		EIGHTH J	UDIC	HAL	CIRC	UIT		,	JUVEN		NOTICE	I O APPE	AK
GB C		9C# 012	202			268	9 <u>A</u>	AGEN	ICY CASE RE		MBER: <b>4-0117</b> 8	86	
	NAME OF SUBJECT (LAST, FIRST, MI):  WHITE, MICHAEL DARNELL  911 HOME ADDRESS (STREET, APARTMENT NUMBER, ETC.):	ITE, MICHAEL DARNELL  ALIAS/MAIDEN: ALIAS/MAIDEN: ASO243BN 004732											
	3055 NE 28TH DR	E							(352) 534-9514				
D	BUŞİNESS / SCHOOL ADDRESS (STREET, APARTMENT NUMBER, PO BOX, E	ETC.):							TELEPHONE NUMBER: (352) 359-106				4
E											<i></i>	2	
E	RACE: DATE OF BIRTH:	HEIGHT:	1 1				EYE COLOR: COMPLEXI		PLEXION:	ON: BUILD:			
D	BLACK □ ASIAN / ORIENTAL   M   02/01/197	'2 6'02 OCIAL SECURITY NUMB	ER: PHOT			CK PLACE OF BIF		ROW	N M	COUNT	M N	MEDIU INSHIP:	<u>/M</u>
N T	W300544720410 FL	PN NUMBER:		LAGENCY	ORI NUMBI	GAINE	SVIL	LE, E	L,	UNIT	ED STATI		MERICA
'	HOMELESS	T TE MONDE   E				100							
	LOCATION OF ARREST:  2200 NE WALDO RD		- 1	DATE OF ARREST: 08/13/2024		TIME OF ARRES 19:			ATE OF 800 08/13/		TIME OF BOOKING (N		· · · I
	SUBJECT IDENTIFIED BY WHOM (VICTIM, WITNESS, LEO, ETC.):		SUBJECT'S NAME VERIFIED			Y (PHOTO ID, FAMILY MEMBER, KN							
C	WALSH, CASEY #1 (NAME):	DATE OF BIRTH: RA	ACE: S	RN EX:	COURT NUM	MBER:		ARRES			FELONY		UVENILE:
0.00	#2 (NAME):	DATE OF BIRTH: R/	ACE: S	SEX: COURT NU		NOCO.		SWORN COMPLAINT NTA ARRESTED			☐ MISDEMEANOR ☐ TRAFFIC CASE ☐ FELONY		NO UVENILE:
DELF	are formula.		NOL.			·	IC	SWORN COMPLA			MISDEMEANO TRAFFIC CASE	R E	YES NO
Ų	JUVENILE: DISPOSITION: NAME OF PARENT / GUARDIAN (NOT RELEASED TO JAC	Case: 202	24 CF 00	2689 A	() ( <b>42:9 (9:8</b> ) (					כנ	WORK TELEF	SHONE NUM	(BER:
ķ	Issued nta and released  PARENT / GUARDIAN HOME ADDRESS (STREET, APARTMENT #, PO BOX, E	TC: .					STATE:	7	IP CODE:	50	HOME TELEP	w <b>k</b>	IBER:
E	HI (NAME).	000756779 DKt: AF-	388 X	-		_	<u> </u>			7.7	TELEBHONE	MINGER	
	## (NAME):  ADDRESS. **  C. TELEPHONE NUMBER: -  C. C. TELEPHONE NUMBER: -										$\lambda $		
FOS	#2 (NAME): ADDRESS: TELEPHONE NUMBER:												
c	OFFENSE DESCRIPTION:  SALE/POSS W/INTENT SELL/MANUF/DELIVER A  Greense Description:  SALE/POSS W/INTENT SELL/MANUF/DELIVER A  Greense Description:  ARREST D YES D											□ NO	
A R	A CONTROLLED SUBSTANCE TRAFFIC NIA 893-13/1(A)1 TRAFFIC NIA 893-13/1(A)1 TRAFFIC NIA 893-13/1(A)1										RELEASE: YES NO		
Ğ	CAPIAS   NUMBER: 08/13/2024 19:23										\$		
1	VICTIM (NAME): The State Of Florida	NUMBER,	PO BOX, ET	C.):	CITY:				STATE: ZIP CODE:		:		
Ç	OFFENSE DESCRIPTION: POSSESSION OF A CONTROLLED SUBSTANCE	E	<b>IX</b> FELO ☐ MISO			1	STATUTE / ORDINANCE NUMBER:				VICTIM NOTIFICATION: ARREST: ☐ YES ☐ NO RELEASE: ☐ YES ☐ NO		□ NO
AR	☐ WARRANT ☐ JUVENILE PU ORDER ☐ CIVIL ORDER ☐ CITAT	ION DATE OF OFFI		TRAFFIC NTA		893-13/6A   SE:   BAIL AMOUNT:		OUNT:	Ş		VICTIMS TELEPHONE NUMBER:		
G	CAPIAS NUMBER: VICTIM (NAME):	08/13	NI IMPED	19:23 MBER; PO BOX, ETC.):			Cny:				STATE: ZIP CODE:		
2	The State Of Florida		M-MA INCH	NOWDER,		.,	U(11,				JINIC.		
PROS	THE FOLLOWING INCIDENT OCCURRED AT (ADDRESS / LOCATION):  2200 NE WALDO RD	CITY OF:	ESVII	LE				1	NTY OF: LACHI	1 <b>1A</b>		i i	TATE OF: LORIDA
SEC	On the above listed date and t	ime, DEF	was c	bser				a on	a bio	cycle			1
ĮÝ	wanted for Aggravated Stalking prior and was investigated by				11730	). This	s of:	fens	e tool	c pla	ace th	e day	Į.
Ě													
SUM	A witness called to report see While checking the area, DEF w												ock
MAR	of NE Waldo Rd. LEO approached	d DEF in a	mark	ed K	9 pat								
Ÿ	north after being given numero	ous warnin	gs to	sto	р.		DATE	OF APPE	ARANCE:	**********	TIME OF AF	PEARANCE	E Class
N T	TAGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND	INSTRUCTIONS SPECIF	FIED IN THIS	NOTICE	I DEFEND	ANT (SIGNATUR	3E):				I DAT	TE:	- O AM
A	TO APPEAR, WILLFUL REFUSAL TO ACCEPT AND SIGN THIS NOTICE TO A LUNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIV	IPPEAR MAY RESULT IN		ARREST.									
J	SWORN TO AND SUBSCRIBED BEFORE ME THIS:	2024		TO	THE BEST O	BOVE, AND RE	DOE AND	BELIEF.		AND STAT	EMENTS ARE	TRUE AND	CORRECT
RA	SIGNATURE: MALLAS SIGNATURE: SIGNATURE:												
ĮΫ	TITLE: LEO	***************************************		AC	SENCY: GA	INESVILL	E POLI	CE DE	PARTME	NT LE	O ID NUMBER	0992	

Form Date (Revised 1/00)

COURT

STATE ATTORNEY

AGENCY

DEFENDANT

PAGE 1 OF 2

OBT	'S NUMBER:		SUPPLEMENT								SPN NUMBER:				
AG	ENCY ORI NUMBER:	E	EIGHTH JUDICIAL CIRCUIT								AGENCY CASE REPORT NUMBER:				
D	0010100 NAME OF SUBJECT (LAST, FIRST, MI):		02-24-011786												
E	RACE: SEX: DARNEL	L ATE OF BIRTH:		HEIGHT:	WEIGH	T:	JAIL NUMBER:				SO ID / AGENCY	Y ID / NUMBER:			
F	☐ WHITE ☐ AMERICAN INDIAN  ☑ BLACK ☐ ASIAN / ORIENTAL   M	02/01/19		6'02	<u> </u>	<u> 150</u>					<u> </u>	Trei entrone marges.			
1	#3 (NAME):		ADDRES									TELEPHONE NUMBER:			
COUNTE	#4 (NAME):		ADDRESS:									TELEPHONE NUMBER:			
CH	OFFENSE DESCRIPTION: TRAFFICKING IN PHENETHYLAMI	INES	FELONY COMPLETE STATUTE / ORDINAN    MISDEMEANOR   TRAFFIC   NTA   893-135						ROINANCE	NUMBER:	VICTIM NOTIFICATION; ARREST: ☐ YES ☐ NO RELEASE: ☐ YES ☐ NO				
A R G	☐ WARRANT ☐ JUVENILE PU ORDER ☐ CIVIL OF	RDER CITA	•				TIME OF OFFENS	SE: BAIL AMOUNT:				VICTIM'S TELEPHONE NUMBE			
E	NUMBER: VICTIM (NAME):		ADDI	08/13 RESS (STREET, A			19:2 ER, PO BOX, ETC			***************************************		STATE:	ZIP CODE:		
3	The State Of Florida			·		I and I am						LVICTIMA	OTIFICATION		
CH	OFFENSE DESCRIPTION:				- 15	FELON MISDEN	y Meanor IC NTA	COMPLETE	STATUTE / ORDINANCE NUMBER:			VICTIM NOTIFICATION: ARREST: YES NO RELEASE: YES NO			
AR	☐ WARRANT ☐ JUVENILE PU ORDER ☐ CIVIL OR ☐ CAPIAS	RDER CITA	CITATION DATE OF OFF			, (KAPPI	TIME OF OFFENS	L E: BAIL AMOUNT:		<b>T</b> ;		VICTIMS TELEPHONE NUMBER:			
G	NUMBER: VICTIM (NAME):		ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.):						CITY:			STATE:   ZIP CODE:			
				(-1,1004)				·							
CH	•						y Meanor IC   nta	E STATUTE / ORDINANCE NUMBER:			VICTIM NOTIFICATION:  ARREST: ☐ YES ☐ NO  RELEASE: ☐ YES ☐ NO				
ARGE	☐ WARRANT ☐ JUVENILE PU ORDER ☐ CIVIL OF ☐ CAPIAS NUMBER:	RDER CIT/	ATION	DATE OF OFF	ENSE:		TIME OF OFFENSE: BAIL			BAIL AMOUNT:			VICTIM'S TELEPHONE NUMBER:		
-	VICTIM (NAME):		ADDRESS (STREET, APARTMENT N				MBER, PO BOX, ETC.): CITY:			CITY:			ZIP CODE:		
CH				FELON   RAFFI				COMPLETE STATUTE / ORDINAL			NUMBER:	ARREST:	VICTIM NOTIFICATION: ARREST: YES NO RELEASE: YES NO		
ARGE	☐ WARRANT ☐ JUVENILE PU ORDER ☐ CIVIL OF ☐ CAPIAS NUMBER:	RDER CITA							BAIL AMOUN	OUNT: VICTIMS TELEPHONE NUMBER:					
=	VICTIM (NAME):		ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.): CITY:								STATE:	ZIP CODE:			
PROSECUTIVE SUMMARY . CONTINUED	DEF was transported and delivered to the Alachua County Jail.														

**AGENCY** 

☐ JUVENILE ☐ NOTICE TO APPEAR

ARRES □ SWORN COMPLAINT □ HOLD