

J. 0489018

17mm 7658

## ARREST / NOTICE TO APPEAR

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

1

JUVENILE

OBTS Number		Agency ORI Number		Agency Name		Agency Report Number (N.T.A.'s only)					
0500-400		Delray Beach Police Department				4 0 17-009665					
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			
Location of Arrest (Including Name of Business) 300 SE 1ST ST		Location of Offense (Business Name, Address) 300 SE 1ST ST, DELRAY BEACH, FL 33483				Hands/fist/feet/teeth		3			
Date of Arrest 06/18/2017		Time of Arrest 19:07		Booking Date 06/18/2017		Booking Time 19:17		Jail Date 06/18/2017			
						Jail Time 19:09		Location of Vehicle			
Name (Last, First, Middle) <b>MODUGNO, JOSEPH</b> <b>BAILEY, JOSEPH</b> Alias:											
Race W - White B - Black		Sex W - M		Date of Birth 05/04/1996		Height 6'00		Weight 200			
D - Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description)						Eye Color BLUE		Hair Color BLOND OR			
								Complexion LIGHT			
								Build			
Local Address (Street, Apt. Number) (City) (State) (Zip) Phone											
21339 TOWN LAKES 1317, BOCA RATON, FL 33486											
Permanent Address (Street, Apt. Number) (City) (State) (Zip) Phone											
21339 TOWN LAKES 1317, BOCA RATON, FL 33486											
Business Address (Name, Street) (City) (State) (Zip) Phone											
D/L Number, State NY		Soc. Sec. Number		INS Number		Place of Birth (City, State) NEW YORK, NY		Citizenship US			
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth			
								<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile			
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth			
								<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile			
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ Name (Last, First, Middle) <input type="checkbox"/> Legal Custodian											
Address (Street, Apt. Number) (City) (State) (Zip) Business Phone											
Notified by: (Name) Date Time JUVENILE DISPOSITION											
Released To: (Name) Relationship Date Time											
1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated											
The above address was provided by <input type="checkbox"/> defendant and/or <input type="checkbox"/> 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.											
School Attended Grade											
<input type="checkbox"/> Yes, by: <input type="checkbox"/> No: _____											
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Description of Property Value of Property											
C O D E Drug Activity S. Sell R. Smuggle K. Disperses M. Manufacture/ Z. Other N. N/A B. Buy D. Deliver Distribute Produce/ Cultivate P. Possess T. Traffic E. Use										Drug Type B. Barbiturate H. Hallucinogen P. Paraphernalia/ U. Unknown N. N/A C. Cocaine M. Marijuana Equipment Z. Other A. Amphetamine E. Heroin O. Opium/Deriv.	
C H A R G E DISORDERLY INTOXICATION										Statute Violation Number 856.011	
Drug Activity Drug Type Amount / Unit Offense # 17-009665 Counts Domestic Violence Warrant / Capias Number										Violation of ORD #	
C H A R G E Charge Description										Statute Violation Number	
Drug Activity Drug Type Amount / Unit Offense # Counts Domestic Violence Warrant / Capias Number										Violation of ORD #	
C H A R G E Charge Description										Statute Violation Number	
Drug Activity Drug Type Amount / Unit Offense # Counts Domestic Violence Warrant / Capias Number										Violation of ORD #	
I N T A K E Health / Apparent Physical Condition of Defendant										Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries Explain:	
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health										PROPERTY - Received By Released By Released To	
E Transported By										Date Transported Time Transported Other	
N O T I C E <input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.										Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444 Court Date and Time	
T O A P P E A R 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 Signature of Arresting Officer	
A D M I N HOLD for Other Agency										Name Verification (Printed by Arrestee) (PRINT)	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other										Name of Arresting Officer (Print) I.D. #	
Intake Deputy I.D. # Pouch # Transporting Officer I.D. # Agency										PAGE 1 OF 1	
D B P D										Witness here if subject signed with an "X"	

COURT  STATE ATTORNEY  AGENCY  CENTRAL RECORDS  JAIL  CRIME LABORATORY  PHOTOG  DEFENDANT

## PROBABLE CAUSE AFFIDAVIT

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

JUVENILE

A	OBTS Number	PROBABLE CAUSE AFFIDAVIT		
D	Agency ORI Number	Agency Name	1. Arrest	3. Request for Warrant
M	<b>FL 0500400</b>	<b>DELRAY BEACH POLICE DEPARTMENT</b>	2. N.T.A.	4. Request for Capias
N	Charge Type: Check as many as apply: 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other <input type="checkbox"/>	Special Notes:		
D	Name (Last, First, Middle)	Alias	Race	Sex
E	<b>MODUGNO, BAYLEE J</b>		<b>W</b>	<b>M</b>
F	Charge Description	Date of Birth		
C	<b>856.011 DISORDERLY INTOXICATION</b>	<b>05/04/1996</b>		
H	Charge Description	Charge Description		
A	Charge Description	Charge Description		
R	Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
G	<b>STATE OF FLORIDA,</b>	<b>W</b>	<b>M</b>	
T	Local Address (Street, Apt. Number)	(City)	(State)	(Zip)
I	<b>FLORIDA, FL</b>			
M	Business Address (Name, Street)	(City)	(State)	(Zip)
			Phone	Address Source
			<b>(561)</b> -	
			Phone	Occupation
			<b>(561)</b> -	
<p>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.</p> <p>The Person taken into custody...</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts.</p> <p><input checked="" type="checkbox"/> was observed by <b>OTHER OFFICERS</b> _____ who told <b>ME</b> _____ that he/she saw the arrested person committ the below acts.</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <b>18</b> day of <b>June</b>, <b>2017</b> at <b>20:06</b> (Specifically include facts constituting cause for arrest.)</p>				

The following incident occurred in the City of Delray Beach, Palm Beach County, Florida.

On 06/18/2017 Officers responded to the 300 block of SE 1st St in reference to a disturbance involving a group of young white males (Nicholas Myers and Baylee Modugno) and a white female (Tayla Figueroa). It should be noted that Officers responded to several disturbance calls throughout the afternoon involving this group of defendants. Myers even interfered with officers conducting investigation an investigation at SALT 7 which had nothing to do with him. Myers attempted to start a fight with a patron during the incident, but moved along after being told he would be arrested.

A few minutes later officers responded to the 300 block of E Atlantic Ave in regards to the same subjects causing a disturbance and trying to fight people. Ofc. Ferraiolo arrived on scene and observed them with their shirts off "getting in peoples' faces". Ofc. Ferraiolo explained to me that when he called toward the group, Myers and Modugno ran separate ways trying to evade from him. Myers, Modugno and Figueroa were put in a taxi which left without incident. The group got out of the taxi a few blocks away and went back to Atlantic Ave without officers knowing this. As I was walking back to my police car, a server from City Oyster approached me and explained to me that the group of subjects that officers were talking to attempted to "dine and dash". She added that one of the subjects (Myers) smashed a glass cup on the floor shattering it. She stated that the business did not want to get involved with the group as they were so belligerent and aggressive. The business did not want to prosecute any of the subjects.

A few minutes after this, officers received a call from a concerned citizen advising that the same group of subjects were pulling "on door handles of vehicles parked on SE 3rd Ave and SE 1st St. Upon arrival, Ofc. Ferraiolo made contact with the group. Ofc. Whiting and I arrived on scene shortly after and determined that they were all intoxicated by their blood shot eyes, slurred speech and the smell of alcohol on their

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME		
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER	
	<b>06/18/2017</b>	<b>SCHUMER, JARED S (1046)</b>	
	DATE	NAME OF OFFICER (PLEASE PRINT)	
	<b>06/18/2017</b>	<b>06/18/2017</b>	
	DATE	DATE	
	PAGE <b>1 OF 2</b>		

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

PROBABLE CAUSE AFFIDAVIT  
SUPPLEMENT

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

**1**

JUVENILE

D	Agency ORI Number <b>FL 0500400</b>	Agency Name <b>DELRAY BEACH POLICE DEPARTMENT</b>	Agency Report Number <b>4   0   17-009665</b>
M	Charge Type: Check as many as apply. <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		Special Notes:
N	<input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other
D	Name (Last, First, Middle) <b>MODUGNO, BAYLEE J</b>	Alias	Race <b>W</b>
E		Sex <b>M</b>	Date of Birth <b>05/04/1996</b>

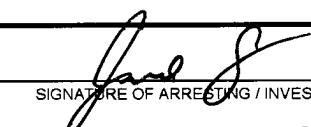
breath and body's. When I arrived on scene, the defendants (Nicholas Myers, Baylee Modugno, and Tayla Figueroa) were all sitting on the ground. Myers had cuts on his knuckles and Modugno had a cut on his face. These injuries were not there the first two times officers were in contact. Throughout the entire process, Myers and Modugno were aggressive toward police and were verbally assaultive.

All three subjects were taken into custody for disorderly intoxication. When putting hand cuffs on the Myers, he continuously tensed up and was intentionally making it difficult to put the hand cuffs on him. Once in my car, he unbuckled himself and brought the handcuffs to the front of his body. He bashed his head on the center partition violently. Once in the DBPD THF sally port, it was determined that Myers was going to be combative so the decision was made to bring the defendants straight to PBCJ. The passenger side rear window on my police car was cracked. Myers spat out the cracked window as Sgt. Ferreri was standing there. It was clearly an intentional act. Myers also kicked the rear windows in an attempt to break them which caused officers to secure his feet in leg shackles.

Based on the above facts, Probable Cause Exists to charge the Defendant, Baylee Modugno, Disorderly Intoxication per FSS 856.011.

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ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME	
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
	<b>06/18/2017</b>	<b>SCHUMER, JARED S (1046)</b>
	DATE	NAME OF OFFICER (PLEASE PRINT)
		<b>06/18/2017</b>
		DATE
		PAGE <b>2 OF 2</b>

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