

17MM014092

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

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

OBTS Number	Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number (N.T.A.'s only) <b>06-17-155103</b>	
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	Weapon Seized / Type 1. Yes 2. No		Multiple Clearance Indicator 1
Location of Arrest (Including Name of Business) <b>11313 TORRINGTON AV WELLINGTON FL., 33414</b>			Location of Offense (Business Name, Address) <b>SAME</b>			
Date of Arrest <b>11/23/2017</b>	Time of Arrest <b>0050</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle

Name (Last, First, Middle) <b>LEAL DAVID</b>			Alias (Name, DOB, Soc. Sec. #, Etc.) <b>F</b>					
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian	Sex <b>W</b>	Date of Birth <b>12/06/1962</b>	Height <b>5'11</b>	Weight <b>190</b>	Eye Color <b>BRN</b>	Hair Color <b>BLK</b>	Complexion <b>MED</b>	Build <b>MED</b>
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>N/A</b>			Marital Status <b>MARRIED</b>	Religion <b>CHRISTIAN</b>	Indication of Alcohol Influence Drug Influence Y N Unk <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>			
Local Address (Street, Apt. Number) <b>1313 TORRINGTON AVE</b>			(City) <b>WELLINGTON FL.,</b>	(State) <b>FL.,</b>	(Zip) <b>33414</b>	Phone <b>(561) 3010116</b>	Residence Type: 1. City 2. County 3. Florida 4. Out of State <b>1</b>	
Permanent Address (Street, Apt. Number) <b>SAME</b>			(City)	(State)	(Zip)	Phone <b>( )</b>	Address Source <b>DEF</b>	
Business Address (Name, Street) <b>N/A</b>			(City)	(State)	(Zip)	Phone <b>( )</b>	Occupation <b>REALTOR</b>	
D/L Number, State <b>L-400-166-62-446-0</b>		Soc. Sec. Number <b>[REDACTED]</b>	INS Number		Place of Birth (City, State) <b>WISCONSIN MK</b>	Citizenship <b>YES</b>		

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 <b>( )</b>
Address (Street, Apt. Number) (City) (State) (Zip)		Business Phone <b>( )</b>
Notified by: (Name)	Date <b>11/23/2017</b>	Time
Released To: (Name) Relationship		Date Time

The above address provided by  defendant and / or  defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address.  
 Yes, by: (Name)  No: (Reason)

Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No	Description of Property	Value of Property
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Drug Activity N. N/A 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 O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other
Charge Description <b>BATTERY</b>		Counts <b>1</b>	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number <b>784.03(1)</b>		Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense # <b>17-155103</b>	Warrant / Capias Number		Bond				

Location (Court, Room Number, Address)	
Court Date and Time Month Day Year Time AM PM	
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

HOLD for other Agency Name:	Arresting Officer <b>J. BROWN III</b>	Name Verification (Printed by Arrestee) <b>(PRINT)</b>
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	Resisted Arrest <input type="checkbox"/> Other:	PAGE <b>1 OF 1</b>
Intake Deputy I.D. # Pouch #	Transporting Officer ID # Agency <b>J. Brown 827 P850</b>	Witness here if subject signed with an "X"

PROBABLE CAUSE AFFIDAVIT

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

1 Juvenile

OBTS Number	PROBABLE CAUSE AFFIDAVIT			1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile
Agency ORI Number <b>FLO 500000</b>	Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>	Agency Report Number <b>06-17-155103</b>					
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	Special Notes:			
Name (Last, First, Middle) <b>LEAL DAVID</b>	Alias <b>F</b>	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>12/06/1962</b>			
Charge Description <b>BATTERY 784.03(1)</b>	Charge Description						
Charge Description	Charge Description						
Victim's Name (Last, First, Middle) <b>LEAL DARLA N</b>	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>12/21/65</b>				
Local Address (Street, Apt. Number) <b>1313 TORRINGTON AVE</b>	(City) <b>WELLINGTON</b>	(State) <b>FL.</b>	(zip) <b>33414</b>	Phone <b>(561) 3731432</b>	Address Source <b>VICTIM</b>		
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 \_\_\_\_\_ that he/she saw the arrested person commit the below acts.

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

On the **23ND** day of **NOV** 20 **17** at **0050**  A.M.  P.M. (Specifically include facts constituting cause for arrest.)

**On ~~Wed~~ <sup>Tues</sup> 11/23/17 AT APPROXIMATELY 0031HRS., I RESPONDED TO 1313 TORRINGTON AVE., WELLINGTON FL., REFERENCE TO A BATTERY CASE - DOMESTIC RELATED.**

**UPON MY ARRIVAL, I MET WITH THE VICTIM, DARLA N. LEAL, WHO PROVIDED THE FOLLOWING:**

**AT APPROXIMATELY 0015HRS., HER HUSBAND, DAVID CAME TO THE HOUSE, BELIGERENT, TURNING LIGHTS ON YELLING AT ME & MY FRIEND, JOEY WILLIAMS. WE WERE HAVING A SLEEPOVER FOR THE GIRLS. HE CAME IN TURNING LIGHTS ON, TELLING MY FRIEND TO GET OUT OF HIS HOUSE, TURNED THE TV ON WITH HIGH VOLUME, DUMPED OUT THE LAUNDRY ONTO THE FLOOR, OPENED THE DOORS TO THE KIDS ROOMS, CAUSING A LOT OF NOISE. JOEY AND I WERE IN THE KITCHEN WHEN HE CAME THRU & WITH AN OPENED HAND AND SHOVED ME IN THE NECK. HE CONTINUED GOING THRU THE HOUSE TURNING LIGHTS ON & CAUSING A LOT OF NOISE & PUSHING ME IN THE NECK WHERE I HAD SURGERY WITH A TITANIUM PLATE & 8 SCREWS PLACED IN MY NECK.**

**AS A RESULT OF DAVID'S ACTIONS, DARLA SUSTAINED STIFFNESS & REDNESS ON THE RIGHT SIDE OF HER NECK. DARLA DID RECEIVE MEDICAL ATTENTION DUE TO HER NECK SURGERY.**

**DARLA DID PROVIDE A SWORN WRITTEN STATEMENT.**

**UPON SPEAKING WITH THE WITNESS, JOEY WILLIAMS, SHE PROVIDED THE FOLLOWING:**

**DAVID CAME HOME SCREAMING "GET THE FUCK OUT OF MY HOUSE" I GOT UP WENT TO GO CHECK ON MY KIDS AND HE WAS BLOCKING THE PATH. I CALLED 911, BUT MY PHONE CUT OUT WHEN I WENT TO THE CHILDRENS ROOM. I HEARD DARLA SCREAMING AT HIM TO LEAVE. I WENT OUT TO HE KITCHEN AND HE YELLED "FUCK YOU" TO HER AND ME. HE LOOKED LIKE HE WAS TRYING TO COME TOWARDS ME AND SHE STEPPED IN HIS PATH AND HE SLAMMED HER ON THE NECK.**

**JOEY DID PROVIDE A SWORN WRITTEN STATEMENT.**

**THEREFORE, BASED ON THE ABOVE MENTIONED FACTS, I FIND PROBABLE CAUSE DID EXIST FOR BATTERY - DOMESTIC RELATED, VIOLATING F.S.S. 784.03(1), AT WHICH TIME GARCIA WAS TAKEN INTO CUSTODY.**

STATE OF FLORIDA  
COUNTY OF PALM BEACH

**J. BROWN III 8678**

(Signature of Arresting/Investigative Officer)

23ND NOV

17 J. BROWN III 8678

The foregoing instrument was sworn to or affirmed and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_ by \_\_\_\_\_ PERSONALLY KNOWN

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced

**S SHACKLEFORD 18882**

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

SCANNED 1