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ARREST / NOTICE TO APPEAR

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias 3 JUVENILE N

AD M I N I S T R A T I O N	OBT Number		Agency ORI Number 0502000		Agency Name Lantana Police Department		Agency Report Number (N.T.A.'s only) 6 4 20-000791	
D E F E N D A N T	Charge Type: Check as many as apply		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 <input type="checkbox"/>	
	Location of Arrest (Including Name of Business)		Location of Offense (Business Name, Address) 311 E OCEAN AVE 210, LANTANA, FL 33462					
J U V E N I L E	Date of Arrest		Time of Arrest		Booking Date		Booking Time	
	Jail Date		Jail Time		Location of Vehicle			
	Name (Last, First, Middle) JOHNSON, CASEY DOUGLAS							
	Alias: _____							
C O D E F	Race		Sex		Date of Birth		Height	
	W - White <input type="checkbox"/> B - Black <input type="checkbox"/>		M <input type="checkbox"/> F <input type="checkbox"/>		07/07/1971		5'10	
	Eye Color		Hair Color		Complexion		Build	
	BROWN		BROWN		LIGHT			
C H A R G E	Local Address (Street, Apt. Number)		(City)		(State)		(Zip)	
	229 SUDBURY DR, ALANTIS, FL 33462							
	Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)	
	229 SUDBURY DR, ALANTIS, FL 33462							
C H A R G E	Business Address (Name, Street)		(City)		(State)		(Zip)	
	D/L Number, State		Sec. Sec. Number		INS Number		Place of Birth (City, State)	
	J525104712470 / FL						US	
	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
N O T I C E	Charge Description BATTERY-ELDERLY		Amount / Unit		Offense #		Counts	
	Drug Activity		Drug Type		Domestic Violence		Warrant / Capias Number	
	N		N		<input type="checkbox"/> Y <input checked="" type="checkbox"/> N		784.08 (2C)	
	Statute Violation Number		Violation of ORD #		Bond			
A P P E A R	Health / Apparent Physical Condition of Defendant		Any knowledge of the following:		Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries <input type="checkbox"/>		Explain:	
	Check which apply		Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County jail <input type="checkbox"/>		PROPERTY - Received By		Released By	
	Transported By		Date Transported		Time Transported		Other	
	Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed		Name Verification (Printed by Arrestee)		(PRINT)	
A D M I N I S T R A T I O N	HOLD for Other Agency		Signature of Arresting Officer		Name of Arresting Officer (Print)		I.D. #	
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		DIAZ, PAULA G		897		Agency	
	Intake Deputy		I.D. #		Pouch #		Transporting Officer	
	I.D. #		Agency		Witness here if subject signed with an "X".		PAGE 1 OF 1	

COURT STATE ATTORNEY AGENCY CENTRAL RECORDS JAIL CRIME ANALYSIS P.I.O. DEFENDANT

PROBABLE CAUSE AFFIDAVIT

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias

3

JUVENILE

A D M I N	OBT Number		Agency ORI Number FL 0502000		Agency Name LANTANA POLICE DEPARTMENT		Agency Report Number 6 4 20-000791	
	Charge Type: Check as many as apply.		Special Notes:					

D E F	Name (Last, First, Middle) JOHNSON, CASEY DOUGLAS				Alias	Race W	Sex M	Date of Birth 07/07/1971
	Charge Description 784.08 (2C) AGG ASSAULT/ BATTERY-ELDERLY				Charge Description			

V I C T I M	Victim's Name (Last, First, Middle)				Race	Sex	Date of Birth
	Local Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone	Address Source
	Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation

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 _____ that he/she saw the arrested person commit the below acts.

confessed to _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.

On the 14 day of May, 2020 at 17:47 (Specifically include facts constituting cause for arrest.)

On Tuesday, April 21, 2020 at 0915hours, I responded to 311 E Ocean Ave unit 210, in reference to a delayed battery. Upon arrival I made contact with w/m Michael Weadock (d.o.b 08/25/45).

Mr. Weadock stated the following:

- On Thursday 04/16/20 at approximately 1600hours he attended a board meeting with other home owners in the building.
- At approximately 1630hours after the board meeting the owner of unit 209 began acting aggressive over a disagreement during the meeting. The board member is w/m Casey D. Johnson (d.o.b 07/07/71).
- Johnson began pointing his finger and yelling in Weadock's face (without a mask of gloves on). Johnson then pushed Weadock's face with his fingers, causing his bare fingers to rub across Weadock's right cheek.
- He told Johnson "Don't touch me" and Johnson left the property.

Mr. Weadock stated this is not the first time Johnson has become aggressive and intimidated himself as well as other members of the board. Mr. Weadock stated the property management company has been made aware of Johnson's behavior with elder board members.

Contact was then made with w/f Marjatta E. Karjalainen (d.o.b 10/08/37) who resides in unit 301. Mrs. Karjalainen stated she was present during the above mentioned board meeting. Mrs. Karjalainen stated she heard arguing between Weadock and Johnson. Mrs. Karjalainen stated she went toward both males to stop the argument and observed Johnson

A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER	
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		NAME OF OFFICER (PLEASE PRINT)	
	DATE		DATE	

OBT# Number

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

1. Arrest
2. N.T.A. 3. Request for Warrant
4. Request for Capias

3

JUVENILE

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FL 0502000

Agency Name

LANTANA POLICE DEPARTMENT

Agency Report Number

6 | 4 | 20-000791

Charge Type:
Check as many
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- 1. Felony
- 2. Traffic Felony
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- 5. Ordinance
- 6. Other

Special Notes:

Name (Last, First, Middle)

JOHNSON, CASEY DOUGLAS

Alias

Race

W

Sex

M

Date of Birth

07/07/1971

push Weadock's face to which Weadock responded saying "don't touch me". Mrs. Karjalainen stated she then observed Johnson step closer into Weadock and touch his face with his fingers.

No visible injuries were observed on Mr. Weadock.

On 05/13/2020 a photo lineup was conducted. An immediate positive identification of suspect w/m Casey D. Johnson (d.o.b 07/07/71) was made by Mr. Weadock.

At this point in time probable cause exists to arrest Casey D. Johnson for Battery on a person 65 years of age or older 784.08 (2) (C) F.S.S.

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SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

5/14/20
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

DIAZ, PAULA G (897)

NAME OF OFFICER (PLEASE PRINT)

05/14/2020

DATE

PAGE

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COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.