

0493219

170720/27
ARREST / NOTICE TO APPEAR

3140

OBTS Number	Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 514 17-005375	1 Arrest 2 N.T.A. 3 Request for Warrant 4 Request for Capas 1	JUVENILE
Charge Type Check as many as apply <input type="checkbox"/> 1 Felony <input type="checkbox"/> 2 Traffic Felony	<input checked="" type="checkbox"/> 3 Misdemeanor	<input type="checkbox"/> 5 Ordinance	<input type="checkbox"/> 4 Traffic Misdemeanor	<input type="checkbox"/> 6 Other	If Weapon Seized Enter Type NONE	Multiple Clearance Indicator	
Location of Arrest (Including Name of Business) 17483 S ALT AIA, JUPITER, FL 33477				Location of Offense (Business Name, Address) 17483 S ALT AIA, JUPITER, FL 33477			
Date of Arrest 11/09/2017	Time of Arrest 23:06	Booking Date 11/09/2017	Booking Time 23:16	Jail Date	Jail Time	Location of Vehicle	
Name (Last, First, Middle) HENLEY, LINDA LUISE				Alias:		Alias (Name, DOB, Soc. Sec. #, Etc.)	
Race W - White A - American Indian B - Black O - Oriental/Asian W	Sex F	Date of Birth 05/15/1966	Height 5'07	Weight 170	Eye Color BROWN	Hair Color BROWN	Complexion FAIR
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Martial Status S	Religion OTHER	Indication of Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Local Address (Street, Apt. Number) 2470 EDWARD RD, PALM BEACH GARDENS, FL 33410				Phone (561) 627-9628		Residence Type 1 City 3 Florida 2 County 4 Out of State	
Permanent Address (Street, Apt. Number) 2470 EDWARD RD, PALM BEACH GARDENS, FL 33410				Phone (561) 627-9628		Address Source Verb	
Business Address (Name, Street)				Phone (561) 627-9628		Occupation Account Exec	
DL Number, State HS40532666750 / FL		Soc. Sec Number		DHS Number		Place of Birth (City, State) Oklahoma City, OK	
Citizenship US		Co-Defendant Name (Last, First, Middle)		Race		Sex	
Date of Birth		Race		Sex		Date of Birth	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
Relationship		Date of Birth		Relationship		Date of Birth	
Parent <input checked="" type="checkbox"/> Other <input type="checkbox"/>		Name (Last, First, Middle)		Residence Phone		Business Phone	
Legal Custodian <input type="checkbox"/>		Address (Street, Apt. Number)		(City)		(State) (Zip)	
Notified by (Name)		Date		Time		JUVENILE DISPOSITION 1 Handled/Processed within Department and 2 TOT JAS	
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 355-2526) informed of any change of address.				School Attended		Grade	
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property			
Drug Activity H. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Struggle D. Deliver E. Use		K. Disperses/ Distribute	
M. Manufacture/ Product/ Cultivars		2. Other		Drug Type H. N/A A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin	
H. Hallucinogen		P. Paraphernalia/ Equipment		U. Unknown 2. Other		S. Synthetic	
Charge Description ACCIDENT - W/PROPERTY DAMAGE, LEAVING THE SCENE				Statute Violation Number 316.06(1)		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Courts	Domestic Violence	Warrant / Capas Number	
N			17-005375	1	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N		
Charge Description				Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Courts	Domestic Violence	Warrant / Capas Number	
					<input type="checkbox"/> Y <input type="checkbox"/> N		
Charge Description				Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Courts	Domestic Violence	Warrant / Capas Number	
					<input type="checkbox"/> Y <input type="checkbox"/> N		
Health / Apparent Physical Condition of Defendant				Any knowledge of the following <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries			
Check which applies <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health				PROPERTY - Received By		Released By	
Transported By				Date Transported		Time Transported	
Other				Date Transported		Time Transported	
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court				Location (Court, Room) 2188 PGA Blvd, Palm Beach Gardens, FL			
<input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.				Court Date and Time 12/13/17 @ 08:30			
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.				No Photo Available			
Signature of Defendant (or Juvenile and Parent/Custodian)				Date Signed			
HOLD for Other Agency				Name Verification (Printed by Arrestee)			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal				<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other			
Intake Deputy				Arresting Officer (Print) J. FLESCH		ID # 1183	
ID #				Transporting Officer J. FLESCH		ID # 348	
Agency				Agency		Agency	
Witness here if subject signed with an "X"				PAGE 1 OF 1			

SCANNED
NOV 14 2017