

190P 1369

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report				1 Arrest 2 NTA.	3. Request for Warrant 4. Request for Capias	1	Juvenile
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 19-035208				
Charge Type: Check as many as apply. <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other						If Weapon Seized Enter Type		Multiple Clearance Indicator 1	
Location of Arrest (including Name of Business) 8091 RED JASPER LANE					Location of Offense (Business Name, Address) 8091 RED JASPER LANE, DELRAY BEACH FL 33446				
Date of arrest 2-9-19		Time of Arrest 0258	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle		
Name (Last, First, Middle) KEENNE, CHRISTIAN, TAYLOR								Alias (Name, DOB, Soc. Sec. #, Etc.)	
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian	Sex W M	Date of Birth 2-20-91	Height 5'10	Weight 190	Eye Color GREEN	Hair Color BROWN	Complexion TAN	Build SMALL	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE					Marital Status SINGLE	Religion NONE	Indication of Alcohol Influence Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>		
Local Address (Street, Apt. Number) 8091 RED JASPER LANE				(City) DELRAY BEACH	(State) FL	(zip) 33446	Phone ()	Residence Type: 1. City 2. County 3. Florida 4. Out of State 2	
Permanent Address (Street, Apt. Number)				(City)	(State)	(zip)	Phone ()	Address Source	
Business Address (Name, Street)				(City)	(State)	(zip)	Phone ()	Occupation	
D/L Number, State K500-118-910-60-0		Soc. Sec. Number		INS Number		Place of Birth (City, State) JACKSONVILLE, FL		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"/> Legal Custodian <input type="checkbox"/> 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 <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 355-2528) informed of any change of address. Yes, by: (Name) No: (Reason)						School Attended		Grade	
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Description of Property				Value of Property				
Activity N. NIA 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. Marijuana D. Opium/Deriv	P. Paraphernalia/ Equipment S. Synthetic. U. Unknown Z. Other
Charge Description BATTERY ON A LEO				Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 784.07(2b)		Violation of ORD #	
Drug Activity N/A	Drug Type N/A	Amount / Unit	Offense #	Warrant / Capias Number				Bond	
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number				Bond	
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number				Bond	
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number				Bond	
Location (Court, Room Number, Address)									
Court Date and Time Month Day Year Time A.M. P.M. 2-9-19									
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 2-9-19			
HOLD for other Agency Name			Signature of Arresting Officer PHILIPPE, G			Name Verification (Printed by Arrestee) (PRINT)			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other	I.D. #	Pouch #	Transporting Officer G. Philippe	I.D. # 32410	Agency PBCO	PAGE 1	OF 1	
Witness here if suspect signed with an "X"									

2019 FEB 10 AM 10:40

PROBABLE CAUSE AFFIDAVIT

ORIS Number _____ 1 Arrest 3 Request for Warrant 2 NTA 4 Request for Capias 1 Juvenile _____

ADMIN	Agency ORI Number FL0 5 0 0 0 0 0 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 19-035208
	Charge Type Check as many as apply <input checked="" type="checkbox"/> 1 Felony <input type="checkbox"/> 2 Traffic Felony	<input type="checkbox"/> 3 Misdemeanor <input type="checkbox"/> 4 Traffic Misdemeanor	<input type="checkbox"/> 5 Ordinance <input type="checkbox"/> 6 Other

DEF	Name (Last, First, Middle) KEENE, CHRISTIAN, TAYLOR	Alias	Race W	Sex M	Date of Birth 2/20/91
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CHARGES	Charge Description BATTERY ON A LEO 784.07(2b)	Charge Description
	Charge Description	Charge Description

VICTIM	Victim's Name (Last, First, Middle) PHILIPPE, GUIRLIN	Race B	Sex M	Date of Birth
	Local Address (Street, Apt Number) _____ (City) (State) (Zip) Phone ()	Address Source		
	Business Address (Name, Street) _____ (City) (State) (Zip) Phone ()	Occupation		

The undersigned certifies and swears that he/she has just and reasonable 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. was observed by _____ who told _____

confessed to _____ that he/she saw the arrested person commit the below acts.

_____ admitting to the below facts. _____ was found to have committed the below acts, resulting from my (described) investigation.

On the 9th day of FEBRUARY 20 19 at 0255 A.M P.M (Specify include facts constituting cause for arrest.)

ON THE ABOVE DATE AND TIME I RESPONDED TO 8091 RED JASPER LANE APT 627 IN UNINCORPORATED DELRAY BEACH FL, 33446 IN REFERENCE TO A DOMESTIC DISTURBANCE.

WHILE AT THE SCENE I CAME IN CONTACT WITH W/M CHRISTIAN TAYLOR KEENE WHO BECAME AGGRESSIVE WITH DEPUTIES WHEN BEING QUESTIONED ABOUT THE WELL BEING THE COMPLAINANT HIS GIRLFRIEND MEGAN BELLODY. CHRISTIAN HAD VISIBLE PRE EXISTING WOUNDS TO HIS EAR, HIS LEFT EYEBROW, AND HIS RIGHT ELBOW FROM A FIGHT HE WAS INVOLVED IN EARLIER THAT EVENING. CHRISTIAN ATTEMPTED TO SHUT THE DOOR WHILE WE WERE STANDING OUTSIDE. I WAS ABLE TO HOLD THE DOOR OPEN AND ADVISE CHRISTIAN WE HAD TO ENTER THE RESIDENCE AND CHECK ON MEGAN.

I ENTERED INTO THE RESIDENCE AND TOLD CHRSTIAN THAT I WAS GOING TO CHECK ON MEGEN. I STEPPED AROUND HIM, AS I MADE ENTRY INTO THE RESIDENCE, WHERE I OBSEVERED MEGAN SLEEPING ON THE SOFA IN THE LIVING ROOM AREA. SHE WAS BREATHING AND DID NOT APPEAR TO HAVE ANY BRUISING OR SWELLING ON HER BODY.

CHRISTIAN BEGAN CURSING AT ME BY SAYING "IF WE WAS ON THE THE STREET YOUR WHOLE FACE WOULD BE SMASHED IN" CHRISTIAN THEN PROCEEDED TO SAY "YOU'RE JUST A DIRTY ASHY NIGGER" AS CHRISTIAN WAS CURSING AT ME HE BEGAN TO CHANGE HIS POSTURE AND BLADE HIS STANCE. CHRISTIAN THEN APPROACHED ME IN A THREATENING MANNER. I THEN ESCORTED HIM TO THE GROUND WHERE HE BEGAN TO ACTIVELY RESIST MY ATTEMPTS TO PLACE HIM IN HAND RESTRAINTS BY GRABBING MY ARMS AND ATTEMPTING PREVENT ME FROM GAINING COMPLETE PHYSICAL CONTROL, I HAD TO RESTRAIN CHRISTIAN ON THE GROUND TO ALLOW MY BACK UP DEPUTY TO PLACE HIM IN HAND RESTARINTS.

BASED ON THE EVENTS THAT OCCURED I FIND PROBABLE CAUSE TO CHARGE CHRISTIAN TAYLOR KEENE WITH BATTERY ON A LAW ENFORCEMENT OFFICER PERSUANT TO F.S.S 784. 07 (2b)

STATE OF FLORIDA
COUNTY OF PALM BEACH
[Signature] 32410
(Signature of Arresting Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 9TH day of FEBRUARY 20 19 by _____

(Print name of Arresting Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced _____
[Signature] 33089
Notary Public, Clerk of Court, Officer (F.S.S. 17.10)



Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>	119.0712(2)	Other: Personal Information contained in a motor vehicle record (s).	
	<input type="checkbox"/>	393202(5)	Other: Person reporting Child Abuse	

REVIEW COMPLETED BY

Booking Number: 2019004623	Date: 2/10/2019
	Specialist Name/ID: M. Tooks #8557