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ARREST / NOTICE TO APPEAR

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias 5. Juvenile Referral 1 JUVENILE

OBTS Number	Agency ORI Number <b>0500200</b>		Agency Name <b>Boca Raton Police Department</b>		Agency Report Number (N.T.A.'s only) <b>3, 2 2020-001935</b>	
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 <b>OTHER WEAPON</b>		Multiple Clearance Indicator
Location of Arrest (Including Name of Business) <b>309 VIA DE PALMAS</b>			Location of Offense (Business Name, Address) <b>309 VIA DE PALMAS, BOCA RATON, FL 33432</b>			
Date of Arrest <b>02/09/2020</b>	Time of Arrest <b>02:46</b>	Booking Date <b>02/09/2020</b>	Booking Time <b>02:56</b>	Jail Date	Jail Time	Location of Vehicle <b>N/A</b>

Name (Last, First, Middle) <b>MARINOS, KRIS DINO</b>		Alias (Name, DOB, Soc. Sec. #, Etc.) Alias:							
Race W - White B - Black	I - American Indian O - Oriental/Asian	Sex <b>M</b>	Date of Birth <b>02/07/1964</b>	Height <b>5'09</b>	Weight <b>160</b>	Eye Color <b>BROWN</b>	Hair Color <b>LIGHT</b>	Complexion <b>LIGHT</b>	Build <b>Small</b>
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status <b>M</b>	Religion <b>GREEK ORTH</b>	Indication of Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>	
Local Address (Street, Apt. Number) <b>18241 CLEAR BROOK CIR, BOCA RATON, FL 33498</b>			(City)	(State)	(Zip)	Phone <b>(561) 870-2438</b>		Residence Type: 1. City 3. Florida 2. County 4. Out of State <b>2</b>	
Permanent Address (Street, Apt. Number) <b>18241 CLEAR BROOK CIR, BOCA RATON, FL 33498</b>			(City)	(State)	(Zip)	Phone <b>(561) 870-2438</b>		Address Source <b>SELF</b>	
Business Address (Name, Street)			(City)	(State)	(Zip)	Phone		Occupation	
DLV Number, State <b>M652504640570 / FL</b>		Soc. Sec. Number	INS Number		Place of Birth (City, State) <b>ITHACA, NY, United</b>	Citizenship <b>US</b>			

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"/> Other: _____ Name (Last, First, Middle) <input type="checkbox"/> Legal Custodian Address (Street, Apt. Number) _____ (City) _____ (State) _____ (Zip) Notified by: (Name) _____ Date _____ Time _____ 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.

Property Crime?  Yes  No

Description of Property \_\_\_\_\_ Value of Property \_\_\_\_\_

Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle 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/Deriv.	P. Paraphernalia/ Equipment S. Synthetic	U. Unknown Z. Other
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Charge Description <b>BATTERY</b>	Statute Violation Number <b>784.03(1A1)</b>	Violation of ORD # <b>78403(1A1) DD</b>					
Drug Activity	Drug Type <b>N</b>	Amount / Unit	Offense #	Counts <b>2</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number	Bond
Charge Description	Statute Violation Number	Violation of ORD #					
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number	Bond
Charge Description	Statute Violation Number	Violation of ORD #					
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number	Bond

Health / Apparent Physical Condition of Defendant <b>GOOD</b>	Any knowledge of the following: Explain: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health	<input checked="" type="checkbox"/> T.O.T. County Jail
Transported By <b>BACHAR</b>	PROPERTY - Received By <b>BACHAR</b>
Date Transported <b>02/09/2020</b>	Time Transported <b>04:00</b>

<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court	<input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court	Location (Court, Room) <b>South County 200 W Atlantic Ave Delray Beach, FL 33444</b>
but must comply with instructions on Page 2.		Court Date and Time <b>03/12/2020 08:30:00</b>
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	Signature of Arresting Officer <b>[Signature]</b>	Name Verification (Printed by Arrestee) <b>BACHAR, B.</b>
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other	I.D. # <b>793</b>
Intake Deputy <b>SPANN 8161</b>	Pouch #	Transporting Officer <b>BACHAR</b>
I.D. #	I.D. # <b>793</b>	Agency <b>BOCA</b>

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

OBTS Number	Agency ORI Number <b>FL 0500200</b>		Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>		Agency Report Number <b>3   2   2020-001935</b>	
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other					Special Notes:	

Name (Last, First, Middle) <b>MARINOS, KRIS DINO</b>			Alias	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>02/07/1964</b>
Charge Description <b>784.03(1A1) SIMPLE BATTERY</b>		Charge Description				
Charge Description		Charge Description				

Victim's Name (Last, First, Middle) <b>MESSINA, JOSEPH VERADALINO J</b>			Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>02/23/1966</b>	
Local Address (Street, Apt. Number) <b>18196 CLEAR BROOK CIRCLE, BOCA RATON, FL 33498</b>		(City)	(State)	(Zip)	Phone <b>(561) 563-1439</b>	Address Source
Business Address (Name, Street) <b>HONDA</b>		(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 9 day of February, 2020 at 02:53 (Specifically include facts constituting cause for arrest.)

On February 9, 2020 at 0040 hours, I responded to 309 Via De Palmas (Biergarten) in reference to a battery investigation.

Upon arrival I met with the two victims, Joseph Messina and Pamela Boyle, who both refused medical attention. I first spoke with Messina who advised he was in a physical altercation with Kris Marinos. According to Messina, he and Boyle are currently dating and while at the bar there was a disturbance between multiple patrons. One of the patrons being Marinos, began to argue with Boyle. During the argument, Marinos suddenly pushed Boyle back causing her to stumble. Messina stated he witnessed Marinos push Boyle, which he then approached Marinos and pushed him back, to prevent an additional battery to Boyle. Marinos grabbed a beer mug from the bar and hit him in the left side of his head with it, causing a contusion and minor bleeding (photos taken and submitted into evidence). It should be noted, the beer mug did not break.

After I spoke with Boyle who also advised of a disturbance at the bar which led to a physical altercation with Marinos. According to Boyle, while she was standing by the bar, Marinos suddenly pushed her causing her to stumble backwards. After being pushed, she witnessed Messina approach Marinos and push him to defend her against an additional battery, at which point, Marinos grabbed a beer mug from the counter of the bar and struck him with it in the left side of his head.

I then checked video surveillance which captured the whole incident. It first showed a disturbance between multiple patrons near the bar. Boyle is seen near Marinos when she was suddenly pushed backwards, in what appears to be an unprovoked attack. Shortly after, Messina walks towards Marinos and pushes him back, at which point, Marinos is seen swinging a beer mug in his right hand and striking Messina in the left side of his head with it. It should be noted, the video surveillance was unable to be retrieved on scene at this time.

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER 	
	<b>MAZER, DEREK P.</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	<b>BACHAR, BRIAN (793)</b> NAME OF OFFICER (PLEASE PRINT)	
	<u>02/09/2020</u> DATE	<u>02/09/2020</u> DATE	
		PAGE 1 OF 2	

OBTS Number	Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>	Agency Report Number <b>3   2   2020-001935</b>
Agency ORI Number <b>FL 0500200</b>		

Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other	Special Notes:
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Name (Last, First, Middle) <b>MARINOS, KRIS DINO</b>	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>02/07/1964</b>
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PROBABLE CAUSE STATEMENT

I then met with Marinos and read him is Constitutional Warnings from a pre-printed card and he advised he wished to speak to me. When asked, he admitted to pushing Boyle backwards and then he "swung" at Messina after he lunged at him after he pushed Boyle. Marinos later stated he "swung" at Messina with what he believed was a beer mug, but was unsure if he made contact with him or not.

Based on Messina's and Boyle's statements and injury, video surveillance, and Marinos admitting to battering both parties, I developed probable cause to arrest Kris Marinos for two counts of Simple Battery, pursuant to F.S.S. 784.03(1a1).

Marinos was then transported to the Boca Raton Police Department for processing and later transported to the Palm Beach County Jail.

NOT A CERTIFIED COPY

SWORN AND SUBSCRIBED BEFORE ME  <u>MAZER, DEREK B</u> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)  <u>02/09/2020</u> DATE	<u></u> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  <u>BACHAR, BRIAN (793)</u> NAME OF OFFICER (PLEASE PRINT)  <u>02/09/2020</u> DATE
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**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)
<b>L/E Exemptions</b>	<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.	
<b>Public Info. Exemptions</b>	<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.	
<b>Florida Rules of Judicial Administration 2.420 (Rule of 23)</b>	<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"/>			
<b>Other</b>	<input type="checkbox"/>	782.04 (FS)	Other: Witness	
	<input type="checkbox"/>	415.107 (1)	Other: in order to protect the rights of the individual or other persons responsible for the welfare of a vulnerable adult, all records concerning reports of abuse, neglect, or exploitation of the vulnerable adult.	

**REVIEW COMPLETED BY**

Booking Number: 2020004417	Date: 2/9/2020
	Specialist Name/ID: M. Tooks #8557

**SCANNED  
FEB 09 2020**