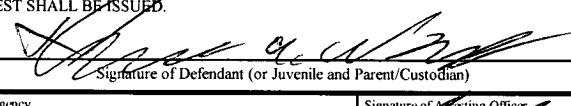


0487263

ARREST NOTICE TO APPEAR

2658

OBTS Number		N/A		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE										
Agency ORI Number 0500800		Agency Name West Palm Beach Police Department		Agency Report Number (N.T.A.'s only) 9 4 2017-0007706													
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: NOT APPLICABLE											
Location of Arrest (Including Name of Business) 799 OKEECHOBEE BLVD				Location of Offense (Business Name, Address) 799 OKEECHOBEE BLVD, WEST PALM BEACH, FL 33401													
Date of Arrest 04/21/2017		Time of Arrest 16:45		Booking Date		Booking Time	Jail Date	Jail Time	Location of Vehicle								
Name (Last, First, Middle) WINTERS, STEVEN AARON																	
Alias: Alias:																	
Race W - White B - Black		Sex M - Male F - Female		Date of Birth 06/17/1975		Height 5'07	Weight 150	Eye Color BLUE	Hair Color BROWN	Complexion FAIR	Build M						
Scars, Marks, Unique Physical Features (Location, Type, Description)										Marital Status S	Religion						
Local Address (Street, Apt. Number) 270 SE MIZNER BLVD UNIT 702, BOCA RATON, FL 33432										Phone (917) 566-9878							
Permanent Address (Street, Apt. Number) 270 SE MIZNER BLVD UNIT 702, BOCA RATON, FL 33432										Phone (917) 566-9878							
Business Address (Name, Street)										Phone							
D/L Number, State W536781752170 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) PARAMOUS, NC		Citizenship US									
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 Name (Last, First, Middle)										Residence Phone							
Address (Street, Apt. Number) (City) (State) (Zip)										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					
<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				
C O D E		Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Dispenses/ 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 DRIVING WHILE UNDER INFLUENCE								Statute Violation Number 316.193(I)		Violation of ORD #					
C H A R G E		Drug Activity N	Drug Type	Amount / Unit /	Offense # 2017-0007706	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond						
C H A R G E		Charge Description								Statute Violation Number		Violation of ORD #					
C H A R G E		Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond						
C H A R G E		Charge Description								Statute Violation Number		Violation of ORD #					
C H A R G E		Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input 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 Explain:							
I N T A K E		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	Released To				
A P P E A R		Transported By								Date Transported	Time Transported	Other					
N O T I C E		<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) Criminal Justice CRIMINAL JUSTICE COMPLEX		Court Date and Time 05/25/2017 08:30:00					
A P P E A R		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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.								 Signature of Defendant (or Juvenile and Parent/Custodian)			Date Signed 4/20/2017				
A D M I N		HOLD for Other Agency				Signature of Arresting Officer 				Name Verification (Printed by Arresting Officer) ERIC EVRLEY							
A D M I N		<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other				Name of Arresting Officer (Print) EVRLEY, ERIC				I.D. # 01645							
A D M I N		Intake Deputy MS 607 7136		Pouch #	Transporting Officer 1943		I.D. # WPBPD	Agency									
										SCANNED							

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

APR 25 2017

APR 21 PM 8:00

No Photo Available

1 OF 1