

#0484997

P#2625

ARREST / NOTICE TO APPEAR

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

1

JUVENILE

OBTS Number				Agency ORI Number				Agency Name				Agency Report Number (N.T.A.'s only)									
0500400				Delray Beach Police Department								4 0 17-001820									
Charge Type: <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance Check as many as apply. <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other												If Weapon Seized Enter Type: Razor / Sharp Object									
Multiple Clearance Indicator 1																					
Location of Arrest (Including Name of Business) 916 SE 5TH AVE				Location of Offense (Business Name, Address) 916 SE 5TH AVE, DELRAY BEACH, FL 33483																	
Date of Arrest 02/02/2017		Time of Arrest 04:17		Booking Date 02/02/2017		Booking Time 04:27		Jail Date 02/02/2017		Jail Time 04:22		Location of Vehicle									
Name (Last, First, Middle) BADGER, BROOKE LYNNE												Alias: _____									
Race W - White I - American Indian W F Date of Birth B - Black O - Oriental/Asian 08/16/1993 Height Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)												Eye Color BROWN		Hair Color BROWN		Complexion FAIR		Build			
Local Address (Street, Apt. Number) 14401 S MILITARY TRL C201, DELRAY BEACH, FL 33445												Marital Status S		Religion		Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>					
Permanent Address (Street, Apt. Number) 14401 S MILITARY TRL C201, DELRAY BEACH, FL 33445												Phone (213) 929-4649		Residence Type: 1. City 3. Florida 2. County 4. Out of State		Address Source VERBAL					
Business Address (Name, Street)												Phone		Occupation							
D/L Number, State B326072937960 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) DELRAY BEACH, FL		Citizenship													
Co-Defendant Name (Last, First, Middle)												Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor			
Co-Defendant Name (Last, First, Middle)												Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor			
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ <input type="checkbox"/> Legal Custodian Address (Street, Apt. Number) No Bond												Name (Last, First, Middle)									
												Residence Phone									
												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 <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/ Distribute M. Manufacture/ Produce/ Cultivate Z. Other N. N/A B. Buy D. Deliver E. Use												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	
C H A R G E AGGRAVATED BATTERY												Statute Violation Number 784.045				Violation of ORD #					
Drug Activity Drug Type N Amount / Unit / Offense # 17-001820												Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number				Bond	
C H A R G E Charge Description												Statute Violation Number				Violation of ORD #					
Drug Activity Drug Type Amount / Unit / Offense # /												Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number				Bond	
C H A R G E Charge Description												Statute Violation Number				Violation of ORD #					
Drug Activity Drug Type Amount / Unit / Offense # /												Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number				Bond	
I N T A K E Health / Apparent Physical Condition of Defendant APP NORMAL												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 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			
N O T I C E Transported By												Date Transported / / : :		Time Transported		Other					
<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 I SHOULD NOT 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.												No Photo Available									
Signature of Defendant (or Juvenile and Parent/Custodian)												Date Signed									
HOLD for Other Agency				Signature of Arresting Officer				Name Verification (Printed by Arrestee)													
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other				Name of Arresting Officer (Print) GODEK, CHRISTOPHER J.				I.D. # 1099		(PRINT)											
Intake Deputy Col. Hardemon				Pouch # 4716		Transporting Officer GODEK		I.D. # 1099		Agency DBPD											
A D M I N I												PAGE 1 OF 1									
N O T I C E Witness here if subject signed with me																					

SCANNED FEB 02 2017 P.I.C. DEFENDANT

OBTS Number			PROBABLE CAUSE AFFIDAVIT				1 Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
D	Agency ORI Number FL 0500400	Agency Name DELRAY BEACH POLICE DEPARTMENT	Agency Report Number 4 0 17-001820				Special Notes:					
M	Charge Type: Check as many as apply. <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other											
E	Name (Last, First, Middle) BADGER, BROOKE LYNNE					Alias		Race W	Sex F	Date of Birth 08/16/1993		
C	Charge Description 784.045 AGGRAVATED BATTERY			Charge Description								
H	Charge Description			Charge Description								
A	Victim's Name (Last, First, Middle) MORIARTY, MILES JOSEPH					Race W	Sex M	Date of Birth 12/11/1982				
R	Local Address (Street, Apt. Number) 916 SE 5TH AVE 1, DELRAY BEACH, FL 33483			(City)	(State)	(Zip)	Phone (860) 549-2413		Address Source VERBAL			
G	Business Address (Name, Street) TAVERNA OPA			(City)	(State)	(Zip)	Phone		Occupation SERVER/MGR			
S	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 . . . <input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to _____ admitting to the below facts. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.											
E	On the <u>2</u> day of <u>February</u> , <u>2017</u> at <u>0330</u> (Specifically include facts constituting cause for arrest.)											
<p>In the City of Delray Beach, in the County of Palm Beach, Florida;</p> <p>On February 2nd, 2017, at approximately 0330 hours, I responded to 916 SE 5th Ave (Upstairs Apt.) for a possible Burglary/ Battery. Upon my arrival, I met with Miles Moriarty, who explained that his ex girlfriend, Brooke Badger, broke into his apartment and got into a physical altercation with him. Moriarty was inside his house and Badger broke a side window and entered his apartment. Badger then picked up multiple wine glasses and threw the wine glasses at Moriarty causing a laceration to his left ankle. There was blood running down Moriarty's ankle and was dripping on the floor as he was walking around the apartment. As I entered the apartment, I noticed blood all over the floor and broken glass all over the living floor and couch, which Moriarty had explained was from his injury. After DBFD had administered medical aid to the victim, blood from the victim's injury continued to bleed through the bandages.</p> <p>I then spoke to Badger, who explained that she broke into the apartment to get some of her belongings, since she was living there for a short period of time. Badger had keys to the apartment, but Moriarty had changed one of the two locks. Badger explained that she broke into the apartment, but did not know where all the broken glass and blood came from.</p> <p>Moriarty provided a sworn statement via my body camera and explained the above mentioned incident. Photos were taken of the victim's injury and the scene itself.</p> <p>Based on the above mentioned investigation, Brooke Badger, was arrested and charged with Aggravated Battery, FSS 784.045 and was transported to the THF. Badger was then transported to County Jail.</p>												
<p>SWORN AND SUBSCRIBED BEFORE ME</p> <p>FERRERI, GARY <i>984</i> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p>02/02/2017 <i>984</i> DATE</p> <p>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p>GODEK, CHRISTOPHER J <i>1099</i> NAME OF OFFICER (PLEASE PRINT)</p> <p>02/02/2017 <i>984</i> DATE</p> <p>SCANNED FEB 02 2017</p>												
ADMINISTRATIVE	<p>COURT</p> <p>STATE ATTORNEY</p> <p>CENTRAL RECORDS</p> <p>JAIL</p> <p>CRIME ANALYSIS</p> <p>P. I. O.</p>											