

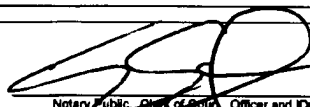
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21MM-7809AMB

179
Rough Arrest Only

ADMINISTRATION		ARREST / NOTICE TO APPEAR Juvenile Referral Report				1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias		1	Juvenile	N	
OBTS Number		Agency ORI Number FL0500300		Agency Name BOYNTON BEACH POLICE DEPT.		Agency Report Number 21-042196					
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 checked="" type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type		Multiple Clearance Indicator	
Location of Arrest (Including Name of Business) 2100 High Ridge Rd						Location of Offense (Business Name, Address) same					
Date of Arrest 10/19/2021		Time of Arrest 2053		Booking Date		Booking Time		Jail Date		Jail Time	
Name (Last, First, Middle) West, Delonte Maurice						Alias (Name, DOB, Soc. Sec. #, Etc)					
W - White B - Black		I - American Indian O - Oriental / Asian		Race B	Sex M	Date of Birth 07/26/1983	Height 6'03	Weight 175	Eye Color Bro	Hair Color Blk	
Complexion Fair		Build Thin		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) Tattoos All Over		Marital Status NA		Religion NA		Indication of: Alcohol Influence <input checked="" type="checkbox"/> <input type="checkbox"/> Drug Influence <input type="checkbox"/> <input checked="" type="checkbox"/>	
Local Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone () -		Residence Type 1. City 3. Florida 2. County 4. Out of State	
Permanent Address (Street, Apt. Number) 5712 Virginia Lane		(City) Oxon Hill		(State) MD		(Zip) 20745		Phone () -		Address Source Maryland DL	
Business Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone () -		Occupation None	
DL Number, State W230139590587		Soc. Sec. Number		INS Number		Place of Birth MD		Citizenship US			
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<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			
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<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			
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other		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 Dept. and Released 2. TOT HRS/DYS 3. Incarcerated					
Released To: (Name)		Relationship		FCIC/CNIC		Date		Time			
The above address was provided by defendant and/or defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office informed of any change of address. <input type="checkbox"/> Yes, By: (Name) <input checked="" type="checkbox"/> No, (Reason)						School Attended		Grade			
Recovery Information 0. N/A 1. Voluntary 2. Located Not Returned 3. Hospitalized 4. HRS Custody 5. Law Enforcement Custody 6. Returned to Parent 7. Deceased 8. Other		Drug Activity S. Sell R. Smuggle K. Dispense/Distribute M. Manufacture Produce/Cultivate Z. Other N. N/A B. Buy D. Deliver P. Possess T. Traffic E. Use		Drug Type N. N/A A. Amphetamine B. Barbituate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/Equipment S. Synthetic U. Unknown Z. Other		Counts 1		Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Statute Violation Number 843.02	
Charge Description Obstruction / Resist w/o Violence		Drug Activity		Drug Type		Amount/Unit		Offense # 21-042196		Warrant/Capias Number	
Charge Description Open Container		Drug Activity		Drug Type		Amount/Unit		Offense # 21-042196		Warrant/Capias Number	
Charge Description Disorderly Intoxication		Drug Activity		Drug Type		Amount/Unit		Offense # 21-042196		Warrant/Capias Number	
Charge Description		Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number	
Instruction No. 1 Mandatory Appearance in Court		Instruction No. 2 You need not appear in Court but must comply with instruction on reverse side.		Location (Court, Room Number, Address)		Court Date and Time Month <u>11</u> Day <u>9</u> Year <u>2020</u> Time <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.		Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed	
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 Arresting Officer <i>TEAM</i>		Name Verification (Printed by Arrestee) (PRINT)		Name of Arresting Officer (Print) SGT Thomas A Murphy		I.D. # 851		Page 1 OF 1	
DANGEROUS <input type="checkbox"/> RESISTED ARREST <input type="checkbox"/> SUICIDAL <input type="checkbox"/> OTHER: <input type="checkbox"/>		Intake Deputy <i>015 10mm 8037</i>		Pouch #		Transporting Officer <i>D. Jones</i>		I.D. # <i>904</i>		Agency <i>6000</i>	

OBTS Number		PROBABLE CAUSE AFFIDAVIT			1 Arrest	3 Request for Warrant	1	Juvenile	N
Agency ORI Number FL0500300		Agency Name BOYNTON BEACH POLICE DEPT.			Agency Report Number 34 - 21 - 042196				
Charge Type Check all that Apply		<input 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	
Name (Last, First, Middle) West Delonte Maurice			Alias	Race B	Sex M	Date of Birth 07/26/1983			
Charge Description Obstruction / Resist w/o Violence				Charge Description Open Container					
Charge Description Disorderly Intoxication				Charge Description					
Victim's Name (Last, First, Middle)				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	
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...									
<input checked="" type="checkbox"/> Committed the below acts in my presence. <input type="checkbox"/> Was observed by _____ Who told _____ That he/she saw the arrested person commit the below acts. <input type="checkbox"/> Confessed to _____ Admitting the below Facts <input type="checkbox"/> Was found to have committed the below acts, resulting from my (described) investigation.									
On The 19 Day Of October 20 21 At AI <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.									
<p>the above-named person did commit the above listed offenses within the city of Boynton Beach, county of Palm Beach.</p> <p>On the above date and time, officers responded to the PD lobby in reference to an individual yelling and banging on the glass doors. Upon officer's arrival, contact was made with the individual, whom was identified as b/m Delonte West dob 07/26/1983. West was screaming profanities and was holding in his hands an open can of Icehouse Beer and an open bottle of Mango Vodka. West then began to walk away from officers while still screaming. Given the plain view violation of city ordinance 3-5.4, Open Container, officers who were in full BBPD Police Uniform with badges, insignia, and Police equipment, did give several verbal commands for him to "Stop". West refused to comply and I, SGT Murphy, did have to cut into his path of travel, where again verbal commands were given in which he initially refused. I did give verbal commands for him to place the open containers of alcohol on the sidewalk. He did comply; however, upon him standing back up, he began to place his hands inside the waistband of his pants. At that time, I did unholster and initialize (light and target lasers only) my electronic control weapon (Taser 7) and continued to give verbal commands in which West did comply and dropped to his knees with his hands in the air. Back up officers then engaged and were able to secure him in handcuffs. Upon trying to search his person and secure him the back of a patrol vehicle, west continued to be belligerent and screaming profanities and obscure rants. It should be noted that he did have the odor of an intoxicating beverage upon his breath and person and his speech was slowed and slurred, all of which are consistent with impairment.</p> <p>Given the above set of facts and circumstances, I find probable cause to charge Delonte West with Obstruction / Resisting w/o Violence in accordance with FSS 843.02, Open Container in violation of City of Boynton Beach Ordinance 3-5.4, and Disorderly Intoxication in accordance with FSS 856.011.</p>									

 933
 Notary Public, Clerk of Court, Officer and ID# (F.S.S. 117.10)

 851
 (Signature of Arresting / Investigative Officer and ID#)

The foregoing instrument was sworn to or affirmed and subscribed before me this **19** Day of **October** 20 **21** by **SGT Thomas A Murphy 851**
 Who is personally known to me and/or produced identification. (Print name of Arresting/Investigative Officer)

STATE OF FLORIDA
 COUNTY OF PALM BEACH