

J# 0485505

17mm-2246
ARREST / NOTICE TO APPEAR
Juvenile Referral Report

A# 3870

OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06		17042070	
Charge Type Check as many as apply <input 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		If Weapon Seized		Enter Type		Multiple Clearance Indicator 01			
Location of Arrest (Including Name of Business) 5000 BLK 10TH AVE N GREENACRES, FL, 33463				Location of Offense (Including Name of Business) 10TH AVE N/PERRY AVE GREENACRES, FL, 33463					
Date of Arrest 02/20/2017		Time of Arrest 1131		Booking Date		Booking Time		Jail Date	
Jail Time		Location of Vehicle							
Name (Last, First, Middle) HALL ROBIN LEE				Alias (Name, DOB, Soc. Sec. # Etc.)					
Race W - White B - Black O - Oriental/Asian W		Sex F		Date of Birth 10/21/1988		Height 5-5		Weight 200	
Eye Color HAZEL		Hair Color BRN		Complexion LIGHT		Build HEAVY			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status SINGLE		Religion NONE		Indication of Alcohol Influence Y <input type="checkbox"/> N <input type="checkbox"/> UNK <input checked="" type="checkbox"/>	
Local Address (Street, Apt. Number) 3157 GULFSTREAM RD LAKE WORTH FL 33461				Phone 3059887791		Residence Type 1. City 2. County 3. Florida 4. Out of State 2			
Permanent Address (Street, Apt. Number)				City		State		Zip	
Business Address (Street, Apt. Number)				City		State		Zip	
D/L Number, State H400732888810				Social Security Number		INS Number		Place of Birth WEST PALM BEACH, FL	
Citizenship									
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth	
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth	
<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	
Notified By (Name)				Date		Time		Juvenile Delegation 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 561 356-2626) 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 DWLS/FTP				Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 322.34(2)	
Drug Activity				Drug Type		Amount/Unit		Offense # 17042070	
Warrant/Capias Number				Bond					
Charge Description FAILURE TO COMPLY WITH ANY LAWFUL ORDER				Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 316.072(3)	
Drug Activity				Drug Type		Amount/Unit		Offense # 17042070	
Warrant/Capias Number				Bond					
Charge Description RESIST ARREST WITH OUT VIOLENCE				Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 843.02	
Drug Activity				Drug Type		Amount/Unit		Offense # 17042070	
Warrant/Capias Number				Bond					
Charge Description				Counts		Domestic Violence		Statute Violation Number	
Drug Activity				Drug Type		Amount/Unit		Offense #	
Warrant/Capias Number				Bond					
Location (Court, Address, Room Number) 3228 GUN CLUB RD WEST PALM BEACH, FL, 33406									
Court Date and Time Month 03 Day 21 Year 2017 Time 8:30 AM <input checked="" type="checkbox"/> PM <input type="checkbox"/>									
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 FULLY 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. D/S Hall									
Signature of Defendant (or Juvenile and Parent/Custodian)									
Date Signed									
HOLD FOR OTHER AGENCY									
Name									
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other									
Signature of Arresting Officer D/S H. BUREY 7576									
Name of Arresting Officer D/S N RHODES									
Transporting Officer D/S N RHODES									
Agency 25005									
Name Verification (Printed by Arrestee) D/S T. BURNSIDE #5406									
(PRINT)									
Intake Deputy D/S T. BURNSIDE #5406									
ID # Pouch #									
Witness here if subject signed with an "X"									
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OETS Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest 3 Request For Warrant 2 N.T.A 4 Request For Capias		1 Juvenile <input type="checkbox"/>	
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06 17042070			
Charge Type Check as many as apply <input type="checkbox"/> 1 Felony <input 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 _____		Special Notes					
Defendant Name (Last, First, Middle) HALL ROBIN LEE				Race W	Sex F	Date of Birth 10/21/1988	
Charge DWLS/FTP				Charge FAILURE TO COMPLY WITH ANY LAWFUL ORDER			
Charge RESITIT ARREST WITH OUT VIOLENCE				Charge			
Victim Name (Last, First, Middle) STATE OF FLORIDA				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 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 checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation. On the 20 day of FEBRUARY 20 17 at 11:26 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM							

WHILE ON PATROL I OBSERVED A GOLD 2006 TOYOTA SUV FL TAG#309RAF TRAVELING WEST BOUND AT THE 5000 BLK OF 10TH AVE N GREENACRES, FL, 33463 AND THE DRIVER, WHITE FEMALE, DID NOT HAVE HER SEATBELT FASTENED. IT SHOULD BE NOTED THE DRIVERS WINDOW WAS ROLLED DOWN AND I HAD A CLEAR VIEW INSIDE OF HER VEHICLE. I INITIATED A TRAFFIC STOP AT THE INTERSECTION OF 10TH AVE N/PERRY AVE AND UPON APPROACHING THE VEHICLE ROBIN LEE HALL WAS SEATED IN THE DRIVERSEAT. I ASKED ROBIN FOR HER DRIVERS LICENSE, INSURANCE AND REGISTRATION. ROBIN ADVISED ME SHE WAS A SOVEREIGN CITIZEN AND SHE DID NOT HAVE TO PROVIDE ME ANY INFORMATION. SHE CONTINUED TO TELL ME WE DID NOT HAVE A CONTRACT TOGETHER AND SHE REFUSED TO PROVIDE ME ANY INFORMATION. I ASKED ROBIN HALL IF SHE WAS THE REGISTERED OWNER OF THE VEHICLE SHE WAS DRIVING AND SHE REPLIED SHE WAS. I TOLD ROBIN HALL THIS IS A LAW FUL TRAFFIC STOP AND SHE WAS NOT FREE TO LEAVE THE SCENE OR DRIVE OFF. I WALKED BACK TO MY POLICE MOTORCYCLE AND COMPLETED A RECORDS CHECK ON THE REGISTERED OWNER ROBIN LEE HALL. THE RECORDS CHECK REVEALED ROBIN LEE HALL'S FLORIDA LICENSE WAS SUSPENDED FOR FAIL TO PAY TRAFFIC FINE. I WALKED BACK TO ROBIN LEE HALL AND ASKED HER IF SHE KNEW HER LICENSE WAS SUSPENDED. ROBIN REFUSED TO ANSWER ANY QUESTIONS AT WHICH TIME I ORDERED HER TO EXIT THE VEHICLE BECAUSE SHE WAS BEING ARRESTED FOR DRIVING WHILE HER LICENSE WAS SUSPENDED. ROBIN REFUSED TO EXIT HER VEHICLE. I THEN ORDERED ROBIN FOR THE SECOND TIME TO EXIT HER VEHICLE BECAUSE SHE WAS UNDERARREST. ROBIN FAILED TO EXIT AND REFUSED TO COMPLY WITH MY LAWFUL ORDER. I THEN OPENED THE DRIVER DOOR, GRABBED ROBIN'S LEFT ARM PULLED HER OUT OF THE CAR AND APPLIED ARM BAR TAKE DOWN AND SHE WENT DOWN TO THE GROUND. ONCE ON THE GROUND ROBIN WAS HANDCUFFED AND SHE GAVE VERY LITTLE RESISTANCE. ROBIN LEE HALL WAS THEN ESCORTED TO D/S RHOADS MARKED PATROL CAR. GREENACRES FIRE RESCUE RESPONDED TO THE SCENE AND TRANSPORTED ROBIN HALL TO DELRAY MEDICAL CENTER BRANCH. ROBIN LEE HALL WAS MEDICALLY CLEARED AND TRANSPORTED TO CJ WITHOUT INCIDENT. ROBIN LEE HALL WAS ARRESTED FOR DWL SUSPENDED, FAIL TO COMPLY WITH LAWFUL ORDER, AND RESIST ARREST WITH OUT VIOLENCE. ROBIN LEE HALL WAS ALSO ISSUED A CITATION FOR SEATBELT VIOLATION.

The foregoing instrument was sworn to and affirmed before me this <u>20th</u> day of <u>FEBRUARY</u> 20 <u>17</u> , by:	
D/S RHOADS 25005	D/S H. BUREY 7576 7576
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Name of Arresting/Investigating Officer
<i>[Signature]</i> 25005	<i>[Signature]</i> 7576
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Signature of Arresting/Investigating Officer

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