

17CF307 MB

OBTS Number			ARREST / NOTICE TO APPEAR Juvenile Referral Report						
						1. Arrest	3. Request For Warrant		
						2. N.T.A.	4. Request For Capias		
						1	Juvenile		
Agency ORI Number FLO 5 0 0 0 0 0			Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 06	17024199		
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 1			
Location of Arrest (Including Name of Business) 13410 S SHORE BLVD			Location of Offense (Including Name of Business) 13410 S SHORE BLVD			WELLINGTON, FL, 33414			
Date of Arrest Jan 9, 2017	Time of Arrest 0102	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle 13410 S SHORE BLVD			
Name (Last, First, Middle) GOULD KYLE E						Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White B - Black O - Oriental/Asian	Sex W	Date of Birth 5/8/1987	Height 5'11"	Weight 160	Eye Color BROWN	Hair Color BROWN	Complexion MED	Build MED	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) SEVERAL					Marital Status SINGLE	Religion NONE	Indication of: Y <input type="checkbox"/> N <input type="checkbox"/> Alcohol Influence <input type="checkbox"/> Drug Influence <input type="checkbox"/>		
Local Address (Street, Apt. Number) 10543 PELICAN DR			City WELLINGTON	State FL	Zip 33410	Phone 815-703-4915	Residence Type 1. City <input type="checkbox"/> 3. Florida <input type="checkbox"/> 2. County <input type="checkbox"/> 4. Out of State <input type="checkbox"/>		
Permanent Address (Street, Apt. Number)			City	State	Zip	Phone	Address Source VERBAL		
Business Address (Street, Apt. Number)			City	State	Zip	Phone	Occupation CONTRACTOR		
DL Number, State G430-5058-7132	Social Security Number [REDACTED]		INS Number	Place of Birth MC HENRY, ILLINOIS		Citizenship	YES		
Co-Defendant Name (Last, First, Middle) SASSMANNSHAUSEN MATTHEW RAYMOND			Race W	Sex M	Date of Birth 5/25/1996	1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <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"/> 3. Felony <input type="checkbox"/> 2. At Large <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			
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. Paraphernal/ Equipment	U. Unknown Z. Other
Charge Description POSSESSION OF COCAINE			Counts 1	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 893.13(6)(A)			Violation or ORD. #	
Drug Activity P	Drug Type C	Amount/Unit .5 GRAMS	Offense # 17024199		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)									
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 BE 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"/> Suicidal			Name of Arresting Officer D/S M.CIMOCH			(PRINT)			
ID #			ID # 16044						
Intake Deputy			Transporting Officer ID # M. CIMOCH 16044			Agency PBSO			Page 1 of 1
Witness here if subject signed with an "X"									

OBTS Number

PROBABLE CAUSE AFFIDAVIT

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

1

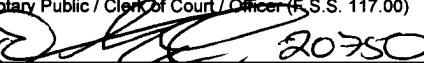
Juvenile

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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	17024199		
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Defendant Name (Last, First, Middle) GOULD KYLE			E	Race W	Sex M
Charge POSSESSION OF COCAINE			Charge		
Charge			Charge		
Victim Name (Last, First, Middle) FLORIDA			Race	Sex	Date of Birth
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 checked="" 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 type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.					
On the <u>9TH</u> day of <u>JANUARY</u> 20 <u>17</u> at <u>0037</u>		<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM			

On 1/9/2017 at approximately 0037 hours I was patrolling the parking lot of a night club, Suri West located at 13410 S Shore Blvd in Wellington, FL, 33414 in my marked PBSO patrol car. As I was driving through I noticed two males inside a blue 2013 Volkswagen Jetta which was parked facing S shore Blvd. The vehicle's lights were off but the interior lights were on which drew my attention to them. I parked my vehicle and walked up to the vehicle's driver side on foot. I watched both occupants sharing a small clear plastic bag containing a white powdery substance. I believed the substance to be Cocaine based on my training and experience. Both of their attention was on the substance and they did not notice me standing next to the driver side door. I shined my flashlight into the vehicle and announced that I was a Deputy with the Palm Beach County Sheriff's Office. They both immediately became nervous as the driver, Kyle Gould tried to conceal the bag of suspected cocaine by transferring it from his right hand to his left hand then putting it by his side. I demanded he give me the suspected cocaine which he complied. The passenger identified by Illinois license as Matthew Sassmannshausen was acting nervous as he kept saying "I've never been in trouble before". After searching Kyle's person I located a twenty dollar bill rolled up tight in his right front pocket as if it would be used to snort the cocaine. Both occupants were handcuffed behind their back and the cuffs were checked for proper fit and double locked. As I was transporting them to the district 8 (Wellington) substation Kyle spontaneously asked why Matthew was being arrested "because I was the one in possession of the cocaine". I informed his that I witnessed both of them knowingly in possession of the cocaine.

The white powdery substance was field tested with a Marquis Reagent kit and a Cobalt Thiocyanate Reagent test kit which both yielded positive for cocaine. The FFP cocaine weighed .5 grams. Based on the above information, I find probable cause to charge Kyle and Matthew with possession of cocaine.

The foregoing instrument was sworn to and affirmed before me this		<u>9th</u>	day of	<u>January</u>	20	<u>17</u>	, by:
D/S SEPTIEN ID# 20750		D/S M.CIMOCH 16044					
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)		Name of Arresting/Investigating Officer					
 <u>20750</u> Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)		 Signature of Arresting/Investigating Officer					
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