

0530465

1476

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 22-050670					
Charge Type: Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony		☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		If Weapon Seized Enter Type		Multiple Clearance Indicator 01	
Location of Arrest (including Name of Business) 1245 SUMMERWOOD CIRCLE, WELLINGTON, FL, 33414				Location of Offense (Business Name, Address) SAME AS ARREST					
Date of arrest 3/28/2022		Time of Arrest 0804		Booking Date		Booking Time		Jail Date	
Jail Time		Location of Vehicle							
Name (Last, First, Middle) MARTINEZ, JAMIE, L				Alias (Name, DOB, Soc. Sec. #, Etc.)					
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex FL		Date of Birth 03/28/1972		Height 5'00		Weight 160	
Eye Color BROWN		Hair Color BROWN		Complexion LIGHT		Build MEDIUM			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status MARRIED		Religion		Indication of: Alcohol Influence Drug Influence	
Local Address (Street, Apt. Number) 1245 SUMMERWOOD CIRCLE		(City) Wellington,		(State) FL		(Zip) 33414		Phone (850) 694-1837	
Permanent Address (Street, Apt. Number) SAME AS ABOVE		(City)		(State)		(Zip)		Address Source FL DL	
Business Address (Name, Street)		(City)		(State)		(Zip)		Occupation	
D/L Number, State M635432887050		Soc. Sec. Number		INS Number		Place of Birth (City, State) DALLAS, TX		Citizenship YES	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		☐ 1. Arrested ☐ 2. At Large	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile	
☐ Parent ☐ Legal Custodian ☐ Other		Name (Last)		(First)		(Middle)		Residence Phone	
Address (Street, Apt. Number)		(City)		(State)		(Zip)		Business Phone	
Notified by (Name)		Date		Time		Juvenile Disposition 1. Handled/processed within Dept. and Released.		2. TOT HRS/DYS 3. Incarcerated	
Released To (Name)		Relationship		Date		Time			
The above address was provided by ☒ defendant and/or ☐ 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)				School Attended		Grade			
Property Crime? ☐ Yes ☒ No		Description of Property		Value of Property					
Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver L. Use		K. Dispense Distribute		M. Manufacture/ Produce/ Cultivate	
Z. Other		Drug Type N. N/A A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv		P. Paraphernalia/ U. Unknown Equipment S. Synthetic	
Z. Other		Charge Description DOMESTIC BATTERY		Counts 1		Domestic Violence ☒ Y ☐ N		Statute Violation Number 784.03 (1)	
Drug Activity N/A		Drug Type N/A		Amount / Unit		Offense # 22-050670		Warrant / Capias Number	
Bond		Charge Description		Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number 1	
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PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 NTA	3 Request for Warrant 4 Request for Capias	1	Juvenile
ADMIN Agency ORI Number: <u>FLO 5000000</u> Agency Name: <u>PALM BEACH COUNTY SHERIFF'S OFFICE</u> Agency Report Number: <u>22-050670</u>					
Charge Type: ☐ 1 Felony ☒ 3 Misdemeanor ☐ 5 Ordinance Check as many as apply: ☐ 2 Traffic Felony ☐ 4 Traffic Misdemeanor ☐ 8 Other		Special Notes			
DEF Name (Last, First, Middle): <u>MARTINEZ, JAMIE, L</u> Alias: _____ Race: <u>W</u> Sex: <u>F</u> Date of Birth: <u>06/05/1988</u>					
CHARGES Charge Description: <u>DOMESTIC BATTERY</u> Charge Description: _____ Charge Description: _____ Charge Description: _____					
VICTIM Victim's Name (Last, First, Middle): <u>CONN, PHILIP, R</u> Race: <u>W</u> Sex: <u>M</u> Date of Birth: <u>11/11/1989</u>					
Local Address (Street, Apt Number): <u>1245 SUMMERWOOD CIRCLE</u> City: <u>Wellington</u> (State): <u>FL</u> (Zip): <u>33414</u> Phone: <u>(850) 938-7844</u> Address Source: <u>Verbal</u>					
Business Address (Name, Street): _____ City: _____ (State): _____ (Zip): _____ Phone: _____ Occupation: _____					
PROBABLE CAUSE STATEMENT 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 <u>28</u> day of <u>March</u> 20 <u>22</u> at <u>8:04</u> ☒ A.M. ☐ P.M. (Specifically include facts constituting cause for arrest.) On 3-28-2022 at approximately 0800 hours, I responded to 1245 Summerwood Circle, Wellington in reference to a Domestic Disturbance reported by an anonymous neighbor. The neighbor notified Palm Beach County dispatch that they observed (2) adults arguing in front of the aforementioned address. Upon arrival, I made contact with both subjects in the driveway of the aforementioned address and they were identified as Philip Conn and Jamie Martinez. Both Philip and Jamie are legally deaf and the interviews had to be translated. I conducted an interview with Philip and he advised the following: Philip explained his wife, Jamie, got mad at him because he wanted to drive his Ford F150 to work. Jamie did not want Philip to use the F150 due to the current high gas prices. Philip attempted to get into his truck which was parked on the driveway of their residence. Jamie grabbed Philip by his shirt. Philip attempted to push Jamie's hand off his shirt several times but was unsuccessful. During the struggle Jamie smacked Philip across his lip. Philip explained Jamie let go of his shirt when Deputies arrived. Philip denied needing medical treatment. Philip completed a sworn written statement detailing the incident. I observed the collar of Philip's shirt stretched out and a cut on his upper lip consistent with Philip's account of the incident. Philip's injuries and shirt were photographed and the photographs were entered into the Domestic Violence Website. I then made contact with Philip and Jamie's children, Jaden and Isabella, who both had the same account of the incident. Both children explained their parents got into an argument over which vehicle Philip should drive. During the argument, they observed Jamie grab Philip by his shirt. They saw Philip trying to remove Jamie's off of his shirt but he was not able to. Jamie finally let go as Deputies were arriving on scene. Both children completed a sworn written statement detailing the incident. I made contact with Jamie who advised the following: Jamie explained she got into an argument with Philip because he used all the gas in her vehicle which she wanted him to pay for. Philip refused to pay for the gas. Philip began recording Jamie with his cellphone at which time Jamie slapped it out of his hand because she did not want to be recorded. Jamie admitted to holding onto Philip's shirt because she did not want him to leave with the vehicle. Jamie denied ever slapping Philip in the mouth. I reviewed the video taken from Philip's phone which revealed Jamie holding onto his shirt. Philip's hand can be seen attempting to remove Jamie's hand from his shirt which is consistent with his account of the incident. Based on the evidence present on scene, sworn written statements, and cellphone footage, I determined probable cause exists to arrest Jamie Martinez.					
ADMINISTRATIVE STATE OF FLORIDA COUNTY OF PALM BEACH <u>31072</u> (Signature of Arresting/Investigative Officer) _____ The foregoing instrument was sworn to or affirmed and subscribed before me this <u>28</u> day of <u>MARCH</u> 20 <u>22</u> by <u>D/S D.GORDON</u> (Print name of Arresting/Investigative Officer who is personally known to me and/or produced identification. Type of identification produced) <u>PBSO ID</u> Notary Public, Clerk of Court, Officer (F.S.S. 117.10) _____					
PAGE <u>1</u> OF <u>1</u>					

PALM BEACH COUNTY SHERIFF'S OFFICE
DOMESTIC VIOLENCE PROBABLE CAUSE SUPPLEMENTAL FORM
(SUBMIT WITH STATE ATTORNEY'S COPY OF PROBABLE CAUSE AFFIDAVIT)

CASE NUMBER: 22-050670

DEFENDANT'S NAME: Jaine Martinez

DEFENDANT'S STATEMENT: ☒ YES ☐ NO (IF YES: ☒ WRITTEN ☐ TAPED ☐ ORAL)

SYNOPSIS: crying, upset

VICTIM'S NAME: Phil Conn

VICTIM'S STATEMENTS: ☒ YES ☐ NO (IF YES: ☒ WRITTEN ☐ TAPED ☐ ORAL)

OBSERVATIONS OF VICTIM: (PHYSICAL & EMOTIONAL)

upset

RELATIONSHIP BETWEEN VICTIM AND SUSPECT: HUSBAND AND WIFE

PHOTOGRAPHS: SCENE: ☒ YES ☐ NO VICTIM(S): ☒ YES ☐ NO

911 CALL: ☒ YES ☐ NO WHO CALLED: anonymous neighbor

WEAPON USED: ☐ YES ☒ NO TYPE: _____

MEDICAL TREATMENT: ☐ YES ☒ NO

AT SCENE: ☐ YES ☒ NO PARAMEDICS: _____

AT HOSPITAL: ☐ YES ☒ NO HOSPITAL: _____

PHYSICIAN: _____

ARE CHILDREN LIVING IN HOME: ☐ YES ☒ NO

NAME: Jaden Williams

DOB: 12/30/07

NAME: Isabella Conn

DOB: 10/21/09

NAME: _____

DOB: _____

WAS ACT(S) COMMITTED IN PRESENCE OF MINOR(S): ☒ YES ☐ NO (IF YES ☐ SAME AS ABOVE OR SPECIFY)

NAME: Jaden Williams

DOB: 12/30/07

NAME: Isabella Conn

DOB: 10/21/09

NAME: _____

DOB: _____

DCF NOTIFIED: (IF CHILD ABUSE) ☐ YES ☒ NO

VICTIM PREGNANT: ☐ YES ☒ NO

PRIOR HISTORY OF DOMESTIC VIOLENCE: ☐ YES ☒ NO

ALCOHOL OR DRUGS INVOLVED: ☐ YES ☒ NO

VIOLATION OF RESTRAINING ORDER: ☐ YES ☒ NO CASE #: _____

ALTERNATE VICTIM CONTACT INFORMATION: (IF VICTIM DECIDES TO LEAVE RESIDENCE)

RELATIVE/FRIEND NAME: _____

PHONE: _____

RELATIVE/FRIEND ADDRESS: _____

VICTIM NOTIFICATION FORM

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 #: 22-050670 Agency: PBSO
Offense: Domestic Battery
Suspect/Offender: JAIME MARTINEZ
D.O.B. 6/5/88 Race: W Sex: F
2. Warrant #(s): _____
- 3.a. Victim's name: Philip Conn D.O.B. 11/11/89 Race: W Sex: M
Address: 1245 Summerwood Circle
City: Wellington State: FL Zip: 33414
Home #: (850) 644-1837 Work #: _____ Other: _____
- b. Victim's next of kin, friend or neighbor: _____
Address: _____
City: _____ State: _____ Zip: _____
Home #: _____ Work #: _____ Other: _____

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).

Signature of person waiving notification: _____

Printed name of person waiving notification: _____

Deputy's Name: D/S Gordon I.D.# 39072 Date: 3/28/22

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

SUSPECT/OFFENDER: _____

COURT CASE/WARRANT#: _____
(FOR WARRANTS USE ONLY)



**PALM BEACH COUNTY
SHERIFF'S OFFICE**
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

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

REVIEW COMPLETED BY

Booking Number: 2022007987 WDC

Date: 02/29/2022

Specialist Name/ID: T Howard/7185