22mm10278 NB

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
	0501700	Jupiter Police Department	5 4 22-004794

Charge Type (Check as many as apply): ☐ 1. Felony ☒ 3. Misdemeanor ☐ 5. Ordinance
☐ 2. Traffic Felony ☐ 4. Traffic Misdemeanor ☐ 6. Other

If Weapon Seized — Enter Type: UNARMED

Multiple Clearance Indicator:

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
319 GEORGIAN PARK DR JUPITER FL	319 GEORGIAN PARK DR, JUPITER, FL 33458

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
12/17/2022	02:15	12/17/2022	02:25			

DEFENDANT

Name (Last, First, Middle): SULLIVAN, MEGAN MAE
Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	08/17/1995	5'03	125	BLUE	BLONDE /	LIGHT	Small

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description):

Marital Status: S
Religion: OTHER
Indication of Alcohol Influence: ☒ Yes ☐ No ☐ Unk
Drug Influence: ☐ Yes ☒ No ☐ Unk

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type (1 City, 2 County, 3 Florida, 4 Out of State)
130 MILBRIDGE DR, JUPITER, FL 33458				(561) 262-8721	

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
130 MILBRIDGE DR, JUPITER, FL 33458				(561) 262-8721	

Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation
,					

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
S415553957970, FL	[redacted]		WEST PALM BEACH,	US

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	
				☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile ☐ 2. At Large ☐ 4. Misdemeanor
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	
				☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile ☐ 2. At Large ☐ 4. Misdemeanor

JUVENILE

☐ Parent ☐ Other ☐ Legal Custodian — Name (Last, First, Middle) — Residence Phone

Address (Street, Apt. Number) (City) (State) (Zip) — Business Phone

1 - O.R.

Notified by (Name) — Date — Time — JUVENILE DISPOSITION (1 Handled/Processed within Department and Released, 2. TOT JAC, 3. Incarcerated)

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.
☐ Yes, by: ☐ No:

School Attended — Grade

Property Crime? ☐ Yes ☒ No — Description of Property — Value of Property

CODE

Drug Activity: N. N/A, P. Possess, S. Sell, B. Buy, T. Traffic, R. Smuggle, D. Deliver, E. Use, K. Disperses/ 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/Derv, P. Paraphernalia/ Equipment, S. Synthetic, U. Unknown, Z. Other

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
DISORDERLY CONDUCT - DISORDERLY INTOXICATION	856.011	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE

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

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
					☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By	Released By	Released To

Transported By	Date Transported	Time Transported	Other
	/ /	: :	

NOTICE TO APPEAR

☒ 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): North County PALM BEACH GARD
Court Date and Time: 01/18/2023 08:30:00

No Photo Available

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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED

Signature of Defendant (or Juvenile and Parent/Custodian) — Date Signed

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Intake Deputy — I.D. # — Pouch #

Signature of Arresting Officer

Name of Arresting Officer (Print): COUNTS, RUSSELL L — I.D. #: 1150

Transporting Officer: R. COUNTS — I.D. #: 1150 — Agency: JPD

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an X

PAGE 1 OF 1

2022 DEC 19 AM 11:17 PALM BEACH COUNTY FLORIDA CLERK & COMPTROLLER

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P.I.O. ☐ DEFENDANT

NOT A CERTIFIED COPY

VC 0536746 P 3365

PROBABLE CAUSE AFFIDAVIT

OBTS Number:

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

JUVENILE:

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FL 0501700	JUPITER POLICE DEPARTMENT	5 | 4 | 22-004794

Charge Type: Check as many as apply. ☐ 1. Felony ☒ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☐ 4. Traffic Misdemeanor ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
SULLIVAN, MEGAN MAE		W	F	08/17/1995

CHARGES

Charge Description	Charge Description
856.011 DISORDERLY CONDUCT - DISORDERLY INTOXICATION	

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
State Of Florida			

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source

Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable 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.

☐ confessed to _____ admitting to the below facts.

☐ was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.

☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 17 day of December, 2022 at 02:15 (Specifically include facts constituting cause for arrest.)

On 12/17/22, at 0139 hours, I was dispatched to 319 Georgian Park Drive in Jupiter, regarding an intoxicated person. The caller advised a WF, later identified as Megan Sullivan DOB: 8/17/95, was outside screaming and banging on vehicles in the parking lot.

Upon arrival, I made contact with Sullivan, who was screaming and pulling on the door handle of truck. Before she could damage the vehicle, I asked Sullivan what she was doing. Sullivan appeared extremely intoxicated and I could smell an unknown alcoholic beverage from a large distance away.

Sullivan advised the truck was hers and she was trying to get in. The vehicle was in fact not hers and I advised her to come toward my vehicle. After several attempts to get information from her, I placed handcuffs on her, which were double locked and checked for proper spacing. Sullivan was then placed in the rear of my patrol vehicle.

Once I was able to identify her, Sullivan was advised she was under arrest for disorderly intoxication. Sullivan was then transported to the Jupiter Police Department for processing. Once processing was completed, Sullivan was transported to county jail without incident.

In conclusion of the incident, I find probable cause to charge Sullivan with disorderly intoxication per F.S.S. 856.011.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

12/17/2022
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

COUNTS, RUSSELL L (1150)
NAME OF OFFICER (PLEASE PRINT)

12/17/2022
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

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:	

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REVIEW COMPLETED BY

Booking Number: 2022032505	**Date:** 12/17/2022
	Specialist Name/ID: Pinkneya/7796