50-2024-MM-002905AMB

2939

☐ Marsy's Law CVI FL Const. Art.1 § 16(b)

☐ Check if Supplement is Attached

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Juvenile: N

ADMINISTRATIVE

OBTS Number:

Agency ORI Number: FL 0 5 0 0 0 0 0 0

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 0 6 - 24-050937

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

If Weapon Seized — Enter Type:

Multiple Clearance Indicator: 1

Location of Arrest (including Name of Business): 3781 Victoria Dr West Palm Beach, FL 33406

Location of Offense (Business Name, Address): 3781 Victoria Dr West Palm Beach, FL 33406

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
04/08/24	0117					

DEFENDANT

Name (Last, First, Middle): Durivou Amanda Marie

Alias (Name, DOB, Soc. Sec. #, Etc.):

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	09/23/1984	5'06	195	HAZEL	BROWN	FAIR	MEDIUM

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

Marital Status: Single

Religion: OTHER

Indication of: Alcohol Influence / Drug Influence (Y / N / Unk)

Local Address (Street, Apt. Number): 1050 Summit Place Cir Apt D, West Palm Beach, FL 33415

Mobile Phone: 561-305-8416

Residence Type (1. City 2. County 3. Florida 4. Out of State): 2

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

Address Source: FL DL

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

Occupation: Pet Stylist

D/L Number, State: D610013848430, FL

Soc. Sec. Number: [redacted]

INS Number:

Place of Birth (City, State): Long Island, NY

Citizenship: USA

CO-DEF

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

JUVENILE

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

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

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 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 (561) 355-6511) informed of any change of address.
☐ Yes, by: (Name) ☐ No (Reason)

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. 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 O. Opium/Deriv. P. Paraphernalia/Equipment S. Synthetic U. Unknown Z. Other

CHARGE (1)

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Battery (Domestic)	1	☒ Y ☐ N	784.03(1a1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		24-050937		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

FILED PBC - GUN CLUB '24 APR 8 AM 7:39

NOTICE TO APPEAR

Location (Court, Room Number, Address)

Court Date and Time: Month Day Year Time A.M. ☐ P.M. ☐

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: 04/08/24

I consent to receive text reminders of court date(s) and times for this case by automated technology to the mobile number identified above.
I understand that standard text message rates may apply, and that I may revoke this consent via the text message system if I choose. Signature

ADMIN

HOLD for other agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Signature of Arresting Officer: 40229

Name of Arresting Officer (Print): S. SKINNER II I.D. #: 40229

Name Verification (Printed by Arrestee) (PRINT)

APR 8 AM 2:59

Intake Deputy: Barillo I.D. #: 1832 Pouch #

Transporting Officer: S. SKINNER II I.D. #: 40229 Agency: PBSO

Witness here if subject signed with an "X"

PAGE 1 OF 1

PBSO #0148 REV. 01/23 DISTRIBUTION: COURT COPY STATE ATTORNEY AGENCY AGENCY DEFENDANT (N.T.A.'s ONLY)

ADMIN

OBTS Number	PROBABLE CAUSE AFFIDAVIT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	Juvenile	N

Agency ORI Number	Agency Name	Agency Report Number
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 24-050937

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

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
Durivou Amanda Marie		W	F	09/23/1984

CHARGES

Battery (Domestic) 784.03(1a1)	

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
Reynolds Lorren Oliver	B	M	04/09/1984

Local Address (Street, Apt. Number) (City) (State) (zip)	Phone	Address Source
3799 Collinwood Lane West Palm Beach, FL 33406	561-889-4297	FL DL

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

On the 8 day of April 2024 at 0135 ☒ A. M. ☐ P.M. (Specifically include facts constituting cause for arrest.)

PROBABLE CAUSE STATEMENT

☐ **Marsy's Law CVI**
FL. Const. Art.1 § 16(b)

On April 7, 2024 at approximately 2328 hours, I responded to 3781 Victoria Dr West Palm Beach, FL 33406 in unincorporated Palm Beach county in reference to a domestic battery incident.

Upon arrival I met with the complainant/defendant who identified herself by her FL DL as Amanda Durivou. Durivou gave a sworn recorded statement on body worn camera attesting to the following: While she was at her home located at the above address, she was with her boyfriend, Lorren Reynolds, in her bedroom. While Durivou and Reynolds were sitting on the bed watching television, Durivou started crying. Durivou stated that Reynolds asked her what she was crying about but she did not want to explain to him the reason. This caused Reynolds to become upset and at this time he stood up and pinned Durivou down to the bed. Durivou further stated that Reynolds made sexual advances towards her, which she rejected and Reynolds then starts to pull Durivou fingernails off. At this time Reynolds gets up and starts to leave the residence. Durivou advised that she chased after him to retrieve her house key back which Reynolds has a copy of. Once outside, Reynolds pushes Durivou causing her to fall to the ground. Reynolds continued to leave the area and Durivou gets up to chase after him again until he eventually leaves out of the neighborhood. I then observed Durivou for any visible signs of injuries and I observed that Durivou was missing two manicured nails and her natural nails had fresh signs of blood on them.

Next in my investigation I spoke with Lorren Reynolds at his home located at 3799 Collinwood Lane West Palm Beach, FL 33406. Reynolds gave a sworn recorded statement on body worn camera attesting to the following: While he was with his girlfiend's, Amanda Durivou, home they got into a verbal argument that eventually turned physical. Reynolds advised that they were inside Durivou's room watching the television when he heard Durivou start sniffling. Reynolds then asked Durivou why she was crying but she refused to give an answer. Reynolds stated at this time he told her that he is just going to go home but she stood in the doorway and refused to let him leave. Durivou then eventually lets him pass and then follows him outside to get back they key to the home that she gave him. While walking away, Reynold takes the key off the key ring and gives it to Durivou and continues walking. Durivou still being upset, started to punch Reynolds in the back of the head with a closed fist. Durivou also scratched Reynolds on the neck and started to rip his clothing. I then viewed Reynolds for any physical signs of injuries and I located minor fresh scratch marks on the right side of his neck and arm. I also viewed Reynolds shirt and boxers that ripped during the altercation. Reynolds was able to show me cell phone video footage that he recorded of Durivou continuing to follow him as he is trying to leave the neighborhood. The video also revealed Durivou hitting Reynolds multiple times and ripping his clothing as he is trying to get away.

Based on the above stated facts, probable cause exists to charge Amanda Durivou with Simple Battery(Domestic) pursuant to FSS 784.03(1a1).

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH
S. SKINNER II (ID #) 40229
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 8 day of April 20 24 by S. SKINNER II 40229
(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced KNOWN

D/S A. STARR #29001
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

PAGE 1 OF 1

Palm Beach County Sheriff's Office

DOMESTIC VIOLENCE/DATING VIOLENCESUPPLEMENTAL PROBABLE CAUSE FORM

(Submit this form with the original Probable Cause affidavit)

Name (Last, First, Middle)

Suspect: Durivou Amanda Marie **DOB:** 09/23/1984 **Case #:** 24-050937

Name (Last, First)

Victim: Reynolds Lorren **DOB:** 04/09/1984 **Race:** B **Sex:** M

Relationship between Victim and Defendant: Boyfriend / Girlfriend

Photographs: Scene Yes × No Victim × Yes No Defendant × Yes No

911 Call: × Yes No **Caller:** Durivou Amanda Marie

Weapon Used: × Yes No **Type:** Hands/Fists/Feet

Witness: Yes × No **Name:** (Last) (First) (Middle)

Victim Pregnant: Yes × No **If yes,** weeks months

Injuries: × Yes No **Description:** Laceration

Medical Treatment: Yes × No

At Scene: Yes × No **Paramedics:**

At Hospital: Yes × No **Hospital:** **Doctor:**

Are Children Living in Home? Yes × No **DCF Notified?** Yes × No

Name: **DOB:**

Name: **DOB:**

Name: **DOB:**

Injunction Yes × No **Case #:**

No Contact Order Yes × No **Case #:**

Alcohol or Drugs × Yes No Unknown

Prior History of Domestic/Dating Violence × Yes _ No

Defendant's Statements × Yes No **If yes,** written × recorded × oral

First words Defendant said when you responded to scene: My boyfriend hit me.

Victim's Statements × Yes No **If yes,** written × recorded × oral

First words Victim said when you responded to scene: My girlfriend hit me.

Did the Victim contact anyone other than police within an hour of the incident regarding the incident?

Yes × No **If yes, name:** **phone:**

Observations of Victim (Physical & Emotional) Normal

_ Upset Crying Fearful Hysterical Afraid × Calm Nervous

Complained of pain Other

Victim Contact Information: (Last) Reynolds (first) Lorren

Local Address: 3799 Cottonwood Lane, West Palm Beach FL 33406

Phone: 561-889-4297

Employer: (Name) (Employer Address)

Name of Relative: (Last) (First) **Phone:**

Address:

PALM BEACH COUNTY SHERIFF'S OFFICE (PBSO)
CASE INFORMATION FORM

Date:	Time:	Case #:
4/8/24	0043	24-050937

CHECK ONE: ☒ PERSON CRIME ☐ PROPERTY CRIME ☐ NON-CRIME CASE

Deputy:	ID#:	Dist. / Div.	Phone:	Case Type/Offense/Crime (do not use signal code):
S. Skinner II	40229	1/12	561-688-3000	Domestic Battery

☒ Victim ☐ Witness • Name (Last, First, M.):	Race:	Sex:	D.O.B.:	Phone:
Reynolds, Lorren, O	B	M	04/09/84	561-889-4297

Victim/Witness Address:	City/State/Zip
3949 Collinwood Ln	WPB, FL 33406

DEPUTY TO VERIFY AND CHECK APPLICABLE BOX(ES) – VICTIM/WITNESS TO INITIAL APPLICABLE SECTIONS – WRITE LEGIBLY

A ☒ **VICTIM / WITNESS RIGHTS BROCHURE – ACKNOWLEDGEMENT**

BROCHURE TO BE PROVIDED TO ALL CRIME VICTIMS AND/OR WITNESSES **(PBSO #0147)**

I, **[Initials** LR **]**, have received a copy of the Victim Rights Brochure and/or acknowledge I can view electronically via **www.pbso.org**.

B ☒ **VICTIM NOTIFICATION (V.I.N.E.) – FOR CORRECTIONS TO CONTACT VICTIM UPON JAIL RELEASE**

REQUIRED IF ARREST OR WARRANT FOR HOMICIDE, ATTEMPTED MURDER, SEXUAL OFFENSES, ATTEMPTED SEXUAL OFFENSES, STALKING, DOMESTIC/DATING VIOLENCE - TO INCLUDE ANY ASSAULT, AGG. ASSAULT, BATTERY, AGG. BATTERY, SEXUAL ASSAULT, SEXUAL BATTERY, STALKING, AGG. STALKING, VIOLATION OF NCO OR INJUNCTION, OR ANY CRIMINAL OFFENSE RESULTING IN PHYSICAL INJURY OR DEATH OF ONE FAMILY MEMBER OR HOUSEHOLD MEMBER BY ANOTHER, WHO IS OR WAS RESIDING IN THE SAME SINGLE DWELLING.

Suspect Name (Last, First, M.):	Race:	Sex:	D.O.B.:
Quirivan, Amanda, M	W	F	09/23/84

I understand that I may be notified when the arrestee is released from PBSO custody at the phone number I provided above.
I request the following person be notified if I was not contacted (optional):

FILED PBC - GUN CLUB
'24 APR 8 AM 7:39

Name: _____ Address: _____ Primary Phone: _____
(Next of Kin/Neighbor/Friend/etc.)

(optional) I choose **NOT** to be notified when the arrestee is released from custody. **[Initial_____]**

Deputy to check one: (X) ARREST or ( ) WARRANT #_____

C ☐ **MARSY'S LAW – CONFIDENTIAL VICTIM INFORMATION – FL Constitution, Article 1, §16(b)**

CRIME REPORT ONLY - MUST BE LISTED AS A "VICTIM" IN AN OFFENSE REPORT (or next of kin); NOT A BUSINESS, COMPLAINANT OR OTHER

I, **[Initials_____]** request confidentiality pursuant to Marsy's Law, FL Constitution, Article 1, §16(b) as provided below:
As a victim, I have the right under the Florida Constitution to prevent the disclosure of certain information or records that could be used to locate or harass me or my family, or which could disclose confidential or privileged information about me. I do hereby request that the email address, phone number and work and business addresses of me and my family be redacted from my records indefinitely, if my records are requested pursuant to a public records request.

D ☐ **CONFIDENTIAL VICTIM INFORMATION – FS 960 – ONLY APPLIES TO SPECIFIC CRIMES LISTED BELOW**

CRIME REPORT ONLY - MUST BE LISTED AS A "VICTIM" IN AN OFFENSE REPORT (or next of kin); NOT A BUSINESS, COMPLAINANT OR OTHER

I, **[Initials_____]**, as a victim (or spouse/former spouse) of **Harassment** (FSS 784.048(1)(a)), **Sexual Battery, Aggravated Child Abuse, Domestic Violence** (live together, lived together or have a child in common), **Aggravated Stalking** (FSS 784.048 (3)(4)), or **Aggravated Battery** (FSS 784.045), I do hereby request that my home and employment telephone number, home and employment address and personal assets be redacted from my records requested pursuant to public records request for a period of five (5) years from the date noted on this form.

E ☐ **AUTHORIZED RECORD EXEMPTION(S) - PUBLIC RECORDS ACT - FS 119.071(4)(d) – VERIFY EMPLOYMENT**

CRIME OR NON CRIME REPORT - MUST FIT THE CRITERIA DESCRIBED

I, **[Initials_____]**, attest that I am an individual exempt under FS 119.071(4)(d) (to include a spouse or child of), a current or former **Law Enforcement Officer, Firefighter, Justice or Judge, General Magistrate, Code Enforcement Officer, Child Enforcement Hearing Officer, State Attorney, Public Defender, U.S. Attorney, U.S. Judge, U.S. Magistrate**, or other authorized person and hereby request my information be redacted from public record.

CURRENT or FORMER exempt position: _____ Name of current or last agency: _____

SIGN BELOW

I have read and initialed the applicable section(s) and sign of my own free will (if a minor, a parent or guardian must sign):

MY SIGNATURE: X _____ Date: 04/8/24

Print Parent/Guardian/Next of Kin name (if applicable):

Deputy Signature: _____ ID#: 40229

► *If Criminal Case:* _____

Scanned to Victim Advocate by ID#: _____

WHITE – CENTRAL RECORDS YELLOW – CORRECTIONS PINK – VICTIM/WITNESS

PBSO#0028 REV.09/23

Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☐	119.071(2)(e)	Confession	
Public Info. Exemptions	☐	FL Const. Art. I, s. 16(b)(5)	Marsy's Law – victim information shall be redacted. The term "victim" also includes the victim's lawful representative, the parent or guardian of a minor, or the next of kin of a homicide victim. The term "victim" does not include the accused (ref. page 99 of the CRTM for additional information)	
	☐	119.071(2)(j)	Home/employment telephone number, home/employment address, or personal assets of a person who has been the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence	
	☐	119.0712(2)	Personal information contained in a motor vehicle record	
	☐	316.650(11)	Driver information contained in a uniform traffic citation	
	☐	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
Florida Rules of Judicial Administration 2.420	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	☐	(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	☐			
	☐			
	☐			
	☐			

REVIEW COMPLETED BY

Booking Number: 2024009350	**Date:** 4/8/2024
	Specialist Name/ID#: T.HOWARD/7185