

ARREST REPORT / NOTICE TO APPEAR

WALTON COUNTY SHERIFF

REPORT TYPE ARREST **Adult**
 NOTICE TO APPEAR

ADMINISTRATIVE

ORI NUMBER
FL0660000

CHARGE TYPES FELONY MISDEMEANOR ORDINANCE
 TRAFFIC FELONY TRAFFIC MISDEMEANOR OTHER

LOCATION OF ARREST
119 Jim Cotton DR DEFUNIAK SPRINGS

DATE AND TIME OF ARREST
02/24/2016 11:00

AGENCY REPORT NUMBER
2016-00017039

LOCATION OF OFFENSE
119 Jim Cotton DR DEFUNIAK SPRINGS

OFFENSE DATE AND TIME
02/24/2016 11:00

DEFENDANT

JACKET TYPE **Adult** NAME (LAST, FIRST, MIDDLE SUFFIX) **Herndon, Tony A** DOB **02/09/1971** AGE **45** SEX **Male**

RACE **White** HEIGHT **6'0** WEIGHT **320** HAIR COLOR **Brown** EYE COLOR **Blue** COMPLEXION **Fair** BUILD **Obese**

LOCAL ADDRESS (STREET, CITY, STATE, ZIP) **119 Jim Cotton DR DEFUNIAK SPRINGS, FL 32433** PHONE _____ 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: **Not Applicable** DRUG INFLUENCE: **Not Applicable**

DL NUMBER/STATE **H653801710490/FL** SOCIAL SECURITY _____ PLACE OF BIRTH **Germany** CITIZENSHIP **U.S. Citizen**

CHARGES

CHARGE DESCRIPTION	WARRANT NUMBER	COUNTS	<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> ORD	STATUTE/ORD VIOLATION CODE
Possession Of Controlled Substance		1	<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> ORD	893.13
Poss/Use Drug Parapernalia		1	<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> ORD	893.147.1
Marijuana - Possession <20 Gr		1	<input checked="" type="checkbox"/> F.S. <input type="checkbox"/> ORD	893.13.6b
			<input type="checkbox"/> F.S. <input type="checkbox"/> ORD	
			<input type="checkbox"/> F.S. <input type="checkbox"/> ORD	
			<input type="checkbox"/> F.S. <input type="checkbox"/> ORD	

PROBABLE CAUSE STATEMENT

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 **24** day of **February, 2016** at **1100** A.M. P.M.
 (Specifically include facts constituting cause for arrest.)

On 2/24/16, Walton County Sheriff's Office Narcotics Unit executed a probable cause search warrant at 119 Jim Cotton Dr Defuniak Springs Fl. During the search of the residence, Investigators located finished product methamphetamine, marijuana and several items of drug paraphernalia inside the residence. The items were located within a Cool Whip container which was sitting on a table in the common area of the residence, near the back door, with other miscellaneous items. Both Herndon and Stanley had equal access to the drugs and paraphernalia. Both the methamphetamine and marijuana were field tested and field tested positive. This offense did occur in Walton County FL and is in violation of FSS 893.13 and 893.147.

NOTICE TO APPEAR

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 **Caraway, Kelly C** **02/24/2016**

ATTESTING OFFICER **Hall, Jason L.** **02/24/2016**