

FCIC/NCIC CHECK  YES  NO

ARREST REPORT / NOTICE TO APPEAR

WALTON COUNTY SHERIFF

REPORT TYPE  ARREST  NOTICE TO APPEAR

ORI NUMBER

FL0660000

CHARGE TYPES  FELONY  MISDEMEANOR  ORDINANCE  TRAFFIC FELONY  TRAFFIC MISDEMEANOR  OTHER

AGENCY REPORT NUMBER 2016-00054353

LOCATION OF ARREST 362 Bob McCaskill DR DEFUNIAK SPRINGS

LOCATION OF OFFENSE 622 Paradise Island DR DEFUNIAK SPRINGS

DATE AND TIME OF ARREST 06/13/2016 18:00

OFFENSE DATE AND TIME 06/06/2016 18:00

JACKET TYPE Adult NAME (LAST, FIRST, MIDDLE SUFFIX) Gray, Paula Jane DOB 2/2/1957 AGE 59 SEX Female

RACE White HEIGHT 5'5 WEIGHT 135 HAIR COLOR Brown EYE COLOR Brown COMPLEXION Light BUILD Meduim

LOCAL ADDRESS (STREET, CITY, STATE, ZIP) 622 PARADISE ISLAND DR DEFUNIAK SPRINGS, FL 32433 PHONE (850)520-4253 NTA THUMB PRINT

PERMANENT ADDRESS (STREET, CITY, STATE, ZIP) PHONE

BUSINESS NAME AND ADDRESS (OR PARENT INFO IF JUVENILE) OCCUPATION- Unemployed PHONE

SCARS, MARKS TATTOOS INDICATION OF ALCOHOL INFLUENCE: No DRUG INFLUENCE: No

DL NUMBER/STATE SOCIAL SECURITY PLACE OF BIRTH CITIZENSHIP U.S. Citizen

CHARGE DESCRIPTION Child Neglect WO Great Bodily Harm WARRANT NUMBER 2016-54353 COUNTS 1  F.S.  ORD STATUTE/ORD VIOLATION CODE 827.03.2d

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The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe the above named Defendant committed the following violation of law: On the 13 day of June, 2016 at 6:00  A.M.  P.M. (Specifically include facts constituting cause for arrest.)

On 06/13/2016 I made contact with the defendant, Paula Gray, at 362 Bob McCaskill Drive. I advised dispatch of this and they confirmed the warrant for Child Neglect was active and in hand. She was transported to the Walton County Jail without incident.

This did occur in Walton County Florida.

CONTINUED FOR:  NARRATIVE  CHARGES

MANDATORY APPEARANCE IN COURT LOCATION (COURT, ROOM NUMBER, ADDRESS) COURT DATE/TIME MONTH DAY YEAR TIME  A.M.  P.M.

I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE DESCRIBED. 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 OR A TAKE INTO CUSTODY ORDER SHALL BE ISSUED.

SIGNATURE OF DEFENDANT/JUVENILE SIGNATURE OF JUVENILE PARENT/CUSTODIAN

ADMINISTRATIVE I SWEAR/AFFIRM THE ABOVE AND ATTACHED STATEMENTS ARE TRUE AND CORRECT OFFICER'S/COMPLAINANT'S SIGNATURE Gibson, Justin Randall 06/13/2016 ATTESTING OFFICER Webster, Cory J. 06/13/2016