

ARREST <input checked="" type="checkbox"/> NOTICE TO APPEAR <input type="checkbox"/> AFFIDAVIT <input checked="" type="checkbox"/> C.C. <input type="checkbox"/> ADULT <input type="checkbox"/> JUVENILE <input type="checkbox"/>		Court Case Number: 01-455-CFFA	
(ORI) FL: 1   8   0   2   0   0		Agency Name: FLAGLER BEACH POLICE DEPARTMENT	
FCIC/NCIC Check? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Agency Case Number: 01-4192	
ADDRESS OF ARREST: 111 Avalon Ave, Flagler Beach, FL		Date Arrested: 08/26/01	
DEFENDANT NAME (L.F.M.): MORTON, Lawrence William		Arrested By: G. Williams	
DOB: 04-12-56 Age: 45		A.K.A.: LARRY	
Driver's Lic./ID No.: M635539561320		Sex: M Race: W	
Height: 6'02" Weight: 185 Hair: Brn Eyes: HAZ		State: FL Year Expires: 07	
P.O.B (City, State, Country): Florida		Statement Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Business & Occupation: Laborer		Citizenship: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Address - Mailing/Permanent: 111 Avalon Ave, Flagler Beach, FL		ZIP CODE: 32136-4397	
Address - Local: 111 Avalon Ave, Flagler Beach, FL		RESIDENT PHONE: 321-36-4397	
Address - Other (Employer/School):		BUS/SCHOOL:	
CHARGES		DOMESTIC VIOLENCE? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
Attachments: Affidavit(s) <input type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/>		Total Charges: 1	
#1 Charge: SEXUAL BATTERY ON A CHILD UNDER AGE 12		FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/> FS/ORD <input checked="" type="checkbox"/>	
Citation No: 794.011(2)(A)		Bond: NONE	
#2 Charge:		FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/> FS/ORD <input type="checkbox"/>	
#3 Charge:		FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/> FS/ORD <input type="checkbox"/>	
CO-DEFENDANT		Co-Def #1. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel <input type="checkbox"/> Misd <input type="checkbox"/> Traf <input type="checkbox"/> Ord <input type="checkbox"/> NTA <input type="checkbox"/>	
#1 NAME (L.F.M.):		Co-Def #2. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel <input type="checkbox"/> Misd <input type="checkbox"/> Traf <input type="checkbox"/> Ord <input type="checkbox"/> NTA <input type="checkbox"/>	
#2 NAME (L.F.M.):			
NARRATIVE			
The undersigned certifies and swears that there is probable cause to believe the above-named defendant, on the 26 day of August, 2001, at approximately 11:00 a.m. at 111 AVALON AVE, FLAGLER BEACH, FL within FLAGLER County, violated the law and did then and there:			
BWI: DEFENDANT DID LIE NEXT TO THE VICTIM WHILE SHE WAS SLEEPING IN HIS RESIDENCE, AND PLACE HIS HAND UNDERNEATH HER SHIRT AND RUB HER BREASTS. THE DEFENDANT THEN PLACED HIS HAND INSIDE HER UNDERWEAR AND BEGAN TO VIGOROUSLY RUB THE VAGINAL AREA. DEFENDANT THEN PENETRATED THE VAGINAL WITH A DIGIT (FINGER) AND ON THREE OCCASIONS PLACED THE FINGER INSIDE THE VAGINA, LEAVING IT FOR A FEW SECONDS AND THEN REMOVING IT. VICTIM ADVISED DEFENDANT CUT HER VAGINA INTERIOR CANAL CAUSING PAIN AND DISCOMFORT			
NOTICE TO APPEAR		MANDATORY APPEARANCE <input type="checkbox"/> YOU NEED NOT APPEAR IN COURT BUT MUST COMPLY WITH INSTRUCTIONS ON THE REVERSE SIDE OF YOUR COPY <input type="checkbox"/> FINE, AND COSTS AMOUNT	
I AGREE TO APPEAR IN COURT HEREIN TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE INDICATED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED, OR PAY THE LISTED FINE, I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST WILL BE ISSUED.			
SIGNATURE OF DEFENDANT		SIGNATURE OF JUVENILE PARENT OR CUSTODIAN	
Date		RELATIONSHIP TO JUVENILE	
Sworn to and subscribed before me, the undersigned this 26 day of August, 2001		I swear/affirm the above statements are correct and true	
Name: G. Williams		Notary Public <input type="checkbox"/> Law Enforcement or Corrections Officer <input type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>	
Type of Identification:		OFFICER'S/COMPLAINANT'S SIGNATURE	
OFFICIAL USE ONLY		NAME (PRINTED): G. Williams	
Inmate Number & Facility		ID NUMBER	

01-455-CFFA

STATE VS. Morton Lawrence William | 4-12-56  
Name (L,F,M): | DOB:

FIRST APPEARANCE DATE: 8/27/01

The defendant was advised of his/her rights and furnished a copy of the complaint.  
Defendant ( ) requested and was appointed a Public Defender after being found indigent.  
Defendant ( ) not indigent, has or will retain \_\_\_\_\_ as counsel.  
The Court has examined the sworn complaint and finds:

*Sexual battery on a child 2/12*

CHARGE			
Probable Cause Found	✓		
PC Undet. - 72 hours			
PC Undet. - 96 hours			
Insufficient PC			
BOND SET AT	<i>None</i>		
ROR			
PTR			
Other			

ASA: \_\_\_\_\_ PD *(Signature)*  
Plea: \_\_\_\_\_  
Sentence: \_\_\_\_\_  
Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Type of Supervision:

- ( ) Supervised Release
- ( ) Electronic Monitoring - May require defendant to pay for use of monitoring equipment

Special Conditions:

- ( ) No contact with the alleged victim(s), witness(es), & co-defendant(s)
- ( ) No violent contact with the alleged victim(s)
- ( ) Do not consume illegal drugs
- ( ) Do not consume alcohol
- ( ) Submit to urinalysis tests for illegal drugs and/or alcohol
- ( ) Substance abuse assessment
- ( ) Participation in appropriate substance abuse treatment
- ( ) \_\_\_\_\_

*(Signature)*

Judge

<b>ARREST</b> <input checked="" type="checkbox"/> <b>NOTICE TO APPEAR</b> <input type="checkbox"/> <b>AFFIDAVIT</b> <input type="checkbox"/> <b>C.C.</b> <input type="checkbox"/> <b>ADULT</b> <input checked="" type="checkbox"/> <b>JUVENILE</b> <input type="checkbox"/>		Court Case Number:	
(OR) FL: 1 8 0 0 0 0		Agency Name: FLAGLER COUNTY SHERIFF'S OFFICE	
Agency Case Number: 00254-02		Date Arrested: 01/03/02	
FCIC/NIC Check? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> OBTS # 1801005326		Time of Arrest: 1030	
ADDRESS OF ARREST: PCIF / COURT HOUSE		Arrested By: CPL. T. STAKES	
<b>DEFENDANT</b>		ID Number: C07	
NAME (L.F.M.): MORTON, LAWRENCE WILLIAM		A.K.A.: CARRY	
DOB: 04/12/56		Sex: M Race: W	
Age: 45		State: FL	
Driver's Lic. ID No.: M635-539-56-132-0		Year Expires:	
Height: 6'02"		P.O.B. (City, State, Country): PALATKA, FL	
Weight: 185		Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Hair: BRO		Eyes: HAZ	
Scars, Marks, Tattoos: NONE SEEN		Business & Occupation: SELF	
Address - Mailing/Permanent: 111 AVAICON AVE (STREET, APT. NUMBER)		CITY: FLAGLER BCH (CITY) FL. 32136 (STATE) ZIP CODE 384-439 2057 (RESIDENT PHONE)	
Address - Local: (STREET, APT. NUMBER)		CITY: (CITY) (STATE) ZIP CODE (RESIDENT PHONE)	
Address - Other (Employer/School): (STREET, APT. NUMBER)		CITY: (CITY) (STATE) ZIP CODE (BUS/SCHOOL)	
<b>CHARGES</b>		DOMESTIC VIOLENCE? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Attachments: Affidavit(s) <input type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/> Total Charges:			
#1 Charge: FC CAPIAS # 01000455 CFFA	FEL <input checked="" type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: 800.04	Citation No.: Bond: 25,000.
#2 Charge: FC CAPIAS # 01000456 CFFA	FEL <input checked="" type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: 800.04	Citation No.: Bond: 25,000.
#3 Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No.: Bond:
<b>CO-DEFENDANT</b>		Co-Def #1. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel <input type="checkbox"/> Misd <input type="checkbox"/> Traf <input type="checkbox"/> Ord <input type="checkbox"/> NTA <input type="checkbox"/>	
Co-Def #2. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel <input type="checkbox"/> Misd <input type="checkbox"/> Traf <input type="checkbox"/> Ord <input type="checkbox"/> NTA <input type="checkbox"/>			
#1 NAME (L,F,M):	Race:	Sex:	DOB:
#2 NAME (L,F,M):	Race:	Sex:	DOB:
<b>NARRATIVE</b>			
The undersigned certifies and swears that there is probable cause to believe the above-named defendant, on the 3 day of JAN, 2002, at approximately 1030 a.m. p.m. at PCIF / COURT HOUSE within FLAGLER County, violated the law and did then and there: SUBJECT WAS SERVED WITH (TWO) FLAGLER CAPIAS - REF: LEWD OR LASCIVIOUS MOLESTATION. CASE NUMBERS - 01000456 CFFA AND 01000455 CFFA. EACH CARRY A BOND OF \$25,000.00. CAPIAS SIGNED BY JUDGE K.C. HAMMOND ON 09/28/2001.			
NOTHING FOLLOWS			
<b>NOTICE TO APPEAR</b>		MANDATORY APPEARANCE <input type="checkbox"/> YOU NEED NOT APPEAR IN COURT BUT MUST COMPLY WITH INSTRUCTIONS ON THE REVERSE SIDE OF YOUR COPY <input type="checkbox"/>	
FINE AND COSTS AMOUNT: 00			
I AGREE TO APPEAR IN COURT HEREIN TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE INDICATED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED, OR PAY THE LISTED FINE, I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST WILL BE ISSUED.			
SIGNATURE OF DEFENDANT		SIGNATURE OF JUVENILE PARENT OR CUSTODIAN	
Date		RELATIONSHIP TO JUVENILE	
Sworn to and subscribed before me, the undersigned this 3rd day of January, 2002		I swear/affirm the above statements are correct and true.	
Name: Lt. Henry, CO-03		OFFICER'S/COMPLAINANT'S SIGNATURE	
Notary Public <input type="checkbox"/> Law Enforcement or Corrections Officer <input checked="" type="checkbox"/>		CPL. T.M. STAKES C07	
Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>		NAME (PRINTED) ID NUMBER	
Type of Identification:		Inmate Number & Facility: PCIF - 01-1235	
<b>OFFICIAL USE ONLY</b>			

ARREST  NOTICE TO APPEAR  AFFIDAVIT  C.C.  ADULT  JUVENILE  Court Case Number: 01-456-CFFA

(OR) FL: 180200 Agency Name: FLAGLER BEACH POLICE DEPARTMENT Agency Case Number: 01-4193

FCIC/NCIC Check? Yes  No  OBTS # 1301004626 Date Arrested: 08/26/01 Time of Arrest: 2342  
ADDRESS OF ARREST: 111 Avalon Ave, Flagler Beach, FL Arrested By: J. Williams ID Number: 02

DEFENDANT NAME (L.F.M.): MORTON, LAWRENCE WILLIAM A.K.A.: LARRY Sex: M Race: W  
DOB: 04-12-56 Age: 45 Driver's Lic. ID No.: M635-539-56-137-0 State: FL Year Expires: 07

Height: 6-02 Weight: 185 Hair: BRN Eyes: HAZ P.O.B. (City, State, Country): FLORIDA Statement: Yes  No   
Scars, Marks, Tattoos: Business & Occupation: LABORER Citizenship: Yes  No

Address - Mailing/Permanent (STREET, APT NUMBER) (CITY) (STATE) ZIP CODE RESIDENT PHONE

Address - Local 111 AVALON AV. FLAGLER BCH FL 32136 (STATE) ZIP CODE RESIDENT PHONE (386) 439-2057

Address - Other (Employer/School) (STREET, APT NUMBER) (CITY) (STATE) ZIP CODE BUS/SCHOOL

CHARGES table with columns: CHARGES, DOMESTIC VIOLENCE?, YES, Attachments, Affidavit(s), Statement(s), NTA Schedule, Report, Traffic Infraction(s), Total Charges. Row 1: #1 Charge: LEND AND DISGUISE ON A CHILD, FEL MISD ORD, FS/ORD, Citation No.: 300.04(1), Bond: \$25,000

CO-DEFENDANT table with columns: #1 NAME (L.F.M.), Race, Sex, DOB, Age; #2 NAME (L.F.M.), Race, Sex, DOB, Age

NARRATIVE The undersigned certifies and swears that there is probable cause to believe the above-named defendant, on the day of BETWEEN 08-98 AND 08-99, at approximately UNKNOWN a.m. p.m. at 111 AVALON AV. FLAGLER BCH within FLAGLER County, violated the law and did then and there: TO WIT: DEFENDANT DID LIE DOWN NEXT TO THE VICTIM WHILE SHE WAS SLEEPING AND REACH UNDER HER SHIRT AND BEGAIN TO RUB HER BREASTS. DEFENDANT THEN MOVED HIS HAND UNDER HER UNDERWEAR AND BEGAN TO PLACE HIS DIGIT (FINGER) INSIDE HER VAGINA. THE VICTIM ADVISED THIS CAUSED HER PAIN AND DISCOMFORT AT WHICH TIME SHE SAID "OUCH" AUDIBLY AND THE DEFENDANT SAID "SORRY" AND STOPPED TOUCHING HER.

NOTICE TO APPEAR MANDATORY APPEARANCE  YOU NEED NOT APPEAR IN COURT BUT MUST COMPLY WITH INSTRUCTIONS ON THE REVERSE SIDE OF YOUR COPY  FINE, AND COSTS AMOUNT:

I AGREE TO APPEAR IN COURT HEREIN TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE INDICATED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED, OR PAY THE LISTED FINE, I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST WILL BE ISSUED.

SIGNATURE OF DEFENDANT Date: Sworn to and subscribed before me, the undersigned this 26 day of August, 2001. Name: J. J. Smith, Notary Public 9L. I swear/affirm the above statements are correct and true. Signature of Officer/Complainant: J. Williams, ID Number: 02.

OFFICIAL USE ONLY Inmate Number & Facility:

ARREST <input type="checkbox"/> NOTICE TO APPEAR <input type="checkbox"/> AFFIDAVIT <input type="checkbox"/> C.C. <input type="checkbox"/> ADULT <input type="checkbox"/> JUVENILE <input type="checkbox"/>		Court Case Number:	
(ORI) FL: 1800000	Agency Name: FLAGLER COUNTY SHERIFF'S OFFICE	Agency Case Number: 01-26136	
FCIC/NCIC Check? Yes <input type="checkbox"/> No <input type="checkbox"/>	OBTS # 1801004626	Date Arrested: 8/27/01	Time of Arrest: 0201
ADDRESS OF ARREST: Flagler Co. Inmate Facility		Arrested By: Sgt. J. Hall	ID Number: CO-04
<b>DEFENDANT</b> NAME (L.F.M.): MORTON, Lawrence William		A.K.A.:	Sex: m Race: w
DOB: 4/12/56	Age: 45	Driver's Lic./ID No.: M635539561320	State: FL Year Expires: 07
Height: 602	Weight: 185	Hair: Brown Eyes: Haz	P.O.B. (City, State, Country): Florida
Scars, Marks, Tattoos:	Business & Occupation:		Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>
Address - Mailing/Permanent (STREET, APT NUMBER): 111 AVALON LANE AVE		(CITY): Flagler Bch FL (STATE): FL	ZIP CODE: 32136 RESIDENT PHONE: 439-2057
Address - Local (STREET, APT NUMBER):		(CITY):	(STATE): ZIP CODE: RESIDENT PHONE:
Address - Other (Employer/School) (STREET, APT. NUMBER):		(CITY):	(STATE): ZIP CODE: BUS/SCHOOL:

<b>CHARGES</b>		DOMESTIC VIOLENCE? YES <input type="checkbox"/>	Attachments: Affidavit(s) <input type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/>	Total Charges: 4
#1	Charge: WFT Ref. Lewd/Lasc. Asslt on Child	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/> FS/ORD <input type="checkbox"/>	800.04(1)	Citation No.: Bond: 25000-
#2	Charge: WFT Ref. Lewd/Lasc Asslt on Child	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/> FS/ORD <input type="checkbox"/>	800.04(1)	Citation No.: Bond: 25000-
#3	Charge: WFT Ref. Lewd/Lasc Asslt on Child	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/> FS/ORD <input type="checkbox"/>	800.04(1)	Citation No.: Bond: 25000-

<b>CO-DEFENDANT</b>		Co-Def #1. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel <input type="checkbox"/> Misd <input type="checkbox"/> Traf <input type="checkbox"/> Ord <input type="checkbox"/> NTA <input type="checkbox"/>	Co-Def #2. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel <input type="checkbox"/> Misd <input type="checkbox"/> Traf <input type="checkbox"/> Ord <input type="checkbox"/> NTA <input type="checkbox"/>
#1 NAME (L,F,M):	Race:	Sex:	DOB:
#2 NAME (L,F,M):	Race:	Sex:	DOB:

**NARRATIVE**

The undersigned certifies and swears that there is probable cause to believe the above-named defendant, on the 26 day of Aug, 2001, at approximately 2342 a.m. at 111 AVALON AVE within Flagler County, violated the law and did then and there arrested by FAPD (Parrish) and transported to the Flagler Co. Inmate Facility where he was served with three (3) warrants Ref Lewd or Lascivious ASSAULT upon a child and one (1) WARRANT Ref Sexual Battery. Each warrant signed by Judge S.B. ATTACK on 26 Aug. 2001.

<b>NOTICE TO APPEAR</b>	MANDATORY APPEARANCE <input type="checkbox"/>	YOU NEED NOT APPEAR IN COURT BUT MUST COMPLY WITH INSTRUCTIONS ON THE REVERSE SIDE OF YOUR COPY <input type="checkbox"/>	FINE, AND COSTS AMOUNT:
I AGREE TO APPEAR IN COURT HEREIN TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE INDICATED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED, OR PAY THE LISTED FINE, I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST WILL BE ISSUED.			

SIGNATURE OF DEFENDANT	Date	SIGNATURE OF JUVENILE PARENT OR CUSTODIAN	RELATIONSHIP TO JUVENILE	JUVE DISP.	CITATION No.
Sworn to and subscribed before me, the undersigned, this 27 day of Aug, 2001		I swear/affirm the above statements are correct and true.		rt thumb	
Name: Dep. Ford	Notary Public <input type="checkbox"/> Law Enforcement or Corrections Officer <input checked="" type="checkbox"/>	OFFICE OF COMPLAINANT'S SIGNATURE			
Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>	Type of Identification:	NAME (PRINTED): HALL, James J. Co-04	ID NUMBER:		
<b>OFFICIAL USE ONLY</b>			Inmate Number & Facility:		

STATE VS. Morton Lawrence William | 04-12-56  
Name (L,F,M): \_\_\_\_\_ DOB: \_\_\_\_\_

FIRST APPEARANCE DATE: 8/27/01

The defendant was advised of his/her rights and furnished a copy of the complaint.  
Defendant ( ) requested and was appointed a Public Defender after being found indigent.  
Defendant ( ) not indigent, has or will retain \_\_\_\_\_ as counsel.  
The Court has examined the sworn complaint and finds:

*wet C/L wet C/L w/ C/L wet sexual battery*

CHARGE				
Probable Cause Found	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
PC Undet. - 72 hours				
PC Undet. - 96 hours				
Insufficient PC				
BOND SET AT	<u>250</u>	<u>250</u>	<u>25000</u>	<u>none</u>
ROR				
PTR				
Other				

ASA: \_\_\_\_\_ PD: (M)  
Plea: \_\_\_\_\_  
Sentence: \_\_\_\_\_  
Notes: \_\_\_\_\_

Type of Supervision:

- ( ) Supervised Release
- ( ) Electronic Monitoring - May require defendant to pay for use of monitoring equipment

Special Conditions:

- ( ) No contact with the alleged victim(s), witness(es), & co-defendant(s)
- ( ) No violent contact with the alleged victim(s)
- ( ) Do not consume illegal drugs
- ( ) Do not consume alcohol
- ( ) Submit to urinalysis tests for illegal drugs and/or alcohol
- ( ) Substance abuse assessment
- ( ) Participation in appropriate substance abuse treatment
- ( ) \_\_\_\_\_

*[Signature]*  
Judge

<input checked="" type="checkbox"/> ARREST NOTICE TO APPEAR		<input type="checkbox"/> AFFIDAVIT		<input type="checkbox"/> C.C.		<input checked="" type="checkbox"/> ADULT		<input type="checkbox"/> JUVENILE		Court Case Number: 01-457-CFA		
(FL) 1   8   0   2   0   0		Agency Name: FLAGLER BEACH POLICE DEPARTMENT						Agency Case Number: 01-4227				
FCIC/NCIC Check? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		OBTS # 1801004626				Date Arrested: 08/26/01		Time of Arrest: 2342				
ADDRESS OF ARREST: 111 Avalon Ave, Flagler Beach, FL										Arrested By: Grew Williams		
<b>DEFENDANT</b>		NAME (L.F.M.): MORTON, LAURENCE WILLIAMS				A.K.A.: LARRY		Sex: M		Race: W		
DOB: 04-12-56		Age: 45		Driver's Lic./ID No.: ML635-539-56-132-0		State: F		Year Expires: 07		S.S.:		
Height: 6-02		Weight: 185		Hair: BRN		Eyes: HAZ		P.O.B. (City, State, Country): FLORIDA		Statement: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
Scars, Marks, Tattoos:		Business & Occupation:		Citizenship: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>								
Address - Mailing/Permanent		(STREET, APT. NUMBER)		(CITY)		(STATE)		ZIP CODE		RESIDENT PHONE		
Address - Local		(STREET, APT. NUMBER)		(CITY)		(STATE)		ZIP CODE		RESIDENT PHONE		
Address - Other (Employer/School)		(STREET, APT. NUMBER)		(CITY)		(STATE)		ZIP CODE		BUS/SCHOOL		
<b>CHARGES</b>		DOMESTIC VIOLENCE? YES <input type="checkbox"/>		Attachments: Affidavit(s) <input type="checkbox"/>		Statement(s) <input type="checkbox"/>		NTA Schedule <input type="checkbox"/>		Report <input type="checkbox"/>		
										Traffic Infraction(s) <input type="checkbox"/>		
										Total Charges: 1		
#1	Charge: FELONY DISORDERLY ASSAULT ON A CHILD	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input checked="" type="checkbox"/> FS/ORD <input type="checkbox"/>	Citation No.: 800.04(1)	Bond: \$25,000								
#2	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/> FS/ORD <input type="checkbox"/>	Citation No.:	Bond:								
#3	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/> FS/ORD <input type="checkbox"/>	Citation No.:	Bond:								
<b>CO-DEFENDANT</b>		Co-Def #1. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel. <input type="checkbox"/> Misd <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>		Co-Def #2. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel. <input type="checkbox"/> Misd <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>								
#1 NAME (L.F.M.):		Race:		Sex:		DOB:		Age:				
#2 NAME (L.F.M.):		Race:		Sex:		DOB:		Age:				
<b>NARRATIVE</b>		The undersigned certifies and swears that there is probable cause to believe the above-named defendant, <u>between 01-96 and 01-97</u> on the <u>day of</u> , at approximately <u>unknown</u> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> at <u>111 AVALON AVE, FLAGLER BEACH</u> in <u>FLAGLER</u> County, violated the law and did then and there:										
TO WIT: VICTIM WAS SLEEPING IN THE LIVING ROOM FLOOR OF THE DEFENDANT'S RESIDENCE WHEN HE LAID DOWN NEXT TO HER AND WHEN SHE WOKE UP, THE DEFENDANT WAS ROBBING HER BREAST UNDERNEATH HER SHIRT. DEFENDANT THEN BEGAN RUBBING HER STOMACH AND THEN MOVED HIS HAND UNDERNEATH HER PANTIES TO THE VAGINAL AREA WHERE HE BEGAN TO RUB VIGOROUSLY. VICTIM THEN GOT UP AND MOVED TO THE COUCH WHERE SHE WAS NOT PURSUED BY THE DEFENDANT.												
<b>NOTICE TO APPEAR</b>		MANDATORY APPEARANCE <input type="checkbox"/>		YOU NEED NOT APPEAR IN COURT BUT MUST COMPLY WITH INSTRUCTIONS ON THE REVERSE SIDE OF YOUR COPY <input type="checkbox"/>				FINE, AND COSTS AMOUNT:				
I AGREE TO APPEAR IN COURT HEREIN TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE INDICATED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED, OR PAY THE LISTED FINE, I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST WILL BE ISSUED.												
SIGNATURE OF DEFENDANT						Date		SIGNATURE OF JUVENILE PARENT OR CUSTODIAN		RELATIONSHIP TO JUVENILE		
Sworn to and subscribed before me the undersigned this <u>26</u> day of <u>August</u> 2001						Name: <u>Off. G. L. Williams 8L</u>		OFFICER'S/COMPLAINANT'S SIGNATURE		ID NUMBER: <u>8L</u>		
Notary Public <input type="checkbox"/> Law Enforcement or Corrections Officer <input type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>						Type of Identification:		NAME (PRINTED): <u>G. L. WILLIAMS</u>		ID NUMBER: <u>8L</u>		
<b>OFFICIAL USE ONLY</b>						Inmate Number & Facility:						

01-457-CFA

STATE VS. Morton, Lawrence Williams 04-12-56  
Name (L.F.M.): FOR:

FIRST APPEARANCE DATE: 8/27/01

The defendant was advised of his/her rights and furnished a copy of the complaint.  
Defendant ( ) requested and was appointed a Public Defender after being found indigent.  
Defendant ( ) not indigent, has or will retain \_\_\_\_\_ as counsel.  
The Court has examined the sworn complaint and finds:

*4/6 Assault on a child*

CHARGE			
Probable Cause Found	X		
PC Undet. - 72 hours			
PC Undet. - 96 hours			
Insufficient PC			
BOND SET AT	25,000		
ROR			
PTR			
Other			

ASA: \_\_\_\_\_ PD *(Signature)*  
Plea: \_\_\_\_\_  
Sentence: \_\_\_\_\_  
Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Type of Supervision:

- ( ) Supervised Release
- ( ) Electronic Monitoring - May require defendant to pay for use of monitoring equipment

Special Conditions:

- ( ) No contact with the alleged victim(s), witness(es), & co-defendant(s)
- ( ) No violent contact with the alleged victim(s)
- ( ) Do not consume illegal drugs
- ( ) Do not consume alcohol
- ( ) Submit to urinalysis tests for illegal drugs and/or alcohol
- ( ) Substance abuse assessment
- ( ) Participation in appropriate substance abuse treatment
- ( ) \_\_\_\_\_

*(Signature)*  
\_\_\_\_\_  
Judge