

OFFICE OF THE SHERIFF
CLAY COUNTY, FLORIDA

WRITTEN STATEMENTS
OBTAINED YES NO

INCIDENT REPORT
WRITTEN YES NO

ADULT ARREST REPORT
 ADULT NOTICE TO APPEAR

SPECIAL INSTRUCTIONS

CCSSO FHP
 OPPD GFC
 GCSPD FMP
 OTHER

LOCATION OF ARREST:
 O.P. CITY UNINCORPORATED AREA
 GCSPS CITY
 K.H. CITY

1. CASE NUMBER
2016-005796

A D M I N	2. ARRESTED BY BALTEAN, R. C.	3. ID NO. 07326	4. LOCATION 3517 COUNTY ROAD 215, MIDDLEBURG		5. DATE OF ARREST (MDY) 03/01/2016	6. TIME OF ARREST 15:53				
	7. ARREST NUMBER	8. O.B.T.S. NUMBER	9. BOOKING OFFICER	10. FINGERPRINT OFFICER	11. SEARCHING OFFICER					
D E F E N D A N T	12. COURT DATE (LOCATION/DATE/TIME)									
	13. NAME (LAST, FIRST, MIDDLE) MALDONADO, JOSUE JR					14. ALIAS				
	15. HOME ADDRESS 3517 COUNTY ROAD 215, MIDDLEBURG, FL 32068					16. PHONE NUMBER (904) 755-0290				
	17. MAILING ADDRESS, IF DIFFERENT FROM PHYSICAL SAME					18. EMPLOYER AND ADDRESS UNEMPLOYED NONE	19. PHONE NUMBER (904) -			
	20. POB (CITY/STATE) BROOKLYN, NY, United		21. CITIZENSHIP UNITED		22. DRIVER'S LICENSE NUMBER (STATE)		23. SOCIAL SECURITY NUMBER			
24. RACE W	25. SEX M	26. DATE OF BIRTH (MDY) 01/18/1993	27. AGE 23	28. HEIGHT 5'07	29. WEIGHT 210	30. HAIR COLOR BLACK				
31. EYE COLOR BROWN			32. COMPLEX MEDIUM		33. BUILD					
34. IDENTIFYING CHARACTERISTICS (SCARS/MARKS/TATOOS/ETC.) TATT RIGH WRIST / ROSE										
C H A R G E S	35. CHARGE #1 Possession W/ Intent To Distribute		36. TYPE F	37. <input type="checkbox"/> F.S.S. <input type="checkbox"/> ORD.	38. STATUTE/ORDINANCE NUMBER 893-13/1A2	39. CASE # 2016005796	40. WEAPON SEIZED NONE (NO)	41. CHEM. TEST RESULT		
	42. DRUG ACT Possession	43. DRUG TYPE Marijuana	44. DRUG UNIT Gram	45. DRUG AMOUNT 2078.50		46. VICIARR. RELAT. STRANGER	47. BOND	48. MADE BY		
	35. CHARGE #2 Possess/use Drug Paraphernalia		36. TYPE M	37. <input type="checkbox"/> F.S.S. <input type="checkbox"/> ORD.	38. STATUTE/ORDINANCE NUMBER 893-147/1	39. CASE # 2016005796	40. WEAPON SEIZED NONE (NO)	41. CHEM. TEST RESULT		
	42. DRUG ACT Possession	43. DRUG TYPE Other	44. DRUG UNIT Item	45. DRUG AMOUNT 1.00		46. VICIARR. RELAT. STRANGER	47. BOND	48. MADE BY		
	35. CHARGE #3		36. TYPE	37. <input type="checkbox"/> F.S.S. <input type="checkbox"/> ORD.	38. STATUTE/ORDINANCE NUMBER	39. CASE #	40. WEAPON SEIZED	41. CHEM. TEST RESULT		
	42. DRUG ACT	43. DRUG TYPE	44. DRUG UNIT	45. DRUG AMOUNT		46. VICIARR. RELAT.	47. BOND	48. MADE BY		
	ON THE <u>1st</u> DAY OF <u>March, 2016</u> AT <u>3:00 PM</u> THE DEFENDANT, AT <u>3517 COUNTY ROAD 215, MIDDLEBURG, FL 32068</u> WITHIN CLAY COUNTY, VIOLATED THE LAW AND DID THEN AND THERE: commit the offense of possession of marijuana with intent to distribute and possession of drug paraphernalia.									
	On the above date, members of the Clay County Sheriff's Office Strategic Response Division executed a search warrant at 3517 County Road 215. The defendant was located inside home. A search of the defendant's bedroom (master) revealed 2,078.5 grams (4lb 9.3 oz) of marijuana (i [REDACTED]). Also inside [REDACTED] was \$2,640 in U.S. Currency. 2 pipes and a marijuana grinder was also located inside the master bedroom. Post Miranda, the defendant [REDACTED]. The defendant also [REDACTED]. The marijuana was field tested using a department issued test kit and tested positive. The defendant was identified using D.A.V.I.D. The defendant's name was ran through FCIC/NCIC and was negative for wants. It should be noted that the co-defendant occupies the same bedroom as the defendant [REDACTED].									
	P R O B A B L E C A U S E	49. CO-DEFENDANT #1 HALE, MAEGAN CHRISTINE		50. DATE OF BIRTH 10/18/1990	49. CO-DEFENDANT #2		50. DATE OF BIRTH	49. CO-DEFENDANT #3		50. DATE OF BIRTH
51. VICTIM/COMPLAINANT State Of Florida		52. DATE OF BIRTH	53. ADDRESS		54. PHONE NUMBER					
55. WITNESS		56. DATE OF BIRTH	57. ADDRESS		58. PHONE NUMBER					
W I T N E S	55. WITNESS		56. DATE OF BIRTH	57. ADDRESS		58. PHONE NUMBER				
	59. <input type="checkbox"/> TO BE SET BY CLERK OF COURT		RIGHT THUMB PRINT REQUIRED FOR NTA							
	I AGREE TO APPEAR AT THE PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILL FULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED IN THIS NOTICE TO APPEAR OR PAY THE FINE SET FORTH THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST MAY BE ISSUED. ***I HEREBY CERTIFY BY MY SIGNATURE THAT THE PERMANENT ADDRESS LISTED ABOVE IS MY CORRECT MAILING ADDRESS***									
N O T I C E A R	60. SIGNATURE OF DEFENDANT					61. DATE				
	62. I SWEAR/AFFIRM THE ABOVE STATEMENTS ARE TRUE AND CORRECT					63. SWORN TO AND SUBSCRIBED BEFORE ME				
	PRINTED BALTEAN, R. C.		ID NUMBER 07326			AUTHORITY THIS SIGNATURE OF NOTARY OR LAW ENFORCEMENT OFFICER		DAY OF		
A D M I N	64. VEHICLE TOWED BY:					65. TRANSPORTING OFFICER (IF OTHER THAN BLOCK 2)				

OFFICER COPY

COURT COPY

DEFENDANT COPY

STATE ATTORNEY #

CLERKS OFFICE #

ARREST REPORT
 NOTICE TO APPEAR

**OFFICE OF THE SHERIFF
 CLAY COUNTY, FLORIDA**

JUVENILE
 ADULT

CCSO
 OPPD
 GCSPD
 OTHER

FHP
 GFC
 FMP

LOCATION OF ARREST:
 O.P. CITY
 GCSPS CITY AREA
 K.H. CITY
 UNINCORPORATED

1. CASE NUMBER
2016-005796

A D M I N	2. ARRESTED BY BALTEAN, R. C.		3. ID NO. 07326		4. LOCATION 3517 COUNTY ROAD 215, MIDDLEBURG			5. DATE OF ARREST (MDY) 03/01/2016		6. TIME OF ARREST 15:53			
	13. DEFENDANT NAME MALDONADO, JOSUE JR					7. ARREST NUMBER			8. O.B.T.S. NUMBER				
C H A R G E S	35. CHARGE #		36. TYPE		37. <input type="checkbox"/> F.S.S. <input type="checkbox"/> ORD.		38. STATUTE/ORDINANCE NUMBER		39. CASE #		40. WEAPON SEIZED		41. CHEM. TEST RESULT
	42. DRUG ACT		43. DRUG TYPE		44. DRUG UNIT		45. DRUG AMOUNT		46. VIC/ARR. RELAT.		47. BOND		48. MADE BY
	35. CHARGE #		36. TYPE		37. <input type="checkbox"/> F.S.S. <input type="checkbox"/> ORD.		38. STATUTE/ORDINANCE NUMBER		39. CASE #		40. WEAPON SEIZED		41. CHEM. TEST RESULT
	42. DRUG ACT		43. DRUG TYPE		44. DRUG UNIT		45. DRUG AMOUNT		46. VIC/ARR. RELAT.		47. BOND		48. MADE BY

The Deputy responsible for transporting the defendant to the Detention facility was provided an Addendum bearing my original witnessed signature to be attached to the original Arrest Report.

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51. VICTIM/COMPLAINANT	52. DATE OF BIRTH	53. ADDRESS	54. PHONE NUMBER
59. I SWEAR/AFFIRM THE ABOVE STATEMENTS ARE TRUE AND CORRECT		60. SWORN TO AND SUBSCRIBED BEFORE ME	
PRINTED BALTEAN, R. C.		ID NUMBER 07326	AUTHORITY THIS DAY OF SIGNATURE OF NOTARY OR LAW ENFORCEMENT OFFICER

OFFICER COPY

COURT COPY

DEFENDANT COPY

STATE ATTORNEY #

CLERK'S OFFICE #

E

ADULT ARREST REPORT
 ADULT NOTICE TO APPEAR

OFFICE OF THE SHERIFF
 CLAY COUNTY, FLORIDA

WRITTEN STATEMENTS
 OBTAINED YES NO

SPECIAL INSTRUCTIONS

CCSO FHP
 OPPD GFC
 GCSPD FMP
 OTHER _____

LOCATION OF ARREST:
 O.P. CITY UNINCORPORATED AREA
 GCSPS CITY
 K.H. CITY

INCIDENT REPORT
 WRITTEN YES NO

1. CASE NUMBER
2016-005796

2. ARRESTED BY HARRIS, A. F.	3. ID NO. 06476	4. LOCATION 3517 COUNTY ROAD 215 MIDDLEBURG	5. DATE OF ARREST (MDY) 03/01/2016	6. TIME OF ARREST 19:51
7. ARREST NUMBER	8. O.B.T.S. NUMBER	9. BOOKING OFFICER	10. FINGERPRINT OFFICER	11. SEARCHING OFFICER

12. COURT DATE (LOCATION/DATE/TIME)

13. NAME (LAST, FIRST, MIDDLE)
MALDONADO, JOSE MANUEL

14. ALIAS
MALDONADO, JOSE | MALDONADO,

15. HOME ADDRESS
3517 COUNTY ROAD 215, MIDDLEBURG, FL 32068

16. PHONE NUMBER
(904) 210-7950

17. MAILING ADDRESS, IF DIFFERENT FROM PHYSICAL

18. EMPLOYER AND ADDRESS
UNEMPLOYED

19. PHONE NUMBER
(904) -

20. POB (CITY/STATE)
CAMBRIDGE, MA, United

21. CITIZENSHIP
UNITED

22. DRIVER'S LICENSE NUMBER/STATE
[REDACTED]

23. SOCIAL SECURITY NUMBER
[REDACTED]

24. RACE
W M

25. SEX
M

26. DATE OF BIRTH (MDY)
07/03/1994

27. AGE
21

28. HEIGHT
5'08

29. WEIGHT
180

30. HAIR COLOR
BLACK

31. EYE COLOR
BROWN

32. COMPLEX
MEDIUM

33. BUILD

34. IDENTIFYING CHARACTERISTICS (SCARS/MARKS/TATTOOS/ETC.)
TATT RIGH SHOULDER / FLAG, MONEY SYMBOL, DEVIL, FEATHER, MONEY, CLOWN FACES; TATT RIGH

35. CHARGE
1 Poss W Intent To Sell

36. TYPE
F

37. F.S.S. ORD
 F.S.S. ORD

38. STATUTE/ORDINANCE NUMBER
893-13/1A1

39. CASE #
2016005796

40. WEAPON SEIZED
NONE (NO)

41. CHEM. TEST RESULT

42. DRUG ACT

43. DRUG TYPE

44. DRUG UNIT

45. DRUG AMOUNT

46. VIC/ARR. RELAT.
STRANGER

47. BOND

48. MADE BY

35. CHARGE
2

36. TYPE

37. F.S.S. ORD

38. STATUTE/ORDINANCE NUMBER

39. CASE #

40. WEAPON SEIZED

41. CHEM. TEST RESULT

42. DRUG ACT

43. DRUG TYPE

44. DRUG UNIT

45. DRUG AMOUNT

46. VIC/ARR. RELAT.

47. BOND

48. MADE BY

35. CHARGE
3

36. TYPE

37. F.S.S. ORD

38. STATUTE/ORDINANCE NUMBER

39. CASE #

40. WEAPON SEIZED

41. CHEM. TEST RESULT

42. DRUG ACT

43. DRUG TYPE

44. DRUG UNIT

45. DRUG AMOUNT

46. VIC/ARR. RELAT.

47. BOND

48. MADE BY

ON THE 1st DAY OF March, 2016 AT 2:30 PM THE DEFENDANT,

AT 3517 COUNTY ROAD 215, MIDDLEBURG, FL 32068 WITHIN CLAY COUNTY, VIOLATED THE LAW AND DID THEN AND THERE:
 was arrested for the possession of a controlled substance contrary to FSS 893.

On 03-01-2016 the Clay County Sheriffs Office had and executed a search warrant on a residence located at 3517 County Road 215 Middleburg Florida. The search warrant involved the residence of the defendant, Jose Maldonado, and his brother Josue Maldonado.

During the execution of the search warrant the defendant ran from the home through a small wooded area where he was detained and returned back to the residence.

Having executed the search warrant and with all occupants having been secured I met with and began an interview with the Defendant, Jose Maldonado, whom I positively identified by his Florida drivers license. The Defendant had been read his Miranda Rights previously and I verified that he understood them and still agreed to talk about this incident.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

49. CO-DEFENDANT
1 SLUDER, DECODA BILOXI

50. DATE OF BIRTH
08/08/1996

49. CO-DEFENDANT
2

50. DATE OF BIRTH

49. CO-DEFENDANT
3

50. DATE OF BIRTH

51. VICTIM/COMPLAINANT
State Of Florida

52. DATE OF BIRTH

53. ADDRESS

54. PHONE NUMBER

55. WITNESS

56. DATE OF BIRTH

57. ADDRESS

58. PHONE NUMBER

55. WITNESS

56. DATE OF BIRTH

57. ADDRESS

58. PHONE NUMBER

59. TO BE SET BY CLERK OF COURT

RIGHT THUMB PRINT REQUIRED FOR NTA

I AGREE TO APPEAR AT THE 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 IN THIS NOTICE TO APPEAR OR PAY THE FINE SET FORTH THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST MAY BE ISSUED.

I HEREBY CERTIFY BY MY SIGNATURE THAT THE PERMANENT ADDRESS LISTED ABOVE IS MY CORRECT MAILING ADDRESS

60. SIGNATURE OF DEFENDANT

61. DATE

62. I SWEAR/AFFIRM THE ABOVE STATEMENTS ARE TRUE AND CORRECT

63. SWORN TO AND SUBSCRIBED BEFORE ME

PRINTED
HARRIS, A. F.

ID NUMBER
06476

AUTHORITY THIS DAY OF
 SIGNATURE OF NOTARY OR LAW ENFORCEMENT OFFICER

64. VEHICLE TOWED BY:

65. TRANSPORTING OFFICER
SANTIAGO, DIMITRI ALISKIAL
 (IF OTHER THAN BLOCK 2)

OFFICER COPY

COURT COPY

DEFENDANT COPY

CCS/C-015 (REV. 1/02)

STATE ATTORNEY #

CLERK'S OFFICE #

OFFICE OF THE SHERIFF
CLAY COUNTY, FLORIDA

ARREST REPORT
 NOTICE TO APPEAR

JUVENILE
 ADULT

CCSO FHP
 OPPD GFC
 GCSPD FMP
 OTHER

LOCATION OF ARREST:
 O.P. CITY UNINCORPORATED AREA
 GCSPS CITY
 K.H. CITY

1. CASE NUMBER
2016-005796

A D M I N	2. ARRESTED BY HARRIS, A. F.	3. ID NO. 06476	4. LOCATION 3517 COUNTY ROAD 215 MIDDLEBURG	5. DATE OF ARREST (MDY) 03/01/2016	6. TIME OF ARREST 19:51		
	13. DEFENDANT NAME MALDONADO, JOSE MANUEL		7. ARREST NUMBER	8. O.B.T.S. NUMBER			
C H A R G E S	35. CHARGE #	36. TYPE	37. <input type="checkbox"/> F.S.S. <input type="checkbox"/> ORD.	38. STATUTE/ORDINANCE NUMBER	39. CASE #	40. WEAPON SEIZED	41. CHEM. TEST RESULT
	42. DRUG ACT	43. DRUG TYPE	44. DRUG UNIT	45. DRUG AMOUNT	46. VICIARR. RELAT.	47. BOND	48. MADE BY
P R O B A B L E C A U S E	35. CHARGE #	36. TYPE	37. <input type="checkbox"/> F.S.S. <input type="checkbox"/> ORD.	38. STATUTE/ORDINANCE NUMBER	39. CASE #	40. WEAPON SEIZED	41. CHEM. TEST RESULT
	42. DRUG ACT	43. DRUG TYPE	44. DRUG UNIT	45. DRUG AMOUNT	46. VICIARR. RELAT.	47. BOND	48. MADE BY

[REDACTED]

The interview was concluded and his room was searched. [REDACTED]

The defendant was advised of his charges and transported to the Clay County jail without incident.

An arrest addendum was completed for the transportation of the defendant.

51. VICTIM/COMPLAINANT	52. DATE OF BIRTH	53. ADDRESS	54. PHONE NUMBER
59. I SWEAR/AFFIRM THE ABOVE STATEMENTS ARE TRUE AND CORRECT		60. SWORN TO AND SUBSCRIBED BEFORE ME	
PRINTED HARRIS, A. F.		DAY OF	SIGNATURE OF NOTARY OR LAW ENFORCEMENT OFFICER
ID NUMBER 06476			

OFFICER COPY COURT COPY DEFENDANT COPY

STATE ATTORNEY # _____
CLERKS OFFICE # _____

**OFFICE OF THE SHERIFF
CLAY COUNTY, FLORIDA**

WRITTEN STATEMENTS
OBTAINED YES NO

INCIDENT REPORT
WRITTEN YES NO

ADULT ARREST REPORT
 ADULT NOTICE TO APPEAR

SPECIAL INSTRUCTIONS

CCSO FHP
 OPPD GFC
 GCSPD FMP
 OTHER _____

LOCATION OF ARREST:
 O.P. CITY UNINCORPORATED AREA
 GCSPS CITY
 K.H. CITY

1. CASE NUMBER
2016-005796

A D M I N	2. ARRESTED BY SMITH, J. W.		3. ID NO. 06788		4. LOCATION 3517 COUNTY ROAD 215			5. DATE OF ARREST (MO/Y) 03/01/2016		6. TIME OF ARREST 16:58		
	7. ARREST NUMBER		8. O.B.T.S. NUMBER		9. BOOKING OFFICER		10. FINGERPRINT OFFICER		11. SEARCHING OFFICER			
12. COURT DATE (LOCATION/DATE/TIME)												
D E F E N D A N T	13. NAME (LAST, FIRST, MIDDLE) HALE, MAEGAN CHRISTINE										14. ALIAS	
	15. HOME ADDRESS 4612 PLANTAIN AV, MIDDLEBURG, FL 32068										16. PHONE NUMBER (904) 610-4988	
	17. MAILING ADDRESS, IF DIFFERENT FROM PHYSICAL											
	18. EMPLOYER AND ADDRESS UNEMPLOYED										19. PHONE NUMBER (904) 282-0234	
20. POB (CITY/STATE) JACKSONVILLE, FL,			21. CITIZENSHIP UNITED		22. DRIVER'S LICENSE NUMBER/STATE			23. SOCIAL SECURITY NUMBER				
24. RACE W		25. SEX F	26. DATE OF BIRTH (MO/Y) 10/18/1990		27. AGE 25	28. HEIGHT 5'05	29. WEIGHT 150	30. HAIR COLOR BLONDE		31. EYE COLOR BLUE	32. COMPLEX FAIR	
34. IDENTIFYING CHARACTERISTICS (SCARS/MARKS/TATOOS/ETC.) TATT RIGH FOOT / "BELIEVE"; TATT RIGH HIP / DIAMOND												
C H A R G E S	35. CHARGE #1 Poss W Intent To Sell Manufacture Deliver		36. TYPE F		37. <input type="checkbox"/> F.S.S. <input type="checkbox"/> ORD.		38. STATUTE/ORDINANCE NUMBER 893-13/1A1		39. CASE # 2016005796		40. WEAPON SEIZED NONE (NO)	41. CHEM. TEST RESULT
	42. DRUG ACT		43. DRUG TYPE		44. DRUG UNIT		45. DRUG AMOUNT		46. VIC/ARR. RELAT. STRANGER		47. BOND	48. MADE BY
	35. CHARGE #2		36. TYPE		37. <input type="checkbox"/> F.S.S. <input type="checkbox"/> ORD.		38. STATUTE/ORDINANCE NUMBER		39. CASE #		40. WEAPON SEIZED	41. CHEM. TEST RESULT
	42. DRUG ACT		43. DRUG TYPE		44. DRUG UNIT		45. DRUG AMOUNT		46. VIC/ARR. RELAT.		47. BOND	48. MADE BY
	35. CHARGE #3		36. TYPE		37. <input type="checkbox"/> F.S.S. <input type="checkbox"/> ORD.		38. STATUTE/ORDINANCE NUMBER		39. CASE #		40. WEAPON SEIZED	41. CHEM. TEST RESULT
	42. DRUG ACT		43. DRUG TYPE		44. DRUG UNIT		45. DRUG AMOUNT		46. VIC/ARR. RELAT.		47. BOND	48. MADE BY
	ON THE <u>1st</u> DAY OF <u>March, 2016</u> AT <u>5:03 PM</u> THE DEFENDANT, AT <u>3517 COUNTY ROAD 215, MIDDLEBURG, FL 32068</u> WITHIN CLAY COUNTY, VIOLATED THE LAW AND DID THEN AND THERE: Commit the offense of possession more than 20 grams of marijuana.											
	On 03/01/2016, I along with members of the Strategic Response Division and Clay County Sheriff's Office SWAT Unit served a search warrant at 3715 County Road 215, Middleburg Florida, 32068.											
	During the search of the listed residence a large safe was located in the master bedroom closet. The safe was open and contained what appeared based on my training and experience to be multiple glass jars and plastic bags containing a green leafy substance I believed to be marijuana.											
	After interviewing the occupants of the residence it was determined that Maegan Hale (defendant) resides in the master bedroom with her boyfriend, Josue Maldonado.											
	Maegan was read her Miranda warning form my department issued card, to which she stated she understood and would speak with me. At first Maegan was not very											
	P R O B A B L E C A U S E	49. CO-DEFENDANT #1 MALDONADO, JOSUE		50. DATE OF BIRTH 01/18/1993		49. CO-DEFENDANT #2		50. DATE OF BIRTH		49. CO-DEFENDANT #3		50. DATE OF BIRTH
51. VICTIM/COMPLAINANT State Of Florida		52. DATE OF BIRTH		53. ADDRESS		54. PHONE NUMBER						
55. WITNESS		56. DATE OF BIRTH		57. ADDRESS		58. PHONE NUMBER						
N O T I C E	59. <input type="checkbox"/> TO BE SET BY CLERK OF COURT										RIGHT THUMB PRINT REQUIRED FOR NTA	
	I AGREE TO APPEAR AT THE 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 IN THIS NOTICE TO APPEAR OR PAY THE FINE SET FORTH THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST MAY BE ISSUED. ***I HEREBY CERTIFY BY MY SIGNATURE THAT THE PERMANENT ADDRESS LISTED ABOVE IS MY CORRECT MAILING ADDRESS***											
	60. SIGNATURE OF DEFENDANT						61. DATE					
A D M I N	62. I SWEAR/AFFIRM THE ABOVE STATEMENTS ARE TRUE AND CORRECT						63. SWORN TO AND SUBSCRIBED BEFORE ME					
	PRINTED SMITH, J. W.			ID NUMBER 06788			AUTHORITY THIS DAY OF		SIGNATURE OF NOTARY OR LAW ENFORCEMENT OFFICER			
	64. VEHICLE TOWED BY:						65. TRANSPORTING OFFICER (IF OTHER THAN BLOCK 2)					

OFFICER COPY

COURT COPY

DEFENDANT COPY

STATE ATTORNEY #

CLERKS OFFICE #

OFFICE OF THE SHERIFF
CLAY COUNTY, FLORIDA

ARREST REPORT
 NOTICE TO APPEAR

JUVENILE
 ADULT

CCSO FHP
 OPPD GFC
 GCSPD FMP
 OTHER

LOCATION OF ARREST:
 O.P. CITY UNINCORPORATED
 GCSPS CITY AREA
 K.H. CITY

1. CASE NUMBER
2016-005796

2. ARRESTED BY: **SMITH, J. W.** 3. ID NO: **06788** 4. LOCATION: **3517 COUNTY ROAD 215** 5. DATE OF ARREST (MDY): **03/01/2016** 6. TIME OF ARREST: **16:58**
13. DEFENDANT NAME: **HALE, MAEGAN CHRISTINE** 7. ARREST NUMBER: 8. O.B.T.S. NUMBER:

35. CHARGE # 36. TYPE 37. F.S.S. ORD. 38. STATUTE/ORDINANCE NUMBER 39. CASE # 40. WEAPON SEIZED 41. CHEM. TEST RESULT
42. DRUG ACT 43. DRUG TYPE 44. DRUG UNIT 45. DRUG AMOUNT 46. VICIARR. RELAT. 47. BOND 48. MADE BY
35. CHARGE # 36. TYPE 37. F.S.S. ORD. 38. STATUTE/ORDINANCE NUMBER 39. CASE # 40. WEAPON SEIZED 41. CHEM. TEST RESULT
42. DRUG ACT 43. DRUG TYPE 44. DRUG UNIT 45. DRUG AMOUNT 46. VICIARR. RELAT. 47. BOND 48. MADE BY

cooperative, [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Maegan was placed under arrest and transported to the Clay County Jail.
The deputy responsible for transporting the defendant to the Detention Facility was provided an Addendum bearing my original witnessed signature to be attached to the original Arrest Report.

51. VICTIM/COMPLAINANT 52. DATE OF BIRTH 53. ADDRESS 54. PHONE NUMBER

59. I SWEAR/AFFIRM THE ABOVE STATEMENTS ARE TRUE AND CORRECT 60. SWORN TO AND SUBSCRIBED BEFORE ME
AUTHORITY THIS DAY OF
PRINTED: **SMITH, J. W.** ID NUMBER: **06788** SIGNATURE OF NOTARY OR LAW ENFORCEMENT OFFICER:

OFFICER COPY COURT COPY DEFENDANT COPY

STATE ATTORNEY #
CLERKS OFFICE #

**OFFICE OF THE SHERIFF
CLAY COUNTY, FLORIDA**

WRITTEN STATEMENTS
OBTAINED YES NO

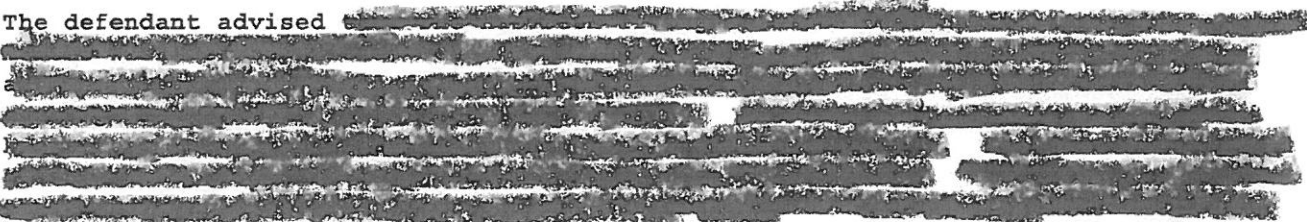
ADULT ARREST REPORT
 ADULT NOTICE TO APPEAR

CCSO FHP
 OPPD GFC
 GCSPD FMP
 OTHER

LOCATION OF ARREST:
 O.P. CITY UNINCORPORATED
 GCSPS CITY AREA
 K.H. CITY

INCIDENT REPORT
WRITTEN YES NO

1. CASE NUMBER
2016-005796

A D M I N	2. ARRESTED BY ANDERSON, K. L.	3. ID NO. 06320	4. LOCATION 3517 COUNTY ROAD 215	5. DATE OF ARREST (MOY) 03/01/2016	6. TIME OF ARREST 16:30
	7. ARREST NUMBER	8. O.B.T.S. NUMBER	9. BOOKING OFFICER	10. FINGERPRINT OFFICER	11. SEARCHING OFFICER
D E F E N D A N T	12. COURT DATE (LOCATION/DATE/TIME)				
	13. NAME (LAST, FIRST, MIDDLE) SLUDER, DECODA BILOXI LYNN				14. ALIAS
	15. HOME ADDRESS 3517 COUNTY ROAD 215 /, MIDDLEBURG, FL 32068				16. PHONE NUMBER (904) 309-3253
	17. MAILING ADDRESS, IF DIFFERENT FROM PHYSICAL				
C H A R G E S	18. EMPLOYER AND ADDRESS BLK CREEK CAFE/KANGAROO				19. PHONE NUMBER (904) 405-7682
	20. POB (CITY/STATE) JACKSONVILLE, FL,	21. CITIZENSHIP UNITED	22. DRIVER'S LICENSE NUMBER/STATE	23. SOCIAL SECURITY NUMBER	
	24. RACE W	25. SEX F	26. DATE OF BIRTH (MDY) 08/08/1996	27. AGE 19	28. HEIGHT 5'02
	29. WEIGHT 104	30. HAIR COLOR BROWN	31. EYE COLOR HAZEL	32. COMPLEX FAIR	33. BUILD
	34. IDENTIFYING CHARACTERISTICS (SCARS/MARKS/TATTOOS/ETC.) TATT RIGH WRIST / ROSE; TATT UPP CHEST / SEMICOLON; TATT LEFT UPPER ARM / BOW; EYE; TATT				
	35. CHARGE # 1 Poss W Intent To Sell Manufacture Deliver	36. TYPE F	37. <input type="checkbox"/> F.S.S. <input type="checkbox"/> ORD.	38. STATUTE/ORDINANCE NUMBER 893-13/1A1	39. CASE # 2016005796
	40. WEAPON SEIZED NONE (NO)	41. CHEM. TEST RESULT			
	42. DRUG ACT	43. DRUG TYPE	44. DRUG UNIT	45. DRUG AMOUNT	46. VIC/ARR. RELAT. STRANGER
	47. BOND	48. MADE BY			
	35. CHARGE # 2	36. TYPE	37. <input type="checkbox"/> F.S.S. <input type="checkbox"/> ORD.	38. STATUTE/ORDINANCE NUMBER	39. CASE #
40. WEAPON SEIZED	41. CHEM. TEST RESULT				
42. DRUG ACT	43. DRUG TYPE	44. DRUG UNIT	45. DRUG AMOUNT	46. VIC/ARR. RELAT.	
47. BOND	48. MADE BY				
35. CHARGE # 3	36. TYPE	37. <input type="checkbox"/> F.S.S. <input type="checkbox"/> ORD.	38. STATUTE/ORDINANCE NUMBER	39. CASE #	
40. WEAPON SEIZED	41. CHEM. TEST RESULT				
42. DRUG ACT	43. DRUG TYPE	44. DRUG UNIT	45. DRUG AMOUNT	46. VIC/ARR. RELAT.	
47. BOND	48. MADE BY				
P R O B A B L E C A U S E	ON THE <u>1st</u> DAY OF <u>March, 2016</u> AT <u>4:30 PM</u> THE DEFENDANT, AT <u>3517 COUNTY ROAD 215, MIDDLEBURG, FL 32068</u> WITHIN CLAY COUNTY, VIOLATED THE LAW AND DID THEN AND THERE: Commit the offense of possession with intent to sell marijuana. On 03/01/16 members of the Strategic Response Division served a search warrant at 3517 County Road 215, Middleburg, Florida. Several subjects were taken into custody, including the defendant. The defendant was read Miranda Warnings by Detective Ben Simmons. The defendant advised that she understood her rights and would talk to us and answer our questions. The defendant advised 				
	49. CO-DEFENDANT # 1 MALDONADO, JOSE MANUEL	50. DATE OF BIRTH 07/03/1994	49. CO-DEFENDANT # 2	50. DATE OF BIRTH	49. CO-DEFENDANT # 3
	50. DATE OF BIRTH	51. VICTIM/COMPLAINANT State Of Florida			
	52. DATE OF BIRTH	53. ADDRESS			
	54. PHONE NUMBER	55. WITNESS			
	56. DATE OF BIRTH	57. ADDRESS			
	58. PHONE NUMBER	55. WITNESS			
	56. DATE OF BIRTH	57. ADDRESS			
	58. PHONE NUMBER	59. <input type="checkbox"/> TO BE SET BY CLERK OF COURT			
	RIGHT THUMB PRINT REQUIRED FOR NTA				
I AGREE TO APPEAR AT THE 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 IN THIS NOTICE TO APPEAR OR PAY THE FINE SET FORTH THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST MAY BE ISSUED. ***I HEREBY CERTIFY BY MY SIGNATURE THAT THE PERMANENT ADDRESS LISTED ABOVE IS MY CORRECT MAILING ADDRESS***					
60. SIGNATURE OF DEFENDANT			61. DATE		
62. I SWEAR/AFFIRM THE ABOVE STATEMENTS ARE TRUE AND CORRECT			63. SWORN TO AND SUBSCRIBED BEFORE ME		
PRINTED ANDERSON, K. L.			AUTHORITY THIS DAY OF		
ID NUMBER 06320			SIGNATURE OF NOTARY OR LAW ENFORCEMENT OFFICER		
64. VEHICLE TOWED BY:			65. TRANSPORTING OFFICER (IF OTHER THAN BLOCK 2)		

STATE ATTORNEY #

CLERKS OFFICE #

OFFICER COPY

COURT COPY

DEFENDANT COPY

**OFFICE OF THE SHERIFF
CLAY COUNTY, FLORIDA**

ARREST REPORT
 NOTICE TO APPEAR

JUVENILE
 ADULT

CCSO FHP
 OPPD GFC
 GCSPD FMP
 OTHER

LOCATION OF ARREST:
 O.P. CITY UNINCORPORATED
 GCSPS CITY AREA
 K.H. CITY

1. CASE NUMBER
2016-005796

2. ARRESTED BY ANDERSON, K. L.		3. ID NO. 06320		4. LOCATION 3517 COUNTY ROAD 215		5. DATE OF ARREST (MDY) 03/01/2016		6. TIME OF ARREST 16:30				
13. DEFENDANT NAME SLUDER, DECODA BILOXI LYNN				7. ARREST NUMBER		8. O.B.T.S. NUMBER						
35. CHARGE #		36. TYPE		37. <input type="checkbox"/> F.S.S. <input type="checkbox"/> ORD.		38. STATUTE/ORDINANCE NUMBER		39. CASE #		40. WEAPON SEIZED	41. CHEM. TEST RESULT	
42. DRUG ACT		43. DRUG TYPE		44. DRUG UNIT		45. DRUG AMOUNT		46. VIC/ARR. RELAT.		47. BOND		48. MADE BY
35. CHARGE #		36. TYPE		37. <input type="checkbox"/> F.S.S. <input type="checkbox"/> ORD.		38. STATUTE/ORDINANCE NUMBER		39. CASE #		40. WEAPON SEIZED	41. CHEM. TEST RESULT	
42. DRUG ACT		43. DRUG TYPE		44. DRUG UNIT		45. DRUG AMOUNT		46. VIC/ARR. RELAT.		47. BOND		48. MADE BY

We asked the defendant what we would find in their bedroom. The defendant advised [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Upon searching the room the marijuana in [REDACTED] jars was located in the safe. The green dab mat with the dabs was located [REDACTED] the dresser.

[REDACTED]

The deputy responsible for transporting the defendant to the Detention Facility was provided an Addendum bearing my original witnessed signature to be attached to the original Arrest Report.

Case cleared by arrest.

51. VICTIM/COMPLAINANT		52. DATE OF BIRTH		53. ADDRESS		54. PHONE NUMBER	
59. I SWEAR/AFFIRM THE ABOVE STATEMENTS ARE TRUE AND CORRECT				60. SWORN TO AND SUBSCRIBED BEFORE ME			
PRINTED ANDERSON, K. L.		ID NUMBER 06320		AUTHORITY THIS DAY OF		SIGNATURE OF NOTARY OR LAW ENFORCEMENT OFFICER	

OFFICER COPY COURT COPY DEFENDANT COPY

STATE ATTORNEY # _____
CLERK'S OFFICE # _____