

0530070

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2092

ARREST / NOTICE TO APPEAR

OBTS Number	Agency ORI Number 0500700		Agency Name Riviera Beach Police Department		Agency Report Number (N.T.A.'s only) 8 4 22-01730		1 Arrest 2 N.T.A. 3 Request for Warrant 4 Request for Capias 1		JUVENILE	
Charge Type Check as many as apply ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other	Location of Arrest (Including Name of Business) 5540 NOCEAN DR RIVIERA BEACH FL		Location of Offense (Business Name, Address) 5540 NOCEAN DR 7B, RIVIERA BEACH, FL 33404		If Weapon Seized Enter Type UNARMED		Multiple Clearance Indicator 1			
Date of Arrest 03/12/2022	Time of Arrest 02:32	Booking Date 03/12/2022	Booking Time 02:42	Jail Date	Jail Time	Location of Vehicle				
Name (Last, First, Middle) TOBIAS, KELSI		Alias:		Aunt (Name, DOB, Sec. Sec. #, Etc.)						
Race W - White A - Black O - Oriental/Asian W	Sex F	Date of Birth 11/26/1994	Height 5'09	Weight 130	Eye Color BLUE	Hair Color BROWN	Complexion LIGHT	Build SMALL		
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Married Status S	Religion CHRISTIAN	Indication of Alcohol Influence Yes ☐ No ☒ Unk ☐				
Local Address (Street, Apt. Number) 5540 NOCEAN DR 7B, RIVIERA BEACH, FL 33404				(City) (State) (Zip)		Phone				
Permanent Address (Street, Apt. Number) 5540 NOCEAN DR 7B, RIVIERA BEACH, FL 33404				(City) (State) (Zip)		Phone				
Business Address (Name, Street) 5540 NOCEAN DR 7B, RIVIERA BEACH, FL 33404				(City) (State) (Zip)		Phone				
D/L Number, State				Sec. Sec. Number	IRS Number	Place of Birth (City, State) KLAMATH FALLS, OR	Citizenship US			
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile			
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile			
☐ Parent ☐ Other: _____ ☐ Legal Custodian				Name (Last, First, Middle)				Residence Phone		
Address (Street, Apt. Number)				(City) (State) (Zip)		Business Phone				
Notified by: (Name)				Date	Time	JUVENILE DISPOSITION If Held/Proceed with Detention and Release				
Released To: (Name)				Relationship	Date	Time	VICTIM NOTIFICATION REQUIRED			
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.				School Attended		Grade				
☐ Yes, by: ☐ No				Property Crime? ☐ Yes ☒ No	Description of Property		Value of Property			
Drug Activity S. Sell N. N/A P. Possess R. Struggle D. Deliver E. Use K. Disperse/ 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/Codeine P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other						
Charge Description SIMPLE BATTERY				Statute Violation Number 784.03(1)(A)		Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number		Bond		
	N	/	22-01730	1	☒ Y ☐ N					
Charge Description				Statute Violation Number		Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number		Bond		
					☐ Y ☐ N					
Charge Description				Statute Violation Number		Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number		Bond		
					☐ Y ☐ N					
Health / Apparent Physical Condition of Defendant				Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries						
Check which applies: ☐ Released O.R. ☐ Released to Parent / Guardian ☐ T.O.T. County Jail				PROPERTY - Received By		Released By		Released To		
Transported By				Date Transported	Time Transported	Other				
☐ INSTRUCTION NO. 1 - Mandatory appearance in court ☒ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.				Location (Court, Room)		Court Date and 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				Name Verification (Printed by Arrestee)						
HOLD for Other Agency				Signature of Arresting Officer		Name Verification (Printed by Arrestee)				
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other				Points of Arresting Officer (Print)		(PRINT)				
Inmate Deputy Benillo				Pouch #	Transporting Officer CADE, C. B.	ID # 6540				
ID # 18512				Pouch #	Transporting Officer C CADE	ID # 6540				
Agency RBPB				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										

OETS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
Agency ORI Number FL FLO500700		Agency Name Riviera Beach Police Department		Agency Report Number 8 4 22-01730					
Charge Type Check as many as apply ☐ 1. Felony ☐ 2. Traffic Felony		☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		Special Notes			
Name (Last, First, Middle) TOBIAS, KELSI				Alias		Race W	Sex F	Date of Birth 11/26/1994	
Charge Description 784.03(1)(A)(1) BATTERY-SIMPLE (TOUCH OR STRIKE)				Charge Description					
Charge Description				Charge Description					
Victim's Name (Last, First, Middle) VILLEGAS, HORACIO				Race W		Sex M	Date of Birth 12/22/1966		
Local Address (Street, Apt. Number) 5540 N OCEAN DR #7B, MIAMI, FL 33169				(City) MIAMI		(State) FL		(Zip) 33169	
Business Address (Name, Street) 5540 N OCEAN DR #7B, MIAMI, FL 33169				(City) MIAMI		(State) FL		(Zip) 33169	
Phone (561) 859-6340				Address Source VICTIM		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 <u>12</u> day of <u>March</u>, 2022 at <u>02:32</u> (Specifically include facts constituting cause for arrest.) I utilized my axon body worn camera for this incident. On March 12, 2022, at approximately 0230 hours I responded to 5200 N Ocean DR, in reference to a delayed Simple Battery Domestic. Upon my arrival, I made contact with Horacio Villegas (W/M 12/22/66), who provided the following recorded statement which is a summary and not be taken as verbatim. Villegas stated at approximately 10:30pm he and his girlfriend of two years, Kelsi Tobias (W/F 11/26/94), were attending a party in West Palm Beach FL. He advised that Tobias was under the influence of alcohol from the party. While driving home in our city Tobias initiated a verbal dispute with Villegas in reference infidelities in their relationship. Villegas stated while driving he was suddenly struck multiple times on the right side of face by Tobias. Once they arrived to their residence of 5540 N Ocean DR unit 7B, He told Tobias that he would take her to the police station so she would be forced to stop hitting him. Villegas began driving his vehicle to the Riviera Beach Police Department on N Ocean DR. Villegas stated while driving Tobias continued punching him, and began kicking him in the face from her passenger seat. Villegas stopped his vehicle on the roadway and exited to run away from Tobias. He advised that Tobias took possession of the vehicle and parked it at their residence. Villegas stated while walking south on N Ocean DR he was followed by Tobias on foot. He advised while Tobias was following on the roadway she feel multiple times causing injury herself. Villegas was able to reach 5200 N Ocean DR, away from Tobias, where he called for police assistance. Villegas stated he did not wish to prosecute. Villegas appeared to have bruising under his right eye. Pictures of Villegas were taken and later entered into evidence.									
SWORN AND SUBSCRIBED BEFORE ME BYRD, RUSSELL K NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 03/12/2022 DATE CADE, CHRISTOPHER BERNARD JR NAME OF OFFICER (PLEASE PRINT) 03/12/2022 DATE PAGE 1 OF 2									

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

OBT Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1 Arrest 2 N.T.A. 3 Request for Warrant 4 Request for Capias		1	JUVENILE
Agency ORI Number	Agency Name		Agency Report Number				
FL FL0500700	Riviera Beach Police Department		8 4 22-01730				
Charge Type: Check as many as apply:			☐ 1 Felony ☒ 3 Misdemeanor ☐ 5 Ordinance ☐ 4 Traffic Misdemeanor ☐ 5 Other			Special Notes	
Name (Last, First, Middle)			Alias		Race	Sex	Date of Birth
TOBIAS, KELSI					W	F	11/26/1994
While officers were responding to the residence to make contact with Tobias, She was seen walking north on the roadway barefoot. I made contact with Tobias who had an odor of alcohol and appeared to be under the influence. Tobias stated that she and Villegas had a verbal dispute over infidelities in their relationship. She said while driving Villegas slammed her head on the dashboard. Tobias advised that Villegas stopped the vehicle and exited, leaving her in the roadway alone. She advised that she exited the vehicle to talk with Villegas. Tobias stated that Villegas pushed her backwards onto the ground and began walking south on N Ocean DR. Tobias said she parked his vehicle and went to look for Villegas. Tobias had minor road rash on her right palm, a small cut in her right foot, and a small cut on her forehead. Pictures of Tobias were later entered into evidence. The injuries she sustained appeared to be caused from falling forward onto the roadway. Based on my investigation, I found probable cause to arrest Tobias for Simple Battery Domestic F.S.S. 784.01(1)(A)(1). I transported Tobias to Saint Mary's Medical Center for medical clearance. After clearance, Tobias was transported to Riviera Beach PD for processing and later turned over to the Palm Beach County Jail.							
NOT A CERTIFIED COPY							
SWORN AND SUBSCRIBED BEFORE ME BYRD, RUSSELL K NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 03/12/2022 DATE SIGNATURE OF ARRESTING / INVESTIGATING OFFICER CADE, CHRISTOPHER BERNARD JR NAME OF OFFICER (PLEASE PRINT) 03/12/2022 DATE							
						PAGE 2 OF 2	

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

A D M I N	Date / Time 03/12/2022 03:55	Agency Name Riviera Beach Police Department		Agency Report Number 8 4 22-01730																																																																											
	Agency ORI Number FL FL0500700																																																																														
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O B S E R V A T I O N S	DEFENDANT'S STATEMENTS: Written ☐ Taped ☒ Oral ☐		OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): INJURED																																																																												
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R E L A T I O N S H I P	RELATIONSHIP BETWEEN VICTIM & SUSPECT SPOUSE																																																																														
	<table border="0"><tr><td>PHOTOGRAPHS:</td><td>Scene:</td><td>☐ YES ☒ NO</td><td colspan="2"></td></tr><tr><td></td><td>Victim:</td><td>☒ ☐</td><td colspan="2"></td></tr><tr><td></td><td>911 CALL:</td><td>☒ ☐</td><td colspan="2">CALLER: VICTIM</td></tr><tr><td></td><td>WEAPON USED:</td><td>☒ ☐</td><td colspan="2">TYPE: PERSONAL</td></tr><tr><td></td><td>WITNESSES:</td><td>☐ ☒</td><td colspan="2">(If YES, attach witness list)</td></tr><tr><td></td><td>INJURIES:</td><td>☒ ☐</td><td colspan="2"></td></tr><tr><td></td><td>MEDICAL TREATMENT:</td><td>☒ ☐</td><td colspan="2"></td></tr><tr><td></td><td>AT: Scene:</td><td>☐ ☒</td><td colspan="2">PARAMEDICS:</td></tr><tr><td></td><td>Hospital:</td><td>☒ ☐</td><td colspan="2">PHYSICIAN(S) / HOSPITAL: ST MARY'S</td></tr><tr><td></td><td>ACT COMMITTED IN PRESENCE OF MINOR(S):</td><td>☐ ☒</td><td colspan="2">NAMES/AGES:</td></tr><tr><td></td><td>H. R. S. NOTIFIED:</td><td>☐ ☒</td><td colspan="2"></td></tr><tr><td></td><td>VICTIM PREGNANT:</td><td>☐ ☒</td><td colspan="2"></td></tr><tr><td></td><td>VIOLATION OF RESTRAINING ORDER:</td><td>☒ ☐</td><td colspan="2">CASE #:</td></tr><tr><td></td><td>PRIOR HISTORY OF DOMESTIC VIOLENCE:</td><td>☐ ☒</td><td colspan="2"></td></tr><tr><td></td><td>ALCOHOL OR DRUGS INVOLVED:</td><td>☐ ☒</td><td colspan="2"></td></tr></table>					PHOTOGRAPHS:	Scene:	☐ YES ☒ NO				Victim:	☒ ☐				911 CALL:	☒ ☐	CALLER: VICTIM			WEAPON USED:	☒ ☐	TYPE: PERSONAL			WITNESSES:	☐ ☒	(If YES, attach witness list)			INJURIES:	☒ ☐				MEDICAL TREATMENT:	☒ ☐				AT: Scene:	☐ ☒	PARAMEDICS:			Hospital:	☒ ☐	PHYSICIAN(S) / HOSPITAL: ST MARY'S			ACT COMMITTED IN PRESENCE OF MINOR(S):	☐ ☒	NAMES/AGES:			H. R. S. NOTIFIED:	☐ ☒				VICTIM PREGNANT:	☐ ☒				VIOLATION OF RESTRAINING ORDER:	☒ ☐	CASE #:			PRIOR HISTORY OF DOMESTIC VIOLENCE:	☐ ☒				ALCOHOL OR DRUGS INVOLVED:	☐ ☒	
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N A R R	STATE OF FLORIDA COUNTY OF PALM BEACH Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.  SIGNATURE OF ARRESTING OFFICER Sworn to and subscribed to before me this _____ day of _____, _____ _____ NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)																																																																														

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

VICTIM NOTIFICATION FORM

This form must be filled out in a case involving one of the following crimes:

- Homicide (Ch. 782)
- Sexual Offense (Ch. 794)
- Attempted Murder
- Attempted Sexual Offense
- Stalking (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 22-01730 Agency Riviera Beach Police Department
Offense: Simple Battery (Domestic)
Suspect/Offender: Tobias Kelsi
D. O. B.: 11-26-1994 Race: w Sex: F
2. Warrant #(s): _____
3. Complete one (1) of the following:
 - a. Victim's Name: Villegas Horacio
Address: 5540 N Ocean DR unit 7B
City: Riviera Beach State: FL Zip: 33404
Home #: (561)859-6340 Work #: _____ Other: _____
 - b. Victim's next of kin:
Address: _____
City: _____ State: _____ Zip: _____
Home #: _____ Work #: _____ Other: _____
 - c. Victim's designated contact other than next of kin (for example: a friend or neighbor):
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Home #: _____ Work #: _____ Other: _____
4. Relevant identification or case numbers assigned to the case (please

WAIVER: I CHOOSE NOT TO COMPLETE THIS VICTIM NOTIFICATION FORM, AND UNDERSTAND THAT I AM WAIVING MY RIGHT TO BE NOTIFIED OF THE RELEASE OF THE SUSPECT/OFFENDER.

Signature of person waiving notification: _____

Printed name of person waiving notification: _____

Officer's Name: C Cade I.D. # 6540 Date: 03-12-2022

SUSPECT/OFFENDER

Tobias

Kelsi

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: 2022006549	Date: 3/12/2022
	Specialist Name/ID: M. Tooks #8557