

**BEFORE THE SCHOOL BOARD OF PALM BEACH COUNTY, FLORIDA**

ARTHUR C. JOHNSON, Ph.D.,  
as Superintendent of Schools,

Petitioner,

vs.

Case No. 05/06-X-012

[REDACTED]

Respondent.

\_\_\_\_\_ /

**FINAL ORDER**

**THIS MATTER** came to be heard by the School Board of Palm Beach County, Florida, ("School Board") for the purpose of entering a Final Order in the above-styled cause. In consideration of the Recommendation of the Superintendent and the attached exhibits, the School Board makes the following Findings of Fact and Conclusions of Law.

**FINDINGS OF FACT**

1. Respondent's parent was notified by the Principal of Christa McAuliffe Middle School that the Respondent was being recommended for expulsion on September 20, 2005. The Recommendation for Expulsion is incorporated by reference and made a part hereof as (Exhibit A).
2. Respondent's parent was notified by the Superintendent of the School District of Palm Beach County, Florida ("School District") on November 15, 2005, via certified and regular mail, that the Respondent would be recommended to the School Board to be expelled from the School District. The Notice of Recommendation for Expulsion is incorporated by reference and made a part hereof as (Exhibit B).
3. Said notice advised Respondent's parent of their right to an administrative hearing to contest the charges contained therein provided they requested a hearing within ten (10) days of receipt of same.
4. No hearing request has been received in the Office of the Chief Academic Officer.

**CONCLUSIONS OF LAW**

1. The School Board has jurisdiction over the subject matter and the parties hereto.
2. The School Board finds that the Respondent is guilty of the acts alleged by the Superintendent in the letter dated November 15, 2005, to wit:

Possession of a knife while on the campus of Christa McAuliffe Middle School on September 19, 2005.

**ORDERED AND ADJUDGED** by the School Board in regular session that the recommendation of the Superintendent be accepted and confirmed. [REDACTED] is hereby expelled from the School District for one calendar year from October 6, 2005. Respondent may choose to continue educational services during his expulsion

period at the ACS site. However, if Respondent is dismissed from that program by ACS, no further educational services will be offered by the District until the expulsion period is ended.

This Order may be appealed within thirty (30) days by filing a notice of appeal with the District Court of Appeal. Except in cases of indigence, the Court will require a filing fee and payment for preparing the record on appeal. For further explanation of the right to appeal, refer to § 120.68, Fla. Stat., and the Florida Rules of Appellate Procedure.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 2005.

**SCHOOL BOARD OF PALM BEACH COUNTY, FLORIDA**

**BY:** \_\_\_\_\_  
**Thomas Lynch, Chairman**

**Attest:** \_\_\_\_\_  
**Arthur C. Johnson, Ph.D., Secretary**

**(SEAL)**

**Filed with the Clerk of the School Board this \_\_\_\_\_ day of \_\_\_\_\_, 2005.**

\_\_\_\_\_  
**Alicia Palmer, Clerk**

Regular and Certified Mail

Return Receipt Requested

Date 09/20/2005

Student Number [REDACTED]

[REDACTED]  
[REDACTED]  
Custodial Parent/Guardian of:

[REDACTED]  
Dear Custodial Parent/Guardian:

On 09/19/2005 your son/daughter/ward was rendered a ten (10) day suspension as documented by my letter to you, a copy of which is attached.

Pursuant to Florida Statute § 230.23(6)(c), which authorizes the School Board to decide cases recommended for expulsion, I have this date recommended to the Expulsion Screening Committee that the School Board expel your son/daughter/ward from the public schools of Palm Beach County. My recommendation is based on substantial evidence available to me supporting the following serious misconduct.

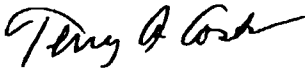
[REDACTED] was in possession of a butterfly knife with a 3 1/2" blade. Upon entering the campus and prior to the time the campus was supervised, [REDACTED] chased a male student with the knife out and pointed it at the student.

Office Wisniewski, with information provided by a student witness, was able to recover the knife.  
Police Case Number # 05 - 2668

Pursuant to Florida Statute § 230.33(8), the Superintendent may extend the ten (10) day suspension until the date the School Board Meeting at which time the School Board will act on the Expulsion.

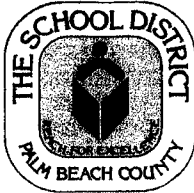
As of 10/06/2005, your son/daughter/ward is assigned to the Department of Alternative Education.

Sincerely,



Terry A. Costa, Principal  
Christa McAuliffe Middle School  
6500 Le Chalet Blvd.  
Boynton Beach, FL 33437

cc. Area Superintendent  
Chief Academic Officer  
Director of Alternative Education  
School Police



THE SCHOOL DISTRICT OF  
PALM BEACH COUNTY, FLORIDA

CHIEF ACADEMIC OFFICE  
3300 FOREST HILL BLVD., C-316  
WEST PALM BEACH, FL 33406-5813

Ph: 561-649-6888 Fx: 561-649-6837

www.PalmBeachSchool.org

ANN KILLETS  
CHIEF ACADEMIC OFFICER

ARTHUR C. JOHNSON, Ph.D.  
SUPERINTENDENT OF SCHOOLS

**FILE COPY**

November 15, 2005

CERTIFIED AND REGULAR MAIL  
RETURN RECEIPT REQUESTED

7003 2260 0001 9364 6214

**NOTICE OF RECOMMENDATION FOR EXPULSION**

Dear [REDACTED]

Based upon the recommendation of Terry Costa, Principal of Christa McAuliffe Middle School, and in accordance with Florida Statute § 1006.07, and Palm Beach County School Board Policy 5.1813, I will request that the School Board of Palm Beach County, Florida, expel your son, [REDACTED] from the Palm Beach County School District. This decision is based upon the following action:

Possession of a knife on September 19, 2005 while on the campus of Christa McAuliffe Middle School.

Pursuant to Florida Statute § 120.569, you have the right to an administrative hearing. Your request must be received by the Office of the Chief Academic Officer within ten (10) days of the date of this letter. If you request a hearing, a hearing officer will be appointed pursuant to Florida Statute § 120.81(1)(e). If you do not request a hearing, this recommendation will become final.

Your son may receive educational services at the ACS Transition Program during this expulsion due process. If you have any questions regarding the expulsion due process or the educational services available at the ACS Intensive Site, please contact the Office of the Chief Academic Officer at 561-649-6888.

Sincerely,

Arthur C. Johnson, Ph.D.  
Superintendent

ACJ:AK:JRA:ITM:mjp

cc: Principal, Christa McAuliffe Middle School  
Central Area Superintendent  
Chief Academic Officer  
Director of Alternative Education

RECEIVED

OCTOBER 5, 2005

OCT 05 2005

PALM BEACH COUNTY  
SCHOOL DISTRICT  
DEPT. OF LEGAL SERVICES

BY LEGAL SERVICES

ATTN: COLLEEN IRVINE

RE: [REDACTED]  
RECOMMENDED PENDING EXPULSION

Dear Ms. Irvine,

My family is moving from Palm Beach County District to the St Lucie County School District tentatively Oct 31, 2005. I do not have an exact date, as I am waiting for the builder to provide the closing date. Our tentative date is standing firm as 10/31/05.

My son [REDACTED] has a *Recommended Pending Expulsion* and I am asking the review board to please consider the fact that we will be moving to a new district and not to forward his recommended pending expulsion to the Area Superintendent.

Although the decision to move was not for my son, I believe this move will be a wonderful restart for him to involve himself in a new environment and away from some of the experiences he has had. [REDACTED] has never been arrested for anything and although he has had a few discipline referrals for disrespect and disobedience, he has never been violent or broken the law before. He in fact, has been referred to Palm Beach County Youth Court, where after completing the recommended program, his case will be dismissed and he will have no record that this charge ever took place. He will be doing 50 hours community service as well as writing some apology letters and attending an anger management class. He will be performing his community hours in youth court among his peers as well as the director, Officer J. Pruitt and is very excited to take part in this program.

This unfortunate situation has made my family realize how unaware we can become of our children's actions and we will and have all learned from this already.

[REDACTED]'s father already lives in the St. Lucie District and if this expulsion recommendation is dropped, possibly I could arrange to have him go stay with his father right away and start school anew prior to me moving to my new home. I would love to see him have the opportunity to attend a regular district school rather than an alternative program. I do not believe my son belongs in alternative school and although I agree and am aware of his possession charge, he was not in any way violent or threatening to anyone. The alternative program would expose my son to other children and other experiences that we all as parents work so hard to keep our children away from. [REDACTED] is very young, just barely 13 and much younger than most of his peers at the same grade level.

Please consider dropping this recommendation and letting our family learn from this terrible mistake [REDACTED] made. [REDACTED] acted responsibly and turned this knife in to a teacher before school started the morning of the incident. He handled his bad judgment in a way I am proud of. He did not have this in his possession when school started as it was in safe keeping with the teacher he turned it in to.

Thank you,

[REDACTED]

a/k/a [REDACTED]'s Mom!

| <b>SUMMARY OF INCIDENT</b>  |  |
|---|--|
| Student Name  | [REDACTED]   |
| Student ID #  | [REDACTED]   |
| School  | 1821 Christa McAuliffe Middle School   |
| Principal   | Terry A. Costa   |
| Area Supt.  | Ronald Montgomery  |
| Grade   | [REDACTED]   |
| Sex   | [REDACTED]   |
| Date of birth & age   | [REDACTED]   |
| Language  | English  |
| ESE/504   | ESE: Yes <input type="checkbox"/> No <input type="checkbox"/> 504: Yes <input type="checkbox"/> No <input type="checkbox"/>  |
| Date of Incident  | September 19, 2005   |
| Violation & Code  | Possession of a Knife #86  |
| If weapons infraction or other assault, did student allege weapon was brought for protection? | Yes <input type="checkbox"/> No <input type="checkbox"/> (Please check one box only)   |
| If so, has School Board Policy 5.001 been followed?   | Yes <input type="checkbox"/> No <input type="checkbox"/> (Please check one box only)   |
| Police report charge & number   | # 05 – 2668 Felony   |
| Persons involved & witnesses to testify   | Phyllis Kabinoff, Assistant Principal<br>Paul Sirota, Assistant Principal<br>Larry Harris, Teacher   |
| Student's Explanation of Incident<br>(Use additional page if necessary)                       | [REDACTED] claims that he forgot that he had the knife in his pants. He also claims that he did not have the knife out. He brought the knife to Mr. Harris, a teacher, so that he could hold it to the end of the day at school. |
| Additional Information<br>(Use additional page if necessary)                                  | [REDACTED] was chasing a student on school grounds with a 3 ½ " Knife blade.   |

I have reviewed the above information and recommend this student for expulsion.

Terry A. Costa  
Principal's Signature

9/20/05  
Date

THE SCHOOL DISTRICT OF PALM BEACH COUNTY

DIRECTIONS: Write in the appropriate code number or letter in the corresponding boxes.

# Student Discipline Referral

|   |                                    |                        |   |  |               |
|---|------------------------------------|------------------------|---|--|---------------|
| STUDENT NAME<br>[REDACTED]  | STUDENT NUMBER<br>[REDACTED]       | GRADE<br>[REDACTED]    | ESE / 504<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  | DATE<br>09/19/2005                             | TIME<br>09:00 |
| LOCATION<br>BK - Bookstore<br>BS - Bus Stop<br>BU - School Bus/Transportation<br>CA - Cafeteria<br>CL - Clinic<br>CS - Regular Classroom<br>GR - School Grounds<br>GY - Gymnasium<br>HA - Hallway<br>IS - Alternative to Suspension Room<br>LA - Laboratory<br>LI - Library/Media Center<br>OF - Office<br>OG - Off School Grounds<br>OT - Other<br>PG - Playground/Track<br>PK - Parking Lot<br>RE - Restroom<br>RT - Returning Home<br>TO - Field Trip/Activity Off Campus<br>TR - To School  | REPORTED BY<br>Phyllis B. Kabinoff | STAFF ID NUMBER<br>133 | INTERVENTIONS BY TEACHER BEFORE REFERRAL<br><input type="checkbox"/> Conference with student<br><input type="checkbox"/> Referral to CORE team<br><input type="checkbox"/> Telephone call to parent<br><input type="checkbox"/> Conference with counselor<br><input type="checkbox"/> Other | SCHOOL<br>1821 Christa McAuliffe Middle School | BUS CODE      |
| NATURE OF PROBLEM (Be Specific)<br>Upon arrival to my office shortly after school started on Monday, September 19, 2005, I was told by a staff member that a student had come to the office because [REDACTED] had a knife and was chasing him around in front of the school. I went to go to [REDACTED] first hour class and he was in the back hallway of the school on a pass. I asked him to come into the office so that I could ask him a few questions. I searched [REDACTED] backpack while a male assistant principal searched [REDACTED] person but a knife was not found.<br><br>Office Wisniewski, with information provided by a student witness, was able to recover the knife. |                                    |                        |   |  |               |

|   |   |   |  |   |                    |
|---|---|---|--|---|--------------------|
| ADMINISTRATIVE USE ONLY BELOW THIS LINE   |   |   |  |   |                    |
| DISTRICT NUMBER<br>5 0  | WHEN EVENT OCCURRED (circle one)<br>1 - DURING SCHOOL HOURS<br>2 - Outside school hours, school sponsored activity<br>3 - Outside school hours, non-school sponsored activity<br>4 - Unrelated event or unknown | WHERE EVENT OCCURRED (circle one)<br>1 - SCHOOL GROUNDS / ON CAMPUS<br>2 - School sponsored activity / off campus<br>3 - School sponsored transportation (includes bus stops)   | INVOLVEMENT TYPE (circle one)<br>S - STUDENT<br>N - Non-student<br>B - Both student and non-student<br>U - Unknown | RELATED ISSUES (circle all that apply)<br>G - Gang related<br>W - Weapon related<br>A - Alcohol related<br>H - Hate related<br>D - Drug related | DATE<br>09/19/2005 |
| WHAT KIND OF WEAPON USED (if appropriate)<br>K - Knife<br>H - Handgun<br>F - Firearm/Explosive device<br>R - Rifle/Shotgun<br>O - Other Weapon<br>U - Unknown | INCIDENT CODES (see code sheets)<br>8 6   | ADMINISTRATOR'S NAME<br>Phyllis B. Kabinoff   | ADMINISTRATION ID<br>133   | EVENT NUMBER  | DATE               |
| DURATION<br>How many days 10<br>Begin Date 09/20/2005<br>Return Date 10/05/2005   | ACTION CODE (see code sheets)<br>0 9<br>8 6   | COMMENTS<br>Police Case # 05-2668<br><br>suspension 9/20/05 - 10/03/05 return to school 10/05/05<br>note: 10/04/05 is a school holiday  | SIGNATURE OF PARENT<br><i>Phyllis B. Kabinoff</i>  | SIGNATURE OF STUDENT  | DATE               |
| CASE NUMBER/AGENCY  | CRT / TEAM INTERVENTION<br><input type="checkbox"/> Yes <input type="checkbox"/> No   | TRESPASSING NOTICE: I, the student, am aware that I may not be on school grounds and may not attend any school functions or school activities on or off school grounds of any Palm Beach County School District facility during the dates of my suspension. |  |   |                    |



THE SCHOOL DISTRICT OF ALAMEDA COUNTY  
**Transportation Request for  
 Special Needs Student**

Allow up to ten business days after receipt by the Transportation Department for the processing of this request.

**PROGRAMS** (check all that apply)

- Teen Parent    504    Exceptional Student Education (ESE)  
 ESE Prekindergarten:    A.M.    P.M.    Full Day (circle) M T W T H F  
 Alternative Education    Other: \_\_\_\_\_

If any ESE is checked a copy of page 3 of the IEP, PBS0 0659, and copy of A03, demographics screen must accompany this request.

**STUDENT INFORMATION**

|  |         |            |   |                   |                     |
|--|---------|------------|---|-------------------|---------------------|
| STUDENT (last, first, middle)<br>[REDACTED]                                |         | A          | STUDENT NUMBER<br>[REDACTED]              | AGE<br>[REDACTED] | GRADE<br>[REDACTED] |
| STUDENT HOME ADDRESS (street/apt no., city, state, zip code)<br>[REDACTED] |         |            |   |                   |                     |
| AM ADDRESS IF DIFFERENT FROM HOME ADDRESS                                  |         |            |   |                   |                     |
| (city)   | (state) | (zip code) | AM TELEPHONE NUMBER<br>( ) - -            |                   |                     |
| PM ADDRESS IF DIFFERENT FROM HOME ADDRESS                                  |         |            |   |                   |                     |
| (city)   | (state) | (zip code) | PM TELEPHONE NUMBER<br>( ) -              |                   |                     |
| HOME SCHOOL<br>Christa McAuliffe Middle School                             |         |            | ASSIGNED SCHOOL<br>Excell South Intensive |                   |                     |

**PARENT INFORMATION**

|   |                                  |                                |
|---|----------------------------------|--------------------------------|
| NAME OF PARENT/LEGAL GUARDIAN (last, first)<br>[REDACTED] | WORK TELEPHONE NUMBER<br>( ) - - | PAGER/MOBILE NUMBER<br>( ) - - |
| NAME OF PARENT/LEGAL GUARDIAN (last, first)<br>[REDACTED] | WORK TELEPHONE NUMBER<br>( ) -   | PAGER/MOBILE NUMBER<br>( ) -   |

**EMERGENCY INFORMATION**

|   |                            |                             |
|---|----------------------------|-----------------------------|
| 1) EMERGENCY CONTACT NAME<br>[REDACTED] | RELATIONSHIP<br>[REDACTED] | TELEPHONE NUMBER<br>( ) - - |
| 2) EMERGENCY CONTACT NAME               | RELATIONSHIP               | TELEPHONE NUMBER<br>( ) -   |

**CONDITIONS** - The following conditions apply to the student (check all that apply)

- |   |   |   |   |   |
|---|---|---|---|---|
| <input type="checkbox"/> deaf / hard of hearing | <input type="checkbox"/> poor vision / blind        | <input type="checkbox"/> emotional problems             | <input type="checkbox"/> drools excessively | <input type="checkbox"/> obscene language |
| <input type="checkbox"/> compulsive talking     | <input type="checkbox"/> balance / walking problems | <input type="checkbox"/> doesn't understand directions  | <input type="checkbox"/> hits / hurts self  | <input type="checkbox"/> spits            |
| <input type="checkbox"/> speech difficulty      | <input type="checkbox"/> brittle bones              | <input type="checkbox"/> poor social interaction skills | <input type="checkbox"/> throws objects     | <input type="checkbox"/> other            |
| <input type="checkbox"/> unable to talk         | <input type="checkbox"/> difficulty with change     | <input type="checkbox"/> rocks / twirls                 | <input type="checkbox"/> swears             |   |

**DISABILITIES** - The following disabilities apply to the student (check all that apply)

- |  |   |  |   |
|--|---|--|---|
| <input type="checkbox"/> Educable Mentally Handicapped (EMH)   | <input type="checkbox"/> Specific Learning Disabled (SLD)     | <input type="checkbox"/> Traumatic Brain Injured (TBI) | <input type="checkbox"/> Blind                  |
| <input type="checkbox"/> Trainable Mentally Handicapped (TMH)  | <input type="checkbox"/> Dual Sensory Impaired (DSI)          | <input type="checkbox"/> Other Health Impaired (OHI)   | <input type="checkbox"/> Visually Impaired (VI) |
| <input type="checkbox"/> Profoundly Mentally Handicapped (PMH) | <input type="checkbox"/> Emotionally Handicapped (EH)         | <input type="checkbox"/> Autistic (AUT)                | <input type="checkbox"/> Other                  |
| <input type="checkbox"/> Orthopedically Impaired (OI)          | <input type="checkbox"/> Severely Emotionally Disturbed (SED) | <input type="checkbox"/> Speech Impaired (SI)          |   |
| <input type="checkbox"/> Deaf or Hard of Hearing (D/HH)        | <input type="checkbox"/> Developmentally Delayed (DD)         | <input type="checkbox"/> Language Impaired (LI)        |   |

**EQUIPMENT** - Specialized equipment to be transported

- Wheelchair    manual    motorized    Lap tray    Computer    Walker / crutches / cane    Augmentative device    Medical equipment

**PRESCHOOL CHILD SAFETY RESTRAINT SYSTEM (CSRS)**

Note specific needs: \_\_\_\_\_

Weight \_\_\_\_\_ Date weighed / /      Size: chest \_\_\_\_\_ waist \_\_\_\_\_ Date measured / /

**K-12 SAFETY RESTRAINT SYSTEM OR SAFETY EQUIPMENT** (as per the Individual Education Plan, IEP)

Size: chest \_\_\_\_\_ waist \_\_\_\_\_ Date measured / /      Note specific needs \_\_\_\_\_

|                      |       |           |             |                             |
|----------------------|-------|-----------|-------------|-----------------------------|
| REQUEST COMPLETED BY | TITLE | TELEPHONE | DATE<br>/ / | PREFERRED START DATE<br>/ / |
|----------------------|-------|-----------|-------------|-----------------------------|

**DO NOT WRITE BELOW - TO BE COMPLETED BY TRANSPORTATION DEPARTMENT**

|             |      |                  |   |                   |
|-------------|------|------------------|---|-------------------|
| AM BUS CODE | TIME | AM STOP LOCATION | COMPOUND<br><input type="checkbox"/> Ctr <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> R | START DATE<br>/ / |
| PM BUS CODE | TIME | PM STOP LOCATION |   |                   |





|     |                                      |   |  |                        |
|-----|--------------------------------------|---|--|------------------------|
| ADM | Agency ORI Number<br>FLO 5 0 4 2 0 0 | THE SCHOOL DISTRICT OF PALM BEACH COUNTY SCHOOL POLICE    | <input checked="" type="checkbox"/> Juvenile <input checked="" type="checkbox"/> 1 - Original <input type="checkbox"/> 1 - Offense<br><input type="checkbox"/> Adult <input type="checkbox"/> 2 - Suppl. <input type="checkbox"/> 2 - Arrest | Case Number<br>05-2668 |
|     | Original Date Reported<br>09-19-05   | Offense<br>POSSESSION OF WEAPON on School Grounds 790.115 |  |                        |

NARRATIVE CONTINUATION

On September 20, 2005, while working as a school police officer for Palm Beach County School District, at Christa McAuliffe MS, 6500 Le Chaler Blvd Boynton Beach FL 33437, I was notified by 8th grade assistant principal Phyllis Kabinoff that a student may have a pocket knife in his possession. The student [REDACTED] was then brought to the office and 7th grade AP, Paul Sirota then searched [REDACTED]. He did not have the knife and I spoke with two other students, who advised me that [REDACTED] had a green handled with a silver blade knife, open, in his hand, chasing student [REDACTED] with it. This incident took place before staff had gone outside and it occurred near the bus loop. [REDACTED] advised me that the didn't know why [REDACTED] had been chasing him with a knife but it made him afraid and he told Mr Golden about the incident. I asked [REDACTED] if [REDACTED] said anything while he was being chased and he said he didn't hear anything because as soon as he saw the knife he ran away. I also spoke with witness, student [REDACTED] who advised me that [REDACTED] had the knife and was chasing [REDACTED] with it. She didn't know if he meant to hurt him and she told [REDACTED] to put it away because he could get into trouble with it. [REDACTED] told her that he was going to bring it to Mr. Harris's portable for safe keeping.

I then walked to Mr. Harris's portable which is the in school suspension portable and spoke with Mr. Harris. I asked him if [REDACTED] had visited him that morning as school opened? He said, "yes." I then asked him if [REDACTED] had given him anything to hold and he said, "yes, [REDACTED] had brought him something to hold until the end of the day because he forgot that he had it in his backpack." I asked him if it was a green handled knife and he said yes. Mr. Harris then gave me a green handled, fly type knife with a silver blade. I then advised the assistant principals and arrested [REDACTED] for Possession Weapon on School Grounds. FSS 790.115.

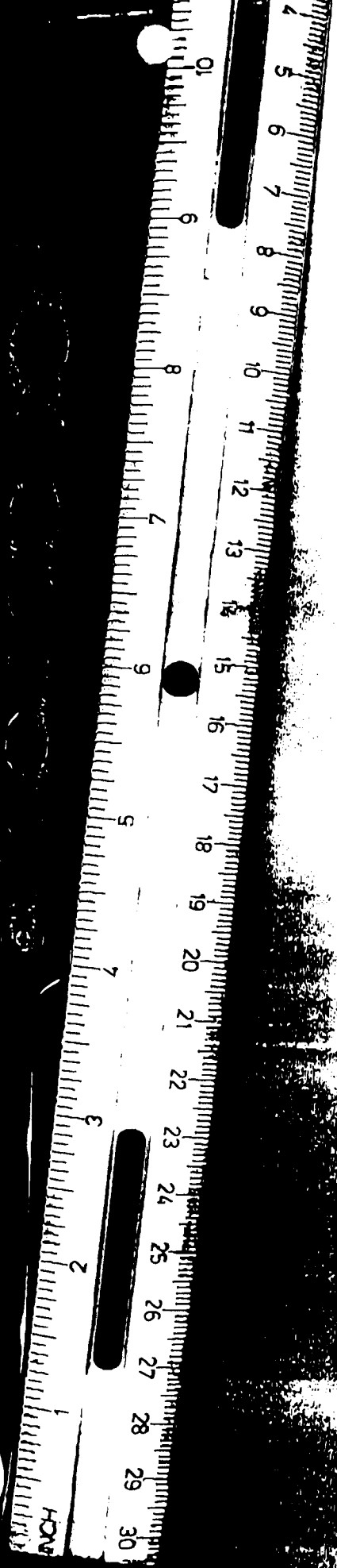
While in my custody, with assistant principal Mrs. Kabinoff present, I read [REDACTED] his Miranda Rights. He said he understood them and signed the paperwork. I then asked him if the knife belong to him and he said, "it was his knife and he forgot it in his backpack. He then said he brought it to Mr. Harris's portable to hold it until the end of the day, so he could give it to his mother or father. He also stated, that he didn't chase him."

[REDACTED] was then transported to JAC by Officer Saxe and the knife was turned over to Lt BK Davis.

I received written statements from [REDACTED], [REDACTED], Mrs. Kabinoff and Mr. Harris.

This case is cleared with an arrest.

|   |   |   |                          |  |                      |      |
|---|---|---|--------------------------|--|----------------------|------|
| ADMINISTRATIVE  | Officer Reporting<br>K. Wisniewski                      | I.D. Number<br>929                              | Date<br>09-19-05         | Lieutenant Reviewing<br>BK Davis   | I.D. Number<br>217   | Date |
|   | Captain Reviewing                                       | I.D. Number                                     | Date                     | Forward to   | Date                 |      |
| Case Status<br>Cleared  | Clearance Type<br>1-Arrest 3-Unfounded<br>2-Exceptional | A-Adult<br>J-Juvenile                           | Date Cleared<br>09-19-05 | Recommended Youth Court<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Number Arrested<br>1 |      |
| Exception Type<br>1-Extradition Declined<br>2-Arrest on Primary Offense Without Prosecution | 3-Death of Offender<br>4-V/W Refused to Cooperate       | 5-Prosecution Declined<br>6-Juvenile/No Custody | OBTS/Arrest Number       |  | Page of              |      |



HCM

PANEL: \_\_\_\_\_

A24. STUDENT DISCIPLINE SUMMARY

YEAR: 05

Wednesday October 5, 2005 3:50 pm

STDT: [REDACTED]  
SPEC: [REDACTED]

SCHL: 1821 GR: [REDACTED] ST: A  
YTD-ISS: 005 OSS: 010

| SY | EVENT    | DATE     | TIME | SCHL | LOC | CODE   | X | C | TAKEN    | DUR |
|----|----------|----------|------|------|-----|--|---|---|----------|-----|
| 05 | 10855619 | 05062005 | 1100 | 1821 | CS  | E 073 GLAZIER, CYNTHIA<br>I 30 REP DISRUPT BEH<br>A 60 IN-SCHOOL INTER | * |   | 05062005 | 003 |
|    |          |          |      |      |     | A 09 PAR/GRD CONTCT  |   |   | 05062005 |     |
| 05 | 10852918 | 05032005 | 1320 | 1821 | CS  | E 085 ROBBINS, JEAN<br>I 47 SEV/REP IN ACTV<br>A 81 O/S 1-2 DAYS       | * |   | 05032005 | 002 |
|    |          |          |      |      |     | A 09 PAR/GRD CONTCT  |   |   | 05032005 |     |
|    |          |          |      |      |     | A 01 CONF W/STDT/WRN   |   |   | 05032005 |     |
| 05 | 10852910 | 05032005 | 1100 | 1821 | CS  | E 081 DRENNAN, ROBYN<br>I 30 REP DISRUPT BEH<br>A 22 TMP REMOV F/CLS   |   |   | 05032005 |     |
|    |          |          |      |      |     | A 10 PAR/GRD CONF  |   |   | 05032005 |     |
|    |          |          |      |      |     | A 01 CONF W/STDT/WRN   |   |   | 05032005 |     |

PF1=HELP 3=EXIT 5=REFRESH 7=BKWD 8=FWD 9=NXT PAGE 12=ESCAPE  
PAGE FULL...CONTINUE.

TERML: Z62D

YEAR: 05

PANEL: \_\_\_\_\_

A24. STUDENT DISCIPLINE SUMMARY

Wednesday October 5, 2005 3:50 pm

STDT: [REDACTED], [REDACTED]  
SPEC: [REDACTED]

SCHL: 1821 GR: [REDACTED] ST: A  
YTD-ISS: 005 OSS: 010

| SY | EVENT    | DATE     | TIME | SCHL | LOC | CODE                   | X | C | TAKEN    | DUR |
|----|----------|----------|------|------|-----|------------------------|---|---|----------|-----|
| 05 | 10852910 | 05032005 | 1100 | 1821 | CS  | A 10 PAR/GRD CONF      |   |   | 05032005 |     |
|    |          |          |      |      |     | A 01 CONF W/STDT/WRN   |   |   | 05032005 |     |
| 05 | 10844442 | 04142005 | 1330 | 1821 | CS  | E 984 SUBSTITUTE TEACH |   |   |          |     |
|    |          |          |      |      |     | I 30 REP DISRUPT BEH   |   |   |          |     |
|    |          |          |      |      |     | A 09 PAR/GRD CONTCT    |   |   | 04182005 |     |
|    |          |          |      |      |     | A 01 CONF W/STDT/WRN   |   |   | 04182005 |     |
| 05 | 10844440 | 04182005 | 1420 | 1821 | CS  | E 984 SUBSTITUTE TEACH |   |   |          |     |
|    |          |          |      |      |     | I 30 REP DISRUPT BEH   |   |   |          |     |
|    |          |          |      |      |     | A 09 PAR/GRD CONTCT    |   |   | 04182005 |     |
|    |          |          |      |      |     | A 01 CONF W/STDT/WRN   |   |   | 04182005 |     |
| 05 | 10829640 | 03112005 | 1500 | 1821 | CS  | E 028 FIRSTEN, MARC    |   |   |          |     |
|    |          |          |      |      |     | I 10 CLASS/SCHL RULE   |   |   |          |     |
|    |          |          |      |      |     | A 60 IN-SCHOOL INTER   | * |   | 03162005 | 003 |
|    |          |          |      |      |     | A 25 REF CORE TEAM     |   |   | 03162005 |     |

PF1=HELP 3=EXIT 5=REFRESH 7=BKWD 8=FWD 9=NXT PAGE 12=ESCAPE  
PAGE FULL...CONTINUE.

TERML: Z62D

PANEL: \_\_\_\_\_

A24. STUDENT DISCIPLINE SUMMARY

YEAR: 05

Wednesday October 5, 2005 3:50 pm

STDT: [REDACTED], [REDACTED]

SCHL: 1821 GR: [REDACTED] ST: A

SPEC:

YTD-ISS: 005 OSS: 010

| SY | EVENT    | DATE     | TIME | SCHL | LOC | CODE                   | X | C | TAKEN    | DUR |
|----|----------|----------|------|------|-----|------------------------|---|---|----------|-----|
| 05 | 10829640 | 03112005 | 1500 | 1821 | CS  | A 25 REF CORE TEAM     |   |   | 03162005 |     |
|    |          |          |      |      |     | A 09 PAR/GRD CONTCT    |   |   | 03162005 |     |
|    |          |          |      |      |     | A 01 CONF W/STDT/WRN   |   |   | 03162005 |     |
| 05 | 10805061 | 02022005 | 0900 | 1821 | CS  | E 028 FIRSTEN, MARC    |   |   |          |     |
|    |          |          |      |      |     | I 01 HABITUAL TARDIN   |   |   |          |     |
|    |          |          |      |      |     | A 43 SAT DETENTION     |   |   | 02032005 |     |
|    |          |          |      |      |     | A 09 PAR/GRD CONTCT    |   |   | 02032005 |     |
|    |          |          |      |      |     | A 01 CONF W/STDT/WRN   |   |   | 02032005 |     |
| 05 | 10800507 | 01252005 | 1500 | 1821 | CS  | E 028 FIRSTEN, MARC    |   |   |          |     |
|    |          |          |      |      |     | I 01 HABITUAL TARDIN   |   |   |          |     |
|    |          |          |      |      |     | A 09 PAR/GRD CONTCT    |   |   | 01262005 |     |
|    |          |          |      |      |     | A 01 CONF W/STDT/WRN   |   |   | 01262005 |     |
| 05 | 10769701 | 11112004 | 0800 | 1821 | CS  | E 090 SCHECTOR, JEFFRE |   |   |          |     |
|    |          |          |      |      |     | I 39 UNSERVED DETENT   |   |   |          |     |

PF1=HELP 3=EXIT 5=REFRESH 7=BKWD 8=FWD 9=NXT PAGE 12=ESCAPE  
PAGE FULL...CONTINUE.

TERML: Z62D

PANEL: \_\_\_\_\_

A24. STUDENT DISCIPLINE SUMMARY

YEAR: 05

Wednesday October 5, 2005 3:50 pm

STDT: [REDACTED], [REDACTED]

SCHL: 1821 GR: [REDACTED] ST: A

SPEC: YTD-ISS: 005 OSS: 010

| SY | EVENT    | DATE     | TIME | SCHL | LOC | CODE                 | X | C | TAKEN    | DUR |
|----|----------|----------|------|------|-----|----------------------|---|---|----------|-----|
| 05 |          |          |      |      |     |                      |   |   |          |     |
| 05 | 10769701 | 11112004 | 0800 | 1821 | CS  | A 43 SAT DETENTION   |   |   | 11112004 | 001 |
|    |          |          |      |      |     | A 09 PAR/GRD CONTCT  |   |   | 11112004 |     |
|    |          |          |      |      |     | A 01 CONF W/STDT/WRN |   |   | 11112004 |     |
| 05 | 10755254 | 10212004 | 1500 | 1821 | CS  | E 044 SIROTA, P      |   |   |          |     |
|    |          |          |      |      |     | I 29 PHY AGGRESSION  |   |   |          |     |
|    |          |          |      |      |     | A 81 O/S 1-2 DAYS    | * |   | 10202004 | 002 |
|    |          |          |      |      |     | A 10 PAR/GRD CONF    |   |   | 10202004 |     |
|    |          |          |      |      |     | A 01 CONF W/STDT/WRN |   |   | 10202004 |     |

PF1=HELP 3=EXIT 5=REFRESH 7=BKWD 8=FWD 9=NXT PAGE 12=ESCAPE  
NO ADDITIONAL PAGES...NEXT?

TERML: Z62D

PANEL: \_\_\_

A24. STUDENT DISCIPLINE SUMMARY

YEAR: 06

Monday September 19, 2005 5:20 pm

STDT: [REDACTED], [REDACTED]  
SPEC: [REDACTED]

SCHL: 1821 GR: [REDACTED] ST: A  
YTD-ISS: 005 OSS: 000  
X C TAKEN DUR

| SY | EVENT    | DATE     | TIME | SCHL | LOC | CODE                   |   |          |  |
|----|----------|----------|------|------|-----|------------------------|---|----------|--|
| 06 | 10830904 | 09192005 | 0900 | 1821 | GR  | E 133 KABINOFF, PHYLLI |   |          |  |
|    |          |          |      |      |     | I 86 POSS OF KNIFE     | * |          |  |
|    |          |          |      |      |     | A 09 PAR/GRD CONTCT    |   | 09192005 |  |
|    |          |          |      |      |     | A FA FUTURE ACTION     | * | 09192005 |  |
| 06 | 10830804 | 09192005 | 0945 | 1821 | CS  | E 984 SUBSTITUTE TEACH |   |          |  |
|    |          |          |      |      |     | I 29 PHY AGGRESSION    |   |          |  |
|    |          |          |      |      |     | A 10 PAR/GRD CONF      |   | 09192005 |  |
|    |          |          |      |      |     | A 01 CONF W/STDT/WRN   |   | 09192005 |  |
| 06 | 10826816 | 09082005 | 1220 | 1821 | CS  | E 073 GLAZIER, CYNTHIA |   |          |  |
|    |          |          |      |      |     | I 30 REP DISRUPT BEH   |   |          |  |
|    |          |          |      |      |     | A 09 PAR/GRD CONTCT    |   | 09092005 |  |
| 06 | 10826803 | 09022005 | 1200 | 1821 | CS  | E 101 BERNSTEIN, AUDRA |   |          |  |
|    |          |          |      |      |     | I 30 REP DISRUPT BEH   |   |          |  |
|    |          |          |      |      |     | A 09 PAR/GRD CONTCT    |   | 09092005 |  |

PF1=HELP 3=EXIT 5=REFRESH 7=BKWD 8=FWD 9=NXT PAGE 12=ESCAPE  
PAGE FULL...CONTINUE.

TERML: CN1A



PANEL: \_\_\_\_\_ A24. STUDENT DISCIPLINE SUMMARY YEAR: 06  
Monday September 19, 2005 5:20 pm  
STDT: [REDACTED] SCHL: 1821 GR: [REDACTED] ST: A  
SPEC: [REDACTED] YTD-ISS: 005 OSS: 000  
SY EVENT DATE TIME SCHL LOC CODE X C TAKEN DUR  
06 \_\_\_\_\_  
06 10826761 08282005 1001 1821 CS E 984 SUBSTITUTE TEACH  
I 30 REP DISRUPT BEH  
A 60 IN-SCHOOL INTER \* 09092005 005  
A 09 PAR/GRD CONTCT 09092005

PF1=HELP 3=EXIT 5=REFRESH 7=BKWD 8=FWD 9=NXT PAGE 12=ESCAPE  
NO ADDITIONAL PAGES...NEXT?

TERML: CN1A

PALM BEACH COUNTY SCHOOL BOARD -- REPORT OF INCIDENT

INCIDENT INFORMATION

```

+-----+
| Case Nbr: 052668 | Incident Type: WEAPON | Rpt Date/Time: MON 09/19/2005 1020 | Ofc: WISNIEWSKI 929 |
+-----+
| Time Received: 1020 | Time Dispatched: | Time Arrived: | Time Cleared: | Response Time: 0 | Total Time: 0 |
+-----+
| Offense Date: MON 09/19/2005 1020 to MON 09/19/2005 1020 | Juvenile Involved? NO | Investigator Assigned: JF |
+-----+
| Place Name: CHRISTA MS | Incident Location: 1821 | Zip: 33437 | Zone: |
+-----+
| Forced Entry to Struct? N | Struct Occupied? N | Location Type: SCHOOL/UNIVERSITY | Weapon Type: KNIFE/CUTTING INSTR |
+-----+
| Number Of Offenses: 01 | Victims: 01 | Offenders: 01 | Premises Entered: 00 | Vehicles Stolen: 00 | Entered By: JW |
+-----+
    
```

OFFENSE INFORMATION

```

+--[ Offense 1 ]--
| WEAPON (FELONY ) Statute: 790 115 (CIS: 5200 NCIC: ) COMMITTED Agg Asslt: N/A
| Drug Related: Alcohol Related: Gambling? Kidnapping? Coercion? Bribery? Computer Theft?
| Drug Activity: N/A Drug Type: N/A Drug Quantity: 0 Qty Unit: Val: 0
+-----+
+--[ Offense 2 ]--
| (UNKNOWN ) Statute: (CIS: NCIC: ) UNKNOWN Agg Asslt: UNKNOWN
| Drug Related: ??? Alcohol Related: ??? Gambling? Kidnapping? Coercion? Bribery? Computer Theft?
| Drug Activity: Drug Type: Drug Quantity: 0 Qty Unit: Val: 0
+-----+
    
```

CLEARANCE INFORMATION

```

+-----+
| Original Report Date: 09/19/2005 | Clearance Type: CLEARED BY ARREST | Exception Type:
+-----+
| Date Cleared: 09/19/2005 | Adult/Juvenile Arrested: JUVENILE | OBTS/Arrest Number: 052668 | Individuals Arrested: 01 |
+-----+
    
```

**RECEIVED**  
 OCT 13 2005  
 BY LEGAL SERVICES

```

+-----+
| Officer Assigned: WISNIEWSKI | ID Number: 929 | Signature/Date:
+-----+
| Supervisor Signature:
+-----+
    
```

NAME INFORMATION - VICTIM/WITNESS/COMPLAINANT/OTHER (052668 )

| VICTIM 01 Name: STATE OF FLORIDA | N N | Age: 0 | SSN: |  
 | Drivers License Nbr: | DL State: | Employer: | Emp Phone: ( ) |  
 | Address: WEST PALM BEACH, FL 33406 | Residence Category: NOT APPLICABLE NOT APPLICABL |  
 | Home Phone ( ) | VICTIM of OFFENSE 1 | Vic Type: OTHER | Offender Relation: NOT APPLICABLE |  
 | Domestic Violence Victim? N | Extent of Injury: NONE | 1st Inj Type: NOT APPLICABLE | 2nd Inj Type: NOT APPLICABLE |

NAME INFORMATION - VICTIM/WITNESS/COMPLAINANT/OTHER (052668 )

| WITNESS 01 Name: [REDACTED] | Age: [REDACTED] | SSN: |  
 | Drivers License Nbr: | DL State: | Employer: | Emp Phone: ( ) |  
 | Address: [REDACTED] | Residence Category: FULL YEAR CITY |  
 | Home Phone [REDACTED] | WITNESS of OFFENSE 1 | Vic Type: JUVENILE | Offender Relation: STUDENT |  
 | Domestic Violence Victim? N | Extent of Injury: NONE | 1st Inj Type: NOT APPLICABLE | 2nd Inj Type: NOT APPLICABLE |

NAME INFORMATION - VICTIM/WITNESS/COMPLAINANT/OTHER (052668 )

| WITNESS 02 Name: [REDACTED] | Age: [REDACTED] | SSN: |  
 | Drivers License Nbr: | DL State: | Employer: | Emp Phone: ( ) |  
 | Address: [REDACTED] | Residence Category: FULL YEAR COUNTY |  
 | Home Phone [REDACTED] | WITNESS of OFFENSE 1 | Vic Type: JUVENILE | Offender Relation: STUDENT |  
 | Domestic Violence Victim? N | Extent of Injury: NONE | 1st Inj Type: NOT APPLICABLE | 2nd Inj Type: NOT APPLICABLE |

NAME INFORMATION - VICTIM/WITNESS/COMPLAINANT/OTHER (052668 )

| WITNESS 03 Name: KABINOFF, PHYLLIS | W F [REDACTED] | Age: [REDACTED] | SSN: |  
 | Drivers License Nbr: | DL State: | Employer: | Emp Phone: (561)3746600 |  
 | Address: 6500 LE CHALET BLVD BOYNTON BEACH, FL 33437 | Residence Category: FULL YEAR CITY |  
 | Home Phone ( ) | WITNESS of OFFENSE 1 | Vic Type: ADULT | Offender Relation: STUDENT |  
 | Domestic Violence Victim? N | Extent of Injury: NONE | 1st Inj Type: NOT APPLICABLE | 2nd Inj Type: NOT APPLICABLE |

NAME INFORMATION - VICTIM/WITNESS/COMPLAINANT/OTHER (052668 )

| WITNESS 04 Name: HARRIS, LARRY | B M | Age: 0 | SSN: |  
 | Drivers License Nbr: | DL State: | Employer: | Emp Phone: (561)3746600 |  
 | Address: 6500 LE CHALET BLVD BOYNTON BEACH, FL 33437 | Residence Category: |  
 | Home Phone ( ) | WITNESS of OFFENSE 1 | Vic Type: ADULT | Offender Relation: NOT APPLICABLE |  
 | Domestic Violence Victim? N | Extent of Injury: NONE | 1st Inj Type: NOT APPLICABLE | 2nd Inj Type: NOT APPLICABLE |

| Officer Assigned: WISNIEWSKI | ID Number: 929 | Signature/Date: |  
 | Supervisor Signature: |

NAME INFORMATION - ARRESTEE (052668 )

ARRESTEE 01 Name: [REDACTED] | Age: [REDACTED] | Juvenile? Yes |  
 [REDACTED] | Home Phone: [REDACTED] | Residence Type: COUNTY  
 Employer: | Emp Phone ( ) | SSN: | DL Nbr/State:  
 Height: 0 | Weight: 0 | Eye Color: | Hair Color: | Hair Len: | Hair Style: | Complexion: | Build:  
 Scars: | Citizenship: | Relationship to Victim: OTHER KNOWN  
 Under Influence of Drugs? UNK | Under Influence of Alcohol? UNK | Weapon Seized: KNIFE/CUTTING INSTR | Jail #:  
 Juvenile Disposition: PROCESSED WITHIN DEPT AND RELE | City ID Nbr: 052668 | Photo Nbr:  
 FDLE Nbr: | OBTS Nbr: 052668 | Arresting Officer: WISNIEWSKI | Arrest Date/Time: 09/19/2005

| Counts | Description | Statute | CIS  | Drug Activity | Drug Type | Drug Quan | Drug Unit | Court Number | Domestic Violence |
|--------|-------------|---------|------|---------------|-----------|-----------|-----------|--------------|-------------------|
| 01     | WEAPON      | 790 115 | 5200 | N/A           | N/A       | 0         |           |              | NO                |
|        |             |         |      |               |           | 0         |           |              |                   |
|        |             |         |      |               |           | 0         |           |              |                   |
|        |             |         |      |               |           | 0         |           |              |                   |

PROPERTY INFORMATION (052668 )

Prop Type: MISCELLANEOUS | Item Nbr: 01 | Status: EVIDENCE OR SEIZED | Damage: NOT APPLICABLE  
 Quantity: | Item Name: WEAPON | Brand: | Model: | Serial Nbr:  
 Description: ONE 4 INCH FLY TYPE KNIFE GREE | Value Stolen: 0 | Value Recovered: 1 | Date Recovered: 09/19/2005  
 VICTIM 01 Name: STATE OF FLORIDA | Home Phone: ( )  
 Address: , WEST PALM BEACH FL 33406

Officer Assigned: WISNIEWSKI | ID Number: 929 | Signature/Date:  
 Supervisor Signature:

**NARRATIVE CONTINUATION**

**FLO 504200**

**PALM BEACH COUNTY SCHOOL DISTRICT POLICE**

**Case:** 05-2668  
**Investigator:** Wisniewski  
**Reported Date:** 9/19/05 - 1020 Hours

On September 19, 2005 while working as a school police officer for Palm Beach County School District, at Christa McAuliffe MS, 6500 Le Chalet Blvd Boynton Beach, FL 33437, I was notified by 8<sup>th</sup> grade assistant principal Phyllis Kabinoff that a student may have a pocket knife in his possession. The student [REDACTED] was then brought to the office and 7<sup>th</sup> grade AP, Paul Sirota then searched [REDACTED]. He did not have the knife and I spoke with two other students, who advised me that [REDACTED] had a green handled with a silver blade knife, open, in his hand, chasing student [REDACTED] with it. This incident took place before staff had gone outside and it occurred near the bus loop. [REDACTED] advised me that the didn't know why [REDACTED] had been chasing him with a knife but it made him afraid and he told Mr. Golden about the incident, I asked [REDACTED] if [REDACTED] said anything while he was being chased and he said he didn't hear anything because as soon as he saw the knife he ran away. I also spoke with witness, student [REDACTED] who advised me that [REDACTED] had the knife and was chasing Boshier with it. She didn't know if he meant to hurt him and she told [REDACTED] to put it away, because he could get into trouble with it. [REDACTED] told her that he was going to bring it to Mr. Harris's portable for safekeeping.

I then walked to Mr. Harris's portable, which is in school suspension portable and spoke with Mr. Harris. I asked him if [REDACTED] had visited him that morning as school opened? He said, yes. I then asked him if [REDACTED] had given him anything to hold and he said, yes. [REDACTED] had brought him something to hold until the end of the day because he forgot that he had it in his backpack. I asked him if it was a green, handled knife and he said yes. Mr. Harris then gave me a green handled, fly type knife with a silver blade. I then advised the assistant principals and arrested [REDACTED] for possession of weapon on school grounds. FSS 790.115.

While in my custody, with AP Mrs. Kabinoff present, I read [REDACTED] his Miranda rights. He said he understood them and signed the paperwork. I then asked him if the knife belong to him and said it was his knife and he forgot it in his backpack. He then said he brought it to Mr. Harris's portable to hold it until the end of the day, so he could give it to his mother or father. He also stated, that he didn't chase him.

Officer Saxe then transported [REDACTED] to JAC and the knife was turned over to Lt. BK Davis.



THE SCHOOL DISTRICT OF PALM BEACH COUNTY  
 SCHOOL POLICE DEPARTMENT  
**Felony Filing Packet**

**SECTION 1: Filing Receipt**

Case number 05-2668

Agency Palm Beach County School Police

Arrest date 09-19-05

Received with reference to DEFENDANT

[REDACTED] [REDACTED] [REDACTED]  
 Last Name First Name MI

DOB 08-28-92

The following in the above style case (check)

- 1. Police Reports
- 2. Witness Lists
- 3. Evidence List
- 4. Probable Cause
- 5. Rough Arrest
- 6. Criminal History
- 7. \_\_\_\_\_
- 8. \_\_\_\_\_
- 9. \_\_\_\_\_
- 10. \_\_\_\_\_

Charged by Officer with

POSSESSION OF WEAPON on School Grounds 790.115  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Charges filed by Assistant State Attorney \_\_\_\_\_

Officer's Name K. Wisniewski

ID number 929

This \_\_\_\_\_ day of \_\_\_\_\_,

By \_\_\_\_\_  
 ASSISTANT STATE ATTORNEY







**SECTION 3: Defendant/Evidence List continued**

**D. Written, recorded, and/or oral statements of co-defendant (use additional pages if necessary).**

1. Person to whom made \_\_\_\_\_

Date of statement \_\_\_\_\_  Written  Taped  Oral

If oral, what did he/she say?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2. Person to whom made \_\_\_\_\_

Date of statement \_\_\_\_\_  Written  Taped  Oral

If oral, what did he/she say?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

E. Grand Jury Testimony  Yes  No

F. Confidential Information  Yes  No

G. Electronic Surveillance  Yes  No

H. Search and/or Seizure  Yes  No

I. Reports of Experts  Yes  No

Name of expert n/a

Nature of testimony \_\_\_\_\_

**J. Papers or objects belonging to or obtained from defendant.**

| ITEMS   | CUSTODIAN     | CHAIN OF CUSTODY                                   |
|---|---------------|--|
| 1. 4 inch fly type knife, green with silver blade | Ofc. Williams | det. Mr. Harris, writer, Lt BK Davis, Ofc Williams |
| 2.  |               |  |
| 3.  |               |  |
| 4.  |               |  |
| 5.  |               |  |
| 6.  |               |  |
| 7.  |               |  |
| 8.  |               |  |
| 9.  |               |  |
| 10.   |               |  |
| 11.   |               |  |
| 12.   |               |  |







(192)

THE SCHOOL DISTRICT OF PALM BEACH COUNTY  
SCHOOL POLICE DEPARTMENT  
**Sworn/Affirmed Statement**

Case No. 05-2668  
Date 9/19/05  
Time \_\_\_\_\_

WITNESS    VICTIM    SUSPECT    OTHER

I, (print full name) Lawrence T Harris \_\_\_\_\_  
BIRTH DATE \_\_\_\_\_

508 49th St \_\_\_\_\_ (561) 841-2444  
HOME STREET ADDRESS HOME TELEPHONE NO.

WPB \_\_\_\_\_ 33407 (561) 374-6600  
CITY ZIP CODE WORK TELEPHONE NO.

voluntarily furnish this sworn/affirmed statement to: Kutsmen \_\_\_\_\_ 929  
OFFICER ID NO.

VICTIM ONLY: I am requesting criminal charges be pressed in this case. Victim's Initials: \_\_\_\_\_

On Monday about 855. A student \_\_\_\_\_  
came to see me about a knife he brought  
to school. He explained to me and the student  
said that he made a mistake by bringing it to school.  
Then he presented it to me. He was not alarmed  
or fearful in any way. I asked him was anyone  
after him. He said he got the knife for a gift  
and he made a mistake. I explained the ramifications  
of the knife even appearing in school. He was  
told of the consequences that he faced and I faced  
with this knife. He was also told that his parent  
would have to pick it up from Administration. I  
explain to him that if he had told Mr Bellas  
about the knife, he had probably reported it  
and school police would be here for the  
knife. At no time did I feel, need to  
or in any danger \_\_\_\_\_  
from this student \_\_\_\_\_  
SIGNATURE, PERSON MAKING STATEMENT (sign every page) DATE 9/19/05

WITNESS SIGNATURE (sign every page) \_\_\_\_\_ DATE \_\_\_\_\_

WITNESS SIGNATURE (sign every page) \_\_\_\_\_ DATE \_\_\_\_\_

Sworn to and subscribed this 19 day of Sept, 2005.  
\_\_\_\_\_  
Notary Public, State of Florida Law Enforcement Officer ID No. 929



THE SCHOOL DISTRICT OF PALM BEACH COUNTY  
SCHOOL POLICE DEPARTMENT

### Sworn/Affirmed Statement

|          |         |
|----------|---------|
| Case No. | 05-2668 |
| Date     | 9/19/05 |
| Time     | 1020    |

WITNESS     VICTIM     SUSPECT     OTHER

|  |                          |                                  |   |
|--|--------------------------|----------------------------------|---|
| NAME OF PERSON MAKING STATEMENT (full name)<br>Kabinoff Phyllis B                                  | BIRTH DATE<br>[REDACTED] | HOME TELEPHONE NUMBER<br>(561) - | WORK TELEPHONE NUMBER<br>(561) 374 6616 |
| ADDRESS (street address, city, state, zip code)<br>6500 Le Chateauf Blvd    Boynton Beach FL 33437 |                          |                                  |   |

I voluntarily furnish this sworn/affirmed statement to:    Officer KWisniewski    ID 929

#### VICTIM ONLY (Parent of Juvenile) :

I am requesting criminal charges.     Yes     No    I further understand that I will be required to appear in court if subpoenaed.

\_\_\_\_\_  
SIGNATURE OF VICTIM (PARENT OF JUVENILE)    DATE

#### STATEMENT

I was called to the office on Monday September 20, 2005 at 9:00  
 right after the bell rang to start school. A staff member, Mr Golden,  
 told me that a student had come to him and told him that [REDACTED]  
 [REDACTED] had a knife and was chasing him in front of the school with  
 it. I had Mr Sirota, the 7th grade assistant principal, to check  
 [REDACTED] for a knife. I checked [REDACTED] bookbag. Officer Katie  
 left my office and found the weapon with Mr Harris.

Phyllis B Kabinoff    9/20/05  
 SIGNATURE PERSON MAKING STATEMENT (sign every page)    DATE

\_\_\_\_\_  
WITNESS SIGNATURE (sign every page)    DATE

\_\_\_\_\_  
WITNESS SIGNATURE (sign every page)    DATE

Sworn to and subscribed this 19 day of Sept, 2005.

KWisniewski    929  
LAW ENFORCEMENT OFFICER    ID NO.

NOTARY PUBLIC, STATE OF FLORIDA



THE SCHOOL DISTRICT OF PALM BEACH COUNTY  
SCHOOL POLICE DEPARTMENT

### Sworn/Affirmed Statement

|          |         |
|----------|---------|
| Case No. | 05-2668 |
| Date     | 9/19/05 |
| Time     | 1020    |

WITNESS   
 VICTIM   
 SUSPECT   
 OTHER

|   |            |                       |                       |
|---|------------|-----------------------|-----------------------|
| NAME OF PERSON MAKING STATEMENT (full name)     | BIRTH DATE | HOME TELEPHONE NUMBER | WORK TELEPHONE NUMBER |
| [REDACTED]                                      | [REDACTED] | [REDACTED]            | [REDACTED]            |
| ADDRESS (street address, city, state, zip code) |            |                       |                       |
| [REDACTED]                                      |            |                       |                       |

I voluntarily furnish this sworn/affirmed statement to: Officer Kulonen ID 929

#### VICTIM ONLY (Parent of Juvenile) :

I am requesting criminal charges.  Yes  No I further understand that I will be required to appear in court if subpoenaed.

\_\_\_\_\_  
SIGNATURE OF VICTIM (PARENT OF JUVENILE)      DATE

#### STATEMENT

Was chased with knife by [REDACTED]  
[REDACTED] in front of school before school  
around 8:25. Was scared to get hurt so ran to principal.

\_\_\_\_\_  
SIGNATURE, PERSON MAKING STATEMENT (sign every page)      DATE

\_\_\_\_\_  
WITNESS SIGNATURE (sign every page)      DATE

\_\_\_\_\_  
WITNESS SIGNATURE (sign every page)      DATE

Sworn to and subscribed this 19 day of Sept, 2005.

\_\_\_\_\_  
NOTARY PUBLIC, STATE OF FLORIDA      LAW ENFORCEMENT OFFICER      ID NO. 929



THE SCHOOL DISTRICT OF PALM BEACH COUNTY  
SCHOOL POLICE DEPARTMENT

### Sworn/Affirmed Statement

|          |         |
|----------|---------|
| Case No. | 05-2668 |
| Date     | 9/19/05 |
| Time     | 1020    |

WITNESS     VICTIM     SUSPECT     OTHER

|   |            |                       |                       |
|---|------------|-----------------------|-----------------------|
| NAME OF PERSON MAKING STATEMENT (full name)     | BIRTH DATE | HOME TELEPHONE NUMBER | WORK TELEPHONE NUMBER |
| [REDACTED]                                      | [REDACTED] | [REDACTED]            | [REDACTED]            |
| ADDRESS (street address, city, state, zip code) |            |                       |                       |
| [REDACTED]                                      |            |                       |                       |

I voluntarily furnish this sworn/affirmed statement to: Officer \_\_\_\_\_ ID \_\_\_\_\_

#### VICTIM ONLY (Parent of Juvenile) :

I am requesting criminal charges.  Yes  No I further understand that I will be required to appear in court if subpoenaed.

\_\_\_\_\_  
SIGNATURE OF VICTIM (PARENT OF JUVENILE)      DATE

#### STATEMENT

I saw ~~the~~ [REDACTED] with the knife, and told him to put it away. But he didn't listen and he chased after [REDACTED] with it. It happened around 8:20, & I heard him say that he was going to keep it w/ Mr. Harris.

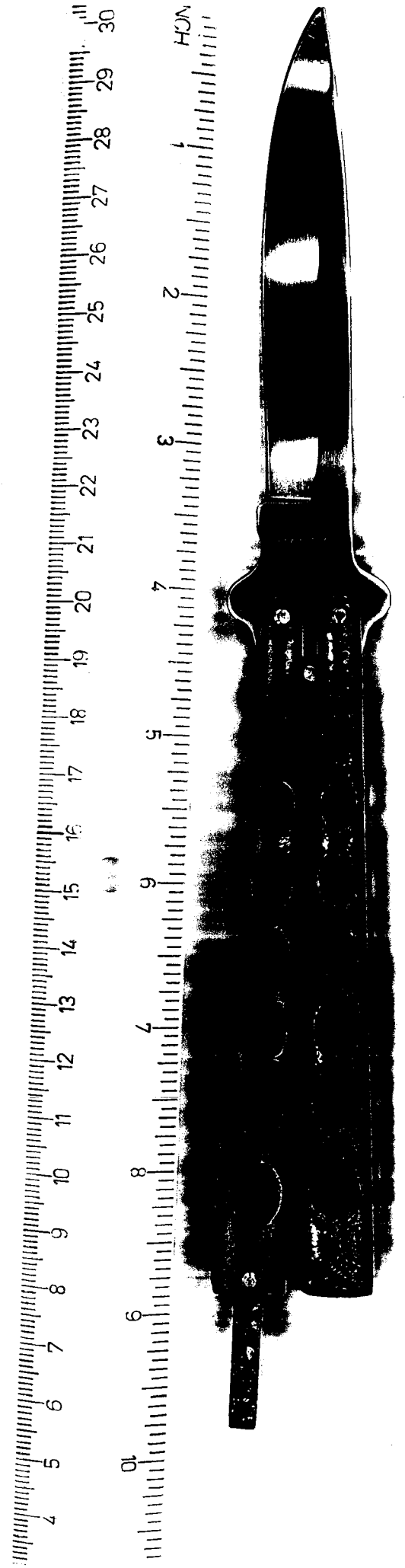
|                                     |         |  |         |
|-------------------------------------|---------|--|---------|
| [REDACTED]                          | 9/19/05 | [REDACTED]   | 9/19/05 |
| WITNESS SIGNATURE (sign every page) | DATE    | SIGNATURE, PERSON MAKING STATEMENT (sign every page) | DATE    |
| [REDACTED]                          | 9/19/05 | [REDACTED]   | 9/19/05 |
| WITNESS SIGNATURE (sign every page) | DATE    | WITNESS SIGNATURE (sign every page)                  | DATE    |

Sworn to and subscribed this 19 day of Sept, 2005.

\_\_\_\_\_  
NOTARY PUBLIC, STATE OF FLORIDA      1 Kelso 929  
LAW ENFORCEMENT OFFICER      ID NO.



05-2668  
de Wisniewski





THE SCHOOL DISTRICT OF PALM BEACH COUNTY  
SCHOOL POLICE DEPARTMENT

# Miranda Rights

|          |                |
|----------|----------------|
| Case No. | 05-2668        |
| Date     | 9/19/05 (1020) |
| Time     | 1020           |

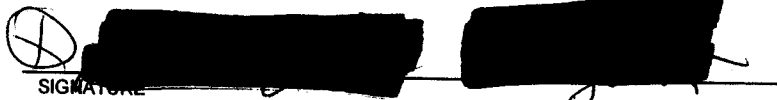
I am required to warn you before you make any statement that you have the following constitutional rights...

1. You have the right to remain silent and not answer any questions.
2. Any statement you make must be freely and voluntarily given.
3. You have the right to the presence and representation of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford an attorney, you are entitled to the presence and representation of a court appointed lawyer before you make any statement and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

I have been advised of my Miranda Rights and I understand them.

*Me han avisado de mis derechos Miranda y los entiendo.*

*Yo te ban m eksplikasyon sou dwa Miranda mwen genyen, epi mwen konprann yo.*

  
SIGNATURE  
FIRMA  
SIYATI

9/19/05  
DATE  
FECHA  
DAT

Police Officer W. W. W.  
Policia  
Ofisye Polis

I.D. No 929  
N° de Identidad  
Nimewo Idantite

Location 6500 Le Chalet Blvd Baynton Beach FL 33437  
Lugar de entrevista  
Kote konvèsasyon an te fet

Witness   
Testigo  
Temwen

Witness  
Testigo  
Temwen



THE SCHOOL DISTRICT OF PALM BEACH COUNTY SCHOOL POLICE  
YOUTH COURT

Referral

CASE NUMBER:  
05-2668A

|   |                              |
|---|------------------------------|
| DEFENDANT:<br>[REDACTED]                            | DATE OF BIRTH:<br>[REDACTED] |
| CHARGE(S):<br>POSSESSION OF WEAPON ON SCHOOL CAMPUS | DATE CHARGED:<br>9 19 1 2005 |
| CHARGE(S):  | DATE CHARGED:<br>/ /         |
| CHARGE(S):  | DATE CHARGED:<br>/ /         |

Referral By:

|   |                            |
|---|----------------------------|
| REFERRING AGENCY REPRESENTATIVE:<br>OFFICER WISNIEWSKI #929 | REFERRING AGENCY:<br>PBSDP |
|---|----------------------------|

1. Was juvenile accepted into the Youth Court Program?  YES  NO

Reason for Decline:

- Prior Delinquency/Criminal Charge
- Failed to meet Criteria
- Victim declines defendant's participation

Other THE DEFENDANT WAS TRANSPORTED TO THE JAC

2. Did juvenile complete the Youth Court Program?  YES  NO

Reason for Non-completion:

- Failed to Complete Sanctions:
  - Community Service Hours
  - School Attendance
  - Curfew
  - Essay/Letter of Apology
  - Counseling
  - Jury Duty
  - Other (explain) \_\_\_\_\_

[Signature]  
SIGNATURE OF YOUTH COURT OFFICER

9/27/05  
DATE

JACK DELONCH  
PRINTED NAME OF YOUTH COURT OFFICER

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

1. Arrest 3. Request for Warrant 1 Juvenile   
2. N.T.A. 4. Request for Capias

|  |   |  |  |
|--|---|--|--|
| OBTS Number  | Agency ORI Number<br>FLO 5 0 4 2 0 0  | Agency Name<br>PALM BEACH COUNTY SCHOOL DISTRICT POLICE                                    | Agency Report Number<br>9 9 - 0 5 - 2 6 6 8                                |
| Change Type<br>Check as many as apply  | <input checked="" type="checkbox"/> 1. Felony<br><input type="checkbox"/> 2. Traffic Felony     | <input type="checkbox"/> 3. Misdemeanor<br><input type="checkbox"/> 4. Traffic Misdemeanor | <input type="checkbox"/> 5. Ordinance<br><input type="checkbox"/> 6. Other |
| Location of Arrest (Including Name of Business)<br>Christa McAuliffe MS 6500 Le chalet Blvd Boynton Beach Fl | Weapon Seized/Type<br><input checked="" type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No | Multiple Clearance Indicator<br>0 1  | Location of Offense (Business Name, Address)<br>same                       |
| Date of Arrest<br>0 9 / 0 5  | Time of Arrest<br>1 0 2 0   | Booking Date   | Booking Time   |
| Jail Date  | Jail Time   | Location of Vehicle<br>none  |  |

|   |  |  |   |
|---|--|--|---|
| Name (Last, First, Middle)  | Alias (Name, DOB, Social Security #, Etc.) |  |   |
| Race<br>W - White<br>B - Black  | Sex  | Date of Birth  | Build   |
| Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) | Marital Status<br>S                        | Religion<br>Cath   | Indication of:<br>Alcohol Influence<br>Drug Influence |
| Local Address (Street, Apt. Number) (City) (State) (Zip)                      | Phone                                      | Residence Type:<br>1. City 3. Florida<br>2. County 4. Out of State 2 |   |
| Permanent Address (Street, Apt. Number) (City) (State) (Zip)                  | Phone                                      | Address Source<br>school records                                     |   |
| Business Address (Name, Street) (City) (State) (Zip)                          | Phone                                      | Occupation<br>Student ID #   |   |
| D/L Number, State   | Social Security Number                     | INS Number   | Place of Birth  |

|   |      |     |               |  |   |
|---|------|-----|---------------|--|---|
| Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | <input type="checkbox"/> 1. Arrested<br><input type="checkbox"/> 2. At Large | <input type="checkbox"/> 3. Felony<br><input type="checkbox"/> 4. Misdemeanor<br><input type="checkbox"/> 5. Juvenile |
| Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | <input type="checkbox"/> 1. Arrested<br><input type="checkbox"/> 2. At Large | <input type="checkbox"/> 3. Felony<br><input type="checkbox"/> 4. Misdemeanor<br><input type="checkbox"/> 5. Juvenile |

|   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Parent<br><input type="checkbox"/> Legal Custodian<br><input type="checkbox"/> Other:   | Name (Last) (First) (Middle)            | Residence Phone   |
| Address (Street, Apt. Number) (City) (State) (Zip)  | Business Phone                          |   |
| Notified by: (Name)<br>Ofc Wisniewski   | Date<br>09-19-05                        | Time<br>1035  |
| Released To: (Name)<br>Juvenile Assessment Center   | Relationship<br>Intake                  | Juvenile Disposition<br>1. Handled/Processed within Dept. and Released<br>2. TOT HRS/CYF<br>3. Incarcerated 2 |
| 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.<br><input type="checkbox"/> Yes, by: (Name) <input checked="" type="checkbox"/> No: (Reason) | School Attended<br>Christa McAuliffe MS | Grade<br>8  |
| Property Crime?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  | Description of Property                 | Value of Property   |

|   |                                 |   |   |  |                       |                                       |   |  |  |                        |
|---|---------------------------------|---|---|--|-----------------------|---------------------------------------|---|--|--|------------------------|
| Drug Activity<br>N. N/A<br>P. Possess                     | S. Sell<br>B. Buy<br>T. Traffic | R. Smuggle<br>D. Deliver<br>E. Use                                      | K. Dispense/<br>Distribute                          | M. Manufacture/<br>Produce/<br>Cultivate | Z. Other              | Drug Type<br>N. N/A<br>A. Amphetamine | B. Barbiturate<br>C. Cocaine<br>E. Heroin | H. Hallucinogen<br>M. Marijuana<br>O. Opium/Deriv. | P. Paraphernalia/<br>Equipment<br>S. Synthetic | U. Unknown<br>Z. Other |
| Charge Description<br>Possession Weapon on School Grounds | Counts<br>1                     | <input checked="" type="checkbox"/> FSS<br><input type="checkbox"/> ORD | Statute Violation Number<br>7 9 1 0 1 - 1 1 1 5 ( ) | Violation of ORD #                       | Drug Activity<br>none | Drug Type<br>none                     | Amount / Unit<br>none                     | Offense #  | Warrant / Capias Number                        | Bond                   |
| Charge Description  | Counts                          | <input type="checkbox"/> FSS<br><input type="checkbox"/> ORD            | Statute Violation Number                            | Violation of ORD #                       | Drug Activity         | Drug Type                             | Amount / Unit                             | Offense #  | Warrant / Capias Number                        | Bond                   |
| Charge Description  | Counts                          | <input type="checkbox"/> FSS<br><input type="checkbox"/> ORD            | Statute Violation Number                            | Violation of ORD #                       | Drug Activity         | Drug Type                             | Amount / Unit                             | Offense #  | Warrant / Capias Number                        | Bond                   |
| Charge Description  | Counts                          | <input type="checkbox"/> FSS<br><input type="checkbox"/> ORD            | Statute Violation Number                            | Violation of ORD #                       | Drug Activity         | Drug Type                             | Amount / Unit                             | Offense #  | Warrant / Capias Number                        | Bond                   |

|   |   |
|---|---|
| <input type="checkbox"/> Mandatory Appearance in Court  | Location (Court, Room Number, Address)  |
|   | Month Day Year Time <input type="checkbox"/> A.M. <input type="checkbox"/> P.M. |
| I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNED 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 Name:   | Signature of Arresting Officer<br>x [Signature]      | Name Verification (Printed by Arrested) (PRINT) |
| <input type="checkbox"/> Dangerous<br><input type="checkbox"/> Suicidal     | Name of Arresting Officer (Print)<br>Ofc. Wisniewski | ID #<br>929                                     |
| <input type="checkbox"/> Resisted Arrest<br><input type="checkbox"/> Other: | Intake Deputy ID #                                   | Agency<br>School Police                         |
| Transporting Officer ID #<br>Ofc. Saxe 748                                  | Witness here if subject signed with an "X"           | PAGE<br>od 1                                    |

|       |  |   |   |
|-------|--|---|---|
| ADMIN | Agency ORI Number<br>FL0 5 0 4 2 0 0   | Agency Name<br>PALM BEACH COUNTY SCHOOL DISTRICT POLICE | Agency Report Number<br>9 9 - 0 5 - 2 6 6 8 |
|       | Change Type<br>Check as many as apply<br><input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance<br><input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other |   | Special Notes                               |

|     |  |       |      |     |               |
|-----|--|-------|------|-----|---------------|
| DEF | Name (Last, First, Middle)<br>[REDACTED] | Alias | Race | Sex | Date of Birth |
|-----|--|-------|------|-----|---------------|

|        |   |                    |
|--------|---|--------------------|
| CHARGE | Charge Description<br>Possession Weapon on School Grounds | Charge Description |
|        | Charge Description  | Charge Description |

|        |  |                          |                |               |
|--------|--|--------------------------|----------------|---------------|
| VICTIM | Victim's Name (Last, First, Middle)<br>Christa McAuliffe MS                                      | Race                     | Sex            | Date of Birth |
|        | Local Address (Street, Apt. Number) (City) (State) (Zip)<br>6500 Le Chalet Blvd Boynton Beach Fl | Phone ( ) - ( ) - ( )    | Address Source |               |
|        | Business Address (Name, Street) (City) (State) (Zip)<br>6500 Le Chalet Blvd Boynton Beach Fl     | Phone ( 561 ) 374 - 6600 | 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...

committed the below acts in my presence.     was observed by \_\_\_\_\_ who told \_\_\_\_\_ that he/she saw the arrested person commit the below acts.

confessed to \_\_\_\_\_ admitting to the below facts.     was found to have committed the below acts, resulting from my (described) investigation.


On the 19 day of September 20 05 at 1020  A.M.  P.M. (Specifically include facts constituting cause for arrest.)

On September 19, 2005, while working as a school police officer for Palm Beach County School District, at Christa McAuliffe MS, 6500 Le Chalet Blvd Boynton Beach FL 33437, I was notified by 8th grade assistant principal Phyllis Kabinoff that a student may have a pocket knife in his possession. The student [REDACTED] was then brought to the office and 7th grade AP, Paul Sirota then searched [REDACTED]. He did not have the knife and I spoke with two other students, who advised me that [REDACTED] had a green handled with a silver blade knife, open, in his hand, chasing student [REDACTED] with it. This incident took place before staff had gone outside and it occurred near the bus loop. [REDACTED] advised me that the didn't know why [REDACTED] had been chasing him with a knife but it made him afraid and he told Mr Golden about the incident. I asked [REDACTED] if [REDACTED] said anything while he was being chased and he said he didn't hear anything because as soon as he saw the knife he ran away. I also spoke with witness, student [REDACTED] who advised me that [REDACTED] had the knife and was chasing [REDACTED] with it. She didn't know if he meant to hurt him and she told [REDACTED] to put it away because he could get into trouble with it. [REDACTED] told her that he was going to bring it to Mr. Harris's portable for safe keeping.

I then walked to Mr. Harris's portable which is the in school suspension portable and spoke with Mr. Harris. I asked him if [REDACTED] had visited him that morning as school opened? He said, "yes." I then asked him if [REDACTED] had given him anything to hold and he said, "yes, [REDACTED] had brought him something to hold until the end of the day because he forgot that he had it in his backpack." I asked him if it was a green, handled knife and he said yes. Mr. Harris then gave me a green handled, fly type knife with a silver blade. I then advised the assistant principals and arrested [REDACTED] for Possession Weapon on School Grounds. FSS 790.115.

While in my custody, with assistant principal Mrs. Kabinoff present, I read [REDACTED] his Miranda Rights. He said he understood them and signed the paperwork. I then asked him if the knife belong to him and he said, "it was his knife and he forgot it in his backpack. He then said he brought it to Mr. Harris's portable to hold it until the end of the day, so he could give it to his mother or father. He also stated, that he didn't chase him."

[REDACTED] was then transported to JAC by Officer Saxe and the knife was turned over to Lt BK Davis.

|                |   |  |
|----------------|---|--|
| ADMINISTRATIVE | SWORN AND SUBSCRIBED BEFORE ME                                  |  |
|                | NOTARY PUBLIC / CLERK OF COURT / POLICE OFFICER (F.S.S. 117.10) | SIGNATURE OF ARRESTING / INVESTIGATING OFFICER                                       |
|                | September 20, 2005  | K. Wisniewski  |
|                | DATE  | NAME OF OFFICER (PLEASE PRINT)   |
|                | September 19, 2005  | September 19, 2005   |
|                | DATE  | DATE   |
|                |   | PAGE 1 OF 1  |

PANEL: \_\_\_\_\_

A03. DEMOGRAPHICS

YEAR: 06

Thursday September 22, 2005 4:48 pm

STDT: [REDACTED]

| LAST       | APP FIRST  | MIDDLE     | AKA | FORMER |
|------------|------------|------------|-----|--------|
| [REDACTED] | [REDACTED] | [REDACTED] |     |        |

| RES NBR    | DR | STREET     | TYPE       | PD         | APT/BLDG | CITY       | ST         | ZIP+4      |
|------------|----|------------|------------|------------|----------|------------|------------|------------|
| [REDACTED] |    | [REDACTED] | [REDACTED] | [REDACTED] |          | [REDACTED] | [REDACTED] | [REDACTED] |

| MLG NBR | DR | STREET | TYPE | PD | APT/BLDG | CITY | ST | ZIP+4 |
|---------|----|--------|------|----|----------|------|----|-------|
|         |    |        |      |    |          |      |    |       |

| S R | DOB        | BIRTH CITY | ST         | VER | PHONE      | PUB | MIL | SUMMER | ORIG   | SAC  | SCHL2 |
|-----|------------|------------|------------|-----|------------|-----|-----|--------|--------|------|-------|
| M W | [REDACTED] | [REDACTED] | [REDACTED] | 1   | [REDACTED] | Y   |     |        | 082097 | 245A |       |

| ENT | DATE   | SCHL | GR | OD | CL | AT | W/D | DATE | PR | PF | SSN        | EXTRNL     | NBR | PC | PS | PD |
|-----|--------|------|----|----|----|----|-----|------|----|----|------------|------------|-----|----|----|----|
| R02 | 082305 | 1821 | 08 |    | 01 | Y  |     |      |    |    | [REDACTED] | [REDACTED] |     | US | FL | 50 |

| LNG | PLG | COB | SURVEY | STAT | CAT | LEP | RES | EN:DS | SCHL | C1:B-H-M-N | CH2 | EHA | D/B | ST:C | M | EX  |
|-----|-----|-----|--------|------|-----|-----|-----|-------|------|------------|-----|-----|-----|------|---|-----|
| EN  | EN  | US  | 073097 |      |     | ZZ  | 3   |       |      | NNNN       | NN  | NN  | NN  |      |   | NNZ |

PF1=HELP 3=EXIT 7=BKWD 8=FWD 12=ESCAPE

RECORD IS DISPLAYED...NEXT?

TERML: Z334