

COMPLAINT/ARREST AFFIDAVIT CONTINUATION - CO COPY

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| NUMBER | COMPLAINT/ARREST AFFIDAVIT CONTINUATION | POLICE CASE NO. PD101209-511305 |
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| |
|-----------------------|
| COURT CASE NO. |
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| | | |
|---------------------------------|-----------------------------------|--------------------------------|
| AGENCY CODE 30 | MUNICIPAL P.D. DEF. ID NO. | MDPD RECORDS AND ID NO. |
|---------------------------------|-----------------------------------|--------------------------------|


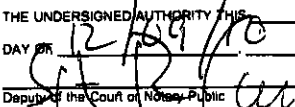
| | |
|--|--|
| DEFT'S NAME (LAST, FIRST, MIDDLE) DANIELS, HERBERT DEAN | DOB (MM/DD/YYYY) 04 26 1974 |
|--|--|

| | | |
|---|-------------------------|---|
| ADDITIONAL CO-DEFENDANT NAME (Last, First, Middle) | DOB (MM/DD/YYYY) | <input type="checkbox"/> IN CUSTODY <input type="checkbox"/> FELONY <input type="checkbox"/> JUVENILE <input type="checkbox"/> AT LARGE <input type="checkbox"/> DV <input type="checkbox"/> MISDEMEANOR |
| ADDITIONAL CO-DEFENDANT NAME (Last, First, Middle) | DOB (MM/DD/YYYY) | <input type="checkbox"/> IN CUSTODY <input type="checkbox"/> FELONY <input type="checkbox"/> JUVENILE <input type="checkbox"/> AT LARGE <input type="checkbox"/> DV <input type="checkbox"/> MISDEMEANOR |

| ADDITIONAL CHARGES | CHARGE AS: | COUNTS | FL. STATUTE NUMBER | VIOL. OF SECT | CODE OF | UCR | DV | WARRANT TYPE OR TRAFFIC CITATION |
|---|---|--------|--------------------|---------------|---------|-----|----|--|
| POSS. OF CONTROLLED SUBSTANCE | <input type="checkbox"/> F.S. <input type="checkbox"/> ORD | 1 | 893.13 | | | | | <input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> PW <input type="checkbox"/> JW <input type="checkbox"/> PU <input type="checkbox"/> AW <input type="checkbox"/> DWV <input type="checkbox"/> WRIT CASE #: |
| POSS. OF AMMUNITION BY CONV. FELON (737 ROUNDS) | <input type="checkbox"/> F.S. <input type="checkbox"/> ORD | 1 | 790.23 | | | | | <input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> PW <input type="checkbox"/> JW <input type="checkbox"/> PU <input type="checkbox"/> AW <input type="checkbox"/> DWV <input type="checkbox"/> WRIT CASE #: |
| | <input type="checkbox"/> F.S. <input type="checkbox"/> ORD | | | | | | | <input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> PW <input type="checkbox"/> JW <input type="checkbox"/> PU <input type="checkbox"/> AW <input type="checkbox"/> DWV <input type="checkbox"/> WRIT CASE #: |
| | <input type="checkbox"/> F.S. <input type="checkbox"/> ORD | | | | | | | <input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> PW <input type="checkbox"/> JW <input type="checkbox"/> PU <input type="checkbox"/> AW <input type="checkbox"/> DWV <input type="checkbox"/> WRIT CASE #: |

T. ROSARIO AND DET. GALVEZ OBSERVED A BRIGHT LIGHT EMITTING FROM THE SHED AS THE DOOR OPENED AND CLOSED. THE DEFENDANT WAS THEN OBSERVED JOGGING FROM THE SHED TOWARD THE REAR OF THE HOUSE. AFTER APPROXIMATELY 10 SECONDS THE DEFENDANT GREETED THESE DETECTIVES AT THE SHED AT WHICH TIME SGT. ROSARIO AND DET. GALVEZ IDENTIFIED HIM AS THE SAME INDIVIDUAL OBSERVED EXITING THE SHED. THE DEFENDANT THEN EXITED THE RESIDENCE AND SPOKE WITH THESE DETECTIVES IN THE FRONT DRIVEWAY. HE WAS MADE AWARE OF THE NATURE OF OUR INVESTIGATION TO WHICH HE ADVISED THAT HE WOULD COOPERATE WITH US THROUGHOUT ITS HANDLING. THE DEFENDANT THEN STATED "I KNOW IT WAS MY HOUSE (POINTING TO THE HOUSE SOUTH OF HIS) THAT CALLED, BUT I'M GONNA DO WHAT I GOTTA DO". THE DEFENDANT THEN STATED THAT HE DOES HAVE AN AK-47 INSIDE HIS RESIDENCE, BUT EXPLAINED THAT HE HAD BEEN ROBBED SEVERAL TIMES IN THE PAST, AND IT WAS FOR THE PROTECTION OF HIS FAMILY. HE THEN OFFERED TO RETRIEVE THE FIREARM FROM INSIDE THE RESIDENCE FOR US TO VIEW. THE DEFENDANT WAS TOLD THAT THE INVESTIGATION COULD NOT BE CONDUCTED IN SUCH A MANNER AS IT WOULD JEOPARDIZE THE SAFETY OF THE OFFICERS ON SCENE. THESE OFFICERS EXPLAINED TO THE DEFENDANT THAT THE CRIME STOPPERS TIP STATED THAT SEVERAL FIREARMS WERE ON HIS PROPERTY AND WE WOULD NEED TO CONDUCT THE INVESTIGATION IN ACCORDANCE TO THAT INFORMATION. WE THEN REQUESTED THE DEFENDANT'S CONSENT TO SEARCH HIS ENTIRE RESIDENCE AND THE REAR SHED THAT HE WAS OBSERVED EXITING.

PAGE ____ OF ____

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| OR OTHER AGENCY | VERIFIED BY | <input type="checkbox"/> HOLD FOR BOND HEARING. DO NOT BOND OUT (Officer Must Appear at Bond Hearing). | <input type="checkbox"/> 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. Furthermore, I agree that notice concerning the time, date, and place of all court hearings should be sent to the above address. I agree that it is my responsibility to notify Clerk of the Court (Juvéniles notify Juvenile Division) anytime that my address changes. |
| I HEREBY STATE THAT THE ABOVE STATEMENT IS TRUE AND CORRECT  RUZ / D. LEE <small>(Printed)</small> | | SWORN TO AND SUBSCRIBED BEFORE ME. THE UNDERSIGNED AUTHORITY THIS DAY OF <u>12/29/10</u>  <small>Deputy of the Court of Non-Prosecution</small> | <input type="checkbox"/> You need not appear in court, but must comply with the instructions on the reverse side hereof. Signature of Defendant / Juvenile and Parent or Guardian |
| COURT ID NUMBER/LOC. CODE 7779 7885 (44) | | AGENCY NAME MDPD | |

COMPLAINT/ARREST AFFIDAVIT

POLICE CASE NO.

PD101209-511305

COMPLAINT/ARREST AFFIDAVIT

COURT COPY

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| <input checked="" type="checkbox"/> FELONY <input type="checkbox"/> MISD <input type="checkbox"/> TRAFFIC <input type="checkbox"/> JUV <input type="checkbox"/> DV <input type="checkbox"/> MOVES <input type="checkbox"/> CIV INF | JAIL NO | PMHD <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown | COURT CASE NO. |
| <input type="checkbox"/> WARRANT FUGITIVE WARRANT: <input type="checkbox"/> In state <input type="checkbox"/> Out of state | MDPD RECORDS AND ID NO. | STUDENT ID NO. | GANG ACTIVITY RELATED ARREST <input checked="" type="checkbox"/> FRAUD RELATED ARREST <input type="checkbox"/> |
| AGENCY CODE 30 | MUNICIPAL P.D. DEF. ID NO. | | |

VT'S NAME (LAST, FIRST, MIDDLE) **DANIEL S, HERBERT DEAON** ALIAS and / or STREET NAME

| | | | | | | | | | | | | | |
|------------|-----|------|-----|---|--------|--------|------------|-------------|------------|-------|---------|-------------|-------|
| DD/YYYY | AGE | RACE | SEX | <input type="checkbox"/> Hispanic <input type="checkbox"/> Not Hispanic | HEIGHT | WEIGHT | HAIR COLOR | HAIR LENGTH | HAIR STYLE | EYES | GLASSES | FACIAL HAIR | TEETH |
| 04/26/1974 | 36 | B | M | | 61 | 180 | BLK | BALD | BALD | BROWN | No | CLN | GOL |

ETHNICITY: **AFR. AMER** PLACE OF BIRTH (City, State/Country) **MIAMI, FL**

DRESS (Street, Apt. Number) **22635 SW 125 AVE** (City) **MIAMI** (State) **FL** (Zip) **33170** PHONE () CITIZENSHIP **US**

NT ADDRESS (Street, Number) HOMELESS UNKNOWN (City) (State/Country) (Zip) PHONE () OCCUPATION **CAR WASH**

ESS OR SCHOOL NAME AND ADDRESS (Street) (City) (State/Country) (Zip) PHONE () ADDRESS SOURCE: Dir Verbal

LICENSE NUMBER / STATE **D542-324-74-146-0** SOCIAL SECURITY NO. **265610278** WEAPON SEIZED? Type Yes No If Def. has Concealed Weapons Permit PERMIT # W- INDICATION OF: Y N UNK Alcohol influence Drug influence:

ATE (MM/DD/YYYY) **12-08-2010** ARREST TIME (HHMM) **1930** ARREST LOCATION (include name of business) **22635 SW 125 AVE** GRID

ADANT NAME (Last, First, Middle) **ST. CLAIR, MICHAEL KAYA** DOB (MM/DD/YYYY) **04 / 17 / 1978** IN-CUSTODY FELONY JUVENILE AT LARGE DV MISDEMEANOR

ADANT NAME (Last, First, Middle) DOB (MM/DD/YYYY) IN CUSTODY FELON

ADANT NAME (Last, First, Middle) DOB (MM/DD/YYYY) IN CUSTODY FELON

Arrest (Name) (Street, Apt. Number) (City) (State/Country) (Zip) (Phone) () Contacted? Yes No

| CHARGES | CHARGE AS: | COUNTS | FL STATUTE NUMBER | VIOL. OF SECT | CODE OF | UCR | DV | WARRANT TYPE OR TRAFFIC CITATION |
|----------------------------------|---|--------|-------------------|---------------|---------|-----|----|---|
| LOSS OF FIRE ARM BY CONV. FELON | <input type="checkbox"/> FB. <input type="checkbox"/> ORD | 6 | 790.23 | | | | | <input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DW <input type="checkbox"/> WRIT |
| POSS. OF MARIJUANA +/-13LBS | <input type="checkbox"/> FB. <input type="checkbox"/> ORD | 1 | 893.13 | | | | | <input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DW <input type="checkbox"/> WRIT |
| LOSS OF MARIJUANA WITH INTENT | <input type="checkbox"/> FB. <input type="checkbox"/> ORD | 1 | 893.13 | | | | | <input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DW <input type="checkbox"/> WRIT |
| AND THEFT (POSSESSION) / FIREARM | <input type="checkbox"/> FB. <input type="checkbox"/> ORD | 2 | 812.014 | | | | | <input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DW <input type="checkbox"/> WRIT |

I signed 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: **08TH day of DEC 20 10 at 1917 (HHMM) at 22635 SW 125 AVE (Narrative, be specific)**

MIAMI-DADE CRIME STOPPERS GUN BOUNTY
THE ANONYMOUS TIPSTER ADVISED MIAMI-DADE CRIME STOPPERS THAT THE DEFENDANT POSSESSED ILLEGAL WEAPONS THAT ARE KEPT AT HIS LISTED RESIDENCE. UPON ARRIVING AT THE RESIDENCE, SGT. C. ROSARIO (4470) AND DET. E. GALVEZ (5998) POSITIONED THEMSELVES ON THE SOUTHERN PORTION OF THE FRONT LAWN HAVING A CLEAR UNINTERRUPTED VIEW OF A SHED IN THE BACK YARD. THE DOOR TO THE SHED WAS CLOSED AND AN AIR CONDITIONED A/C UNIT APPEARED TO HAVE BEEN OPERATING. THESE DETECTIVES APPROACHED THE FRONT DOOR, KNOCKED, AND ANNOUNCED OURSELVES AS POLICE OFFICERS. APPROXIMATELY 30 SECONDS, AFTER KNOCKING

| | | | |
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| OTHER AGENCY | VERIFIED BY | <input type="checkbox"/> HOLD FOR BOND HEARING. DO NOT BOND OUT (Officer Must Appear at Bond Hearing) | <input type="checkbox"/> 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. Furthermore, I agree that notice concerning the time, date, and place of all court hearings should be sent to the above address. I agree that it is my responsibility to notify Clerk of the Court (Juvéniles notify Juvenile Division) anytime that my address changes. |
| THAT THE ABOVE STATEMENT IS TRUE AND CORRECT | COMPLAINANT'S SIGNATURE RUIZ / D. LEE | SWORN TO AND SUBSCRIBED BEFORE ME. THE UNDERSIGNED AUTHORITY THIS DAY OF 12/09/10 at MIAMI (City) FL (State) 33170 (Zip) | <input type="checkbox"/> You need not appear in court, but must comply with the instructions on the reverse side hereof. |
| COURT ID NUMBER/LOC CODE 7885 (44) | AGENCY NAME MDPD | Signature of Defendant / Juvenile and Parent or Guardian [Signature] | |

COMPLAINT/ARREST AFFIDAVIT
CONTINUATION

PD101209511305

COURT CASE NO.

AGENCY CODE

MUNICIPAL P.D. DEF. ID NO.

MDPD RECORDS AND ID NO.

30

DEFTANT'S NAME (LAST, FIRST, MIDDLE)

ST. CLAIR, MICHAEL KAYA

DOB (MM/DD/YYYY)

04 17 1978

ADDITIONAL CO-DEFENDANT NAME (Last, First, Middle)

DOB (MM/DD/YYYY)

IN CUSTODY FELONY JUVENILE
 AT LARGE DV MISDEMEANOR

ADDITIONAL CO-DEFENDANT NAME (Last, First, Middle)

DOB (MM/DD/YYYY)

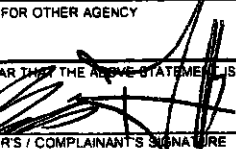
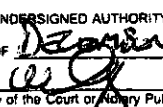
IN CUSTODY FELONY JUVENILE
 AT LARGE DV MISDEMEANOR

| ADDITIONAL CHARGES | CHARGE AS: | COUNTS | FL STATUTE NUMBER | VIOL. OF SECT | CODE OF | UCR | DV | WARRANT TYPE OR TRAFFIC CITATION |
|--------------------|---|--------|-------------------|---------------|---------|-----|----|--|
| | <input type="checkbox"/> F.S. <input type="checkbox"/> ORD | | | | | | | <input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DVW <input type="checkbox"/> WRIT CASE #: |
| | <input type="checkbox"/> F.S. <input type="checkbox"/> ORD | | | | | | | <input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DVW <input type="checkbox"/> WRIT CASE #: |
| | <input type="checkbox"/> F.S. <input type="checkbox"/> ORD | | | | | | | <input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DVW <input type="checkbox"/> WRIT CASE #: |
| | <input type="checkbox"/> F.S. <input type="checkbox"/> ORD | | | | | | | <input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DVW <input type="checkbox"/> WRIT CASE #: |

THE SEARCH REVEALED LOOSE MARIJUANA LEAVES IN A MEDIUM SIZE IGLOO ICE BOX AND IN SEVERAL PLASTIC BAGS WHICH WERE RECOVERED FROM THE VICINITY (WINGSPAN) OF WHERE THE DEFENDANT WAS SEATED. 8LBS OF MARIJUANA WAS RECOVERED FROM THE DEFENDANT'S POSSESSION. THE DEFENDANT WAS ARRESTED AND TRANSPORTED TO STA#1. ALL EVIDENCE WAS IMPOUNDED AT MDPD HEADQUARTERS.

ARREST SET: 12/15/2010 @ 12:45 P.M. WITH A.S.A. EDEIRY

PAGE 2 OF 2

| | | | |
|--|--|---|---|
| FOR OTHER AGENCY | VERIFIED BY | <input type="checkbox"/> HOLD FOR BOND HEARING. DO NOT BOND OUT (Officer Must Appear at Bond Hearing). | <input type="checkbox"/> 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. Furthermore, I agree that notice concerning the time, date, and place of all court hearings should be sent to the above address. I agree that it is my responsibility to notify Clerk of the Court (Juvenciles notify Juvenile Division) anytime that my address changes. |
| I AFFIRM THAT THE ABOVE STATEMENT IS TRUE AND CORRECT  RUIZ / D. LEE Printed) | 7779 7885 (44) COURT ID NUMBER/LOC CODE MDPD AGENCY NAME | SWORN TO AND SUBSCRIBED BEFORE ME. THE UNDERSIGNED AUTHORITY THIS 9 DAY OF December 2010  Deputy of the Court or Notary Public | <input type="checkbox"/> You need not appear in court, but must comply with the instructions on the reverse side hereof Signature of Defendant / Juvenile and Parent or Guardian |

COMPLAINT/ARREST AFFIDAVIT CONTINUATION - COURT COPY

COMPLAINT/ARREST AFFIDAVIT

PD101209511305

COMPLAINT/ARREST AFFIDAVIT

COURT COPY

| | | | |
|--|----------------------------|--|----------------|
| <input checked="" type="checkbox"/> FUGITIVE <input type="checkbox"/> WARRANT <input type="checkbox"/> MISD <input type="checkbox"/> TRAFFIC <input type="checkbox"/> JUV <input type="checkbox"/> DV <input type="checkbox"/> MOVES <input type="checkbox"/> CIV INF <input type="checkbox"/> In state <input type="checkbox"/> Out of state | JAIL NO. | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown | COURT CASE NO. |
| AGENCY CODE 30 | MUNICIPAL P.D. DEF. ID NO. | MDPD RECORDS AND ID NO. | STUDENT ID NO. |

| | | | | | |
|--|------------------|----------------------------|-----------------|---|---------------------|
| DEFENDANT'S NAME (LAST, FIRST, MIDDLE) ST. CLAIR, MICHAEL KAYA | | ALIAS and / or STREET NAME | | SIGNAL: <input type="checkbox"/> 100 <input type="checkbox"/> 150 <input type="checkbox"/> 200 <input type="checkbox"/> 300 <input type="checkbox"/> 400 <input type="checkbox"/> 500 | |
| (MM/DD/YYYY) 04/17/1978 | AGE 32 | RACE B | SEX M | <input type="checkbox"/> Hispanic <input type="checkbox"/> Not Hispanic ETHNICITY: TRINIDADAN | HEIGHT 59 |

| | | | | | | |
|--------------------------|---------------------------|--------------------------|--------------------|---|---------------------------------|---------------------------|
| HAIR COLOR BLK | HAIR LENGTH SHO | HAIR STYLE AFR | EYES BRO | GLASSES <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | FACIAL HAIR GOAT NORI | TEETH GOAT NORI |
|--------------------------|---------------------------|--------------------------|--------------------|---|---------------------------------|---------------------------|

| | | | |
|---|--|--|---|
| PLACE OF BIRTH (City, State/Country) TRINIDAD | | | CITIZENSHIP TRINIDAD & TOBAGO |
|---|--|--|---|

| | | | | |
|--|------------------------|----------------------|-----------------------|-----------------------------|
| HOME ADDRESS (Street, Apt. Number) 22611 SW 124 CT | (City) MIAMI | (State) FL | (Zip) 33170 | PHONE () () () |
|--|------------------------|----------------------|-----------------------|-----------------------------|

| | | | | | |
|--|------------------------|------------------------------|-----------------------|-----------------------------|---|
| BUSINESS OR SCHOOL NAME AND ADDRESS (Street) SAME AS LOCAL | (City) MIAMI | (State/Country) FL | (Zip) 33170 | PHONE () () () | ADDRESS SOURCE: <input type="checkbox"/> DL <input type="checkbox"/> Verbal <input type="checkbox"/> |
|--|------------------------|------------------------------|-----------------------|-----------------------------|---|

| | | | | |
|---|---|---|--|---|
| DRIVER'S LICENSE NUMBER / STATE S324-551-78-137-0 | SOCIAL SECURITY NO. 589-45-4214 | WEAPON SEIZED? Type <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If Def. has Concealed Weapons Permit. PERMIT # W- | INDICATION OF: Y N UNK Alcohol influence: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Drug influence: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
|---|---|---|--|---|

| | | | |
|---|-----------------------------------|---|------|
| ARREST DATE (MM/DD/YYYY) 12/08/2010 | ARREST TIME (HHMM) 1935 | ARREST LOCATION (include name of business) 22635 SW 125 AVE | GRID |
|---|-----------------------------------|---|------|

| | | | |
|--|---------------------------------------|--|--|
| DEFENDANT NAME (Last, First, Middle) DANIELS, HERBERT DEANON | DOB (MM/DD/YYYY) 04/26/1974 | <input type="checkbox"/> IN CUSTODY <input type="checkbox"/> AT LARGE | <input type="checkbox"/> FELONY <input type="checkbox"/> DV <input type="checkbox"/> MISDEMEANOR |
|--|---------------------------------------|--|--|

| | | | | | | | |
|--|--|--|------------------------|------------------------------|-----------------------|-------------------------------|---|
| <input type="checkbox"/> Parent <input type="checkbox"/> Guardian <input type="checkbox"/> Foster Care | (Name) DANIELS, HERBERT DEANON | (Street, Apt. Number) 22635 SW 125 AVE | (City) MIAMI | (State/Country) FL | (Zip) 33170 | (Phone) () () () | Contacts? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--|--|--|------------------------|------------------------------|-----------------------|-------------------------------|---|

| CHARGES | CHARGE AS: | COUNTS | FL STATUTE NUMBER | VIOL. OF SECT | CODE OF | UCR | DV | WARRANT TYPE OR TRAFFIC CITATION |
|----------------------------------|--|--------|-------------------|---------------|---------|-----|----|---|
| POSSESSION OF MARIJUANA +/- 8LBS | <input checked="" type="checkbox"/> F.S. <input type="checkbox"/> ORD | 1 | 893.13 | | | | | <input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DW <input type="checkbox"/> WRIT CASE #: |
| | <input type="checkbox"/> F.S. <input type="checkbox"/> ORD | | | | | | | <input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DW <input type="checkbox"/> WRIT CASE #: |
| | <input type="checkbox"/> F.S. <input type="checkbox"/> ORD | | | | | | | <input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DW <input type="checkbox"/> WRIT CASE #: |
| | <input type="checkbox"/> F.S. <input type="checkbox"/> ORD | | | | | | | <input type="checkbox"/> AC <input type="checkbox"/> CAPIAS <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> JUV PU <input type="checkbox"/> AW <input type="checkbox"/> DW <input type="checkbox"/> WRIT CASE #: |

I, 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:
8TH day of **DEC**, 20 **10** at **1915** (HHMM) at **22635 SW 125 AVE** (Location, include name of business) (Narrative, be specific)

FILE CONDUCTING A CRIME STOPPER'S TIP AT THE ABOVE LOCATION, CONTACT WAS MADE WITH CO-DEF. DANIELS WHO IS THE RESIDENT AT THE LISTED PROPERTY. CO-DEF. DANIELS PROVIDED A WRITTEN CONSENT TO THESE DETECTIVES PERMITTING A SEARCH OF THE HIS RESIDENCE AND THE REAR SHED. UPON OPENING THE SHED TO CONDUCT THE SEARCH, THE DEFENDANT WAS OBSERVED SITTING INSIDE THE SHED ON A BOX DIRECTLY ACROSS FROM THE DEFENDANT (APPROXIMATELY 1 FOOT) WAS A HYDROPONIC LABORATORY WITH FOUR LIVE MARIJUANA PLANTS IN FLOWER POTS AND HEATING LAMPS DIRECTLY ABOVE THEM. THE DEFENDANT WAS TAKEN TO CUSTODY AND A FULL SEARCH OF THE SHED WAS CONDUCTED.

| | | |
|--|--|---|
| FOR OTHER AGENCY VERIFIED BY 7779 7885 (44) | <input type="checkbox"/> HOLD FOR BOND HEARING DO NOT BOND OUT (Officer Must Appear at Bond Hearing) | <input type="checkbox"/> 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. Furthermore, I agree that notice concerning the time, date, and place of all court hearings should be sent to the above address. I agree that it is my responsibility to notify Clerk of the Court (Juvéniles notify Juvenile Division) anytime that my address changes |
| ARRESTING OFFICER'S SIGNATURE RUIZ / LEE | SWORN TO AND SUBSCRIBED BEFORE ME THE UNDERSIGNED AUTHORITY THIS DAY OF December 2010 WJ Deputy of the Court or Notary Public | <input type="checkbox"/> You need not appear in court, but must comply with the instructions on the reverse side hereof. |
| ARRESTING OFFICER'S NAME RUIZ / LEE | COURT ID NUMBER/LOC. CODE MDPD | Signature of Defendant / Juvenile and Parent or Guardian |