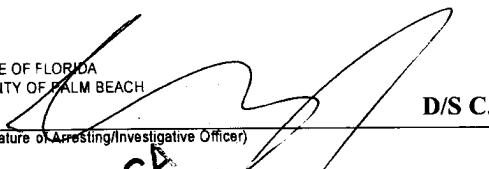


J# 0465063

7MM4626 # 2186

ARREST / NOTICE TO APPEAR				Juvenile Referral Report				1. Arrest		3. Request for Warrant		4. Request for Capias		1 Juvenile			
OBTS Number				Agency Name				Agency Report Number (N.T.A.'s only)				1		Juvenile			
Agency ORI Number		PALM BEACH COUNTY SHERIFF'S OFFICE						06- 17-066329						N			
ChargeType: Check as many as apply:		<input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other				Weapon Seized / Type		Multiple Clearance Indicator		1					
								2 1. Yes 2. No						01			
Location of Arrest (Including Name of Business) 5171 Floria Dr #H, Boynton Beach, FL 33437				Location of Offense (Business Name, Address) 5171 Floria Dr #H, Boynton Beach, FL 33437													
Date of Arrest 04/19/2017		Time of Arrest 0247		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle					
Name (Last, First, Middle) Conn, Timothy, Ray																	
Alias (Name, DOB, Soc. Sec. #, Etc.)																	
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian		W M		Sex		Date of Birth 03/08/1983		Height 5'08		Weight 181		Eye Color Bro		Hair Color Bro		Complexion Light	
Scars, Marks, Unique Physical Features (Location, Type, Description) Tattoos Sun on Leg, Stars on Elbows Graffiti on right arm																	
Marital Status Divorced		Religion CHRISTIAN		Indication of: Y N Alcohol Influence Drug Influence													
Local Address (Street, Apt. Number) 213 Sw Aubudon Ave, Port Saint Lucie, FL 34984		(City)		(State)		(Zip)		Phone (772) 380-7816				Residence Type: 1. City 2. County 3. Florida 4. Out of State		2			
Permanent Address (Street, Apt. Number) 5171 Floria Dr, Apt H, Boynton Beach, FL 33472		(City)		(State)		(Zip)		Phone ()				Address Source Verbal					
Business Address (Name, Street)		(City)		(State)		(Zip)		Phone ()				Occupation Sales					
D/L Number, State C500816830880, FL		Soc. Sec. Number		INS Number				Place of Birth (City, State) Elizabeth City, 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 <input type="checkbox"/> Other												Residence Phone ()					
Address (Street, Apt. Number)		(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 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 (Phone 355-2526) informed of any change of address. <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									
CODE	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 O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other						
CHARGE	Charge Description Violation of Protection Order				Counts 01	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 741.31 (4A).				Violation of ORD #					
CHARGE	Drug Activity N	Drug Type N	Amount / Unit	Offense # 17-066329					Warrant / Capias Number				Bond				
CHARGE	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number				Violation of ORD #					
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #					Warrant / Capias Number				Bond				
CHARGE	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number				Violation of ORD #					
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #					Warrant / Capias Number				Bond				
NOTICE TO APPEAR	Location (Court, Room Number, Address) 2011 APR 19 AM 10:00																
NOTICE TO APPEAR	Court Date and Time Month Day Year Time AM PM																
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 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)																	
Date Signed 2011 APR 19 AM 10:00																	
HOLD for other Agency Name: Cpl. Harder 4716				Signature of Arresting Officer X				Name Verification (Printed by Arrestee)									
								(PRINT) I.D. # 16305									
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal				<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other				Name of Arresting Officer (Print) D/S C. Ward									
Intake Deputy Cpl. Harder 4716				I.D. # D/S J. Shears				Transporting Officer 16305									
								Agency PBSO									
SCANNED 16305 Witness here if subject signed with an "X" 1 OF 1																	

OBTS Number		PROBABLE CAUSE AFFIDAVIT				1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile	N	
ADMIN	Agency ORI Number FLO 50000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 06- 17-066329					
	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			Special Notes:		
DEF	Name (Last, First, Middle) Conn, Timothy, Ray						Alias		Race W	Sex M	Date of Birth 03/08/1983
CHARGES	Charge Description Violation of Protection Order			741.31 (4A1)			Charge Description				
	Charge Description						Charge Description				
VICTIM	Victim's Name (Last, First, Middle) Hite, Erica, M						Race W	Sex F	Date of Birth 05/17/1981		
	Local Address (Street, Apt. Number) 5171 Floria Dr Apt H, Boynton Beach, FL 33437			(City)	(State)	(zip)	Phone (561) 267-7435	Address Source FCIC			
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. The Person taken into custody</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts.</p> <p><input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p>											
On the 19 day of April 20 17 at 0243 <input checked="" type="checkbox"/> A. M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)											
<p>I responded to 5171 Floria Dr Apt H, unincorporated Boynton Beach, Palm Beach County at the request of Palm Beach County Fire Rescue.</p> <p>Upon arrival I made contact with the defendant, identified by his Florida Driver's License as Timothy Conn. During a check of FCIC/NCIC a protection order was located by dispatch that showed Erica Hite as the protected party. The protection order was confirmed by the Broward County Sheriff's office. Timothy stated to me that he just moved in to the residence today. He stated that he had paid \$600 rent to be in the residence but did not show me proof of the payment. He showed me clothes in the closet.</p> <p>He stated that he had an on again off again relationship with Erica Hite but he was currently not dating her and that he was just a roommate. He stated to me that he had not had an intimate relationship with Erica in two and a half years. He stated to me that the Protection order had been lifted and showed me paperwork showing that the paperwork had been lifted as of the morning of the 18th.</p> <p>I also spoke with Erica Hite, who identified herself through a Florida Driver's License, who stated that Timothy had been living with her for approximately 1 month. She stated that they had been intimate with each other approximately one week prior. She stated to me that she believed that the no contact order had been lifted as the morning of the 18th.</p> <p>Erica Hite later stated in a written sworn statement that Timothy had only been at her house for one day.</p> <p>I spoke with Records/Warrant Technician J. Oakley of the Broward County Sheriff's office. She stated to me that her records showed that there was an active protection order. She stated that although there was a court case listed on the morning of the 18th for Timothy Conn there was no record of the no contact order being rescinded.</p> <p>At this time, based on my investigation I found Probable cause to arrest the defendant, Timothy Conn, for violation of a protection order pursuant to Florida State Statute 741.31 (4A1).</p>											
PROBABLE CAUSE STATEMENT	 D/S C. Ward <small>(Signature of Arresting/Investigative Officer)</small>										
	The foregoing instrument was sworn to or affirmed and subscribed before me this 19 day of April 20 17 by D/S C. Ward 16305 <small>SCB</small> <small>D/S C. Ward 16305</small> <small>Personally Known</small> <small>(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced</small> <small>D/S J. Shears 7047</small>										
ADMINISTRATIVE	<small>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</small>										
	<small>PAGE 1 OF 1</small>										