0508264 19mm12924-2053

ARREST / NOTICE TO APPEAR

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

ADMINISTRATION

OBTS Number

Agency ORI Number: 0501700 | Agency Name: Jupiter Police Department | Agency Report Number (N.T.A.'s only): 5 | 4 | 19-005262

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: NONE | Multiple Clearance Indicator

Location of Arrest (Including Name of Business): 6220 MICHAEL ST, JUPITER 33458

Location of Offense (Business Name, Address): 6220 MICHAEL ST, JUPITER, FL 33458

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
11/24/2019	08:44	11/24/2019	08:54	/ / : :		6220 Michael St.

DEFENDANT

Name (Last, First, Middle): KANE, BRIANNA CELINE

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

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	09/23/1998	5'05	125	BLUE	BLONDE /	MEDIUM	Medium

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description): TATT R ARM / FOREARM 2 CATS; TATT L BUTTOCKS / DAS; TATT

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

Local Address (Street, Apt. Number) (City) (State) (Zip): 6220 MICHAEL ST, JUPITER, FL 33458 | Phone: (561) 385-4607 | Residence Type: 1. City 3. Florida 2. County 4. Out of State | 1

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 6220 MICHAEL ST, JUPITER, FL 33458 | Phone: (561) 385-4607 | Address Source: FLDL

Business Address (Name, Street) (City) (State) (Zip): NONE, | Phone | Occupation: None

D/L Number, State: K500063988430 / FL | Soc. Sec. Number: [redacted] | INS Number | Place of Birth (City, State): WEST PALM BEACH, | Citizenship: US

CO-DEF

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

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

JUVENILE

☐ Parent ☐ Other: ☐ Legal Custodian | 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 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/Deriv, P Paraphernalia/Equipment, S Synthetic, U Unknown, Z Other

CHARGE

Charge Description: BATTERY-SIMPLE (TOUCH OR STRIKE) | Statute Violation Number: 784.03(1)(A)(1) | Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
N	N	1	19-5262	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)

Court Date and Time

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

No Photo Available

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Intake Deputy | I.D. # | Pouch #

Signature of Arresting Officer: [signature] 334

Name of Arresting Officer (Print): CEDENO, LUIS | I.D. #: 1085

Transporting Officer: CEDENO | I.D. #: 334 | Agency: JUPITE

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X"

PAGE 1 OF 1

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ DEFENDANT

DOMESTIC VIOLENCE PROBABLE CAUSE AFFIDAVIT

Palm Beach County

ADMIN

Date / Time	Agency ORI Number	Agency Name	Agency Report Number
11/24/2019 09:38	FL 0501700	JUPITER POLICE DEPARTMENT	5 | 4 | 19-005262

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
KANE, BRIANNA CELINE	KANE, BRIANNA C	W	F	09/23/1998

CHRG

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

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
SLATER, DANIEL ANTHONY	W	M	07/20/1969

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
6220 MICHAEL ST, JUPITER, FL 33458	(561) 802-8245	VERBAL
Business Address (Name, Street) (City) (State) (Zip)	**Phone**	**Occupation**
GREENWISE LANDSCAPING, 88297 SE PINES CIR	(561) 746-1402	LANDSCAPE

ADDITIONAL INFORMATION

	Written	Taped	Oral
DEFENDANT'S STATEMENTS:	☐	☒	☐
VICTIM'S STATEMENTS:	☐	☒	☐

OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): SMALL LACERATIONS ON NOSE

RELATIONSHIP BETWEEN VICTIM & SUSPECT: FIANCE

	YES	NO	
PHOTOGRAPHS: Scene:	☒	☐	
Victim:	☒	☐	
911 CALL:	☒	☐	CALLER: DANIEL SLATER
WEAPON USED:	☒	☐	TYPE: SOME TYPE OF GLASS
WITNESSES:	☐	☒	(If YES, attach witness list)
INJURIES:	☒	☐	
MEDICAL TREATMENT:	☐	☒	
AT: Scene:	☐	☐	PARAMEDICS:
Hospital:	☐	☐	PHYSICIAN(S) / HOSPITAL:
ACT COMMITTED IN PRESENCE OF MINOR(S):	☐	☒	NAMES/AGES:
H. R. S. NOTIFIED:	☐	☒	
VICTIM PREGNANT:	☐	☒	
VIOLATION OF RESTRAINING ORDER:	☐	☒	CASE #: 19002554/19002708
PRIOR HISTORY OF DOMESTIC VIOLENCE:	☒	☐	
ALCOHOL OR DRUGS INVOLVED:	☐	☒	

NARR

On 11/24/19, around 0722hrs, I responded to 6220 Michael st in Jupiter in regards to a possible domestic battery. Prior to my arrival, Northcom advised the male caller advised his girlfriend assaulted him and he was bleeding from his mouth and hands. He also advised he did not want police involvement and left the residence after his girlfriend left. Upon my arrival, Northcom contacted the victim, later identified as

STATE OF FLORIDA
COUNTY OF PALM BEACH

Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.

334
SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 24 day of November, 2019.

307 / 1223
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

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

NOV 25 2

DOMESTIC VIOLENCE PROBABLE CAUSE
AFFIDAVIT
Palm Beach County
Narrative Continuation

ADMIN

Date / Time		
11/24/2019 09:38		
Agency ORI Number	Agency Name	Agency Report Number
FL 0501700	JUPITER POLICE DEPARTMENT	5 4 19-005262

NARRATIVE

Daniel Slater (wm, 7/20/69), who stated he was on his way back to the residence to talk to police. When Slater arrived, he advised the following:

Slater advised he and his fiance, Brianna Celine Kane (wf, 9/23/98) returned home around 0530hrs from a night club in Palm Beach County. According to Slater, Kane was upset about him talking to a girl (Sabrina) at the club. He advised shortly after they returned home, while he was laying in bed Kane threw a glass of water on him. He stated when he got up to go in the kitchen to ask her what was wrong, she threw a glass at him, hitting him in the chest, which broke into pieces. He then told me, Kane threw her cell phone at him, striking him in the nose causing several minor cuts on the bridge of his nose. Slater said he dropped to his knees after being hit by the phone and when he did she hit him in the back of the head with a glass bong pipe. He also had visible minor abrasions to fingers on both hands, which he stated he wasn`t sure what was used to cause them. He advised shortly after Kane left the residence.

While leaving the scene, Kane returned back to the residence, where contact was made with her in the driveway. Kane stated when she and Slater returned home from the night club, she confronted him about the girl (Sabrina). She stated Slater then cornered her in the kitchen and from about 4 feet away threw a glass at her chest. Officer Razzano responded to the scene to check Kane for any injuries, which there didn`t appear to be any. Kane also stated Slater took her cell phone and threw it on the ground, causing it to shatter. She stated she walked outside because she knew he wouldn`t follow her and cause a scene. She advised she then left the residence and went to the beach.

Based on the above investigation and the the visible injuries to Slater, I believe probable cause exists to charge Brianna Kane with domestic battery pursuant to F.S.S 784.03(1)(A)(1).

STATE OF FLORIDA
COUNTY OF PALM BEACH

Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.

334
SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 24 day of November, 2019.

302 / 1223
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

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

VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been commited:

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

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

1. Incident Report #: 19-5262 Agency: JUPITER
   Offense: SIMPLE BATTERY (DOMESTIC)
   Suspect/Offender: BRIANNA E. KANE
   D.O.B. 9-23-98 Race: W Sex: F

2. Warrant #(s): _____

3.a. Victim's name: DANIEL SLATER D.O.B. 7-20-69 Race: W Sex: M
   Address: 6220 MICHAEL ST
   City: JUPITER State: FL Zip: 33458
   Home #: _____ Work #: _____ Other: 561-802-8245

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

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY BE SUBJECT TO CONFIDENTIALITY.

Victim/Relation Notification Waiver and Confidential Information Request.

(check applicable boxes)

☐ **Waiver:** **I choose not to be notified when the arrestee is released from custody.**

☐ **Confidential:** **I request the information on this form be kept confidential (applicable only to sexual battery, stalking, child abuse, harassment or domestic violence cases).**

Signature of person waiving notification: _____

Printed name of person waiving notification: _____

Deputy's Name: _____ I.D.# _____ Date: _____

White/Corrections or State Attorney (Warrant Application) **Yellow/Warrants Section** **Pink/Central Records**

#0029A REV. 4/99

SUSPECT/OFFENDER: _____ COURT CASE/WARRANT#: _____

(FOR WARRANTS USE ONLY)

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:	

REVIEW COMPLETED BY

Booking Number: 2019037832	**Date:** 11/25/2019
	Specialist Name/ID: AM/31562