0511744 3338 1901-9690

ARREST / NOTICE TO APPEAR
JUVENILE REFERRAL
15TH JUDICIAL CIRCUIT

ADMINISTRATIVE

FCIC CHECK: [✓] YES [ ] NO
OBTS #

1. Arrest 2. Notice to Appear 3. Arrest Affidavit 4. Compl. Affidavit 5. Request Capias 6. Juvenile Ref. — [1] Juvenile [ ]

Agency ORI Number	Agency Name	Agency Case #
FL0503700	FLORIDA ATLANTIC UNIVERSITY POLICE	19-0804

Check Type. Check as many as apply: [✓] 1. Felony [ ] 2. Traffic Felony [ ] 3. Misdemeanor [ ] 4. Traffic Misdemeanor [ ] 5. Ordinance [ ] 6. Other/Capias
Weapon Seized? [ ] Yes [✓] No — Type —
Agency Arrest # or Court Case #

Location of Arrest (Include Name of Business)	City	Business Name, Address	City
FAU	BOCA RATON	FAU	BOCA RATON

Date of Arrest	Time of Arrest	Date of Booking	Time of Booking	Jail Date	Jail Time	Fingerprinted By:
10/14/2019	01:13 PM	10/14/2019		10/14/2019		[ ] ID Only [ ] AFIS [ ] Criminal

Booking #	SPN #	Other ID #	FCIC/NCIC #	DOC #	FBI #

DEFENDANT

Name (Last, First, Middle, Suffix)			Alias/Maiden
HILLMAN	LUKE	HARRISON	

Race: W-White I-American Indian B-Black A-Oriental/Asian O-Other	Sex	Date Of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	7/1/2001	5'11"	155 LBS	BLU	BRO	FAIR	MEDIUM

SCARS/MARKS/TATOOS (Location/Describe): N/A

Indication of: Alcohol influence [ ] Yes [ ] No [✓] Unk. — Drug influence [ ] Yes [ ] No [✓] Unk.

Local Address	City	State	Zip Code	Phone #	1 City 2 County 3 FL 4 Out-of-State
850 NE SPANISH RIVER BLVD	BOCA RATON	FL	33431	(561) 703-2665	

Permanent Address	City	State	Zip Code	Phone #	Address Source
850 NE SPANISH RIVER BLVD	BOCA RATON	FL	33431	(561) 703-2665	VERBAL

Street Address	City	State	Zip Code	Phone #	Occupation

DL #	DL State	Soc. Sec. #	INS #	Place Of Birth	Country of Citizenship
H455-528-01-241-0	FL	[redacted]		FL	US

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date Of Birth	
				[ ] Arrested [ ] At Large [ ] Felony [ ] Misdemeanor [ ] Juvenile
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date Of Birth	
				[ ] Arrested [ ] At Large [ ] Felony [ ] Misdemeanor [ ] Juvenile

CODE

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

Type: N. N/A A. Amphetamine — B. Barbiturate C. Cocaine E. Heroin — H. Hallucinogen M. Marijuana O. Opium/Deriv. — P. Paraphernalia/ Equipment S. Synthetic — U. Unknown Z. Other

CHARGE #

Charge Description	Counts	F.S.S. / Ordinance	State Statute	Ordinance #
FRAUD - POSS DISPLAY BLANK FORGED STOLEN DR LIC OR ID	1	[✓] F.S.S. [ ] Ordinance	322.212(1a)	

Drug Activity	Drug Type	Drug Amount	State Attorney Number	Court Number	Bond Amount
N	N				

[✓] PC [ ] Capias — [ ] AC [ ] BW — [ ] FW [ ] PW — [ ] Juv. PU [ ] Citation — #

Offense/Issued Date: 10/14/2019 — [ ] Writ. Att. [ ] Order of Arrest — [ ] Injunction — #

CHARGE #

Charge Description	Counts	F.S.S. / Ordinance	State Statute	Ordinance #
		[ ] F.S.S. [ ] Ordinance		

Drug Activity	Drug Type	Drug Amount	State Attorney Number	Court Number	Bond Amount

[ ] PC [ ] Capias — [ ] AC [ ] BW — [ ] FW [ ] PW — [ ] Juv. PU [ ] Citation — #

Offense/Issued Date: — [ ] Writ Att. [ ] Order of Arrest — [ ] Injunction — #

CHARGE #

Charge Description	Counts	F.S.S. / Ordinance	State Statute	Ordinance #
		[ ] F.S.S. [ ] Ordinance		

Drug Activity	Drug Type	Drug Amount	State Attorney Number	Court Number	Bond Amount

[ ] PC [ ] Capias — [ ] AC [ ] BW — [ ] FW [ ] PW — [ ] Juv. PU [ ] Citation — #

Offense/Issued Date: — [ ] Writ. Att. [ ] Order of Arrest — [ ] Injunction — #

NOTICE TO APPEAR

[ ] Mandatory Appearance in Court.
[ ] You need not appear in Court, but must comply with attached instructions.
Location
Date: Time:

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.

Defendant/Juvenile Signature	Parent/Guardian Signature	Released To:	Date	Time

ADMINISTRATIVE

[ ] Miranda Warning — Hold For (Agency): — Verified By:

Adults Only: [ ] Hold for First Appearance [ ] Do Not Bond Out — Reason:

I swear/affirm the above and attached statements are true and correct.

SCANNED

Officer's / Complainant's Signature

DARRIN COURTNEY 0065
Name(Printed) ID NO.

Sworn and subscribed before me, the undersigned authority this 14 day of October, 2019

Signature of Person Administering Oath

Name(Printed) Title

BOND INFORMATION

Bond Date	Bond Charge #	Bond Charge #

Type. 1. ROR 2. Cash 3. Surety 4. Bail/Bond 5. Cert. 6. Other — Bond Type — Bond Type

Return to Court — Date: Time: [ ] A.M. [ ] P.M.

Released — Date: Time: [ ] A.M. [ ] P.M.

Released by:

Page 1 of 3

PROBABLE CAUSE CONTINUATION

Agency ORI Number	Agency Name	Agency Case #	OBTS #
FL0503700	FLORIDA ATLANTIC UNIVERSIT	19-0804	

Name (Last, First, Middle, Suffix)			Date Of Birth
HILLMAN	LUKE	HARRISON	7/1/2001

PROBABLE CAUSE STATEMENT 1

The undersigned certifies and swears that he/she has just and reasonable grounds to believe that the above named defendant committed the following violation of law:

On **10/14/2019** , at **12:59** (Specifically include facts constituting cause for arrest.)

On October 14, 2019 while on the Breezeway located on the Florida Atlantic University Boca Raton Campus, I noticed a white male skateboarding on the Breezeway, This is a violation of the FAU Rules. I asked the male for identification. The male produced his a Florida Driver's License (H455-528-01-241-0) and Owl Card, identifying him as Luke Harrison Hillman. At that time I noticed a second driver's license from Maine. I told Hillman that I needed to see that. I ran both license and the Florida License was valid, but The Maine License (1161713) was not. I informed Hillman that the Maine License was not valid and he stated that it was fake. I informed Hillman of his Miranda Warnings and I asked him to explain how he got the fake license. Hillman stated that he wanted to have it because everyone else had one. Based on my investigation I concluded that there is Probable Cause for F.S.S. 322.212 (1) a . My body worn camera was activated during this incident.

P.C. Exists for Charge(s): ☐ YES ☐ NO

Judge's Signature _____ Date _____

Officer's/Complainant's Signature

DARREN COURTNEY 0065

Name (Printed) ID NO.

PROBABLE CAUSE CONTINUATION

Agency ORI Number	Agency Name	Agency Case #	OBTS #
FL0503700	FLORIDA ATLANTIC UNIVERSIT	19-0804	

Name (Last, First, Middle, Suffix): HILLMAN LUKE HARRISON — Date Of Birth: 7/1/2001

WITNESS

First Name	Middle	Last Name	Suffix	Phone #1
Street Address		City / State / Zip Code		Phone #2

WITNESS

First Name	Middle	Last Name	Suffix	Phone #1
Street Address		City / State / Zip Code		Phone #2

DEFENDANT

Marital Status _____ # of Dependents _____ Length in County _____ Property Owner _____ Address of Property _____

Place of Employment (Name and address) _____ Length of Employment _____ Previous Employment (if current less than 2 years) _____

ADVISORY AND SOLVENCY HEARING

The Defendant named on the Arrest/Notice to Appear document came before me for an Advisory and Solvency hearing on the _____ day of _____, 20____, at _____ am/pm, and was advised by me on the charge against him/her, his/her right to remain silent, that any statements by him/her may be used against him/her, his/her right to counsel, and, if he/she is financially unable to afford counsel, that counsel forthwith will be appointed: of his/her right to communicate with his/her counsel, family or friends, and that reasonable implementation will be afforded him/her to contact the foregoing.

I FURTHER CERTIFY THAT:

- ☐ **Defendant has advised the court that he/she has retained counsel, or will retain counsel.**
- ☐ **The court investigated the Defendant's solvency and found the Defendant solvent and financially able to secure counsel.**
- ☐ **The court investigated the Defendant's solvency and appointed the Public Defender to represent Defendant.**
- ☐ **The Defendant waived right to counsel at the first appearance only.**
- ☐ **The Court reviewed the Advisory and finds (there is / there is not) probable cause to hold the bind over the Defendant for trial.**
- ☐ **The probable cause determination is hereby passed 72 hours.**
- ☐ **Order of No Imprisonment (ONI)**

BOND ACTION TAKEN, if any _____ **JUDGE:** _____

- ☐ I, having been found solvent and financially able to secure counsel, hereby waive counsel until my attorney files an appearance in this case or until I file a written request for a review of my solvency and ability to secure counsel.
- ☐ I hereby waive right to counsel at the first appearance only. Defendant's Signature _____
- ☐ I hereby acknowledge receipt of a copy of the foregoing complaint and advisory

Defendant's Signature _____ Defendant's Attorney Signature _____

WAIVER

I have been advised of my rights to a Preliminary Hearing in Case Number(s) _____ in which I am the defendant, and I desire to waive and do hereby waive my right to such Preliminary Hearing concerning all of the charges against me in said case(s).

Defendant's Signature _____

FIRST APPEARANCE

ARRAIGNMENT, JUDGMENT, SENTENCE, AND ORDER

Said Defendant was arraigned for trial on _____ and entered a plea of _____ to the charge(s) as set forth herein. After hearing the evidence and duly considering the same, the Court finds you, the defendant _____ of said charge(s); AND IT IS ORDERED AND ADJUDGED that you, the Defendant, are _____ as charged of said offense(s) and set forth herein.
IT IS, THEREFORE, the judgement, Order, and Sentence of the Court that you, the Defendant, be imprisoned in the county jail of _____ County, FL, for the term of _____ days, and pay a fine of $_____ and $_____ the cost herein; and in default of such payment that you, the Defendant, stand committed to the County Jail of _____ County, FL, for a term of _____ days.
DONE, ORDERED, AND ADJUDGED in open Court at _____ County, FL, on _____.

JUDGE_____ COUNTY COURT in and for _____ County, Florida.

FIRST APPEARANCE

Charge	Action	Date

Bond Amount $ _____ Cash/Surety: Receipt # _____

ESTREATED BY (Judge): _____ Date: _____

SCANNED
OCT 15 2019

Officer's / Complainant's Signature

DARREN COURTNEY 0065
Name (Printed) ID NO.

PALM BEACH COUNTY
SHERIFF'S OFFICE
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	☒	(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.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2019033442	**Date:** 10/14/2019
	Specialist Name/ID: J. Beck/9007