

045/512

2685

OBTS NUMBER		ARREST/NOTICE TO APPEAR Juvenile Referral Report				1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		3	Juvenile	No	
ADMINISTRATIVE	Agency ORI Number	Agency Name				Agency Report Number							
	FL0501700	Jupiter Police Department				54-14-002363							
	Charge Type: Check as many as apply	<input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapons Seized/Type					
	Date of Arrest (Including Name of Business)		Location of Offense (Business Name/Address)				Date of Offense						
Jup. MCO CEN. 1210 S. OLD ORT RD						5/26/14							
Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Fingerprinted By:							
5/27/14	1330					<input type="checkbox"/> Identification <input type="checkbox"/> AFIS <input type="checkbox"/> Criminal							
Location of Vehicle		Other Local Number	FDLE Number	DOG Number	FBI Number								
N/A													
DEFENDANT	Name (Last, First Middle)											Alias (Name, DOB, Soc. Sec. #, Etc.)	
	LUCAS, KIMBERLY, DAWN												
	Race	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build				
	W-White B-Black I-American Indian O-Orient/Asian	W F	10/23/1973	5'3"	130	BRO	BLK	MD	SMALL				
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status	Religion	Indication of: Alcohol Influence Drug Influence						
	CONCA SHELL L OYST / TRAD OF LIFE R HIP				Single	UNK	Y <input type="checkbox"/> N <input type="checkbox"/> Un. <input type="checkbox"/>						
	Local Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone	Residence Type:						
	3227 S. Bismark Lane #107,		JUPITER	FL	33458	( )	1. City <input type="checkbox"/> 3. Florida <input type="checkbox"/> 2. County <input type="checkbox"/> 4. Out of State <input type="checkbox"/> 1						
	Permanent Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone	Address Source						
						( )							
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation							
					( )								
D/L Number	D/L State	Soc. Sec. Number	INS Number	Place of Birth	Citizenship								
L220-504-73-883-0	FL			VIRGINIA / PORTSMOUTH	US								
CO-DEF.	Co-Defendant Name (Last, First, Middle)			Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile				
JUVENILE	<input type="checkbox"/> 1. Parent <input type="checkbox"/> 2. Legal Custodian <input type="checkbox"/> 3. Other		Name (Last, First, Middle)			Residence Phone							
			NONE			( )							
	Address (Street, Apt. Number)		(City)	(State)	(Zip)	Business Phone							
			NONE			( )							
	Notified By: (Name)		Date	Time	Juvenile Disposition		2. TOT HRS/DCF 3. Incarcerated						
Released To: (Name)		Relationship			Date	Time							
The above address was provided by the defendant and/or defendant's parent/guardian. The child and/or parent/guardian was told to keep the Juvenile Division Office (Phone 561-355-7200) informed of any change of address:				School Attended				Grade					
Yes, by: (Name)				No: (Reason)									
Property Crimes?		Description of Property				Value of Property							
<input type="checkbox"/> Yes <input type="checkbox"/> No													
CODE	Activity	S. Sell	R. Smuggle	K. Dispense/Distribute	M. Manufacture	Z. Other	Type	B. Barbiturate	H. Hallucinogen	P. Paraphernalia/	U. Unknown		
	N. N/A	B. Buy	D. Deliver	Disinbute	Produce/ Cultivate		A. Amphetamine	C. Cocaine	M. Marijuana	Equipment	Z. Other		
CHARGE	Charge Description		Counts	<input checked="" type="checkbox"/> FSS <input type="checkbox"/> ORD	Statute Violation Number		Violation of ORD #						
	1st degree Murder		1		782.04(1)(a)(1)								
CHARGE	Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond						
CHARGE	Charge Description		Counts	<input checked="" type="checkbox"/> FSS <input type="checkbox"/> ORD	Statute Violation Number		Violation of ORD #						
	Attempted 1st degree Murder		1		782.04(1), 782.04(3)								
CHARGE	Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond						
CHARGE	Charge Description		Counts	<input type="checkbox"/> FSS <input type="checkbox"/> ORD	Statute Violation Number		Violation of ORD #						
CHARGE	Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond						
NOTICE TO APPEAR	<input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court		Location (Court, Room Number, Address)										
			Court Date and Time										
			Month	Day	Year	Time	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.						
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. 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 SHALL BE ISSUED.													
Signature of Defendant (or Juvenile and Parent/Custodian)						Date Signed							
ADMIN	HOLD for other Agency			Signature of Arresting Officer			Name Verification (Printed by Prsoner)						
	Name			X			(PRINT)						
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal			<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:			Name of Arresting Officer (Print)			I.D.#			
	Intake Deputy			I.D.#			BRENTHOOSAC #404/0657			411			
Pouch #			Transporing Officer			I.D.#			Agency				
			BUSHNOW SR.			411			JUP. POL.				
SCANNED MAY 27 PM 3:45													
MAY 28 2014													
1 of 1													

CANONICO NMEZ #409

OBTS Number: \_\_\_\_\_

PROBABLE CAUSE AFFIDAVIT

1. Arrest 3. Request for Warrant

1

Juvenile

Y

2. N.T.A. 4. Request for Capias

Agency ORI Number FLO 5 0 1 7 0 0		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 54-14-002363	
Charge Type: Check as many as apply. <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other					Special Notes:
Name (Last, First, Middle) LUCAS, KIMBERLY, DAWN					Alias
Victim's Name (Last, First, Middle) #2 - 10 year old male Victim			Race	Sex	Date of Birth #1: 11/9/11
Local Address (Street, Apt. Number)			(City)	(State)	(Zip)
Business Address (Name, Street)			(City)	(State)	(Zip)

The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The person taken into custody...

- Committed the below acts in my presence
- was observed by \_\_\_\_\_ who told \_\_\_\_\_
- confessed to \_\_\_\_\_
- that he/she saw the arrested person commit the below acts.
- admitting to the below facts \_\_\_\_\_
- was found to have committed the below acts, resulting from my (described) investigation.

On the 26TH day of MAY 20 14 at 2:40 AM X PM (specifically include facts constitution cause for arrest)

On May 26, 2014, the Palm Beach County Sheriff's Office Dispatch Center received a 911 call from a 10 year old male who informed them that he discovered [redacted] dead in their bathtub. The Sheriff's Office Dispatch Center then determined that the address [redacted] from where the child was calling from was located within the jurisdiction of the Jupiter Police Department. The information was transferred to Jupiter Police Department Dispatch Center, at approximately 2:40 PM, who then sent officers, as well as Palm Beach County Fire Rescue to the address. Upon their arrival, they made contact with the 10 year old male and made entry into the residence. They discovered a small child, later identified as w/f [redacted] (11/9/11) on the floor of a bathroom and a female, later identified as Kimberly Lucas (10/23/1973), lying unconscious on the floor of a bedroom across from the bathroom. Both the female and young child were transported to the Jupiter Medical Center where [redacted] was subsequently pronounced deceased.

Detective Jason VanSteenburgh interviewed the 10 year old male victim at the Jupiter Medical Center. He stated that Kimberly [redacted] last night, while [redacted] at another residence in Jupiter. [redacted] then brought [redacted] back to the residence this morning (5/26/14); leaving [redacted] with Kimberly. Kimberly told him that she had a pill from his doctor that he needed to take that was going to help him grow faster. Kimberly told him that the pill was too big for him to take, so she placed it into a cup of coffee with cream and sugar. The 10 year old male said the coffee tasted good but he did not like the after taste. He then went into the living room with the coffee to watch television. Kimberly gave [redacted] water with "half the pill" because she was too small for the full pill. [redacted] did not like the flavor of the water and would not drink it. Kimberly then told the 10 year old male that she was going to take a bath with [redacted] and then brought her into the bathroom. According to the 10 year old male, he began feeling tired and dizzy and went to his room to lay down. When he awoke, he found Kimberly sleeping next to him without [redacted]. He went to the bathroom and found the door was locked. He then used a knife to open the door. He discovered [redacted] in the bathtub submerged under water. He pulled her out and began CPR. He then went to Kimberly and tried to wake her up, but was unable to do so. He then called 911. It should be noted that 10 year old male urinalysis that was conducted at the Jupiter Medical Center tested positive for benzodiazepine.

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MAY 28 2014

Palm Beach Fire-Rescue transported the 2 year old female, 10 year old male, and Kimberly to the Jupiter Medical Center. [REDACTED] was pronounced deceased at Jupiter Medical Center.

While on scene, officer's noticed a computer monitor sitting in plain view on the kitchen table. The screen had a word document displayed which stated (Verbatim):

"In YOUR WORDS "WHEN YOU ARE LAYING IN BED AT NIGHT REMEMBER YOU FUCKING DID THIS TOO YOURSELF!" Lea's sermon really, really touched me yesterday, but God never told me to stop! SO in enjoyed JEN, Parker, Lisa, and Marie, hyoprtict Susan Helen. Hell is what we through on Earth. Enjoyed your life with possiblego out without us, he you manage but give you finally what you what want.... because apparently over the past 20 years I was not able to. Love you Always Kimberly"

Detective Danielle Hirsch made contact with Kimberly Lucas' Pastor and was able to determine that Kimberly and [REDACTED] attended church on May 25, 2014. Detective Hirsch asked the pastor what her sermon covered on May 25, 2014. The Pastor told Detective Hirsch that her sermon covered Genesis 22, in which God asks Abraham to sacrifice his son Isaac, but at the last minute God stops him from doing so.

Based on the aforementioned information, there is probable cause to believe that Kimberly Lucas did intentionally kill [REDACTED] (11/9/11) with a premeditated design to affect the death of [REDACTED] in violation of F.S.S. 782.04, to wit: 1st degree Murder.

Based on the aforementioned information, there is also probable to believe that Kimberly Lucas did commit an act which could have caused the death of the 10 year old male victim, but did not cause his death in violation of F.S.S. 782.04 and 777.04(1), to wit: Attempted 1<sup>st</sup> degree Murder.

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC/CLERK OF THE COURT/POLICE OFFICER

5/27/14  
DATE

SIGNATURE OF ARRESTING/INVESTIGATING OFFICER

DET. BRENT R. HOOSAC #404/0657  
NAME OF OFFICER (PLEASE PRINT)

05/27/14

DATE

PAGE

2 OF 2

DISTRIBUTION: TWO COPIES - STATE ATTORNEY    THIRD COPY - AGENCY    FOURTH COPY - AGENCY    FIFTH COPY - FILE

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MAY 28 2014

# VICTIM NOTIFICATION FORM

SUSPECT/OFFENDER:

This form must be completed when one of the following crime(s) has been committed:

- Homicide (Ch. 782)
- Sexual Offense (Ch. 794)
- Attempted Murder
- Attempted Sexual Offense
- Stalking (F.S. 784.048)
- Domestic Violence - (This includes any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking or any criminal offense resulting in physical injury or death of one family member or household member by another, who is or was residing in the same single dwelling.)

Upon completion, this form must accompany the booking paperwork. If applying for a warrant, attach this form to the filing packet.

1. Incident Report #: 14-2363 Agency: Jupiter  
Offense: 1<sup>st</sup> degree murder / Attempted 1<sup>st</sup> degree murder  
Suspect/Offender: Kimberly Lucas  
D.O.B. 10/23/73 Race: W Sex: F

2. Warrant #(s): \_\_\_\_\_

3.a. Victim's name: \_\_\_\_\_ D.O.B. 10/28/03 Race: W Sex: M  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Other: \_\_\_\_\_

b. Victim's next of kin, friend or neighbor: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Other: \_\_\_\_\_

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT#:

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY BE SUBJECT TO CONFIDENTIALITY.

### Victim/Relation Notification Waiver and Confidential Information Request.

(check applicable boxes)

**Waiver:** I choose not to be notified when the arrestee is released from custody.

**Confidential:** I request the information on this form be kept confidential (applicable only to sexual battery, stalking, child abuse, harassment or domestic violence cases).

SCANNED

Signature of person waiving notification: \_\_\_\_\_ MAY 28 2014

Printed name of person waiving notification: \_\_\_\_\_

Deputy's Name: Lindsey Nuñez I.D.# 409 Date: 5/27/14

White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records  
PFSO #0029A REV. 4/99