

502020-MM-008334-ASB
0352692

672

OBTS Number		ARREST / NOTICE TO APPEAR				1. Arrest	3. Request for Warrant	1	Juvenile	N	
Agency ORI Number		Agency Name			Agency Report Number (N.T.A.'s only)						
FLO 500000		PALM BEACH COUNTY SHERIFF'S OFFICE			06-20-120073						
Charge Type: Check as many as apply.		1. Felony		<input checked="" type="checkbox"/> 3. Misdemeanor		5. Ordinance		Weapon Seized / Type			
		2. Traffic Felony		4. Traffic Misdemeanor		6. Other		2		Multiple Clearance Indicator	
1. Location of Arrest (Including Name of Business)		Location of Offense (Business Name, Address)									
10114 S. Military Trail, Boynton Beach, FL 33436		10114 S. Military Trail, Boynton Beach, FL 33436									
Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle					
10/25/2020	0631										
Name (Last, First, Middle)						Alias (Name, DOB, Soc. Sec. #, Etc.)					
Marinelli, Matthew, James											
Race		Sex		Date of Birth		Height		Weight		Eye Color	
W - White I - American Indian B - Black O - Oriental/Asian		W M		06/13/1990		5'10		200		Brn	
Hair Color		Complexion		Build							
Brn		Light		Med							
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status		Religion		Indication of Alcohol Influence Drug Influence	
N/A						Single		CHRISTIAN		Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>	
Local Address (Street, Apt. Number)				(City)		(State)		(Zip)		Phone	
6396 Lansdowne Cir, Boynton Beach, FL 33472				Boynton Beach		FL		33472		(561) 222-1242	
Permanent Address (Street, Apt. Number)				(City)		(State)		(Zip)		Phone	
6396 Lansdowne Cir, Boynton Beach, FL 33472				Boynton Beach		FL		33472		()	
Business Address (Name, Street)				(City)		(State)		(Zip)		Phone	
										()	
DL Number State		Soc. Sec. Number		INS Number		Place of Birth (City, State)		Citizenship			
M654550902130, FL						Boynton Beach, Fl		US			
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		Address (Street, Apt. Number)						(City)		(State)	
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 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 (Phone 355-2526) informed of any change of address.						School Attended		Grade			
<input type="checkbox"/> Yes, by (Name)						<input type="checkbox"/> No (Reason)					
Property Crime?		Description of Property				Value of Property					
<input type="checkbox"/> Yes <input type="checkbox"/> No											
Drug Activity		S. Sell		R. Smuggle		K. Dispense/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other	
N. N/A		B. Buy		D. Deliver							
P. Possess		T. Traffic		E. Use							
Drug Type		B. Barbiturate		C. Cocaine		E. Heroin		H. Hallucinogen		P. Paraphernalia/ Equipment	
N								W. Marijuana		S. Synthetics	
Amount / Unit		Offense #		Statute Violation Number		Warrant / Capias Number		Bond			
N		20-120073		843.02							
Charge Description		Counts		Domestic Violence		Statute Violation Number		Violation of ORD #			
Resisting Arrest Without Violence		1		<input type="checkbox"/> Y <input type="checkbox"/> N		843.02					
Charge Description		Counts		Domestic Violence		Statute Violation Number		Violation of ORD #			
				<input type="checkbox"/> Y <input type="checkbox"/> N							
Charge Description		Counts		Domestic Violence		Statute Violation Number		Violation of ORD #			
				<input type="checkbox"/> Y <input type="checkbox"/> N							
Charge Description		Counts		Domestic Violence		Statute Violation Number		Violation of ORD #			
				<input type="checkbox"/> Y <input type="checkbox"/> N							

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PROBABLE CAUSE AFFIDAVIT

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

Juvenile I N

OBTS Number

Agency ORI Number FLO 500000

Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number 06- 20-120073

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) Marinelli, Matthew, James Alias Race W Sex M Date of Birth 06/13/1990

Charge Description Resisting Arrest Without Violence 843.02 Charge Description

Charge Description Charge Description

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. [X] committed the below acts in my presence. [] confessed to admitting to the below facts. [] was observed by who told that he/she saw the arrested person commit the below acts. [] was found to have committed the below acts, resulting from my (described) investigation. On the 25 day of October 20 20 at 0630 [X] A.M. [] P.M. (Specifically include facts constituting cause for arrest.)

On Sunday 10/25/20 at approximately 0616hrs I responded to Sheehan's Corner Pub located at 10114 S. Military Trail in reference to an aggravated battery with a baseball Bat (CN: 20-120074). While enroute dispatch advised that the suspect of the battery was in a white vehicle located in the parking lot of the pub. D/S Vick #7251 arrived on scene and also advised that the suspect was in a white vehicle in the parking lot. I arrived on scene and observed that Cpl. Dufort #9005 and D/S Hayes #13670 were out with a white 4 door Ford Fusion (Fl Tag GKES31). As I was arriving on scene, I observed that D/S Hayes was removing the front black male passenger from the vehicle. The subject was compliant and D/S Hayes placed him in handcuffs to the rear. I approached the vehicle and Cpl. Dufort asked me to detain the the driver so we could conduct a show-up with the victim of the battery. At this point I opened the driver side door and asked the driver, who was later identified as Matthew Marinelli, to step out of the vehicle. Marinelli refused to step out of the vehicle. I then took Marinelli by his left wrist and asked him again to step out of the vehicle or he would be arrested for resisting arrest. Marinelli tensed up and began to pull his wrist towards his body. I told Marinelli that if he did not get out of the vehicle that I would remove him from the vehicle and he would be placed under arrest. Marinelli tensed up more and pulled his wrist that I was holding closer to his body. At this point I pulled Marinelli out of the vehicle by his left wrist and left shoulder, then directed him to the ground. While on the ground Cpl. Dufort and I attempted to places Marinelli in handcuffs to the rear. Marinelli continued to resist by tensing up and trying to pull his arms under his body. After a brief struggle I was able to place Marinelli in handcuffs to the rear. I placed 2 sets of handcuffs on Marinelli, I double locked the cuffs and checked them for proper fit. I have probable cause to to charge Marinelli with Resisting Arrest Without Violence. I placed Marinelli in the rear of my marked patrol vehicle and transported him to the main county jail without further incident.

STATE OF FLORIDA COUNTY OF PALM BEACH Cpl. M. Miller 7947 (Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 25 day of October 20 20 by Cpl. Michael Miller

(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification Type of identification produced D/S B. Black #20407 B. Black Known

Notary Public, Clerk of Court, Officer (F.S.S. 1*7.10)



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)(ii)	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: 2020025138	Date: 10/26/2020
	Specialist Name/ID: AM/31562