

AD M I N I S T R A T I O N	OBTS Number		#0485818 ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		JUVENILE																				
	Agency ORI Number 0500400		Agency Name Delray Beach Police Department		Agency Report Number (N.T.A.'s only) 4, 0 17-003483																										
	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: None/not Applicable		Multiple Clearance Indicator																										
	Location of Arrest (Including Name of Business) 1200 LAKE IDA RD		Location of Offense (Business Name, Address) 1200 LAKE IDA RD, DELRAY BEACH, FL 33444																												
Date of Arrest 03/03/2017		Time of Arrest 04:20		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle																			
D E F E N D A N T	Name (Last, First, Middle) HILFORD, PEYTON RAVEN												Alias (Name, DOB, Soc. Sec. #, Etc.) Alias:																		
	Race W - White B - Black		I - American Indian O - Oriental/Asian		Sex W F		Date of Birth 06/05/1995		Height 5'07		Weight 110		Eye Color BROWN		Hair Color BLOND OR		Complexion LIGHT		Build MEDIUM												
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)												Marital Status S		Religion NOT INDICA		Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/> Drug Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>														
	Local Address (Street, Apt. Number) 2445 SW 22ND AVE, DELRAY BEACH, FL 33445						(City) DELRAY BEACH		(State) FL		(Zip) 33445		Phone (772) 233-0774		Residence Type: 1. City 3. Florida 2. County 4. Out of State 1																
	Permanent Address (Street, Apt. Number) 2445 SW 22ND AVE, DELRAY BEACH, FL 33445						(City) DELRAY BEACH		(State) FL		(Zip) 33445		Phone (772) 233-0774		Address Source VERBAL																
	Business Address (Name, Street) SCORES CLUB,						(City) DELRAY BEACH		(State) FL		(Zip) 33445		Phone		Occupation Dancer																
	D/L Number, State H416676957050 / FL				Soc. Sec. Number				INS Number				Place of Birth (City, State) PHOENIX, AZ				Citizenship														
	Co-Defendant Name (Last, First, Middle)												Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor												
	Co-Defendant Name (Last, First, Middle)												Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor												
	J U V E N I L E	<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ Name (Last, First, Middle)												Residence Phone																	
<input type="checkbox"/> Legal Custodian												Business Phone																			
Address (Street, Apt. Number)												(City) (State) (Zip)																			
Notified by: (Name)												Date		Time		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated															
C O D E	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																
	<input type="checkbox"/> Yes, by: <input type="checkbox"/> No: _____												Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property														
	Drug Activity S. Sell 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 S. Synthetic		U. Unknown Z. Other
C H A R G E	Charge Description POSSESSION OF COCAINE												Statute Violation Number 893.13 (6 A)				Violation of ORD #														
	Drug Activity P		Drug Type C		Amount / Unit 1.00 / DU		Offense # 17-003483		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond																
	Charge Description POSSESSION OF CONTROLLED SUBSTANCE W/OUT A PRESCRIPTION												Statute Violation Number 893.13(6)(A)				Violation of ORD #														
C H A R G E	Drug Activity P		Drug Type S		Amount / Unit 1.00 / DU		Offense # 17-003483		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond																
	Charge Description POSSESSION OF CONTROLLED SUBSTANCE W/ INTENT TO SELL												Statute Violation Number 893.13(1A) I				Violation of ORD #														
	Drug Activity P		Drug Type S		Amount / Unit 2.10 / GM		Offense # 17-003483		Counts 3		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond																
I N T A K E	Health / Apparent Physical Condition of Defendant												Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries																		
	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												PROPERTY - Received By				Released By														
	Transported By												Date Transported		Time Transported		Other														
N O T I C E T O A P P E A R	<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) South County 200 W Atlantic Ave Delray Beach, FL 33444				Court Date and 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.												No Photo Available																		
	Signature of Defendant (or Juvenile and Parent/Custodian)												Date Signed																		
A D M I N	HOLD for Other Agency												Signature of Arresting Officer				Name Verification (Printed by Arrestee)														
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Intake Deputy												Name of Arresting Officer (Print) DEEN, MEER				I.D. # 0943														
	DAS T. BURNSIDE #5406												Transferring Officer Miller				I.D. # 1008														
Witness here if subject signed with an "X".												PAGE 1 OF 2																			

MAR 04 2017

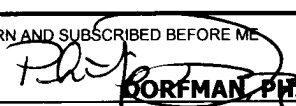
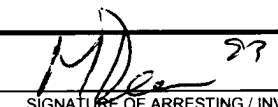
**ARREST / NOTICE TO APPEAR  
Additional Charge List**

Agency ORI Number <b>0500400</b>		Agency Name <b>Delray Beach Police Department</b>				Agency Report Number (N.T.A.'s only) <b>4   0   17-003483</b>					
C O D E	Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Disperses/ 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 S. Synthetic	U. Unknown Z. Other
	Charge Description <b>POSSESS AND/OR USE DRUG PARAPHERNALIA</b>						Statute Violation Number <b>893.147(1)</b>		Violation of ORD #		
	Drug Activity	Drug Type <b>15</b>	Amount / Unit <b>3.00 / XX</b>	Offense # <b>17-003483</b>	Counts <b>3</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number		Bond		

**NOT A CERTIFIED COPY**

SCANNED  
MAR 04 2017

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE				
Agency ORI Number <b>FL 0500400</b>		Agency Name <b>DELRAY BEACH POLICE DEPARTMENT</b>		Agency Report Number <b>4 0 17-003483</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:							
Name (Last, First, Middle) <b>HILFORD, PEYTON</b>		Alias		Race <b>W</b>		Sex <b>F</b>		Date of Birth <b>06/05/1995</b>					
Charge Description <b>POSSESSION OF CONTROLLED SUBSTANCE W/ INTENT TO SEL</b>		Charge Description <b>POSSESSION OF COCAINE</b>											
Charge Description <b>POSSESSION OF NARCOTICS PARAPHERNALIA</b>		Charge Description <b>POSSESSION OF SCHEDULE II SUBSTANCE</b>											
Victim's 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 (Name, Street)		(City)		(State)		(Zip)		Phone		Occupation			
<p>The undersigned certifies and 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.</p> <p>The Person taken into custody . . .</p> <p><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.</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 <u>3</u> day of <u>March</u>, <u>2017</u> at <u>02:39</u> (Specifically include facts constituting cause for arrest.)</p> <p>The following incident occurred within the City of Delray Beach, Palm Beach County, Florida.</p> <p>On the above date and time, Officer Pacheco was in an unmarked police vehicle and observed a white Scion XB bearing FL tag- DHWU85 driving westbound on Lake Ida Rd. He paced clocked the vehicle driving 45 mph in a posted 35 mph zone. We conducted a traffic stop on the vehicle in the 1200 block of Lake Ida Rd and met with the driver, W/F Peyton Hilford, and front passenger, Jeffery Warren. Hilford appeared nervous and was visible shaking. Warren exited the vehicle and I patted him down for Officer Safety. Hilford exited the vehicle and Sergeant Vanness patted her down for Officer Safety. Officer Pacheco and I spoke to Hilford and asked her if there was anything illegal inside of the vehicle. She stated that she might have a little ecstasy (MDMA) in her purse and gave him consent to retrieve it. Officer Pacheco retrieved a clear zip top bag with a white crystal like substance from her brown purse that was located on the rear passenger seat floorboard. I later field tested it positive for the presence of Methdioxymethamphetamine (MDMA) with an MDMA (Ecstasy) test kit. Located on the seat behind the driver was a brown box that contained the following items:</p> <p>1.) One black MAC case that contained two clear zip top baggies of MDMA (I later field tested it positive for the presence of Methdioxymethamphetamine (MDMA) with an MDMA (Ecstasy) test kit) and one zip top bag with one pink pill with (COR 135) inscribed on the pill (Officer Leblanc identified this pill as Adderall- Schedule II substance through drugs.com).</p> <p>2.) One scale</p> <p>3.) One large zip top bag with numerous empty capsules</p> <p>4.) Two pipes that were burnt on one end</p> <p>5.) One zip top bag with one crack cocaine rock and one crack pipe wrapped in a piece of aluminum foil (Officer Leblanc field tested both items positive for the</p>													
<table border="0" style="width:100%;"> <tr> <td style="width:50%; vertical-align: top;"> <p>SWORN AND SUBSCRIBED BEFORE ME</p> <p></p> <p><b>DORFMAN, PHILIP</b></p> <p>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p><u>03/03/2017</u></p> <p>DATE</p> </td> <td style="width:50%; vertical-align: top;"> <p></p> <p>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p><b>DEEN, MEER (0943)</b></p> <p>NAME OF OFFICER (PLEASE PRINT)</p> <p><u>03/03/2017</u></p> <p>DATE</p> </td> </tr> </table>												<p>SWORN AND SUBSCRIBED BEFORE ME</p> <p></p> <p><b>DORFMAN, PHILIP</b></p> <p>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p><u>03/03/2017</u></p> <p>DATE</p>	<p></p> <p>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p><b>DEEN, MEER (0943)</b></p> <p>NAME OF OFFICER (PLEASE PRINT)</p> <p><u>03/03/2017</u></p> <p>DATE</p>
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OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	<b>1</b>	JUVENILE
Agency ORI Number <b>FL 0500400</b>		Agency Name <b>DELRAY BEACH POLICE DEPARTMENT</b>		Agency Report Number <b>4 0 17-003483</b>			
Charge Type: <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:	
Name (Last, First, Middle) <b>HILFORD, PEYTON</b>				Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>06/05/1995</b>	
<p>presence of cocaine with a Scott Reagent test kit)</p> <p>6.) Two syringes</p> <p>7.) One calculator</p> <p>8.) Two medium sized zip top bags that contained numerous empty unused small zip top baggies</p> <p>9.) One grinder</p> <p>10.) One blue woman's undergarment (pantie).</p> <p>At this point, Sergeant Vanness informed Hilford that she was under arrest and handcuffed her behind her back, double locked and checked for tightness, and placed her in the rear of my fully marked patrol vehicle. Officer Pacheco read Hilford her Miranda Rights to which she stated that she understood and waived. Hilford stated that the blue pantie that was found in the box did in fact belong to her as she works at a strip club and buys those items. She further stated that an unknown female asked her to hold onto the box for a day and she would return it to her however she was unable to provide a name to that subject. She also stated that she snorted some of the MDMA that we found in her purse earlier in the night. Officer Leblanc entered all items into the DBPD evidence section.</p> <p>Based on the aforementioned, Probable Cause exists to charge the defendant with three counts of Possession of MDMA with intent to sell in violation of F.S.S. 893.13 (1) (A), one count of Possession of Cocaine in violation of F.S.S. 893.13 (6) (A), one count of Possession of Schedule II substance in violation of F.S.S. 893.13 (6) (A), and three counts of Possession of Narcotics Paraphernalia in violation of 893.147 (1).</p>							
NOT A CERTIFIED COPY							
SWORN AND SUBSCRIBED BEFORE ME  <b>DOEFMAN, PHILIP</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <b>03/03/2017</b> DATE				 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <b>DEEN, MEER (0943)</b> NAME OF OFFICER (PLEASE PRINT) <b>03/03/2017</b> DATE			
				PAGE <b>2 OF 2</b>			

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

MAR 04 2017