

OBTS Number			ARREST / NOTICE TO APPEAR Juvenile Referral Report					1 Arrest 2 NTA.	3. Request for Warrant 4. Request for Capias	1	Juvenile		
ADMINISTRATIVE	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 17-103034							
	Charge Type: Check as many as apply: 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other			If Weapon Seized Enter Type			Multiple Clearance Indicator 01						
Location of Arrest (including Name of Business) 601 Sandsbury Way, WPB FL 33411				Location of Offense (Business Name, Address) 601 Sandsbury Way, WPB FL 33411									
Date of arrest 07/15/17		Time of Arrest 2200		Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle N/A					
Name (Last, First, Middle) Edlund, Paul David													
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex W	Date of Birth 06/24/1985	Height 6'2	Weight 350	Eye Color Brn	Hair Color Brn	Complexion M	Build Lrg				
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status S	Religion N/A	Indication of: Alcohol Influence Drug Influence					
Local Address (Street, Apt. Number) 211 Woodbridge Drive		(City) Jupiter	(State) FL	(zip) 33458	Phone ()	Unk	Residence Type: 1. City 2. County		3. Florida 4. Out of State	2			
Permanent Address (Street, Apt. Number) Same		(City)	(State)	(zip)	Phone ()		Address Source		Verbal				
Business Address (Name, Street) Unknown		(City)	(State)	(zip)	Phone ()		Occupation		Unknown				
D/L Number, State E345684852240 FL		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) Jupiter, FL		Citizenship Refused					
Co-Defendant Name (Last, First, Middle)						Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large				
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"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other		Name (Last) (First) (Middle)				Residence Phone ()							
Address (Street, Apt. Number) 211 Woodbridge Drive						(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 355-2526) informed of any change of address. Yes, by: (Name) No: (Reason)						School Attended				Grade			
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property				Value of Property							
CODE	S. Sell B. Buy P. Possess	R. Smuggle D. Deliver T. Traffic	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 O. Opium/Deriv	P. Paraphernalia/ U. Unknown Equipment S. Synthetic. Z. Other				
	Charge Description Disorderly Intox						Counts 1	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 856.011				
CHARGE	Drug Activity N/A	Drug Type N/A	Amount / Unit N/A	Offense # 17-103034		Violation of ORD #							
	Warrant / Capias Number						Bond						
CHARGE	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number						
	Warrant / Capias Number						Violation of ORD #						
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #		Warrant / Capias Number							
	Warrant / Capias Number						Bond						
CHARGE	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number						
	Warrant / Capias Number						Violation of ORD #						
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #		Warrant / Capias Number							
	Warrant / Capias Number						Bond						
NOTICE TO APPEAR	Location (Court, Room Number, Address) 3228 Gun Club Road, WPB FL 33406												
	Court Date and Time Month August Day 15 Year 2017 Time 8:30 AM 12 P.M. 11												
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 Defendant (or Juvenile and Parent/ Custodian) Paul David Edlund Date Signed 10/19/2017													
ADMIN	HOLD for other Agency Name			Signature of Arresting Officer X			Name Verification (Printed by Arresting Officer) 10/19/2017						
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal			Name of Arresting Officer (Print) Sgt. George Grosso			I.D. # 5429	(PRINT)					
Initials Deputy I.D. QH Deputies 1			Transporting Officer I.D. # 002-801211			Agency							
Witness here if suspect signed with QH 1 of 1													

