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ARREST / NOTICE TO APPEAR  
Juvenile Referral Report1. Arrest 3. Request For Warrant  
2. N.T.A. 4. Request For Capias

1

Juvenile

N

OBTS Number		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 17-091158</b>	
Charge Type: Check as many as apply <input checked="" type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		# Weapon Seized		Enter Type		Multiple Clearance Indicator <b>0 2</b>	
Location of Arrest (Including Name of Business) <b>3141 S. Military Trail Lake Worth, FL 33463</b>				Location of Offense (Including Name of Business) <b>3141 S. Military Trail Lake Worth, FL 33463</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>				Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White B - Black O - Oriental/Asian		Sex <b>F</b>		Date of Birth <b>11/19/1971</b>		Height <b>5'4"</b>	
Weight <b>160</b>		Eye Color <b>Gm</b>		Hair Color <b>Bld</b>		Complexion <b>Med</b>	
Build <b>Med</b>		Marital Status <b>Single</b>		Religion <b>N/A</b>		Indication of Alcohol Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk <input checked="" type="checkbox"/>	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>Tattoo on back and right leg</b>				Residence Type: 1. City 2. County 3. Florida 4. Out of State <b>2</b>		Address Source <b>Verbal</b>	
Local Address (Street, Apt. Number) <b>3611 Pinewood Avenue West Palm Beach FL 33407</b>				Phone <b>561-614-9479</b>		Occupation	
Permanent Address (Street, Apt. Number) <b>3611 Pinewood Avenue West Palm Beach FL 33407</b>				Phone		Occupation	
Business Address (Street, Apt. Number)				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		1. Arrested 2. At Large		3. Felony 4. Misdemeanor 5. Juvenile			
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
1. Arrested 2. At Large		3. Felony 4. Misdemeanor 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 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 <b>Possession of Crack Cocaine</b>		Counts <b>01</b>		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number <b>893.13(6)(a)</b>	
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 checked="" type="checkbox"/> N		Statute Violation Number <b>893.147(1)(b)</b>	
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>OR</b>					
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
Drug Activity		Drug Type		Amount/Unit		Offense #	
Warrant/Capias Number		Bond					
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
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 checked="" type="checkbox"/> <b>17 JUN 17 4:37</b>							
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 <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer <b>D/S A. Artola</b>		ID # <b>7638</b>		(PRINT) <b>JUN 16 PM 8:36</b>	
Initials <b>DP</b>		Transporting Officer <b>BUENARR</b>		ID #		Agency <b>PBSU</b>	
Witness here if subject signed with an "X"						Page <b>1 of 1</b>	

OBTS Number		<b>PROBABLE CAUSE AFFIDAVIT</b>		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"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <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 Lisamarie Anne</b>				Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>11/19/1971</b>		
Charge <b>Possession of Crack Cocaine</b>		Charge <b>Possession of Drug Paraphernalia</b>						
Charge		Charge						
Victim Name (Last, First, Middle) <b>STATE OF FLORIDA</b>				Race	Sex	Date of Birth		
Local Address (Street, Apt. Number)		City	State	Zip	Phone	Address Source		
Business Address (Street, Apt. Number)		City	State	Zip	Phone	Occupation		
The undersign 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 (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 th 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>	<b>D/S A. Artola 7638</b>
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Name of Arresting/Investigating Officer
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Signature of Arresting/Investigating Officer
Page 1 of 1	