

COURT DOCKET NO.
1. _____
2. _____

USE SEPARATE FORMS FOR EACH DEFENDANT AND FOR MULTIPLE OFFENSES OCCURRING AT DIFFERENT TIME, DATE OR LOCATION

ARREST AFFIDAVIT

FBINO. _____ FDLE NO. _____

Fingerprinted By: <input type="checkbox"/> Identification Only <input type="checkbox"/> Fingerprinted <input type="checkbox"/> AFIS		<input checked="" type="checkbox"/> CHECK TRUE NAME <input type="checkbox"/>		Defendant Name (Last, First, Middle) Harrouff, Austin Kelly				ARRESTING AGENCY ORI NO. FL0					
Booking Officer _____ Jail No. _____		A.K.A. _____				OBTSNO. _____							
Local Case No. _____ Date of Birth 12/21/1996		Permanent Address (Street No Street Name) 18421 Lost Lake Way City Jupiter				State FL Zip Code 33458		City 43					
Defendant required to appear in CIRCUIT COURT on: Demand at _____		Race W Sex M Height 600 Weight 160 Hair Color BRO		BAL BLK BLN BRO GRY WHI RED SYN UNK		Eye Color BRO		BLK BLU BRN GRY GRN HZL MAR PNK UNK					
		Social Security Number _____		Occupation or Employer None		Distinguishing Marks _____							
Defendant required to appear in COUNTY COURT on: _____ at _____		Arrest Date 10/03/16 Military Time 12:57 Sector --		Street 901 45th Street City West Palm Beach		State _____ City _____							
Offense Date 08/19/16		Military Time _____ Sector _____		Street Martin County City _____		State FL City _____							
Weapons Seized NO Type N/A		Resident Type 2 1 - City 3 - State 2 - County 4 - Out-of-state		Drug Activity B Buy D Deliver E Use		K Distribute M Manufacture / Cultivate		P Possess R Smuggle S Sell		T Traffic Z Other			
Indication of: Alcohol Influence UNK Drug Influence UNK		Citizenship US		Drug Type A Amphetamine B Barbiturate C Cocaine		E Heroin M Marijuana O Opium or Derivative		P Paraphernalia S Synthetic U Unknown		Z Other			
Charge Status: <input type="checkbox"/> PC <input checked="" type="checkbox"/> Capias <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> Juv <input type="checkbox"/> PU <input type="checkbox"/> Citation													
SEQ* NO.	Felony	Traffic Felony	Misd	Traffic Misd	Ord	Other	Statute Number	Charge	Bond	If Drugs Activity/Type			
1.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	782.04	CT1 First Degree Murder	\$0	N	N		
2.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	782.04	CT2 First Degree Murder	\$0	N	N		
3.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	782.04	CT3 Attempted First Degree Murder	\$0	N	N		
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	843.02	CT4 Resisting Officer Without Violence	\$5000	N	N		
5.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	810.02	CT5 Burglary of Dwelling While Armed	\$0	N	N		
6.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	*****Martin County Warrant #16883CFA*****						
Principle Arresting Officer Det. J. Kloster				Agency MCSO		Officer ID 031		OSN 1723		Bondsman / Surety Name _____		Bond Amount _____	
Co-Defendants (Last, First, Middle) / / /								Victim's Name (Last, First, Middle) _____					
								State _____					

SUMMARY OF OFFENSES AND PROBABLE CAUSE AFFIDAVIT

The above named defendant was arrested for the following reasons;

PROBABLE CAUSE

Above subject arrested as part of the U.S. Marshals Florida Fugitive Regional Task Force on open Martin I First Degree Murder, Bond None; CT2 First Degree Murder, Bond None; CT3 and None; CT4 Resisting an Officer Without Violence, Bond \$5000; CT5 d, Bond None issued on 08/19/16.

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Marketing

Personalization

Analytics

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Accept All

knowledge or belief.

containing **11723**

Sworn & Subscribed before me this 3 day of October, 2016

NOTARY / ASAT

My commission expires Term

Agency MCSO

ATTORNEY COPY

JAIL COPY

ARRESTING AGENCY COPY

DEFENDANT