

0492375

ARREST / NOTICE TO APPEAR

NR

P-3217

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 17-015595
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
Location of Arrest (Including Name of Business) 1700 S FEDERAL HWY, DELRAY BEACH		Location of Offense (Business Name, Address) 1700 S FEDERAL HWY, DELRAY BEACH, FL 33483
Date of Arrest 10/06/2017	Time of Arrest 14:18	Booking Date 10/06/2017
Name (Last, First, Middle) BLOCK, TYRA CORRINE		Alias: Alias (Name, DOB, Soc. Sec. #, Etc.)
Race W - White B - Black	Sex F	Date of Birth 02/12/1998
Height 5'06	Weight 140	Eye Color BROWN
Hair Color BROWN		Complexion LIGHT
Build SMALL		Marital Status S
Religion NOT INDICA		Indication of: Alcohol Influence: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk Drug Influence: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk
Local Address (Street, Apt. Number) 5762 FOX HOLLOW DR G, BOCA RATON, FL 33486		Phone (561) 451-5459
Permanent Address (Street, Apt. Number) 5762 FOX HOLLOW DR G, BOCA RATON, FL 33486		Phone (561) 451-5459
Business Address (Name, Street) UNEMPLOYED,		Occupation VERBAL
D/L Number, State B420803985520 / FL	Soc. Sec. Number	INS Number
Place of Birth (City, State) FT LAUDERDALE, FL,		Citizenship US
Co-Defendant Name (Last, First, Middle) MAGNUSSON, JULIA ADELE	Race W	Sex F
Date of Birth 05/05/1997	<input checked="" 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		<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		
Name (Last, First, Middle) Residence Phone		
Address (Street, Apt. Number) Business Phone		
Notified by: (Name) Date Time		
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.		
Property Crime? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property JEWELRY
Value of Property \$16		
Charge Description THEFT RETAIL (SHOPLIFTING)	Statute Violation Number 812.015(1)(D)	Violation of ORD # DP
Charge Description POSSESSION OF CONTROLLED SUBSTANCE W/OUT A PRESCRIPTION	Statute Violation Number 893.13(6)(A)	Violation of ORD # 3000
Charge Description	Statute Violation Number	Violation of ORD #
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 checked="" type="checkbox"/> F.O.T. County Jail	PROPERTY - Received By	Released By
Transported By	Date Transported	Time Transported
<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
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
HOLD for Other Agency	Signature of Arresting Officer WARNE, MATTHEW	Name Verification (Printed by Arrestee) OCT 6 PM 5:58
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest	Name of Arresting Officer (Print) WARNE, MATTHEW	I.D.# 0958
<input type="checkbox"/> Susceptible <input type="checkbox"/> Other	Transporting Officer OFC WARNE	I.D.# Agency 958 DELRA
Intake Dept. #	Pouch #	Witness here if subject signed with an "X"

2017 OCT 6 PM 5:58

Handwritten initials and signatures at the bottom left.

