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

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number

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

Juvenile: 1 N

ADMINISTRATIVE

Agency ORI Number: FLO 5 0 2 6 0 0
Agency Name: PALM BEACH GARDENS POLICE DEPT.
Agency Report Number (N.T.A.s only): 7 8 1-2 4-1 0 0 1 1 7 1

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: N/A
Multiple Clearance Indicator: 0 1

Location of Arrest (including Name of Business): 317 Old Meadow Way Palm Beach Gardens FL, 33410
Location of Offense (Business Name, Address): 317 Old Meadow Way Palm Beach Gardens FL, 33410

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
0 3 0 5 2 4	1 6 3 2	3/5/24				

DEFENDANT

Name (Last, First, Middle): Morgan Max M
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	M	0 7 1 8 8 6	510	280	Brown	Black	Light	Large

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): Spider Web tattoo on right elbow
Marital Status: Single
Religion: Christian
Indication of: Alcohol Influence ☐ Y ☐ N ☒ Unk ☐; Drug Influence ☐ Y ☐ N ☐ Unk ☐

Local Address (Street, Apt. Number): 317 Old Meadow Way (City): Palm Beach Gardens (State): FL (Zip): 33410
Mobile Phone: (914) 469 6758
Residence Type: 1. City 2. County 3. Florida 4. Out of State: 1

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

Business Address (Name, Street) (City) (State) (Zip)
Phone ( )
Occupation: N/A

D/L Number, State: M625 553862580
Soc. Sec. Number: [redacted]
INS Number
Place of Birth (City, State): NY, NY
Citizenship: YES

CO-DEF

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

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Simple Battery	1	☒ Y ☐ N	7 8 4 . 0 3 (1) A 1	NONE

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	0	24-001171		

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

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

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
MAR 6 AM 8:12

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

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:
Intake Deputy I.D. # Pouch #

Signature of Arresting Officer: X
Name of Arresting Officer (Print): J. Faris I.D. # 476
Transporting Officer: J Faris I.D. # 476 Agency: PBGPD

Name Verification (Printed by Arrestee)
(PRINT)
Witness here if subject signed with an "X"

PAGE 1 OF 1

PBSO #0148REV.10/22 DISTRIBUTION: WHITE- COURT COPY GREEN - STATE ATTORNEY, YELLOW - AGENCY PINK - AGENCY, GOLD - DEFENDANT (N.T.A.'s ONLY)

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PROBABLE CAUSE AFFIDAVIT

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

ADMIN

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number
	FL FL0502600	Palm Beach Gardens Police Department	7 | 8 | 24-001171

Charge Type: 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
MARGAN, MAX M		W	M	07/18/1986

CHARGES

Charge Description	Charge Description
784.03(1)(A)(1) BATTERY-SIMPLE (TOUCH OR STRIKE)	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
ORTEGA, ILIANA CHIQUINQUIRA	W	F	04/03/1981

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
317 OLD MEADOW WAY, PALM BEACH GARDENS, FL 33418	(786) 702-8885	
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 LINDA MARGAN who told MYSELF 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 5 day of March, 2024 at 18:34 (Specifically include facts constituting cause for arrest.)

On March 5, 2024, at 4:04 p.m., I responded to 317 Old Meadow Way, in the city of Palm Beach Gardens, Palm Beach County, Florida, in reference to a domestic disturbance. My body worn camera was activated during this investigation.

On arrival I met Linda Margan standing in the driveway behind a gray Hyundai Sonata, inside the Sonata was Iliana Ortega.

L. Margan was sworn in on my body worn camera and the following is a summary of her statement: her son Max Michael Margan (W/M DOB 7/18/86) had returned home from a job interview and was in a bad mood due to it not going well. M. Margan and his fiancée, Ortega, had been having relationship issues due to her cheating on him. Today they were in an argument about the cheating after M. Margan returned home. Ortega was trying to leave in her vehicle and M. Margan would not allow her to leave. While M. Margan was trying to take the car keys from Ortega and she was telling him to get out of the vehicle, she bit him. L. Margan did not see the bite but M. Margan showed her the bite mark on his right forearm.

I then spoke to Iliana Ortega, Ortega was sworn in on my body worn camera and the following is a summary of her statement: she was trying to leave for an appointment, she was in the driver`s seat and M. Margan was in the passenger seat. M. Margan reached over to take the car keys, while fighting over control of the keys Ortega bit his arm. Both then got out of the car. He started banging on the trunk, then ripped the license plate and license plate cover off. He then ran around to Ortega`s door and started pulling on the door handle after she got back into the driver`s seat. At one point the door opened and L. Margan had to pull him back yelling for Ortega to lock the door.

I observed a dent on the trunk and the license plate cover was located broken in the bushes beside the driveway. The license plate was not located. I did not observe any

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

REYNOLDS, PETER M
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

03/05/2024
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

FARIS, JOHN (476)
NAME OF OFFICER (PLEASE PRINT)

03/05/2024
DATE

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

ADMIN	OBTS Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A 3. Request for Warrant 4. Request for Capias	1	JUVENILE
	Agency ORI Number: FL FL0502600	Agency Name: Palm Beach Gardens Police Department	Agency Report Number: 7 | 8 | 24-001171		
	Charge Type: 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
	MARGAN, MAX M		W	M	07/18/1986

PROBABLE CAUSE STATEMENT

bite mark on M. Margan`s arm.

I spoke to M. Margan, he was sworn in on my body worn camera and I read him his Miranda Warning from my department issued card. When asked if he understood and wanted to talk, he became agitated and yelled. He kept stating he loved her, he did not want her to drive, and that she cheated on him. He would not give his side of the story when asked. M. Margan was placed in handcuffs that were double locked and checked for proper fit.

Based on the statements given to me by Iliana Ortega and Linda Margan probable cause exists that Max Michael Margan (W/M DOB 7/18/86) did intentionally touch Iliana Ortega against her will. Max Margan was arrested for simple battery pursuant to Florida State Statute 784.03(1)(A)(1). Based on the totality of the circumstances Max Margan was deemed the primary aggressor. Max Margan was transported to the palm beach county jail without incident. There is nothing further to report at this time.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

REYNOLDS, PETER M
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

03/05/2024
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

FARIS, JOHN (476)
NAME OF OFFICER (PLEASE PRINT)

03/05/2024
DATE

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

VICTIM NOTIFICATION FORM

This form must be filled out in a case involving one of the following crimes:

- **Homicide** (Ch. 782)
- **Sexual Offense** (Ch. 794)
- **Attempted Murder**
- **Attempted Sexual Offense**
- **Stalking** (S. 784.048)
- **Domestic Violence** - (This includes any assault, agg. assault, battery, agg. battery, sexual assault, sexual battery, stalking, agg. stalking 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.)

Upon completion, this form must accompany the booking paperwork. If applying for a warrant, attach this form to the filing packet.

SUSPECT/OFFENDER: _____

COURT CASE/WARRANT #: _____ **(FOR WARRANTS USE ONLY)**

1. Incident Report #: 24-001171 Agency: PBGPD
   Offense: Simple Battery
   Suspect/Offender: Max Margen
   D.O.B. 07/18/86 Race: W Sex: M

2. Warrant #(s): None

3. Complete one (1) of the following:

   a. Victim's name: Iliana Ortega
   Address: 317 Old Meadow Way PBG, FL 33410
   City: PBG State: FL Zip: 33410
   Home #: _____ Work #: 786 702 8885 Other: _____

   b. Victim's next of kin: _____
   Address: _____
   City: _____ State: _____ Zip: _____
   Home #: _____ Work #: _____ Other: _____

   c. Victim's designated contact other than next of kin (for example: a friend or neighbor):
   Name: _____
   Address: _____
   City: _____ State: _____ Zip: _____
   Home #: _____ Work #: _____ Other: _____

4. Relevant identification or case numbers assigned to the case (please specify):
   _____

WAIVER: I CHOOSE NOT TO COMPLETE THIS VICTIM NOTIFICATION FORM, AND UNDERSTAND THAT I AM WAIVING MY RIGHT TO BE NOTIFIED OF THE RELEASE OF THE SUSPECT/OFFENDER.

Signature of person waiving notification: _____
Printed name of person waiving notification: _____

Officer's Name: J. Faris I.D.: 476 Date: 3/5/24

White-Warrants Division **Yellow-Corrections or State Attorney (Warrant Application)** **Pink-Central Records**

PBGPD FORM-054

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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	☐			
	☐			
	☐			
	☐			

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REVIEW COMPLETED BY

Booking Number: 2024006054	**Date:** 3/6/2024
	Specialist Name/ID#: C.Daniels 30347