

JKT# 0217301

PCB 1120

ARREST / NOTICE TO APPEAR

OBTS Number		ARREST / NOTICE TO APPEAR											
Agency ORI Number		Agency Name		1. Arrest 2. N.T.A.						3. Request for Warrant 4. Request for Capias			
0501700		Jupiter Police Department		5 4 16-004861						1 JUVENILE			
Charge Type: Check as many as apply:		<input type="checkbox"/> 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		If Weapon Seized Enter Type		Multiple Clearance Indicator					
Location of Arrest (Including Name of Business) 1209 CHEROKEE ST				Location of Offense (Business Name, Address) 1209 CHEROKEE ST, JUPITER, FL 33458									
Date of Arrest 10/08/2016		Time of Arrest 22:27		Booking Date		Booking Time		Jail Date		Jail Time			
Name (Last, First, Middle) RYAN, CHRISTINE													
Alias: Alias:													
Race W - White B - Black		Sex W F		Date of Birth 11/20/1963		Height 5'03		Weight 110		Eye Color BLUE			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATTOO BACK										Hair Color BLONDE /			
Marital Status M		Religion CATHOLIC								Complexion FAIR			
Local Address (Street, Apt. Number) 1209 CHEROKEE STREET, JUPITER, FL 33458		(City)		(State)		(Zip)		Phone (561) 386-3823		Indication of Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>			
Permanent Address (Street, Apt. Number) 1209 CHEROKEE STREET, JUPITER, FL 33458		(City)		(State)		(Zip)		Phone (561) 386-3823		Residence Type 1. City 3. Florida 2. County 4. Out of State 1			
Business Address (Name, Street) ,		(City)		(State)		(Zip)		Phone		Address Source VERBAL			
D/L Number, State R500100639200 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) NEW YORK CITY, NY,		Citizenship US		Occupation Accountant			
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) _____ Residence Phone <input type="checkbox"/> Legal Custodian													
Address (Street, Apt. Number) VICTIM NOTIFICATION REQUIRED				(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 <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			
Drug Activity S. Sell N. N/A P. Possess		R. Smuggle B. Buy T. Traffic		K. Disperses/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other		Drug Type B. Barbiturate N. N/A C. Cocaine A. Amphetamine E. Heroin			
H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetic		U. Unknown Z. Other									
Charge Description BATTERY-SIMPLE (TOUCH OR STRIKE)													
Drug Activity N		Drug Type /		Amount / Unit 16-004861		Offense # 1		Counts <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number	
Statute Violation Number 784.03(1)(A)(1)													
Bond NO NO													
Charge Description													
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence		Warrant / Capias Number	
Statute Violation Number													
Bond													
Charge Description													
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Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence		Warrant / Capias Number	
Statute Violation Number													
Bond													
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"/> Posted Bond		<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health		<input type="checkbox"/> T.O.T. County Jail		PROPERTY - Received By		Released By		Released To			
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)													
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 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 386				Name Verification (Printed by Arrestee)					
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal				<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other				Name of Arresting Officer (Print) HOBBY, MATTHEW					
								I.D. # 1193					
								(PRINT)					
								PAGE 1 OF 1					
Intake Deputy I.D. # 1004861 Pouch # 1004861 Transporting Officer I.D. # 386 Agency SPD Witness here if subject signed with an X													

Signature of Defendant (or Juvenile and Parent/Custodian) /

Date Signed

I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR I HEREBY WAIVE
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.

No
Photo
Available

Digitized by srujanika@gmail.com

Signature of Defendant (or Juvenile and Parent/Custodian) / Date Signed

HOLD for Other Agency 291 Name Verification (Printed by Arrestee)

Dangerous Resisted Arrest Name of Arresting Officer (Print) I.D. # (PRINT)

Suicidal Other **HOBBY, MATTHEW** 1193

Intake Deputy I.D. # Pouch # Transporting Officer I.D. # Agency

Witness here if subject signed with an "X"

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COURT STATE ATTORNEY AGENCY CENTRAL RECORDS JAIL CRIME ANALYSIS

11884

Hubby

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

Date / Time 10/08/2016 23:01		AFFIDAVIT Palm Beach County																																						
Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT	Agency Report Number 5 4 16-004861																																					
Name (Last, First, Middle) RYAN, CHRISTINE		Alias	Race W	Sex F																																				
Charge Description 784.03(1)(A)(1) BATTERY-SIMPLE (TOUCH OR STRIKE)		Date of Birth 11/20/1963																																						
Victim's Name (Last, First, Middle) RYAN, JEROME A JR		Race W	Sex M	Date of Birth 04/28/1957																																				
Local Address (Street, Apt. Number) 1209 CHEROKEE STREET, JUPITER, FL 33458		(City) JUPITER	(State) FL	(Zip) 33458																																				
Business Address (Name, Street) RITZ CARLTON		(City) JUPITER	(State) FL	(Zip) 33458																																				
DEFENDANT'S STATEMENTS:		Written <input type="checkbox"/>	Taped <input type="checkbox"/>	Oral <input type="checkbox"/>																																				
VICTIM'S STATEMENTS:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																				
OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL):																																								
RELATIONSHIP BETWEEN VICTIM & SUSPECT																																								
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On 10/08/2016, at approximately 2107 hours, I was dispatched to 1209 Cherokee St. in reference to a domestic disturbance. While en-route to the scene Northcom Communications advised the male half, later identified as W/M Jerome A. Ryan (04/28/1957), who went over to the neighbor's house and advised them his wife, W/F Christine Ryan (11/20/1963) was hitting him. Northcom also advised C. Ryan was throwing things outside the																																								
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p>Appeared before me, <u>Mr Hobby</u> personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.</p> <p><u>Mr Hobby</u> 386/1193</p> <p>SIGNATURE OF ARRESTING OFFICER</p>																																								
Sworn to and subscribed to before me this <u>8</u> day of <u>October</u> , <u>2016</u> .																																								
<p><u>Joseph Coughlin</u></p> <p>COUNTHAN, JOSEPH</p> <p>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p>																																								

Sworn to and subscribed to before me this 8 day of October, 2016.

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

SIGNATURE OF ARRESTING OFFICER

COONAN, JOSEPH
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

Narrative Continuation

A D M I N	Date / Time 10/08/2016 23:01	Palm Beach County Narrative Continuation
N	Agency ORI Number FL 0501700	Agency Name JUPITER POLICE DEPARTMENT
A	Agency Report Number 5 4 16-004861	
R	house. Upon my arrival to the residence I spoke to J. Ryan who advised he had a cut on his left forearm which was bleeding, he also stated he had a cut on his back. He advised he did not need fire rescue for his injuries. J. Ryan advised he was next door at the neighbors, 1207 Cherokee St., when C. Ryan walked over from their house and was knocking on the neighbor's door to get him out of the house. He advised he went back to his house to get another beer when she started to yell at him for being at the neighbors. At this time she started to throw his clothes out the house door all over the property. J. Ryan then stated he was struck by a stool in his arm and back. He advised he did not know why she was so mad and hitting him with the stool. While speaking to J. Ryan, I saw C. Ryan walking outside of her residence, at this time I walked over to her to speak with her about the incident. I did not observe any visible injuries to C. Ryan, and she also stated that she was not injured.	
T	I observed there was beer cans all over the driveway and clothes on the front lawn. C. Ryan stated she was mad that J. Ryan was next door because they were smoking marijuana and she did not want him there. C. Ryan advised she threw the whole case of beer and his clothes outside the house because she wanted him to stop drinking. While speaking to C. Ryan she reached down to grab a beer can that was lying on the ground by her feet. I advised her several times to not pick up the beer can, she did not listen to my commands and picked up the beer can, and stated, "that's okay". At this time I placed C. Ryan into protective custody for officer safety, while I finish interviewing her. She advised she did not hit J. Ryan with anything but she just threw his clothes and the rest of the beer outside.	
V	Contact was made with W/F Delacy R. Odell (09/30/1989), the neighbor, who provided a sworn statement about what happened during the incident. D. Odell advised C. Ryan barged into their home because she was mad that J. Ryan was at their house. She then stated C. Ryan started to scream at J. Ryan to not come back home and punched the house. D. Odell then advised C. Ryan picked up a stool and hit J. Ryan twice and then she threw beer cans at him.	
E	Contact was also made with W/F Jennifer Odell (02/18/1959) who advised C. Ryan barged into their home because J. Ryan was at the house. She then advised J. Ryan was getting yelled at by C. Ryan not to come home, but when he went home she began hitting him with a stool and also threw beer cans at him.	
Based on my investigation I find probable cause to charge Christine Ryan with simple battery (domestic). Photos of the injuries to J. Ryan were taken as well as the scene. The photos were taken of the injuries were later submitted into Jupiter Police Evidence.		
Christine Ryan did actually and intentionally touch or strike Jerome A. Ryan against the will of Jerome A. Ryan and/or did intentionally cause bodily harm to Jerome A. Ryan, contrary to Florida Statute 784.03(1). (1 DEG MISD)		
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p>Appeared before me, <u>ofc Hobby</u> personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.</p> <p><u>M. H.</u> <u>386/1163</u></p> <p>SIGNATURE OF ARRESTING OFFICER</p> <p>Sworn to and subscribed to before me this <u>8</u> day of <u>October</u>, <u>2016</u>.</p> <p><u>J. COUNIHAN, JOSEPH</u></p> <p>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p>		

COURT

STATE ATTORNEY

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CRIME ANALYSIS

P. I. O.