

0481811

HMMO 1033

1715

ARREST / NOTICE TO APPEAR				1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1 JUVENILE						
OBTS Number <b>0501700</b>		Agency Name <b>Jupiter Police Department</b>		Agency Report Number (N.T.A.'s only) <b>5 4 17-003938</b>										
Charge Type: Check as many as apply: 1. Felony 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		If Weapon Seized Enter Type <b>Hands, Feet, Fist, Teeth</b>		Multiple Clearance Indicator						
Location of Arrest (Including Name of Business) <b>911 SENECA ST</b>				Location of Offense (Business Name, Address) <b>911 SENECA ST, JUPITER, FL 33458</b>										
Date of Arrest <b>08/13/2017</b>		Time of Arrest <b>18:11</b>		Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle						
Name (Last, First, Middle) <b>WILSON, DAVID L</b>														
Alias: <b>ALIAS: TATT M BACK/PLAYBOY BUNNY; TATT L WRIST/ "ANDY"</b>														
Race W - White B - Black		Sex I - American Indian O - Oriental/Asian		Date of Birth <b>W M 04/22/1978</b>	Height <b>5'09</b>	Weight <b>205</b>	Eye Color <b>BROWN</b>	Hair Color <b>BROWN</b>	Complexion <b>LIGHT</b>	Build <b>Large</b>				
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>TATT M BACK/PLAYBOY BUNNY; TATT L WRIST/ "ANDY"</b>						Marital Status <b>S</b>	Religion <b>CATHOLIC</b>	Indication of Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/> Drug Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>						
Local Address (Street, Apt. Number) <b>911 SENECA ST, JUPITER, FL 33458</b>						(City) (State) (Zip)		Phone <b>(561) 563-1932</b>		Residence Type: 1. City 2. County 3. Florida 4. Out of State <b>1</b>				
Permanent Address (Street, Apt. Number) <b>911 SENECA ST, JUPITER, FL 33458</b>						(City) (State) (Zip)		Phone <b>(561) 563-1932</b>		Address Source <b>VERBAL</b>				
Business Address (Name, Street) <b>UNEMPLOYED,</b>						(City) (State) (Zip)		Phone		Occupation				
D/L Number, State <b>4251727811SW/IL</b>			Soc. Sec. Number		INS Number		Place of Birth (City, State) <b>BELLEVILLE, IL,</b>		Citizenship <b>US</b>					
Co-Defendant Name (Last, First, Middle)						Race	Sex	Date of Birth						
Co-Defendant Name (Last, First, Middle)						Race	Sex	Date of Birth						
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ Name (Last, First, Middle) <input type="checkbox"/> Legal Custodian										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 <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 N. N/A D. Possess						S. Sell B. Buy R. Smuggle T. Traffic	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 Description <b>BATTERY-SIMPLE (TOUCH OR STRIKE)</b>						Statute Violation Number <b>784.03(1)(A)(1)</b>				Violation of ORD #				
Drug Activity <b>N</b>		Drug Type <b>/</b>		Amount / Unit <b>/</b>	Offense # <b>17-003938</b>	Counts <b>1</b>	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number			Bond			
Charge Description						Statute Violation Number				Violation of ORD #				
Drug Activity <b>/</b>		Drug Type <b>/</b>		Amount / Unit <b>/</b>	Offense #	Counts	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number			Bond			
Charge Description						Statute Violation Number				Violation of ORD #				
Drug Activity <b>/</b>		Drug Type <b>/</b>		Amount / Unit <b>/</b>	Offense #	Counts	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias 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"/> 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				
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)				No Photo Available				
						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														
Signature of Defendant (or Juvenile and Parent/Custodian)						Date Signed								
HOLD for Other Agency				Signature of Arresting Officer <b>312</b>		Name Verification (Printed by Arrestee)								
				Name of Arresting Officer (Print) <b>ZESUT, BRANDEN</b>		I.D. # <b>1190</b>	(PRINT)							
Intake Deputy <b>306</b>		Pouch #	Transporting Officer <b>B. ZESUT</b>		I.D. # <b>312</b>	Agency <b>JPD</b>								
Witness here if subject signed with an "X"														

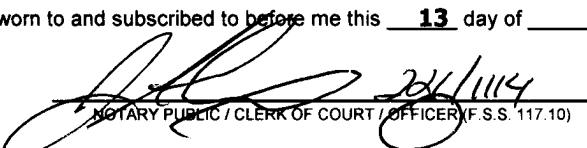
COURT  STATE ATTORNEY  AGENCY  CENTRAL RECORDS  TAIL  CRIMINAL ANALYST  I.O.  DEFENDANT

SCANNED  
AUG 14 2017

## DOMESTIC VIOLENCE PROBABLE CAUSE

## AFFIDAVIT

Palm Beach County

A D M I N D E R G V I C T I M	Date / Time <b>08/13/2017 18:11</b>	Agency ORI Number <b>FL 0501700</b>	Agency Name <b>JUPITER POLICE DEPARTMENT</b>	Alias	Agency Report Number <b>5   4   17-003938</b>																																																														
Name (Last, First, Middle) <b>WILSON, DAVID L III</b>					Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>04/22/1978</b>																																																												
Charge Description <b>784.03(1)(A)(1) BATTERY-SIMPLE (TOUCH OR STRIKE)</b>																																																																			
Victim's Name (Last, First, Middle) <b>ELLIOTT, ANDREA OKEY</b>					Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>11/21/1966</b>																																																												
Local Address (Street, Apt. Number) <b>911 SENECA ST, JUPITER, FL 33458</b>					(City)	(State)	(Zip)																																																												
Business Address (Name, Street) <b>911 SENECA ST, JUPITER, FL 33458</b>					(City)	(State)	(Zip)																																																												
DEFENDANT'S STATEMENTS:			Written <input type="checkbox"/>	Taped <input type="checkbox"/>	Oral <input checked="" type="checkbox"/>	OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): <b>CRYING, SCARED, BLEEDING</b>																																																													
VICTIM'S STATEMENTS:			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																														
RELATIONSHIP BETWEEN VICTIM & SUSPECT <b>GIRLFRIEND/BOYD</b>																																																																			
<table> <tr> <td>PHOTOGRAPHS:</td> <td>Scene: <input checked="" type="checkbox"/></td> <td>YES <input type="checkbox"/></td> <td>NO <input type="checkbox"/></td> </tr> <tr> <td></td> <td>Victim: <input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>911 CALL:</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td>CALLER: <b>CHARLES ARBAN</b></td> </tr> <tr> <td>WEAPON USED:</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td>TYPE:</td> </tr> <tr> <td>WITNESSES:</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td>(If YES, attach witness list)</td> </tr> <tr> <td>INJURIES:</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>MEDICAL TREATMENT:</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td></td> </tr> <tr> <td>AT:</td> <td>Scene: <input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>PARAMEDICS:</td> </tr> <tr> <td></td> <td>Hospital: <input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>PHYSICIAN(S) / HOSPITAL:</td> </tr> <tr> <td>ACT COMMITTED IN PRESENCE OF MINOR(S):</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td>NAMES/AGES:</td> </tr> <tr> <td>H. R. S. NOTIFIED:</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>VICTIM PREGNANT:</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td></td> </tr> <tr> <td>VIOLATION OF RESTRAINING ORDER:</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td>CASE #:</td> </tr> <tr> <td>PRIOR HISTORY OF DOMESTIC VIOLENCE:</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td></td> </tr> <tr> <td>ALCOHOL OR DRUGS INVOLVED:</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> </tr> </table>								PHOTOGRAPHS:	Scene: <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>		Victim: <input checked="" type="checkbox"/>	<input type="checkbox"/>		911 CALL:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	CALLER: <b>CHARLES ARBAN</b>	WEAPON USED:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	TYPE:	WITNESSES:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(If YES, attach witness list)	INJURIES:	<input checked="" type="checkbox"/>	<input type="checkbox"/>		MEDICAL TREATMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>		AT:	Scene: <input type="checkbox"/>	<input type="checkbox"/>	PARAMEDICS:		Hospital: <input type="checkbox"/>	<input type="checkbox"/>	PHYSICIAN(S) / HOSPITAL:	ACT COMMITTED IN PRESENCE OF MINOR(S):	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NAMES/AGES:	H. R. S. NOTIFIED:	<input type="checkbox"/>	<input type="checkbox"/>		VICTIM PREGNANT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>		VIOLATION OF RESTRAINING ORDER:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	CASE #:	PRIOR HISTORY OF DOMESTIC VIOLENCE:	<input type="checkbox"/>	<input checked="" type="checkbox"/>		ALCOHOL OR DRUGS INVOLVED:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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On 8/13/2017 at 1751 hours I was dispatched to 911 Seneca St. Jupiter FL, in reference to a domestic battery that had just occurred. The caller, W/M Charles Arban (11/21/1956) advised Northcom dispatch that his neighbor W/F Andrea Elliot (11/21/1966) was injured due to a fight with her live in boyfriend and she requested that he call 911.																																																																			
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.																																																																			
_____ SIGNATURE OF ARRESTING OFFICER																																																																			
Sworn to and subscribed to before me this <u>13</u> day of <u>August</u> , <u>2017</u> .																																																																			
 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)																																																																			

SCANNED  
AUG 14 2017

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

## DOMESTIC VIOLENCE PROBABLE CAUSE

## AFFIDAVIT

A D M I N	Date / Time <b>08/13/2017 18:11</b>	Palm Beach County Narrative Continuation
	Agency ORI Number <b>FL 0501700</b>	Agency Name <b>JUPITER POLICE DEPARTMENT</b>
		Agency Report Number <b>5   4   17-003938</b>
<p>Upon arrival on scene, Officers Bernstein, Fandrey, Harris and I made contact with Elliot outside of her residence. Elliot was crying, distraught and had injuries on her left hand, both arms, and right leg.</p> <p>She told me the following: she was involved in an argument with her live in boyfriend, W/M David Wilson (4/22/1978) in the backyard. As she was seated in a lawn chair smoking a cigarette (right hand), Wilson forcefully pushed her chest with both hands, causing her to fall over backwards in the chair. After she fell over, Wilson stood over her in an aggressive manner and continued to shout at her. She was able to get back up onto her feet, and Wilson began pushing her towards a fence in the backyard. In an effort to defend herself from Wilson, she put both hands up and pushed back towards Wilson's face. Elliot stated that she was still holding the cigarette in her right hand when she pushed Wilson, and it incidentally burned the left side of his nose. She then went to her neighbor Charles Arban's home at 909 Seneca St. and asked him to call 911.</p> <p>I observed a small cut on her left hand, bruising on the back of her right arm, an abrasion on her right forearm, and an abrasion on her right thigh. Elliot declined to be treated by Palm Beach County Fire Rescue.</p> <p>Elliot stated that she had been drinking alcohol during the day with Wilson, and that he has battered her before. She said she is very afraid of him. She also stated that he does not like law enforcement and will most likely "fight".</p> <p>I then made contact with Wilson on the front lawn of 911 Seneca St. He was placed into protective custody as a precautionary measure (Handcuffs checked for proper spacing and double locked), a limited protective pat down for weapons was conducted with negative results. Wilson had a visible burn mark on the left side of his nose; however he declined Palm Beach County Fire Rescue.</p> <p>I asked Wilson what happened and he told me the following: He was arguing with Elliot in the backyard due to acts of infidelity, and she was very drunk. Elliot was aggressive towards him and put the cigarette out on his nose. Wilson said "I didn't touch her; I did not put a hand on her". He stated that she was cheating on him. When I tried to ascertain further information about the fight, Wilson said that he no longer wished to speak with me about the incident.</p> <p>Based upon the totality of the circumstances, Elliot's statement and visible injuries, I determined Wilson to be the primary aggressor. He was advised that he was under arrest for simple battery, and was placed into the back of my patrol car. There were no independent witnesses, and no one else was in the home during the fight.</p> <p>Photos of the scene and both parties' injuries were taken and placed into the Jupiter Police Dept. evidence facility. Elliot completed a sworn written statement, and was provided with a Domestic Violence victim's rights brochure.</p> <p>Wilson was transported to the Jupiter Police Dept. for paperwork, and then to the Palm Beach County Jail without incident.</p> <p>Based upon the above aforementioned facts, I find probable cause to charge David Wilson with Florida Statute 784.03(1) DOMESTIC BATTERY.</p>		
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p>Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.</p> <p>_____ SIGNATURE OF ARRESTING OFFICER</p> <p>Sworn to and subscribed to before me this <u>13</u> day of <u>August</u>, <u>2017</u>.</p> <p><i>[Handwritten Signature]</i> <u>21/114</u> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p>SCANNED AUG 14 2017</p>		

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.