

0481811		ARREST / NOTICE TO APPEAR		1 Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		JUVENILE	
OBTS Number		Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 5, 4   17-003938					
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		If Weapon Seized Enter Type		Multiple Clearance Indicator	
Location of Arrest (Including Name of Business) 911 SENECA ST		Location of Offense (Business Name, Address) 911 SENECA ST, JUPITER, FL 33458									
Date of Arrest 08/13/2017		Time of Arrest 18:11		Booking Date		Booking Time		Jail Date		Jail Time	
Name (Last, First, Middle) WILSON, DAVID L		Alias: Alias (Name, DOB, Soc. Sec. #, Etc.)									
Race W - White B - Black		Sex W M		Date of Birth 04/22/1978		Height 5'09		Weight 205		Eye Color BROWN	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT M BACK/PLAYBOY BUNNY; TATT L WRIST/"ANDY"		Marital Status S		Religion CATHOLIC		Complexion LIGHT		Build Large			
Local Address (Street, Apt. Number) 911 SENECA ST, JUPITER, FL 33458		(City) (State) (Zip)		Phone (561) 563-1932		Residence Type 1. City 2. County 3. Florida 4. Out of State 5. 1		Address Source VERBAL			
Permanent Address (Street, Apt. Number) 911 SENECA ST, JUPITER, FL 33458		(City) (State) (Zip)		Phone (561) 563-1932		Occupation					
Business Address (Name, Street) UNEMPLOYED,		(City) (State) (Zip)		Phone							
D/L Number, State 42517278115W / IL		Soc. Sec. Number		INS Number		Place of Birth (City, State) BELLEVILLE, IL,		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		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 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.		Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property					
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Disperses/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other	
Charge Description BATTERY-SIMPLE (TOUCH OR STRIKE)		Statute Violation Number 784.03(1)(A)(1)		Violation of ORD #							
Drug Activity		Drug Type		Amount / Unit		Offense # 17-003938		Counts 1		Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
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	
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Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	
Health / Apparent Physical Condition of Defendant		Any knowledge of the following: Explain.		<input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries							
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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.		Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed						No Photo Available	
HOLD for Other Agency		Signature of Arresting Officer		Name Verification (Printed by Arrestee)							
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suspect		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) ZESUT, BRANDEN		I.D. # 1190		(PRINT)		PAGE 1 OF 1	
Intake Deputy		Pouch #		Transporting Officer		I.D. # 312		Agency JPD		Witness here if subject signed with an "X"	

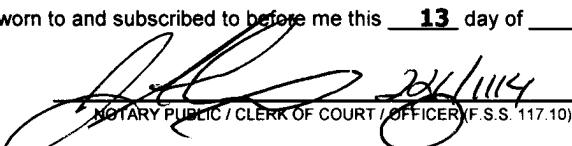
☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ I.O. ☐ DEFENDANT

SCANNED  
AUG 14 2017

## DOMESTIC VIOLENCE PROBABLE CAUSE

## AFFIDAVIT

Palm Beach County

A D M I N	Date / Time <b>08/13/2017 18:11</b>		Agency ORI Number <b>FL 0501700</b>		Agency Name <b>JUPITER POLICE DEPARTMENT</b>		Agency Report Number <b>5   4   17-003938</b>																																																																																																																								
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C H A R G E	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>																																																																																																																						
V I C T I M	Local Address (Street, Apt. Number) (City) (State) (Zip) <b>911 SENECA ST, JUPITER, FL 33458</b>				Phone <b>(561) 222-0546</b>		Address Source																																																																																																																								
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O B S E R V A T I O N S	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"/>																																																																																																																														
R E L A T I O N S H I P	RELATIONSHIP BETWEEN VICTIM & SUSPECT <b>GIRLFRIEND/BOYD</b>																																																																																																																														
	<table border="0"> <tr> <td>PHOTOGRAPHS:</td> <td>Scene:</td> <td>YES <input checked="" type="checkbox"/></td> <td>NO <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Victim:</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>911 CALL:</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td>CALLER:</td> <td colspan="3"><b>CHARLES ARBAN</b></td> </tr> <tr> <td></td> <td>WEAPON USED:</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td>TYPE:</td> <td colspan="3"></td> </tr> <tr> <td></td> <td>WITNESSES:</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td>(If YES, attach witness list)</td> <td colspan="3"></td> </tr> <tr> <td></td> <td>INJURIES:</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> <td colspan="3"></td> </tr> <tr> <td></td> <td>MEDICAL TREATMENT:</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td></td> <td colspan="3"></td> </tr> <tr> <td></td> <td>AT: Scene:</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>PARAMEDICS:</td> <td colspan="3"></td> </tr> <tr> <td></td> <td>Hospital:</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>PHYSICIAN(S) / HOSPITAL:</td> <td colspan="3"></td> </tr> <tr> <td></td> <td>ACT COMMITTED IN PRESENCE OF MINOR(S):</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td>NAMES/AGES:</td> <td colspan="3"></td> </tr> <tr> <td></td> <td>H. R. S. NOTIFIED:</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> <td colspan="3"></td> </tr> <tr> <td></td> <td>VICTIM PREGNANT:</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td></td> <td colspan="3"></td> </tr> <tr> <td></td> <td>VIOLATION OF RESTRAINING ORDER:</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td>CASE #:</td> <td colspan="3"></td> </tr> <tr> <td></td> <td>PRIOR HISTORY OF DOMESTIC VIOLENCE:</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td></td> <td colspan="3"></td> </tr> <tr> <td></td> <td>ALCOHOL OR DRUGS INVOLVED:</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> <td colspan="3"></td> </tr> </table>								PHOTOGRAPHS:	Scene:	YES <input checked="" 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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N A R R A T I O N	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. 117.10)																																																																																																																														

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

 SCANNED  
 CRIME ANALYSIS  
 AUG 14 2017

P. I. O.

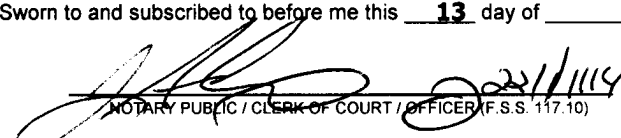
## DOMESTIC VIOLENCE PROBABLE CAUSE

## AFFIDAVIT

Palm Beach County  
Narrative Continuation

ADMINISTRATIVE	Date / Time <b>08/13/2017 18:11</b>	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>				

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

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