

0384811

2090

ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		JUVENILE	
OBTS Number		Agency ORJ Number <b>0500800</b>		Agency Name <b>West Palm Beach Police Department</b>		Agency Report Number (N.T.A.'s only) <b>9 4 2017-0001800</b>			
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 <b>NOT APPLICABLE</b>		Multiple Clearance Indicator					
Location of Arrest (Including Name of Business) <b>5400 N FLAGLER DRIVE</b>		Location of Offense (Business Name, Address) <b>5400 N FLAGLER DR, WEST PALM BEACH, FL 33401</b>							
Date of Arrest <b>01/28/2017</b>	Time of Arrest <b>00:14</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle			
Name (Last, First, Middle) <b>BLUME, MARITA ROSE</b>		Alias:		Place of Birth (City, State) <b>Las Vegas, NV</b>		Citizenship			
Race W - White B - Black O - Oriental/Asian	Sex <b>F</b>	Date of Birth <b>04/22/1988</b>	Height <b>5'02</b>	Weight <b>115</b>	Eye Color <b>Hazel</b>	Hair Color <b>Brown</b>	Complexion <b>LT</b>	Build <b>Small</b>	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status		Religion		Indication of: Alcohol Influence Drug Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>			
Local Address (Street, Apt. Number) <b>410 WILMA CIR 103, RIVIERA BEACH, FL 33404</b>		(City) <b>(City)</b>		(State) <b>(State)</b>		(Zip) <b>(Zip)</b>		Phone	
Permanent Address (Street, Apt. Number) <b>410 WILMA CIR 103, RIVIERA BEACH, FL 33404</b>		(City) <b>(City)</b>		(State) <b>(State)</b>		(Zip) <b>(Zip)</b>		Phone	
Business Address (Name, Street) <b>(City)</b>		(City) <b>(City)</b>		(State) <b>(State)</b>		(Zip) <b>(Zip)</b>		Phone	
D/L Number, State <b>B450556886420 / FL</b>		Soc. Sec. Number <b>(Redacted)</b>		INS Number		Place of Birth (City, State) <b>Las Vegas, NV</b>		Citizenship	
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	
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 Custodian Address (Street, Apt. Number) <b>(City) 3000 (State) (Zip)</b>		Name (Last, First, Middle)		Residence Phone		Business Phone			
Notified by: (Name)		Date		Time		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 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 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	
<input type="checkbox"/> Yes, by: <input type="checkbox"/> No:		Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Disperse/ Distribute	
M. Manufacture/ Produce/ Cultivate		Z. Other		Drug Type N. N/A A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv.	
P. Paraphernalia/ Equipment		U. Unknown Z. Other		Charge Description <b>SELL/POSS/MANUF/CONTROLLED SUSTANCE SCH I, II OR IV Morphine</b>		Statute Violation Number <b>893.13(1)(A)(i)</b>		Violation of ORD #	
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts	
Domestic Violence		Warrant / Capias Number		Bond		Statute Violation Number		Violation of ORD #	
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts	
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Domestic Violence		Warrant / Capias Number		Bond		Statute Violation Number		Violation of ORD #	
Health / Apparent Physical Condition of Defendant		Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input checked="" type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries		Explain:		PROPERTY - Received By		Released By	
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		Date Transported		Time Transported		Other		Released To	
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.		Location (Court, Room)		Court Date and Time		Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed	
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.		Signature of Arresting Officer <b>Noel</b>		Name Verification (Printed by Arrestee) <b>NOEL, DREW</b>		I.D. # <b>02045</b>		(PRINT) <b>ION 28 AM 2:18</b> <b>SCANNED</b> Witness here if subject signed with an "X" <b>JAN 28 2017</b>	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Pouch #		Transporting Officer <b>Noel</b>		I.D. # <b>2045</b>		Agency <b>WFO</b> 1 OF 1	

☐ COURT 
 ☐ STATE ATTORNEY 
 ☐ AGENCY 
 ☐ CENTRAL RECORDS 
 ☐ JAIL 
 ☐ CRIME ANALYSIS 
 ☐ P.I.O. 
 ☐ DEFENDANT

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
A D M I N	Agency ORI Number <b>FL 0500800</b>		Agency Name <b>WEST PALM BEACH POLICE DEPARTMENT</b>		Agency Report Number <b>9   4   2017-0001800</b>				
	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		Special Notes:		
D E F	Name (Last, First, Middle) <b>BLUME, MARITA ROSE</b>				Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>04/22/1988</b>		
	Charge Description <b>893.13(1)(A)(1) POSSESSION OF SCHEDULE 2 SUBSTANCE</b>				Charge Description				
C H A R G E S	Charge Description				Charge Description				
	Charge Description				Charge Description				
V I C T I M	Victim's Name (Last, First, Middle) <i>Scorpio &amp; Co</i>				Race	Sex	Date of Birth		
	Local Address (Street, Apt. Number) (City) (State) (Zip)				Phone		Address Source		
B U S I N E S S	Business Address (Name, Street) (City) (State) (Zip)				Phone		Occupation		
	<p>The undersigned certifies and swears that he/she has just and resonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.</p> <p>The Person taken into custody ...</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence. <input checked="" type="checkbox"/> was observed by <b>OFC. VAUTIN</b> who told <b>OFC. NOEL</b> that he/she saw the arrested person committ the below acts.</p> <p><input type="checkbox"/> confessed to admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <b>28</b> day of <b>January</b>, <b>2017</b> at <b>00:29</b> (Specifically include facts constituting cause for arrest.)</p>								
P R O B A B L E	<p>On 01/28/2017 at approximately 2323hrs, I responded to 5400 N Flagler Drive, West Palm Beach, FL in response to an occupied suspicious vehicle parked in the parking lot. Upon my arrival, myself and Ofc. Vautin discovered a female, identified as Marita Blume, sitting in the front passenger seat of a blue Toyota Corolla. I could observed a black purse and a black/blue sunglass case in Blume's lap. Blume stated that she, did not live there and was waiting on a friend who was visiting someone in one of the apartments. While speaking with Blume, several minutes had passed and her friend did not return to the vehicle. Blume stated that the vehicle belonged to her mother but she was allowed to use it. A DL check revealed that Blume had a suspended license and thus could not legally drive and remove the vehicle from the property. At this point, her friend had not yet returned from the apartment. Due to not having anyone on scene to remove the vehicle, a tow truck was dispatched. Ofc. Vautin asked Blume to exit the vehicle so as to complete a vehicle inventory. As Blume exited the passenger seat, myself and Ofc. Vautin observed in plain view 2 small blue pills on the seat originally under her legs. Also, laying on the seat next to the pills, was a black/blue sunglass case found to be containing 13 additional small blue pills identical to the 2 seen laying on the seat. Blume was detained and spontaneously uttered that the "pills are morphine". Blume did not provide proof of any prescription for the pills. The 15 Morphine pills were weighed at 2.3g.</p>								
	<p>I contacted poison control, provided the pill description, and they verified that they were Morphine pills (Schedule 2) at 15mg each. Reference control # M-3558054. Provided that Morphine pills were observed directly under Blume, in the sunglass case which was in her lap and statements made by Blume that acknowledge the pills are morphine, it can be concluded that Blume was both in possession and aware of the Morphine.</p>								
C A U S E	<p>Based upon the facts, probable cause exist to arrest and charge Marita Blume with possession of a schedule 2 substance pursuant to FSS893.13 (1) (A) (1).</p>								
	<p>SWORN AND SUBSCRIBED BEFORE ME</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><i>[Signature]</i> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p>DATE <b>1/28/17</b></p> </div> <div style="width: 45%;"> <p><i>[Signature]</i> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p><b>NOEL DREW (02045)</b> NAME OF OFFICER (PLEASE PRINT)</p> <p><b>01/28/2017</b> DATE</p> </div> </div>								
A D M I N I S T R A T I V E	<p style="text-align: right;"><b>SCANNED</b></p>								
	<p style="text-align: right;">PAGE 1 OF 1</p>								

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.