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OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request For Warrant 4. Request For Copies		1		Juvenile <input type="checkbox"/>							
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06		21-134311											
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		Multiple Clearance Indicator		0 1											
Location of Arrest (Including Name of Business) 16268 PANTHEON PASS BOCA RATON, FL		Location of Offense (Including Name of Business) 16268 PANTHEON PASS BOCA RATON, FL		Date of Arrest 12/3/21		Time of Arrest 2048		Booking Date Dec 3, 2021		Booking Time							
Jail Date Dec 3, 2021		Jail Time		Location of Vehicle													
Name (Last, First, Middle) LANCASTER MELISSA		Alias (Name, DOB, Soc. Sec. #, Etc.)															
Race W - White B - Black O - Oriental/Asian W F		Sex F		Date of Birth 05/27/1994		Height 5'5		Weight 161		Eye Color BLUE		Hair Color BLONDE		Complexion TAN		Build SMALL	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE		Marital Status SINGLE		Religion NONE		Indication of Alcohol Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk <input checked="" type="checkbox"/>											
Local Address (Street, Apt. Number) 1731 NORTHEAST 24TH AVE		City POMPANO BEACH		State FL		Zip 33062		Phone 561-788-2575		Residence Type 1. City 2. County 3. Florida 4. Out of State 3							
Permanent Address (Street, Apt. Number) 1731 NORTHEAST 24TH AVE		City POMPANO		State FL		Zip 33062		Phone 561-788-2575		Address Source FL DRIVERS LICENSE							
Business Address (Street, Apt. Number)		City		State		Zip		Phone		Occupation BUSINESS OWNER							
Dtl. Number, State L522541948870		Social Security Number		INS Number		Place of Birth FT. LAUDERDALE, FL		Citizenship UNITED STATES									
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							
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other		Name (Last, First, Middle)		Phone													
Address (Street, Apt. No.)		City		State		Zip		Business Phone									
Notified By (Name)		Date		Time		Juvenile Disposition: 1. Handled/Processed within Dept. and Released 2. TOT HRS/OYS 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 parent and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 561 355-2526) informed of any address change		School Attended		Grade													
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property													
Drug Activity N. N/A P. Possess		B. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. 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 P. Paraphernalia/ Equipment U. Unknown Z. Other					
Charge Description TRESSPASS AFTER WARNING		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 810.09 (2)(5)		Violation or ORD. #									
Drug Activity N		Drug Type N		Amount/Unit		Offense # 21-134311		Warrant/Capias Number		Bond							
Charge Description RESIST WITHOUT VIOLENCE		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 843.02		Violation or ORD. #									
Drug Activity N		Drug Type N		Amount/Unit		Offense #		Warrant/Capias Number		Bond							
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number		Violation or ORD. #									
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond							
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number		Violation or ORD. #									
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond							
Location (Court, Address, Room Number) South county court House		Court Date and Time Month DECEMBER Day 31 Year 2021 Time 0830 AM <input checked="" type="checkbox"/>		I AGREE TO APPEAR AT THE ABOVE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT I SHOULD 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 of Arresting Officer G. PHILIPPE		ID # 32410		Name Verification (Printed by Arrestee)											
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Intake Report Dung 696		ID #		Pouch #		Transporting Officer G. PHILIPPE		ID # P801							
Witness here if subject signed with an "X"		Page 1 of 1															

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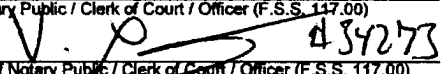

OBTS Number		<b>PROBABLE CAUSE AFFIDAVIT</b>		1. Arrest 3. Request For Warrant 2. N.T.A. 4. Request For Capias		1	Juvenile
Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number <b>06</b>		<b>21-134311</b>	
Charge Type: Check as many as apply <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		Special Notes					
Defendant Name (Last, First, Middle) <b>LANCASTER MELISSA</b>				Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>05/27/1994</b>	
Charge <b>TRESSPASS AFTER WARNING</b>		Charge <b>Resist without</b>					
Victim Name (Last, First, Middle) <b>BETZ EDDIE</b>		Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>01/29/1980</b>			
Local Address (Street, Apt. Number) <b>16268 PANTHEON PASS</b>		City <b>BOCA RATON</b>	State <b>FL</b>	Zip <b>33446</b>	Phone <b>917-837-5495</b>	Address Source <b>FL. DRIVERS LICENSE</b>	
Business Address (Street, Apt. Number)		City	State	Zip	Phone	Occupation	
The undersign 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... <input checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input type="checkbox"/> confessed to admitting to the below facts. <input type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.							
On the <b>3</b> day of <b>DECEMBER</b> 20 <b>21</b> at <b>2048</b> <input checked="" type="checkbox"/> AM <input checked="" type="checkbox"/> PM							

ON THE ABOVE DATE AND TIME I RESPONDED TO THE ABOVE LISTED ADDRESS IN REFERENCE TO AN IN PROGRESS DOMESTIC DISTURBANCE UPON ARRIVAL CONTACT WAS MADE WITH THE COMPLAINANT WHO ADVISED THAT HIS EX-GIRLFRIEND MELISSA LANCASTER ENTERED HIS RESIDENCE WITHOUT HIS CONSENT USING THE GARAGE CODE THAT SHE HAD KNOWN. EDDIE ADVISED THAT HE HAS HER ON HIS PERSONAL DO NOT ALLOW LIST FOR THE SEVEN BRIDGES COMMUNITY WHICH HE RESIDES IN AND ADVISED THAT HE WAS UNSURE HOW SHE WAS ABLE TO GAIN ENTRY. EDDIE ASKED MELISSA TO LEAVE THE RESIDENCE WHILE IN OUR PRESENCE WHEN SHE ADVISED THAT SHE WAS NOT GOING TO LEAVE. I THEN WENT UPSTAIRS AND MADE CONTACT WITH MELISSA. I ASKED MELISSA IF SHE HAD ANYTHING TO SHOW THAT SHE RESIDED AT THE RESIDENCE WHEN SHE ADVISED THAT SHE SHI DID BECAUSE SHE HAD A BAG OF CLOTHING AND SHOES IN THE GARAGE. EDDIE TOLD ME THAT MELISSA DID NOT RESIDED THERE AND WAS UNAWARE THAT SHE WOULD BE COMING TO HIS RESIDENCE. I EXPLAINED TO MELISSA THAT SHE WOULD BE ARRESTED IF SHE REFUSED TO LEAVE THE RESIDENCE. MELISSA TOLD ME THAT SHE DID NOT CARE AND STATED "TAKE ME".

WHILE ESCORTING MELISSA TO MY MARKED PATROL VEHICLE SHE ADVISED THAT IT WAS OKAY AND THAT SHE WAS LEAVING. AS ATTEMPTED TO PLACE MELISSA IN THE BACK SEAT OF MY PATROL VEHICLE SHE ADVISED THAT SHE DID NOT WANT TO TO GO AND TENSED HER MUSCLES TO PREVENT HERSELF FROM BEING PLACED INSIDE.

DUE TO THE CONSTANT COMPLAINING AND CONCERN ABOUT MELISSA'S SONS WHERE ABOUTS I CONTACTED HER FATHER GARY AND EXPLAINED TO HIM HER CURRENT SITUATION. GARY ADVISED THAT HE IS HER CURRENT BABYSITTER AND THAT HE WAS CURRENTLY WATCHING HER SON.

BASED ON MY INVESTIGATION I FIND PROBABLE CAUSE TO CHARGE MELISSA WITH TRESSPASS AFTER WARNING AS WELL AS RESISTING WITHOUT VIOLENCE.

The foregoing instrument was sworn to and affirmed before me this <b>3RD</b> day of <b>DECEMBER</b> 20 <b>21</b> , by:			
<b>V. LAGROTTERIA</b>		<b>G. PHILIPPE</b> <b>32410</b>	
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)		Name of Arresting/Investigating Officer	
			
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)		Signature of Arresting/Investigating Officer	
		Page <b>1</b> of <b>1</b>	



**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"/>			
	<input type="checkbox"/>			
<b>Other</b>	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

**REVIEW COMPLETED BY**

Booking Number: 2021030451

Date: 12/4/2021

Specialist Name/ID: M.Meek/33849