

0221359

2224

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    N

Agency ORI Number <b>FLO 5 0 0 0 0 0</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number <b>06</b>		17-091158	
Charge Type: Check as many as apply <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor		5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type		Multiple Clearance Indicator <b>0   2</b>	
Location of Arrest (Including Name of Business) <b>3141 S. Military Trail</b>				Location of Offense (Including Name of Business) <b>3141 S. Military Trail</b>			
Date of Arrest <b>Jun 16, 2017</b>		Time of Arrest <b>1900</b>		Booking Date		Booking Time	
Jail Date		Jail Time		Location of Vehicle			
Name (Last, First, Middle) <b>Mulroney Lisamarie Anne</b>							
Race W - White   I - American Indian B - Black   O - Oriental/Asian		Sex <b>W F</b>		Date of Birth <b>11/19/1971</b>		Height <b>5'4"</b>	
Weight <b>160</b>		Eye Color <b>Grn</b>		Hair Color <b>Bld</b>		Complexion <b>Med</b>	
Build <b>Med</b>							
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>Tattoo on back and right leg</b>							
Marital Status <b>Single</b>				Religion <b>N/A</b>		Indication of: Y    N Alcohol Influence    Drug Influence	
Local Address (Street, Apt. Number) <b>3611 Pinewood Avenue</b>				City <b>West Palm Beach</b>		State Zip <b>FL 33407</b>	
Phone <b>561-614-9479</b>				Residence Type: 1. City    2. County    3. Florida    4. Out of State			
Permanent Address (Street, Apt. Number) <b>3611 Pinewood Avenue</b>				City <b>West Palm Beach</b>		State Zip <b>FL 33407</b>	
Phone				Address Source		<b>Verbal</b>	
Business Address (Street, Apt. Number)				City		State Zip	
Phone				Occupation			
D/L Number, State <b>M465-521-71-919-0/FL</b>		Social Security Number		INS Number		Place of Birth <b>Elizabeth, NJ</b>	
Citizenship <b>US</b>							
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"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor	
						<input type="checkbox"/> 5. Juvenile	
<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 S. Sell N. NA P. Possess		R. Smuggle B. Buy T. Traffic		K. Dispense/ D. Deliver E. Use		M. Manufacture/ Produce Cultivate	
Z. Other				Z. Other		Drug Type B. Barbiturate N. NVA A. Amphetamine	
						H. Hallucogen C. Cocaine M. Marijuana E. Heroin	
						P. Paraphernalia/ Equipment	
						U. Unknown Z. Other	
Charge Description <b>Possession of Crack Cocaine</b>				Counts <b>01</b>		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	
				Statute Violation Number <b>893.13(6)(a)</b>		Violation or ORD. #	
Drug Activity <b>P</b>	Drug Type <b>C</b>	Amount/Unit <b>.12 Grams</b>	Offense # <b>17-091158</b>	Warrant/Capias Number		Bond <b>31000</b>	
Charge Description <b>Possession of Drug Paraphernalia</b>				Counts <b>01</b>		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	
				Statute Violation Number <b>893.147(1)(b)(M)</b>		Violation or ORD. #	
Drug Activity <b>P</b>	Drug Type <b>P</b>	Amount/Unit <b>3 Pipes</b>	Offense # <b>17-091158</b>	Warrant/Capias Number		Bond <b>0</b>	
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				Name Verification (Printed by Arrestee)			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other _____				(PRINT) <b>JUN 16 PM 8:36</b>			
Initials/Signature				Page			
<b>DPS Ce17196</b>				Witness here if subject signed with an "X"			
				<b>1 of 1</b>			

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 <b>FLO 5 0 0 0 0 0</b>	Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>	Agency Report Number <b>06</b>	<b>17-091158</b>		
Charge Type: Check as many as apply <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other _____			Special Notes		
Defendant Name (Last, First, Middle) <b>Mulroney</b>		Lisamarie	Anne	Race <b>W</b>	Sex <b>F</b>
Charge <b>Possession of Crack Cocaine</b>		Charge <b>Possession of Drug Paraphernalia</b>			
Charge		Charge			
Victim Name (Last, First, Middle) <b>STATE</b>		OF	<b>FLORIDA</b>		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>16</u> day of <u>JUNE</u> 20 <u>17</u> at <u>7:00</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM					

On June 16, 2017 at 1900hrs I was on patrol within the 3100 block of S Military Tr unincorporated West Palm Beach, Florida. While patrolling the plaza located at 3141 S Military Trail, I observed a white female later identified as Lisamarie Mulroney. Mulroney was sitting down on the second floor walkway/sidewalk. It should be noted that this particular plaza is known for high drug activity and prostitution. PBSO has received several complaints in reference to this. The plaza is also properly posted with PBSO "No trespassing" signs, OAN# 25605. Due to the above mentioned circumstances, I decided to make contact with Mulroney. Upon approach I advised her of the "No Trespassing" signs. I asked Mulroney if she had any illegal contraband on her person. Mulroney first denied having anything on her person. I then told Mulroney that I was going to have a female Deputy respond to search her. Mulroney then reached in to her bra and pulled out two small pieces of a white wafer like substance, which based on my training and experience, I believe it to be Crack Cocaine. Mulroney then said she had a crack pipe with a "hit" inside of the pipe. "Hit" meaning a piece of crack cocaine being ready to be smoked. This pipe was located inside of her purse. A plastic bottle was also found inside of her purse. These pipes are known to be used to inhale illegal narcotics such as Crack Cocaine. The Crack Cocaine was tested which yielded a positive result. The total approximate weight of the Crack Cocaine was .12 grams. Due to the above mentioned facts, probable cause exist to charge Mulroney with the above listed FSS violations.

The foregoing instrument was sworn to and affirmed before me this <u>16</u> day of <u>JUNE</u> 20 <u>17</u> , by:					
<b>ROUSSEL 8496</b>					
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)					
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)					
D/S A. Artola <u>7638</u>					
Name of Arresting/Investigating Officer					
Signature of Arresting/Investigating Officer					
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