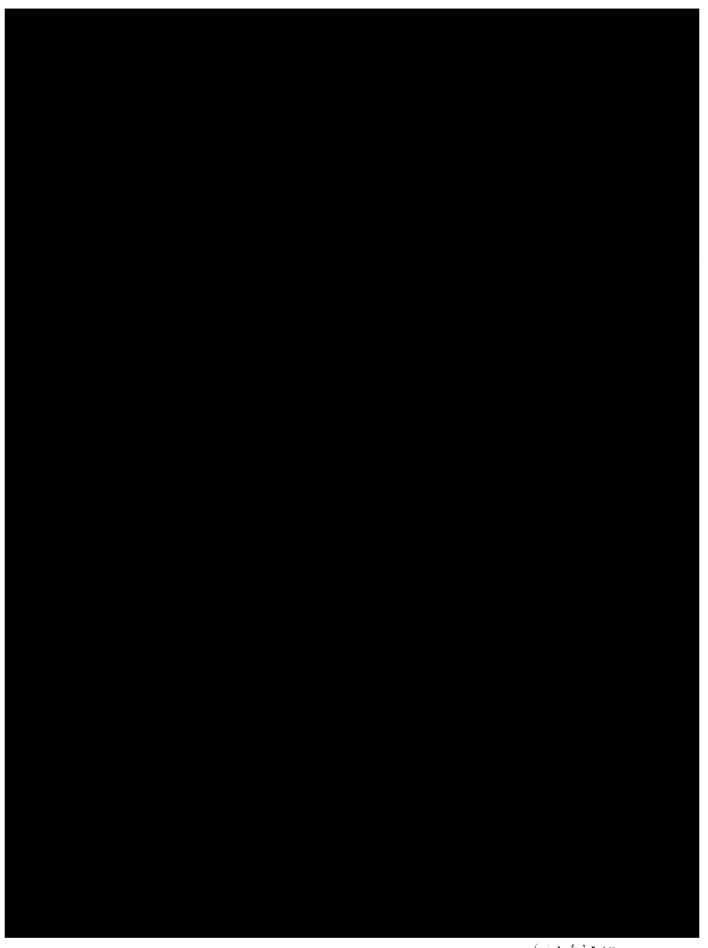
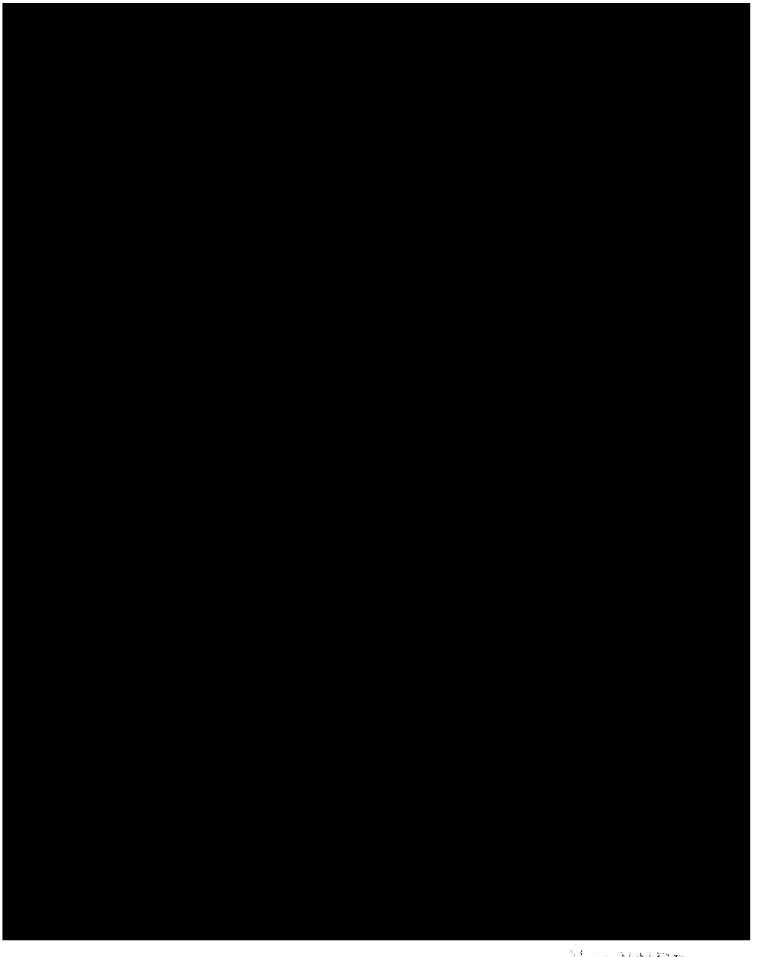
0415399 19MM13464ASB 3297

П	OBTS Number	ARREST / NOTICE TO Juvenile Referral Re		 Arrest Request for Warra N.T.A. Request for Capia 			
VE	Agency ORI Number Agency Nam FLO 500000 PALM BI	L	Agen	ncy Report Number (N.T.A.'s only) 6- 19146931			
ADMINISTRATIVE	ChargeType: 1. Felony X Check as many as apply. 2. Traffic Felony 4	Misdemeanor 5 Ordinance Traffic Misdemeanor 6. Other		Weapon Seized / Type 1. Yes 2. No	Multiple Clearance Indicator		
NIMO	ocation of Arrest (Including Name of Business) 5981 Parkwalk Dr, Boynton Beach/33472		Location of Offense (Bu 5981 PARKWAL	Siness Name, Address) K DR, BOYNTON BEACH/F	L/33472		
`	Date of Arrest Time of Arrest 12/11/2019 0129 HR	Booking Date Booking Time Ja	il Date Jail Tir	me Location of Vehicle			
Г	Name (Last, First, Middle) OCONNELL, ALEXANDER,	<u> </u>	Alia	s (Name, DOB, Soc. Sec. #, Etc.)			
	Race Sex Date W - White I - American Indian	of Birth Height	Weight	Eye Color Hair Color BROWN	Complexion Build		
	B - Black 0- Oriental/Asian W M Scars, Marks, Tatoos, Unique Physical Features (Location,	Type, Description)	6'00 19 Marital 3 か	Status Retigion Indication	light small on of Y N Unk. Influence fluence		
ANT	Local Address (Street, Apt. Number) 5981 PARKWALK DRIVE, Boynton E	(City) (State)		Resident 1. City 2. Count	ce Type: 3. Florida I		
DEFENDANT	Permanent Address (Street, Apt. Number)	(City) (State)	(Zip) Ph	one Address			
la la	Business Address (Name, Street)	(City) (State)	(Zip) Ph) none Occupat	on		
	D/L Number, State Soc.	Sec. Number	INS Number	Place of Birth (City,	State) Cilizenship		
L	O254010890820/FL		15	Boynton (BER FL 1/5		
DEF	Co-Defendant Name (Last, First, Middle)		Race Sex	Date of Birth 1. Arrested 2. At Large	/ ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile		
8	Co-Defendant Name (Last, First, Middle)		Race Sex	Date of Birth	☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juyenile		
	☐ Parent☐ Legal Custodian☐ Other:				Residence Phone		
	Address (Street, Apt. Number)	(City)	(State)	(Z _I p)	Business Phone		
l _w	Notified by (Name)	Date	Tume		OT HRS / DYS		
JUVENI	Released To. (Name) Dept. and Released. Relationship Date Time						
	The above address provided bydefendant and / or to keep the Juvenile Court Clerk (Phone 355-2526) info Yes, by. (Name)	defendant's parents The child and / or rmed of any change of address.	parent was told	School Attended	Grade		
	Property Crime? Description of Property Yes No			Value of Property			
SODE	Drug Activity S. Sell R. Smuggle K. Dis N. N/A B. Buy D. Deliver Dis P. Possess T. Traffic E. Use	pense/ M. Manufacture/ Z. Other hibute Produce/ Cultivate	N. Ñ/A C	Barbiturale H. Hallucinogen C. Cocaine M. Marijuana Heroin O. Opium/Deriy.	P. Paraphemalia/ U. Unknown Equipment Z. Other S. Synthetics		
SE I	Charge Description CRIMNAL MISCHIEF	Counts Domestic Violence	Statute Violation Numb	ber	Violation of ORD #		
CHAR	Drug Activity Drug Type Amount / Unit N N/A 2 5 0	Offense # 19146931	Warrant Capias Numb	ber	Bond		
SE	Charge Description	Counts Domestic Violence 1	Statute Violation Numb	ber	Violation of ORD #		
CHARG	Drug Activity Drug Type Amount / Unit N/A	Offense # 19146931	Warrant / Capias Numb	ber	Bond		
<u>ا</u>	Charge Description	Counts Domestic Violence	Statute Violation Numb	ber	Violation of ORD #		
CHARG	Drug Activity Drug Type Amount I Unit	Offense #	Warrant / Capias Numb	ber	Bond		
-	Charge Description	Counts Domestic Violence	Statute Violation Numb	ber	Violation of ORD #		
CHARG	Drug Activity Drug Type Amount / Unit	Offense #	Warrant / Capias Num	nber	Bond		
	Location (Court, Room Number, Address)						
TO APPEAR	Court Date and Time	····					
TO A	Month Day Year Time AM PM 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 AT THE TIME AND PLACE DESIGNATES TO ANSWER THE OFFENSE CHARGED OR TO PAT THE FINE SUBSCRIBED. TUNDERSTAND THE OFFENSE CHARGED OR TO PAT THE FINE SUBSCRIBED. TO PA				OR MY ARREST SHALL BE ISSUED			
Signature of Defendant (or Juvenile and Parent /Custodian)				Date Signed			
	HOLD for other Agency Name:	Signature of Arresting Officer	35/37	Name Verification (Printed by Arrestee)			
ADMIN	☐ Sangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:	Name of Arresting Officer (Print) D/S Coslay JR	35637 LD #	(PRINT)	PAGE		
	Lotake Deputy 1.0.# Pouch #	Transporting Officer ID#	82 PRSO	Witness here if subject signed with an	UF UF		
DISTRIBUTION WHITE - COURT COPY GREEN - STATE AFFORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT, N.T.A.'S ONLY) PBSO #148 REV. 8/97							

П	OBTS Number	PROBABLE CAUSE AFFID			quest for Warrant quest for Capias	1	Juvenile N	
MIN	Agency ORI Number Agency Name	ACH COUNTY SHERIFF'S C	1	19146931				
ΨĽ	ChargeType: 1. Felony	3. Misdemeanor 5. Ordin 4. Traffic Misdemeanor 6. Othe	ance	Special Notes				
JEF.	Name (Last, First, Middle) OCONNELL, ALEXANDER,		Alias		Race Sex W M	Date of Birth 03/02/1989		
GES	Charge Description CRIMNAL MISCHIEF	,	narge Description SORDERLY INTOX				856.011	
CHAR	Charge Description	Ch	narge Description					
П	Victim's Name (Last, First, Middle) OCONNELL, MARSHA,	,			Race Sex W F	Date of Birth 05/26/1949		
CTIM	Local Address (Street, Apt. Number) 5981 PARKWALK DRIVE, Boynton Beach, F	(City) (Stat L 33472		-) 212-3844	Addres	s Source		
>	Business Address (Name, Street)	(City) (Sta	te) (zip) Phone	,)	Occup	ation		
П	The undersigned certifies and swears that he/she has just The Person taken into custody			amed Defendant c		wing violation of	law	
	committed the below acts in my presence. confessed to		e saw the arrested p					
	admitting to the below facts. On the 11 day of DECEMBER		to have commited th		•			
					-)			
	n December 11, 2019, at approx Beach County, reference a dom							
	Alexander Oconnell was stating							
	Upon arrival, I observed Alexai	nder with scratches on his	s right elbow	with bloo	d around	it. It show	ıld be	
	noted Alexander was extremely	intoxicated causing a dis	sturbance out	tside. Alex	Alexander had a odor of an			
unknown alcoholic beverage emanating from his breath. Alexander while speaking was						s swaying from side		
to side and used the hood of a patrol vehicle for balance. Alexander said he was not in mother and did not know what happen to his elbow. I proceeded to the driveway when					y where	ere I observed a white		
	Hyundai bearing (FL TAG: Z8:	ZKQ) with a shattered gl	lass to the fro	nt windsh	ield.			
MENT	I spoke to Marsha who provide	d me with a sworn writte	n statement.	Marsha sa	aid she wo	ke up to		
TATE		ne kitchen. Marsha said she could tell Alexander was intoxicated and was						
JSE S		a stated Alexander went outside and shattered her window. Marsha oximately (\$250.00) worth of damages.						
LE CA								
Based on the above statements, I find probable cause to charge Alexander Occiminal Mischief pursuant to F.S.S 806.13(1B)(2) and one count of Disorder E.S.S 856.011. Alexander was placed into handcuffs, which were double looke								
PR	F.S.S 856.011. Alexander was placed into handcuffs, which were double locked and checked for proper fit.							
	Alexander was transported to Palm Beach County Jail and turned over to staff.							
1	Y				. 6	TA NAIN	HEE	
	STATE OF FLORIDA COUNTY OF PALMBEACH	D/S Coslay JR			U	EC 11	2019	
Æ	(Signature of Arresting/Investigative Officer)			10	D/C D /			
FRATIL	The foregoing instrument was sworn to or affirmed and subs			Vnouvn	by D/S D. C	OSINY Jr		
ADMINISTRATIVE	(Print name of Arresting/Ippestigative Officer), who is person	ally known to me and/or produced identification, "	Type of identification proc	luced				
	N / W						PAGE	



DEC 1 1 2019



DEC 1 1 2019



Palm Beach County Sheriff's Office - Arrests Only

	х	Florida State Statute	Description	Page Number(s)
	E.	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
ions	[]	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
L/E Exemptions	1.1	119.071(4)(c)	Undercover personnel.	
1/E E		119.071(2)(f)	Confidential informants (Cls).	
	[]	119.071(2)(e)	Confession.	
ns		985.04(1)	Juvenile offender records.	
mptio		119.071(h)(i)	Assets of a crime victim.	
fo. Exe	[]	395.3025(7)(a), 456.057(7)(a)	Medical information.	
Public Info. Exemptions	[]	394.4615(7)	Mental health information.	
Pu	[1]	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.	
	X	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	X	(viii) 394.4615(7)	Clinical records under the Baker Act.	4
of 23)		(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
(Rule		(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)				
al Administr		1		
es of Judici				
Florida Rul				
	ī			
Jer.	[]	782.0 4 (FS)	Other: Witness	
Other	=	119.071(2)(j)	Other: Marsy's Law	

REVIEW COMPLETED BY

Booking Number: 2019039544	Date: 12/11/2019			
	Specialist Name/ID: M. Tooks #8557			

