

Entered: _____

Checked: _____

File Purged: _____

N/A: _____

Route To: **STATE ATTORNEY'S OFFICE
DEPT OF CHILDREN AND FAMILIES**Year: **2009** Incident No.: **9839**

1

**Putnam County Sheriff's Office
General Offense / Incident Report****Incident Information****Sub-Sector S1**Day/Date/Time of Incident-From: **Thursday 11/5/2009 08:56**Day/Date/Time of Incident-To: **Thursday 11/5/2009 08:57**Location of Incident: **TYLER ST** Apt./Lot #:City: **SATSUMA** State: **FLORIDA** Zip: **32189**Day/Date/Time Incident Reported: **Thursday 11/5/2009 08:58**Drug Activity: **POSSESS**Drug Type: **OVER THREE DRUG TYPES**# Of Offenses: **2**Alcohol Related: **NO ONE USING**Drug Related: **UNKNOWN (OR N/A)**# Of Victims: **1**M.C.I. Case: **No** Follow-up by:# Of Suspects: **1****Offense or Incident:**#1 Statute No: **S893.13(6)(A)** Degree: **F3** UCR Code: **350A** Attempt Code: **Commit****PERSON IN ACTUAL OR CONSTRUCTIVE POSSESSION OF A CONTROLLED SUBSTANCE**#2 Statute No: **S893.147(1)** Degree: **M1** UCR Code: **350B** Attempt Code: **Commit****USE, OR POSSESS WITH INTENT TO USE, DRUG PARAPHERNALIA****Victim Information #1****VICTIM TYPE: GOVERNMENT**Name: **STATE OF FLORIDA**

Address: Apt./Lot #:

City: State: Zip:

Alternate Address: Alt Apt./Lot #:

Alt City: Alt State: Alt Zip:

Hospital Where Victim taken:

Place of Employ /School:

Race: Ethnicity: Sex: DOB: Age:

Height: Weight: Eye Color: Hair Color:

Injury Extent: Injury Type:

Offenses Victim of:#1 **PERSON IN ACTUAL OR CONSTRUCTIVE POSSESSION OF A CONTROLLED SUBSTANCE**#2 **USE, OR POSSESS WITH INTENT TO USE, DRUG PARAPHERNALIA**

Victim Relationship To Offender:

NOT APPLICABLE**#1 CROSLIN, HANK THOMAS JR****Suspect Information #1**

Weapons Involved:

Suspect Location: ArrestedName: **CROSLIN HANK THOMAS JR**Address: **116 TYLER ST** Apt./Lot #:City: **SATSUMA** State: **FLORIDA** Zip: **32189**Place of Employ /School: **UNEMPLOYED**Race: **WHITE** Ethnicity: **NOT OF HISPANIC ORIGIN** Sex: **Male** DOB: **8/2/1986** Age: **23**Height: **5' 11"** Weight: **180** Eye Color: **BLUE** Hair Color: **BROWN** Hair length: **SHORT**Hair Style: **STRAIGHT** Complexion: **FAIR / LIGHT** Voice: **NORMAL** Facial Hair: **GOATEE**

Distinguishing Marks:

Clothing/Description:

Nickname(s):

Aliases:

Charges:#1 **PERSON IN ACTUAL OR CONSTRUCTIVE POSSESSION OF A CONTROLLED SUBSTANCE**#2 **USE, OR POSSESS WITH INTENT TO USE, DRUG PARAPHERNALIA**

Jail Booking #

OBTS No. Juvenile: **No** Miranda Warnings Given: **Yes****Witness/Complainant Information: #1****Type: WITNESS**Name: **ALTIZER MATT**Address: **130 ORIE GRIFFIN BLVD** Apt./Lot #:

Home Phone #

City: **PALATKA** State: **FLORIDA** Zip: **32177**
Place of Employ /School: **PUTNAM COUNTY SHERIFF'S OFFICE // P1306**

Bus. Phone # **(386)-329-0800 Ext.**

Race: Sex: DOB: Age:

Relationship To Victim:

NOT APPLICABLE

#1 STATE OF FLORIDA

Witness/Complainant Information: #2

Type: WITNESS

Name: **BRIDGES CHRISTINA**

Address: **130 ORIE GRIFFIN BLVD** Apt./Lot #:

Home Phone #

City: **PALATKA** State: **FLORIDA** Zip: **32177**

Bus. Phone # **(386)-329-0800 Ext.**

Place of Employ /School: **PUTNAM COUNTY SHERIFF'S OFFICE // P1256**

Race: Sex: DOB: Age:

Relationship To Victim:

NOT APPLICABLE

#1 STATE OF FLORIDA

Witness/Complainant Information: #3

Type: WITNESS

Name: **LEDBETTER LISA-MARIE**

Address: **130 ORIE GRIFFIN BLVD** Apt./Lot #:

Home Phone #

City: **PALATKA** State: **FLORIDA** Zip: **32177**

Bus. Phone # **(386)-329-0800 Ext.**

Place of Employ /School: **PUTNAM COUNTY SHERIFF'S OFFICE // P1340**

Race: Sex: DOB: Age:

Relationship To Victim:

NOT APPLICABLE

#1 STATE OF FLORIDA

Witness/Complainant Information: #4

Type: SUBJECT

Name: **LAVOY GREG**

Address: **130 ORIE GRIFFIN BLVD** Apt./Lot #:

Home Phone #

City: **PALATKA** State: **FLORIDA** Zip: **32177**

Bus. Phone # **(386)-329-0800 Ext.**

Place of Employ /School: **PUTNAM COUNTY SHERIFF'S OFFICE // S1120**

Race: Sex: DOB: Age:

Relationship To Victim:

NOT APPLICABLE

#1 STATE OF FLORIDA

Witness/Complainant Information: #5

Type: SUBJECT

Name: **CROSLIN HANK THOMAS**

Address: **116 TYLER ST** Apt./Lot #:

Home Phone #

City: **SATSUMA** State: **FLORIDA** Zip: **32189**

Bus. Phone # Ext.

Place of Employ /School: **UNEMPLOYED**

Race: **WHITE** Sex: **Male** DOB: **8/3/1968** Age: **41**

Relationship To Victim:

NOT APPLICABLE

#1 STATE OF FLORIDA

Witness/Complainant Information: #6

Type: SUBJECT

Name: **CROSLIN LINDSY KATE**

Address: **116 TYLER ST** Apt./Lot #:

Home Phone #

City: **SATSUMA** State: **FLORIDA** Zip: **32189**

Bus. Phone # Ext.

Place of Employ /School: **UNEMPLOYED**

Race: **WHITE** Sex: **Female** DOB: **12/9/1986** Age: **22**

Relationship To Victim:

NOT APPLICABLE

#1 STATE OF FLORIDA

Vehicle / Vessel Information: #1

Vehicle Type: TRUCK / VAN

Year: **2002** Make: **PLYMOUTH** Model: **VOYAGER**

Primary Color: **BLUE** Color #2: **BLUE**

Tag: **B877GJ** State: **FLORIDA** Year: **2009** Tag # 10-28 Ran? **Yes** Tag # 10-29 Ran? **Yes**

V.I.N. #: **1C4GJ25382B731714** VIN 10-28 Ran? **Yes** VIN 10-29 Ran? **Yes** VIN Verified By Officer? **No**

If towed location of garage:

NCIC Notified: **No** Date: Time: **00:00** ID#: Dispatch #:

Ignition Locked: **No** Keys in Ignition: **Yes** Doors Locked: **No** Vehicle Status: **OTHER (e.g. INFORMATION RPT)**

Recovery Code:

Subsector Recovered In:

Location Recovered:

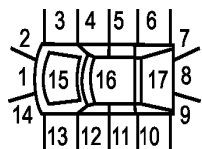
Value of Vehicle Taken: **\$0.00**

Recovery Location:

Value as Recovered **\$0.00**

Vehicle Damaged Vehicle Condition **Fair** Damage Code: **NOT APPLICABLE**

Damaged Areas of Vehicle:



Area 1 **No** Area 2 **No** Area 3 **No** Area 4 **No** Area 5 **No**
Area 6 **No** Area 7 **No** Area 8 **No** Area 9 **No** Area 10 **No**
Area 11 **No** Area 12 **No** Area 13 **No** Area 14 **No** Area 15 **No**
Area 16 **No** Area 17 **No** Area 18 Undercarriage: **No** Area 19 Windshield: **No** Area 20 Tires / Rims **No**

Driver **Suspect #1 CROSLIN, HANK THOMAS JR**

Address: **116 TYLER ST** Apt./Lot #:

Hm Phone #

City: **SATSUMA** State: **FLORIDA** Zip: **32189**

Bus. Phone # Ext.

Owner **Witness #6 CROSLIN, LINDSY KATE**

Address: **116 TYLER ST** Apt./Lot #:

Hm Phone #

City: **SATSUMA** State: **FLORIDA** Zip: **32189**

Bus. Phone # Ext.

Contacted? **Yes** Date: Time: **00:00**

How Contacted: **Other CONTACT MADE AT 116 TYLER STREET**

Vic. / Com. Has received their vehicle at the scene. **NA** Vehicle was Processed? **NA**

Vic. / Com. Has Agreed To Have Their Vehicle Towed if found and is unable to respond to scene. **NA**

Was Vehicle Towed / Hold Placed / Seized? **No**

Property Section:

ITEM #1

Type Code: **DRUGS/NARCOTICS**

Status Code: **SEIZED (NOT STOLEN)**

Weapon Type: Weapon Desc.:

Weapon Caliber: Barrel Length.:

Full-Automatic Firearm:

Manufacturer: **ALPRAZOLAM**

Model: **G3721**

Serial Number: **N/A**

Color: **LIGHT BLUE**

Qty. **9.00**

Drug Type: **OTHER DEPRESSANTS (e.g. METHAQUALONE)**

Drug Unit Type: **PILL(S)**

Weight: **0.00**

Unit of Measure: **DOSAGE UNIT(S) / ITEM(S)**

Description:

Value Stolen or Damaged: **\$0.00**

Value Recovered: **\$0.00**

Victim / Complaint Signed Signature Card: **NA**

Property Owned By:

Property Received From: **Suspect #1 CROSLIN, HANK THOMAS JR**

Disposition of Evidence / Property: **Property Room**

Vehicle Property Recovered From: **#1 YR:2002 LIC#:B877GJ VIN#:1C4GJ25382B731714**

Property Section:

ITEM #2

Type Code: **DRUGS/NARCOTICS**

Status Code: **SEIZED (NOT STOLEN)**

Weapon Type: Weapon Desc.:

Weapon Caliber: Barrel Length.:

Full-Automatic Firearm:

Manufacturer: **HYDROCODONE**

Model: **WATSON 540**

Serial Number: **N/A**

Color: **LIGHT BLUE**

Qty. **9.00**

Drug Type: **OTHER NARCOTICS (e.g. CODEINE, DEMEROL)**

Drug Unit Type: **PILL(S)**

Weight: **0.00**

Unit of Measure: **DOSAGE UNIT(S) / ITEM(S)**

Description:

Value Stolen or Damaged: **\$0.00**

Value Recovered: **\$0.00**

Victim / Complaint Signed Signature Card: **NA**

Property Owned By:

Property Received From: **Suspect #1 CROSLIN, HANK THOMAS JR**

Disposition of Evidence / Property: **Property Room**

Vehicle Property Recovered From: **#1 YR:2002 LIC#:B877GJ VIN#:1C4GJ25382B731714**

Property Section:

ITEM #3

Type Code: **DRUGS/NARCOTICS**

Status Code: **SEIZED (NOT STOLEN)**

Weapon Type: Weapon Desc.:

Weapon Caliber: Barrel Length.:

Full-Automatic Firearm:

Manufacturer: **METHADONE**

Model: **M-5771**

Serial Number: **N/A**

Color: **WHITE**

Qty. **2.00** Drug Type: **OTHER NARCOTICS (e.g. CODEINE, DEMEROL)**
Drug Unit Type: **PILL(S)** Weight: **0.00** Unit of Measure: **DOSAGE UNIT(S) / ITEM(S)**
Description:
Value Stolen or Damaged: **\$0.00** Value Recovered: **\$0.00** Victim / Complaint Signed Signature Card: **NA**
Property Owned By:
Property Received From: **Suspect #1 CROSLIN, HANK THOMAS JR** Disposition of Evidence / Property: **Property Room**
Vehicle Property Recovered From: **#1 YR:2002 LIC#:B877GJ VIN#:1C4GJ25382B731714**

Property Section:

ITEM #4

Type Code: **DRUGS/NARCOTICS**
Status Code: **SEIZED (NOT STOLEN)**
Weapon Type: Weapon Desc.:
Weapon Caliber: Barrel Length.: Full-Automatic Firearm:
Manufacturer: **CYCLOBENZAPRINE** Model: **M-751**
Serial Number: **N/A** Color: **ORANGE**
Qty. **8.00** Drug Type: **OTHER NARCOTICS (e.g. CODEINE, DEMEROL)**
Drug Unit Type: **PILL(S)** Weight: **0.00** Unit of Measure: **DOSAGE UNIT(S) / ITEM(S)**
Description:
Value Stolen or Damaged: **\$0.00** Value Recovered: **\$0.00** Victim / Complaint Signed Signature Card: **NA**
Property Owned By:
Property Received From: **Suspect #1 CROSLIN, HANK THOMAS JR** Disposition of Evidence / Property: **Property Room**
Vehicle Property Recovered From: **#1 YR:2002 LIC#:B877GJ VIN#:1C4GJ25382B731714**

Property Section:

ITEM #5

Type Code: **DRUGS/NARCOTICS**
Status Code: **SEIZED (NOT STOLEN)**
Weapon Type: Weapon Desc.:
Weapon Caliber: Barrel Length.: Full-Automatic Firearm:
Manufacturer: **OXYCODONE HYDROCHLORIDE** Model: **V-4812**
Serial Number: **N/A** Color: **LIGHT BLUE**
Qty. **6.00** Drug Type: **OTHER NARCOTICS (e.g. CODEINE, DEMEROL)**
Drug Unit Type: **PILL(S)** Weight: **0.00** Unit of Measure: **DOSAGE UNIT(S) / ITEM(S)**
Description:
Value Stolen or Damaged: **\$0.00** Value Recovered: **\$0.00** Victim / Complaint Signed Signature Card: **NA**
Property Owned By:
Property Received From: **Suspect #1 CROSLIN, HANK THOMAS JR** Disposition of Evidence / Property: **Property Room**
Vehicle Property Recovered From: **#1 YR:2002 LIC#:B877GJ VIN#:1C4GJ25382B731714**

Property Section:

ITEM #6

Type Code: **DRUGS/NARCOTICS**
Status Code: **SEIZED (NOT STOLEN)**
Weapon Type: Weapon Desc.:
Weapon Caliber: Barrel Length.: Full-Automatic Firearm:
Manufacturer: **UNKNOWN** Model: **UNKNOWN**
Serial Number: **N/A** Color: **RED**
Qty. **1.25** Drug Type: **UNKNOWN**
Drug Unit Type: **PILL(S)** Weight: **0.00** Unit of Measure: **DOSAGE UNIT(S) / ITEM(S)**
Description:
Value Stolen or Damaged: **\$0.00** Value Recovered: **\$0.00** Victim / Complaint Signed Signature Card: **NA**
Property Owned By:
Property Received From: **Suspect #1 CROSLIN, HANK THOMAS JR** Disposition of Evidence / Property: **Property Room**
Vehicle Property Recovered From: **#1 YR:2002 LIC#:B877GJ VIN#:1C4GJ25382B731714**

Property Section:

ITEM #7

Type Code: **DRUGS/NARCOTICS EQUIPMENT**
Status Code: **SEIZED (NOT STOLEN)**
Weapon Type: Weapon Desc.:
Weapon Caliber: Barrel Length.: Full-Automatic Firearm:
Manufacturer: **N/A** Model: **N/A**
Serial Number: **N/A** Color: **BROWN**
Qty. **1.00** Drug Type: **NOT APPLICABLE**
Drug Unit Type: Weight: **0.00** Unit of Measure: **DOSAGE UNIT(S) / ITEM(S)**
Description:
Cyclobenzaprine Prescription Bottle (Prescribed to Hank Croslin)
Value Stolen or Damaged: **\$0.00** Value Recovered: **\$0.00** Victim / Complaint Signed Signature Card: **NA**
Property Owned By: **Witness #5 CROSLIN, HANK THOMAS**

Property Received From: **Suspect #1 CROSLIN, HANK THOMAS JR** Disposition of Evidence / Property: **Property Room**
Vehicle Property Recovered From: **#1 YR:2002 LIC#:B877GJ VIN#:1C4GJ25382B731714**

Property Section:

ITEM #8

Type Code: **DRUGS/NARCOTICS EQUIPMENT**

Status Code: **SEIZED (NOT STOLEN)**

Weapon Type: *Weapon Desc.:*

Weapon Caliber: *Barrel Length.:*

Full-Automatic Firearm:

Manufacturer: **N/A**

Model: **N/A**

Serial Number: **N/A**

Color: **BLUE**

Qty: **1.00**

Drug Type: **NOT APPLICABLE**

Drug Unit Type:

Weight: **0.00**

Unit of Measure: **DOSAGE UNIT(S) / ITEM(S)**

Description:

Small Plastic Baggie (Containing possible crushed pill)

Value Stolen or Damaged: **\$0.00**

Value Recovered: **\$0.00**

Victim / Complaint Signed Signature Card: **NA**

Property Owned By:

Property Received From: **Suspect #1 CROSLIN, HANK THOMAS JR**

Disposition of Evidence / Property: **Property Room**

Vehicle Property Recovered From: **#1 YR:2002 LIC#:B877GJ VIN#:1C4GJ25382B731714**

ADDITIONAL INFORMATION

Scene: Tyler Street & Buffalo Bluff Road

Driving Directions: Highway 17 South, Right on Buffalo Bluff Road (Tyler Street is on the left, immediately across the Railroad Tracks)

I responded to the above location in reference to the report of a non-responsive person lying in the front seat of a vehicle.

Upon my arrival, I witnessed a white male lying on the front seat of a blue van (FL Tag# B877GJ). Rescue personnel had arrived on scene at the same time, and made contact with the individual. Rescue personnel woke the individual up, and began speaking with him to determine if he was having a medical emergency. While Rescue was speaking with the man, later identified as Hank Croslin Jr, I walked to the passenger side of the vehicle. Through the open passenger side window, I saw a prescription pill bottle, and a small sandwich bag containing several blue pills. I seized the baggie containing the pills, and took possession of the pill bottle to allow Rescue to examine the prescription type. Rescue determined that Hank was not suffering a medical emergency, and advised that Hank had told them that he did not need any medical assistance. Based upon the presence of prescription pills in the baggie, I placed Hank in handcuffs until I could determine whether the pills were his or not. Hank immediately began telling me that the pills belonged to his father, Hank Croslin, and that Hank left them in the van. Hank also told me that he did not know the pills were in the van. Hank said that he had dropped his son off at the bus stop at 8AM, and had taken a nap because he was sleepy.

It should be noted that besides a cigarette lighter, the pills were the only items on the front passenger seat of the van.

Deputies Christina Bridges and Lisa-Marie Ledbetter arrived on-scene, and Deputy Bridges assisted me with identifying the prescription pills in the bag. The prescription pill bottle contained several different types of prescription pills, and a piece of a drinking straw that appeared to have some form of powder residue on it. Due to the presence of illegal narcotics, an inventory was performed of the van, which was registered to Hank Jr's wife, Lindsay Croslin. A small baggie was located in the cup holder of the van, which contained a white powder residue. The residue was field tested for cocaine, and tested negative.

Sergeant Greg Lavoy arrived on-scene, and went to 116 Tyler Street, to inform Lindsay that she could come and retrieve her van. Lindsay came to the scene, along with Hank Croslin. Hank asked if Hank Jr. had been in possession of any "roxies", and told me that some "roxies" were stolen from Hank's house last night. I told Hank that we had not located any such narcotic, and Hank then left the scene. Lindsay's van was left in her possession.

Hank Jr. was then informed that he was under arrest. Hank was read his Miranda Rights from a prepared card, and agreed to waive his rights and speak with me. I asked Hank if he was aware of the small baggie located in the van, and Hank told me that he was unaware of it. Hank again denied any knowledge that the pills were in the van, and insisted that they belonged to his father. Hank was transported to the Putnam County Jail, where he was charged with Possession of a Controlled Substance, and Possession of Drug Paraphernalia. Hank received a bond of \$1508.00.

Due to the fact that Hank Jr. said he had dropped his son off for the school bus, and that he alleged he had not

been anywhere since then, a copy of this report will be forwarded to the Department of Children & Families.

In view of the above information, this case is deemed Cleared By Arrest. Any additional reports will be completed, in a timely manner, and submitted as required.

Clearance Status: **CLEARED BY ARREST** Clearance Code: **ADULT** Number of Cases Cleared **1**
Case Cleared **CLEARED BY ARREST (PATROL)**

CRIME ANALYSIS

Aggravated Assault/Murder:

Type of Weapon:

Forced Entry: **NOT APPLICABLE** Structure Occupancy Code: **NOT APPLICABLE** Number of Premises Entered:

Location Type: **Highway / Roadway**

Incident Occurred Outside this Location Incident Occurred In the Parking Lot at this Location: **No**

Number of Vehicles Recovered:

Number of Arrested: **1**

School Name: School Number

MISCELLANEOUS:

Is Offense Related to Domestic Violence: **No** If yes, were Children under 18 Present: If No is it Domestic Related: **NO**

Is there additional information included on a continuation report: **No** Are there other Pertinent Reports: **No**

In your opinion is there significant reason to believe that the crime can be solved by a patrol follow-up investigation? **No**

Neighborhood Canvass Conducted: **No**

Case Information Card Left With: **N.A.**

If Other (Name Address):

Address: Apt./Lot #:

Home Phone #

City: State: Zip:

Bus. Phone # Ext.

Investigative Time:

#1 Hours: **0** Minutes: **0** Cost Amount: **\$0.00**

Detective Called To the Scene: **#0**

NA:

Notified:

Evidence Technician Called to the Scene: **#0**

NA:

Assigned By HQ:

Reporting Officers: **D.ALTIZER**

ID **#1306**

ID **#0**

11/5/2009 14:47

ID **#0**

Approving Supervisor:

Division: **PATROL** Unit: **DELTA**