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OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1 Arrest 2 NTA.		3. Request for Warrant 4. Request for Capias		1		Juvenile	
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number 20-140925					
Charge Type: Check as many as apply.		<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type N/A		Multiple Clearance Indicator 01	
Location of Arrest (including Name of Business) PBIA-1000 James L. Turnage Blvd, West Palm Beach, FL 33406						Location of Offense (Business Name, Address) SAME					
Date of arrest 12/27/20		Time of Arrest 18:40		Booking Date		Booking Time		Jail Date		Jail Time	
Name (Last, First, Middle) MONTESINOS, ISRAEL, ANDRE						Alias (Name, DOB, Soc. Sec. #, Etc.)					
Race W - White - American Indian B - Black O - Oriental/Asian		Sex W M		Date of Birth 4/20/84		Height 5'5"		Weight 145		Eye Color BRO	
Hair Color BLK		Complexion LIGHT		Build THIN		Marital Status single		Religion Christian		Indication of: Alcohol Influence Drug Influence	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>					
Local Address (Street, Apt. Number) 11 Mossland St		(City) Somerville		(State) MA		(zip) 02144		Phone (617) 584-9282		Residence Type: 1. City 2. County 3. Florida 4. Out of State	
Permanent Address (Street, Apt. Number) same as local		(City)		(State)		(zip)		Phone		Address Source MA Driver's License	
Business Address (Name, Street) same as local		(City)		(State)		(zip)		Phone		Occupation Marketer	
D/L Number, State S90443730 / MA		Soc. Sec. Number		INS Number		Place of Birth (City, State) Machala, Ecuador		Citizenship U.S.			
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	
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	
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other		Name (Last)		(First)		(Middle)		Residence Phone			
Address (Street, Apt. Number)		(City)		(State)		(zip)		Business Phone			
Notified by: (Name)		Date		Time		Juvenile Disposition 1. Handed/ processed within Dept. and Released.		2. TOT HRS/DYS		3. Incarcerated	
Released To: (Name)		Relationship		Date		Time					
The above address was provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parents. The child and / or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address. Yes, by: (Name) No: (Reason)						School Attended		Grade			
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property				Value of Property					
Activity N N/A P Possess		S Sell B Buy T Traffic		R Smuggle D Deliver E Use		K. Dispense Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other	
Drug Type N		Drug Type N		Amount / Unit		Offense # 20-140925		Warrant / Capias Number		Bond	
Charge Description DISORDERLY INTOXICATION		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 856.011		Violation of ORD #			
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Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number		Violation of ORD #			
Location (Court, Room Number, Address)											
Court Date and Time Month Day Year Time Month Day Year Time Month Day Year Time											
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					
HOLD for other Agency Name		Signature of Arresting Officer D/S R. Sigiliano				Name Verification (Printed by Arrestee)					
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) D/S R. Sigiliano		I.D. # 4872		(PRINT)			
I.D. #		Pouch #		Name of Arresting Officer (Print) D/S R. Sigiliano		I.D. # 9339		Agency P.B.S.O.			
Witness here if suspect signed with an "X"											

SCANNED
DEC 28 2020 P.M.

PEREZ

PEREZ

DEC 27 PM 9:12

PROBABLE CAUSE AFFIDAVIT

1 Arrest
2 NTA

3 Request for Warrant
4 Request for Capias

1

Juvenile

ADMIN	OBTS Number	Agency ORI Number FL0 5 0 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 20-140925
	Charge Type Check as many as apply	<input type="checkbox"/> 1 Felony <input type="checkbox"/> 2 Traffic Felony	<input checked="" type="checkbox"/> 3 Misdemeanor <input type="checkbox"/> 4 Traffic Misdemeanor	<input type="checkbox"/> 5 Ordinance <input type="checkbox"/> 6 Other	Special Notes

DEF	Name (Last, First, Middle) MONTESINOS, ISRAEL, ANDRE	Alias	Race W	Sex M	Date of Birth 04/20/1984
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CHARGES	Charge Description DISORDERLY INTOXICATION	Charge Description
	Charge Description	Charge Description

VICTIM	Victim's Name (Last, First, Middle) STATE OF FLORIDA	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 _____

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 27th day of December 20 20 at 6:40 A.M P.M (Specifically include facts constituting cause for arrest)

On December 27, 2020 at about 6:00 PM I responded to Transportation Security Administration (TSA) Concourse C security screening checkpoint at the Palm Beach International Airport (PBI), 1000 James L. Turnage Blvd, West Palm Beach, Palm Beach County, Florida regarding a report of a male passenger in Pre-Check Lane 1 causing a disturbance.

Upon arrival I found the subject male (later identified via Massachusetts Driver's License as Israel A. Montesinos) standing outside the screening area with TSA Supervisory Transportation Security Officer (STSO) Sean Helmle.

Investigation revealed Montesinos entered the screening area Pre-Check passenger lanes and approached the Transportation Document Checker (TDC) station. Transportation Security Officer (TSO) Dennis Brown, Jr. told Montesinos he needed to produce identification and a boarding pass. Montesinos fumbled with his phone and failed to produce the required documents to TSO Brown for screening. Montesinos was verbally abusive, cursed at and berated TSO Brown. Montesinos refused to move out of the way of other passengers and employees. Montesinos walked past TSO Brown. Montesinos ignored TSO Brown's instructions to stop. Montesinos walked towards the walk-through metal detector and had to be stopped from going further by TSO Anthony Carbone and Lead Transportation Security Officer (LTSO) Vandanam Yellamaty. STSO Helmle responded. PBSO was contacted for assistance. STSO Helmle escorted Montesinos outside the screening area and awaited PBSO arrival. STSO Helmle stated Montesinos raised his hand and threatened to slap Helmle at some point.

Investigation revealed that Montesinos was scheduled to fly to Boston, Massachusetts on Jet Blue flight 2322. D/S C. Phillips (ID# 6628) and I made contact with Montesinos. I noted that Montesinos had a strong odor of an unknown alcoholic beverage on his breath. Montesinos claimed he was looking for his boyfriend. Montesinos raised his hand to D/S C. Phillips and pointed his finger close to my face. Montesinos called D/S Phillips a fucking asshole and called me a bitch. Montesinos told me he was with the Mafia. Montesinos was speaking loudly, causing a scene.

Based upon the above facts and circumstances, Montesinos was arrested for DISORDERLY INTOXICATION, F.S.S. 856.011.

ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH	4872	27th day of December 20 20 by D/S R. Siciliano #4872
	(Signature of Arresting/Investigative Officer)		
	The foregoing instrument was sworn to or affirmed and subscribed before me this _____ day of _____ 20 _____ by _____ personally known _____	(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced	

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

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SCANNED
DEC 28 2020



Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), 2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2020030286	Date: 12/28/2020
	Specialist Name/ID: AM/31562