

Broward County Sheriff's Office

17008 234 MMAIDA — MV Booking Report





CIS#	551700617			BCCN	#	888035	;	İ	Booki	ng Sheet Contr	ol Date and Time	
OBTS	607235783		Print	Clearan	ce 09/0	7/17 02 1	19 57 Prints	Yes	09/07/17 04 25 59			
Arrest #	DV 1700617		Offen	se Repo	ort #	17054764	4		Agend	cy DAVIE		
Last Name First Middle	SPAK	oski,	MADIS	ON DO	DUCETT	ΓΕ			SSN	#	1417	
Race	Sex	Height	Weight	Eyes	Haır	Comp	Age Admitted	DOB	Place	of Birth	State FDLE	
N	М	601	140	BLU	BRO	LGT	32	3/22/1985	BRYNN	1AR	PENNSYLVA 0 NIA	
Permanent Address	5510 SW 40T	H STRE	ET DAV	IE FL 3	3314					Months of Resid	lence	
Arrest Date	09/07/17 00	37 00	P	lace of A	rrest 55	10 SW 40	TH STREET	Arrest	ing Office	r 711 CAIN		
Inmate Log	ged Date	09/07/17	7 02 04 0	6	Inmate Lo	од Туре	FULL INTAKE	S P	Place Adm	nitted M	/AIN	
ntake Com	ments SP/CO	/29/54-6	162 WC-	15548				3				
Alias Last r	name, First, Mid	dle, DOE	B SPAI	KOSKI, I	MADISON	I, DOUCE	ETC.					
Warrants O	fficer ld bs1554	18										
Scars,Marks	s,Tattoos											
		ī	Back			ANKER V	N/ SHOTGUN E	BLAST				
Scars		ı	Jack	10-								
	te/Time		Back	Release	Reason					Release Auth	norized By	
Release Da	Charge	Initiatio	n Date	Stat	e Reason ute	v	Warrant/Capias	Level	M C	B Type	Bond Amount	
Scars Release Da Charge No 1 Charges	Charge	i nitiatioi /07/17 04	n Date 1 06	Stat 784	e Reason ute 03-1a1(He	V G)			M C		Bond Amount	

* End of Report *

COMPLAINT AFFIDAVIT

SHADED FIELDS MUST BE ANSWERED IF DEFENDANT NOT IN CUSTODY

ARREST FORM

ARREST# DV617 OBTS# Offense Report FDLE . Local ID# FL0061202 DAVIE PD 17-054764 Defendant s Last Name Middle Alias/Street Name Citizenship **MADISON DOUCETTE** SPAKOSKI US DOB Birth Place Race Eves Comp Age BROW **GREE** 6'01 140 **MEDIU** 03/22/1985 BRYNMAR, PA, United States Permanent Address Scars Marks TT 5510 SW 40TH ST, DAVIE, FL 33314 Residence Type (X) City Place of Employment Local Address 5510 SW 40TH ST, DAVIE, FL (2) County (3) Florida (4) Out of State HARD ROCK. How long defendant in Breathalyser By/CCN Place of Arrest Date/Time Arrested Arresting Officer(s) CCN Reading **Broward County** 5510 SW 40TH STREET 09/07/2017 CAIN, SHELIA (711) PMD Y N X Officer Injured Y N X Shift Trans Unit Transporting Officer/CCN Pick-up Time Time Arrived/BSO M-Manufacture/ E-Heroin P-Paraphernalia/ Activity TYPE / ACTIVITY Type T-Traffic Indication of UK H-Hallucinogen Equipment Produce/Cultivate A-Smuggle A-Amphetamine S-Synthetic P-Possess K-Dispense/ M-Marijuana D-Deliver Drug Influence

X B-Barbiturate O-Opium/Deriv U-Unknown S-Sell Distribute E-Use Z-Other C-Cocaine Z-Other B-Buy Defendant's Vehicle Make Color. VIN# Year Attach Other identifiers or remarks Defendant's Vehicle Towed To Photo Name of victim(s) (if corporation exact legal name and state of incorporation) KAHAN, JACLYN ALYCE 5510 SW 40TH STREET, DAVIE, FL 33314 (305) 494-2432 Offenses Charged Count # WC# / Citation # (if applicable) FS or Capias/Warrant # BATTERY (INTENTIONAL STRIKE OR TOUCH TO ANOTHER PERSON) 784.03(1)(A)1 Probable Cause Affidavit Before me this date personally appeared __CAIN, SHELIA (711) who being first duly sworn deposes and says that on 2017 at 5510 SW 40TH ST, DAVIE, FL 33314 day of September (year) the above named defendant committed the above offenses charged and the facts showing probable cause to believe the same are as follows I met with Madison Spakoski, victim/ offender, who was standing outside the residence in the yard/ roadway area Madison advised that his live in girlfriend, struck him in the shoulder Madison advised that was upset that he would not evacuate for the storm Madison and have lived together for a year and have been in a relationship for a year and half. Madison advised that phone with her mother lying about them evacuating for the storm. When he questioned * * * Continued * * * I swear the above statement is correct and true to the best of my knowledge and belief CAIN, SHELIA (711) Patrol Division Officer/Affiant's Signature Officer's Name/CCN Officer's Division -KA OX STATE OF FLORIDA COUNTY OF BROWARD September Sworn to (or affirmed) and subscribed before me this 7 day of OFFICER CAIN, SHELIA (name and title), who is personally known to me or has produced Title/Rank and CCN Notary Public Deputy Clerk of the Court or Assistant State Attorney (SEAL) Seventeenth Judicial Circuit FIRST APPEARANCE/ARREST FORM Orig -Court Broward County State Attorney State of Florida 3rd - Filing Agency (SHOULD ADDITIONAL SPACE BE NEEDED, USE THE PROBABLE CAUSE AFFIDAVIT CONTINUATION (BSO DB#2a)) Arresting Agency BSO DB-#2 (Revised 05/00)

29/154 belon

COURT COPY SPLOD LUID

WU15546

□ COMPLAINT AFFIDAVIT

BROWARD CO			PROBABLE CAL	JSE AFFIDAVIT CONT			MARKEST FORIV
Filing Agency	/61/	Offense Report	Local ID*#*>	FDLE	FBI	3TS#	
DA	VIE PD	17-054764	LOCAL ID #	FL0061202	JOM	ies jič	
Defendant s Last		1.	irst Middle		as/Street Name	ance	Citizenship
SPAKOSKI		egal name and state of in	MADISON DOUCETT	<u>E</u>	0001	01100	US
I value of victim(s)	(ii corporation exact is	garrianie and state of it	(corporation)				
							7 / 1
Count #		Offer	ises Charged		WC# / Citation # (if appli	ıcable) FS	or Capias/Warrant #
			* * * CFF	PAGE	1 * * *		
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						<u> </u>	
			Probab	le Cause Affidavit	€.		
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			5510 SW 40TH ST, DAV	TE. FL 33314	who being in	st duly swom depo	(crime location)
			es charged and the facts sh		to believe the same are as	follows	(crime location)
s	she struck	him in the	right shoulder	. Madıson th	nen said, "It	was more :	like a
tap. Mac	dison advis	ed that the	e tap did not o	ause any in	jury Madison	advised tl	nat he
left the	e residence	after the	incident to ca	all police V	When Madison w	alked out	the front
door	locked	the door b	oehind him. Mad	lison advised	d that he did :	not wish	co
prosecut	ce r	egarding th	ne incident				
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			advised that				· · · · · · · · · · · · · · · · · · ·
		to prosecut			that Madison		g and
grabbing	her was d	lone against	t her will				
						* * * Co	ntinued * * *
I swear the abov	re statement is corre	ct and true to the bes	t of my knowledge and belie	ef			
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Officer/Affiant's	_		Officer's Name/CCI	N		Officer's Division	<u>.</u>
STATE OF FLO						E Z	inns.
		ed before me this	7 day of	September ,	(year),	₹.	<u>~</u> " 🗫
by	OFFICER CA				wn to me or has produced	10元	T 3
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Notary Public De	puty Clerk of the Court.	or Assistant State Attorn	ney	Tit	tle/Rank and CCN	EIVED	
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		11710 PCC 1				—	

Print Type or Stamp Commissioned Name of Notary Public Seventeenth Judicial Circuit

Broward County State of Florida

BSO DB-#2a (Revised 05/00)

FIRST APPEARANCE/ARREST FORM

COURT COPY

(SEAL)

Orig - Court 2nd - State Attorney 3rd - Filing Agency 4th - Arresting Agency

BROWARD COUNTY

□ COMPLAINT AFFIDAVIT

☑ ARREST FORM

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ADDECT#	DI// 1

PROBABLE CAUSE AFFIDAVIT CONTINUATION

ARREST# DV617					OBTS#				
Filing Agency	VIE PD Offense Re	eport -054764	Local ID#	FDLE FL00612	PBI	SS#			
Defendant's Last		First	Middle	SUF	Alias/Street Name	2	Citizenship		
SPAKOSKI			ISON DOUCETTE			4.7	US		
Name of victim(s)	(if corporation exact legal name and	d state of incorpor	ration)			<u>ņestic</u>	2		
		10.				ience			
Count #		Offenses C	Charged	<u> </u>	WC# / Citation # (if app		FS or Capias/Warrant #		
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		*:	* * CFF	PACI	7 1 * * *				
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			Probable	Cause Affiday	ıt.				
Before me this	date personally appearedCA	IN, SHELIA	(711)		who being fi	rst duly sworn d	eposes and says that on		
6_ day o	September, (year) 2017	7 at 5510	SW 40TH ST, DAVIE	E, FL 33314			(crime location)		
the above nam	ed defendant committed the abo	ve offenses ch	arged and the facts show	ving probable cau	se to believe the same are as	follows			
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Departme	ent for processin	ıg							
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I swear the about	ve statement is correct and true	to the best of m	y knowledge and belief						
AS.	and H	711	CAIN, SHELIA	(711)			Patrol Division		
Officer/Affiant's	Signature	·	Officer's Name/CCN			Officer's Divis	ion		
STATE OF FLO									
COUNTY OF B	ROWARD firmed) and subscribed before m	a this	7 day of	September	. 2017 (year),				
	OFFICER CAIN, SHE				nown to me or has produced	1			
by	OTTICLE CAIN, SHE		(name and title), v	who is personally i	as identificatio				
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//	10 John)			Tulo/Pank and CON				
Notary Public De	eputy Clerk of the Court or Assistant	State Attorney			THE/RATIK AND CON				
<u> 5d</u>	LAMBUL 2		····		(SEAL)				
Print Type or Sta	amp Commissioned Name of Notary F	Public			(SEAL)				

Seventeenth Judicial Circuit

Broward County

State of Florida

BSO DB-#2a (Revised 05/00)

FIRST APPEARANCE/ARREST FORM

COURT COPY

2nd - State Attorney
3rd - Filing Agency
4th - Arresting Agency