

ARREST REPORT

WALTON COUNTY SHERIFFS OFFICE

REPORT NO: **WCSO14ARR004692**

Signature (Arresting Officer) _____ Name _____ ID/SSN _____

Subscribed and sworn to (or affirmed) before me this 8 day of September A.D., 2014 by _____

who is personally known to me or has produced _____ as identification.

Signature _____ Notary Public _____ LEO _____ CO _____

Commission No: _____ My Commission Expires _____

[PHYSICAL EVIDENCE] [NO PHYSICAL EVIDENCE LISTED]

[ARREST INFORMATION]

Arrested	Residency	Injured	Extent of Injury			Resist
9/5/2014	15:42 Within jurisdiction					
		Arrested Prior	Arrest Jurisdiction	Alcohol	Drugs	
No.	Di	Street	A/L	City	ST	Zip
255	N	JACKSON ST		FREEMPORT	FL	32439
Arresting Officer			Unit	(GEO)	2 - 2B - FREE -	Lat / Long
C421	SUNDAY, STEPHEN R.		CLERK CID			30.49835 / -86.12879
Reporting Officer			Unit	Original Offense Jurisdiction		
C421	SUNDAY, STEPHEN R.		CLERK CID	WCSO		
Forward to for approval						
STEVE SUNDAY						

Bond Set by LEO at Time of Arrest & Booking: \$0.00

() None () Pro

() ROR

() Cash

() Any

() PreTrial If Qualify

Bond Set by Judge () None () ROR/Sign

() Cash () PTR

() Any

() Pro

() PtrIQ

()Purge _____

()SC _____

Return Court: _____ Date: _____ Time: _____

Instructions: _____

[DISPOSITION]

<u>Disposition Type</u>	<u>Release Type</u>	<u>Other Desc</u>
<u>Release Date</u>	<u>Release Time</u>	<u>Release Officer</u>
		<u>Printed No</u>
		<u>Printed By</u>

IN THE CIRCUIT/COUNTY COURT IN THE FIRST JUDICIAL CIRCUIT IN AND FOR WALTON COUNTY, FLORIDA

ARREST REPORT

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Released To _____

Court DispositionType

Court Disposition Description

[ADDITIONAL PERSONS]

[WITNESS A]

* JUVENILE ON DATE OF ARREST *

* JUVENILE ON DATE OF OCCURRENCE *

Last First Middle Title Race Sex DOB Age Hgt Wgt

[Redacted witness information]

[VICTIM]

* JUVENILE ON DATE OF ARREST *

* JUVENILE ON DATE OF OCCURRENCE *

Last First Middle Title Race Sex DOB Age Hgt Wgt

[Redacted victim information]

[OTHER]

Last First Middle Title Race Sex DOB Age Hgt Wgt

[Redacted other information]

WITNESS STATEMENT

Last First Middle Title R S DOB
BARRETT VINCENT EDWARD W M 11/18/1992

I hereby swear (or affirm) that the facts established on this affidavit are true and correct to the best of my knowledge and belief.

ID / SSN BARRETT , VINCENT EDWARD

WITNESS STATEMENT

IN THE CIRCUIT/COUNTY COURT IN THE FIRST JUDICIAL CIRCUIT IN AND FOR WALTON
COUNTY, FLORIDA

ARREST REPORT

WALTON COUNTY SHERIFFS OFFICE

REPORT NO: WCSO14ARR004692

Last First Middle Title R S DOB

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I hereby swear (or affirm) that the facts established on this affidavit are true and correct to the best of my knowledge and belief.

ID / SSN

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WITNESS STATEMENT

Last First Middle Title R S DOB

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I hereby swear (or affirm) that the facts established on this affidavit are true and correct to the best of my knowledge and belief.

ID / SSN

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WITNESS STATEMENT

Last First Middle Title R S DOB

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I hereby swear (or affirm) that the facts established on this affidavit are true and correct to the best of my knowledge and belief.

ID / SSN

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COURT DISPOSITION:

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(right index)

- No Bill / Petition Issue Warrant Prosecution Approved

Signature of Assistant State Attorney

Date