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ADMINISTRATIVE		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		Juvenile	
OBTS Number		Agency ORI Number		Agency Name		Agency Report Number			
FLO. 5 0 0 0 0 0		PALM BEACH COUNTY SHERIFF'S OFFICE		0 6 1 1 1 0 1 1 2 7 2 4 8					
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	
Location of Arrest (Including Name of Business)		3200 Belvedere Rd. PBIA WPB.KC 33406		Location of Offense (Business Name, Address)		Same as Arrest		Multiple Clearance Indicator 0.1	
Date of arrest		0 9 1 5 1 6		Time of Arrest		1 0 1 5		Booking Date	
Booking Time				Jail Date		Jail Time		Location of Vehicle	
Name (Last, First, Middle)		KRAUSE, Vernon LORIE		Alias (Name, DOB, Soc. Sec. #, Etc.)					
Race		W - White B - Black		Sex		M		Date of Birth	
0 2 2 7 5 1		Height		5'7		Weight		180	
Eye Color		BRN		Hair Color		GRY		Complexion	
Fair		Build		Med					
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		U/S		Marital Status		H/S		Religion	
Catholic		Indication of: Alcohol Influence Drug Influence		Y N		Upk N			
Local Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone	
225 Commodore Dr. Jupiter, FL		33477						()	
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone	
()		()		()		()		()	
Business Address (Name, Street)		(City)		(State)		(Zip)		Phone	
1575 Mansell Rd. Alpharetta, GA		30009						678 488 2269	
D/L Number, State		FL K620 872 51 0670		INS Number				Place of Birth (City, State)	
Wine dt, MI		Citizenship		USA					
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		1. Arrested 2. At Large	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		3. Felony 4. Misdemeanor 5. Juvenile	
Parent Legal Custodian		Name (Last)		(First)		(Middle)		Residence Phone	
Other:		Address (Street, Apt. Number)		(City)		(State)		(Zip)	
Business Phone		()		()		()		()	
Notified by: (Name)		Date		Time		Juvenile Disposition		1. Handled/Processed within Dept. and Released.	
Released To: (Name)		Relationship		Date		Time		2. TOT HRS/DYS 3. Incarcerated	
The above address was provided by		defendant and / or		defendant's parents. The child and / or parent was told		School Attended		Grade	
to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.		Yes, by: (Name)		No: (Reason)		Value of Property			
Property Crime?		Description of Property		Value of Property					
Yes		No							
Drug Activity		S. Sell N. N/A P. Possess		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. Synthetic		U. Unknown Z. Other							
Charge Description		Carrying Concealed Weapon		Counts		Domestic Violence Y N		Statute Violation Number	
N/A		N/A		N/A		16-127248		7 9 0 1 0 1 1 1 2	
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number	
N/A		N/A		N/A		16-127248		-	
Charge Description		Counts		Domestic Violence Y N		Statute Violation Number		Violation of ORD #	
N/A		N/A		N/A		16-127248		-	
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number	
N/A		N/A		N/A		16-127248		-	
Charge Description		Counts		Domestic Violence Y N		Statute Violation Number		Violation of ORD #	
N/A		N/A		N/A		16-127248		-	
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number	
N/A		N/A		N/A		16-127248		-	
Location (Court, Room Number, Address)		Court Date and Time		Month		Day		Year	
SEP 16 2016		Month		Day		Year		Time	
A.M.		P.M.							
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.		Signature of Defendant (or Juvenile and Parent/ Custodian)		Date Signed					
HOLD for other Agency		Signature of Arresting Officer		Name Verification (Printed by Arrestee)		SEP 15 PM 12 32			
Name:		X		(PRINT)					
Dangerous		Resisted Arrest		Name of Arresting Officer (Print)		I.D. #		PAGE	
Suicidal		Other:		D/S Henry Juente		665		1 OF 1	
Intake Deputy		Pouch #		Transporting Officer		I.D. #		Agency	
B/S SANCIS		7457		7850					
Witness here if subject signed with an "X"									

		OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		Juvenile	
ADMIN	Agency ORI Number	FLO 5 0 0 0 0 0		Agency Name	PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number		0 6 11 6 11 27 248		
	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		Special Notes:			
DEF.	Name (Last, First, Middle) KRAUSE, VERNON LOREE					Alias		Race	W	Sex	M
CHARGES	Charge Description Carrying Concealed Firearm					Charge Description					
	Charge Description					Charge Description					
VICTIM	Victim's 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 (Name, Street)					(City)	(State)	(Zip)	Phone		Occupation
PROBABLE CAUSE STATEMENT	The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above 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"/> confessed to _____ admitting to the below facts. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.										
	On the 15 th day of September 2016 at 1000 A.M. (Specifically include facts constituting cause for arrest.)										
	On the above stated date & time the following events occurred at the Palm Beach International Airport (PBI) located @ 3200 Belvedere Rd, West Palm Beach, FL 33406.										
	The defendant, Vernon L. Krause, w/m 02/27/51 was traveling to Atlanta, GA on Board Delta Flight number 1134. As the defendant was attempting to pass through the TSA checkpoint, a revolver was seen through X-Ray in his carry-on bag - A small Black leather case. TSA noted the firearm & alerted myself. A check of the bag revealed a Charter Arms .38 Special revolver s/n 728233 loaded w/ 5 live rounds. Defendant admitted to ownership of the weapon. Defendant does not possess a CCW permit.										
	With the above facts & evidence, I believe probable cause exists for the arrest of the defendant, Vernon L. Krause on the charge of carrying a concealed firearm pursuant to FSS 790.01(2).										
	Crime was witnessed by TSA Agent Timothy A. Silver w/m 12/24/49.										
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH D/S [Signature] (Signature of Arresting/Investigative Officer)					SCANNED SEP 16 2016					
	The foregoing instrument was sworn to or affirmed and subscribed before me this 15 th day of September 2016 by D/S Smith Goss										
	(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced personally known										
	Notary Public, Clerk of Court, Officer (F.S.S. 117.10) [Signature] D/S TU. 8795										