M}_{\mathbb{Z}_{+}}^{m,r})$	m A	
7	Suicidal Other:	Transforting Officer	u (0#9	Amar &	Su Wine	se here if exhibit	t signed with an -X'		PAGE 1 2	
ш	DISTRIBUTION: WHITE COPY	GREEN - STATE ATTO		LOW - AGENCY		- AGENCY	GOLD - DEFEND		l OF C	

Γ	OBTS Number	PROBABLE CAUSE AFFIC	TIVAC	1. Arrest 3. Reque 2. N.T.A. 4. Reque			quest for Warrant quest for Capies 1		
NWO		CH COUNTY SHERIFF'S		ncy Report Number <b>06</b> –	19084353				
Ĺ	as apply. 2. Traffic Felony 4. To	Misdemeanor 5. Ordi Fraffic Misdemeanor 6. Oth		Special Notes:					
DEF	Name (Last, First, Middle) S DAVIS KIA		DUPRI:	5	Race W	Sex F	Date of Bi 11/06/19		
CHARGES	Charge Description POSSESSION OF SCHEDULE IV SU	BSTANCE 893.13 (6)A C	harge Description	OSSESSION OF	DRU <del>G</del> P.	ARAPER	RNALIA 8	393.147(	1)
CHA		. С	harga Description						
Ĺ	STATE OF FLORIDA				Race	Sex	Date of Bir	th	
/ICT:M		(City) (S:a	(ziρ) P	hone )		Address	Source	1	
Ĺ	Business Address (Name, Street)	(City) (Sta	ate) (zip) P	hone )		Occupăi	tion		
PROBABLE CAUSE STATEMENT	The undersigned cardides and swears that he/the has just and reasonable grounds to believe, and does believe that the above name Defendant committed the following violation cities?  The fireron taken into custody?  The previous of the process of the content of the process of								
ATIVE	STATE OF FLORIBA COUNTY OF PARIM BEACH (Signature of Arresting/Investigative Officer) The toregoing instrumen: was sworn to or athermed and subscribed by	20TH TUN	E	<sub>20</sub> 19 h	D/S	K. RI	USSEL	L 6794	
ADMINISTRATIVE	(Print name of Arrest) Investigative Officer), who is personally know		pa of identification pr						
ADMI	Notary Public, Clerk of Court, Officer (F.S.S. 117.10)	C1929C 1523						PAGE 2 OF	_

880 #084 REV. 04/01

WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - AGENCY



## Palm Beach County Sheriff's Office - Arrests Only

	x	Florida State Statute	Description	Page Number(s)
		119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
tions		943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
L/E Exemptions		119.071(4)(c)	Undercover personnel.	
L/EE		119.071(2)(f)	Confidential informants (CIs).	
		119.071(2)(e)	Confession.	
suc		985.04(1)	Juvenile offender records.	
mptic		119.071(h)(i)	Assets of a crime victim.	
Public Info. Exemptions		395.3025(7)(a), 456.057(7)(a)	Medical information.	
blic In		394.4615(7)	Mental health information.	
nd		119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
	×	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
		(viii) 394.4615(7)	Clinical records under the Baker Act.	
of 23)		(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
Rule		(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)				
al Administr				
es of Judici				
Florida Rul				
				N
je r			Other:	
Other			Other:	

## REVIEW COMPLETED BY

Booking Number: 2019020249	Date: 6/20/2019				
9	Specialist Name/ID: J. Beck/9007				