

0490662

17CF 8235

3634

## ARREST / NOTICE TO APPEAR

A D M I N I S T R A T I O N	OBT Number		Agency ORI Number <b>0501700</b>		Agency Name <b>Jupiter Police Department</b>		Agency Report Number (N.T.A.'s only) <b>5   4   17-003996</b>		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias <b>1</b>		JUVENILE <b>2</b>											
	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 <b>OTHER WEAPON</b>		Multiple Clearance Indicator																	
D E F E N D A N T	Date of Arrest <b>08/16/2017</b>		Time of Arrest <b>20:14</b>		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle									
	Name (Last, First, Middle) <b>KLEE, JACLYN MARIE</b>																					
J U V E N I L E	Alias: Alias (Name, DOB, Soc. Sec. #, Etc.)																					
	Race W - White B - Black O - Oriental/Asian <b>W</b>		Sex <b>F</b>		Date of Birth <b>11/07/1988</b>		Height <b>5'04</b>		Weight <b>110</b>		Eye Color <b>BLUE</b>		Hair Color <b>BLONDE /</b>		Complexion <b>FAIR</b>		Build <b>Thin</b>					
C O D E F	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)																					
	Local Address (Street, Apt. Number) <b>422 FERN ST, JUPITER, FL 33458</b>		(City)		(State)		(Zip)		Phone		Residence Type 1. City 2. County 3. Florida 4. Out of State <b>1</b>		Address Source <b>VERBAL</b>									
J U V E N I L E	Permanent Address (Street, Apt. Number) <b>422 FERN ST, JUPITER, FL 33458</b>		(City)		(State)		(Zip)		Phone		Occupation											
	Business Address (Name, Street) <b>K400433889070 / FL</b>		(City)		(State)		(Zip)		Phone		Citizenship <b>Columbus OHIO US</b>											
C O D E F	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		1. Arrested 2. At Large 3. Felony 4. Misdemeanor 5. Juvenile													
	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		1. Arrested 2. At Large 3. Felony 4. Misdemeanor 5. Juvenile													
J U V E N I L E	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian		Name (Last, First, Middle)		Address (Street, Apt. Number)		(City)		(State)		(Zip)		Residence Phone		Business Phone							
	Notified by: (Name)		Date		Relationship		Date		School Attended		Grade											
C O D E F	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																	
C H A R G E	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		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 - BATTERY AGGRAVATED W/ DEADLY WEAPON</b>														Statute Violation Number <b>784.045(1)(A)(2)</b>		Violation of ORD #					
C H A R G E	Drug Activity <b>N</b>		Drug Type <b>/</b>		Amount / Unit <b>/</b>		Offense # <b>17-003996</b>		Counts <b>1</b>		Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond							
	Charge Description <b>RESIST OFFICER WITH VIOLENCE</b>														Statute Violation Number <b>843.01</b>		Violation of ORD #					
C H A R G E	Drug Activity <b>N</b>		Drug Type <b>/</b>		Amount / Unit <b>/</b>		Offense # <b>17-003996</b>		Counts <b>2</b>		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond							
	Charge Description														Statute Violation Number		Violation of ORD #					
I N T A K E	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							
	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			
N O T I C E T O A P P E A R	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					
A D M I N	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 <b>SA 387022</b>		Name Verification (Printed by Arrestee) <b>SCANNED</b>		PAGE <b>1 OF 1</b>			
A D M I N	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Pouch #		Name of Arresting Officer (Print) <b>RALEIGH, ELIZABETH</b>		I.D. # <b>1022</b>		Transporting Officer <b>Raleigh</b>		I.D. # <b>208</b>		Agency <b>JPD</b>		Witness here if subject signed with an "X".					

## DOMESTIC VIOLENCE PROBABLE CAUSE

## AFFIDAVIT

Palm Beach County

A D M I N	Date / Time <b>08/16/2017 20:05</b>		Agency ORI Number <b>FL 0501700</b>		Agency Name <b>JUPITER POLICE DEPARTMENT</b>		Agency Report Number <b>5   4   17-003996</b>	
	Name (Last, First, Middle) <b>KLEE, JACLYN MARIE</b>						Race <b>W</b>	Sex <b>F</b>
C H A R G E	Charge Description <b>784.045(1)(A)(2) BATTERY - BATTERY AGGRAVATED W/ DEADLY WEAPON / Resist with Violence</b>							
	Victim's Name (Last, First, Middle) [REDACTED]						Race <b>W</b>	Sex <b>M</b>
V I C T I M	(State) (Zip)						Address Source <b>FL DL</b>	
	Business Address (Name, Street) (City) (State) (Zip)						Phone Occupation	
O B S E R V A T I O N S	Written <input type="checkbox"/> Taped <input type="checkbox"/> Oral <input type="checkbox"/>			OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL):				
	DEFENDANT'S STATEMENTS: <input type="checkbox"/>			VICTIM'S STATEMENTS: <input checked="" type="checkbox"/> <b>CONTUSIONS</b>				
R E L A T I O N S H I P	RELATIONSHIP BETWEEN VICTIM & SUSPECT [REDACTED]							
	<p>PHOTOGRAPHS: Scene: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Victim: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>911 CALL: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO CALLER: <b>VICTIM</b></p> <p>WEAPON USED: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO TYPE: <b>METAL ANCHOR</b></p> <p>WITNESSES: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (If YES, attach witness list)</p> <p>INJURIES: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>MEDICAL TREATMENT: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>AT: Scene: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO PARAMEDICS: <b>PBFR STATION 16</b></p> <p>Hospital: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO PHYSICIAN(S) / HOSPITAL:</p> <p>ACT COMMITTED IN PRESENCE OF MINOR(S): <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO NAMES/AGES:</p> <p>H. R. S. NOTIFIED: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>VICTIM PREGNANT: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>VIOLATION OF RESTRAINING ORDER: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO CASE #:</p> <p>PRIOR HISTORY OF DOMESTIC VIOLENCE: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>ALCOHOL OR DRUGS INVOLVED: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>							
N A R R	On 08-16-17 at 2005 hrs., I responded to [REDACTED] in reference to a reported domestic battery. The victim, later identified as [REDACTED] (w/m 06-16-84), reported a female, later identified as [REDACTED] Jaclyn M. Klee (w/f 11-07-88), threw an anchor at his ankle. While on the phone, communications advised they could hear a physical struggle, then the line disconnected. Northcom							
	<p>STATE OF FLORIDA</p> <p>COUNTY OF PALM BEACH</p> <p>Appeared before me, <u>E. Raley</u>, personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.</p> <p><u>[Signature]</u> SIGNATURE OF ARRESTING OFFICER</p> <p>Sworn to and subscribed to before me this <u>16</u> day of <u>August</u>, <u>2017</u>.</p> <p><u>[Signature]</u> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p>							

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	08/16/2017 20:05	
	Agency ORI Number	Agency Name	Agency Report Number
	FL 0501700	JUPITER POLICE DEPARTMENT	5   4   17-003996

N called back, but the line was going to voicemail.  
A Upon my arrival, from the end of the driveway I could voices arguing, but could not determine what was  
R being said. As I approached the residence, [REDACTED] pulled back the blinds and yelled she's blocking the  
A door. I asked if he could go out a back door. At this time I tried to open the front door, but it was  
T locked. I could hear [REDACTED] asking her to stop this. The door then opened and [REDACTED] was standing  
I there and Klee was behind him standing in the middle of the living room. I asked [REDACTED] to step outside  
V and he complied. Klee started yelling and pointing at him. I told her to calm down and she started to walk  
E towards the doorway. She was continuing to yell and point at [REDACTED] I told him to walk out to the  
street to wait for the next officer and I told her to stop. She continued to yell and come towards the  
doorway. At this time, I stepped inside and again told her to stop and calm down. Klee was becoming more  
irate and clenched her fists and tensed her body. At this time, I drew my Taser and yelled for her to sit  
down or I would tase her. Officer Palladino arrived on scene and also gave her verbal commands to calm down.  
Klee came towards us and Ofc. Palladino grabbed her by the wrist and again told her to calm down. She  
relaxed for a few seconds and I put my Taser away. She then started to tense and try to pull away from Ofc.  
Palladino, so I grabbed her by the left wrist. She then began flailing and pulling away harder. I drew my  
Taser again and told her, "Stop. You don't want to get tased. I will tase you if you don't stop now". Klee  
paused and was looking directly at me when I said this. She continued pulling away, struggling and resisting.  
She then also was pushing and grabbing at us. I stepped back to be standing about three feet away from her  
and deployed my Taser. The probes struck her in the chest and abdomen and she fell to the floor. Ofc.  
Palladino placed handcuffs on her, which were double locked and checked for proper spacing. I advised over  
the radio of the Taser usage. At some point during the struggle, Ofc. Palladino received a scratch on his  
left wrist.  
I spoke to [REDACTED], who advised the following: he had been out and was texting and talking to Klee  
and she seemed intoxicated to him. He said when he returned home she wasn't there so he went looking for her  
at some local bars. She got home before him and called him screaming about where he was. [REDACTED] said  
when he pulled into the driveway she was walking to her car, he pulled in directly behind her. When he exited  
his vehicle, she ran up to him and shoved him, then went back towards the house. [REDACTED] saw that his  
scooter was knocked over, he yelled, "What did you do" and followed her inside. Once inside he saw that she  
had smashed remotes, threw his tools and a bucket of water in the garage. When he stepped back inside from  
looking at the garage, she was pulled the refrigerator away from the wall in a fit of rage. She shoved him  
again and he pushed her away from him. She then went to the back room and grabbed a decorative metal anchor.  
He said she held it up in the air and he told her to stop. Klee then threw the anchor at him, striking him  
in the left foot/ankle area. He said they continued arguing and she hit him again and he had to hold her off  
and push her away several times. At this time he grabbed his phone to call 911 and she shoved him again and  
something hit him in the lower lip, he wasn't sure if it was the phone or her hand. Klee then took his phone  
and smashed it by throwing it against the interior garage door.  
PBBR Station 16 responded to the scene and evaluated [REDACTED] and Klee. [REDACTED] had a contusion  
on his left foot/ankle area and his lower lip was swollen and a little bloody. [REDACTED] refused medical  
treatment. Due to being tased and appearing under the influence of an unknown type of alcoholic beverage,  
Klee was transported to the Jupiter ER. Dr. Virkler removed the probes from Klee and she medically cleared  
for jail.  
Based upon my above described investigation, I find Probable Cause does exist to charge Jaclyn M. Klee  
with Aggravated Battery Domestic as she did actually and intentionally touch or strike [REDACTED] with a  
metal anchor, a deadly weapon, Pursuant to F.S.S. 784.045(1)(a)2. (2 Deg Fel) (Level 7) and Resisting Arrest  
with Violence as Klee did knowingly and willfully resist, obstruct or oppose Ofc. Raleigh and Ofc. Palladino,  
law enforcement officers of the Jupiter Police Department in the execution of a legal process, by offering or

STATE OF FLORIDA  
COUNTY OF PALM BEACH

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

[Signature]  
SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 16 day of August, 2017.

[Signature] #305  
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

# VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been committed:

- **Homicide** (Ch.782)
- **Sexual Offense** (Ch. 794)
- **Attempted Murder**
- **Attempted Sexual Offense**
- **Stalking** (F.S. 784.048)
- **Dating Violence**
- **Domestic Violence** – (This includes any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking or any criminal offense resulting in physical injury or death of one family member or household member by another, who is or was residing in the same single dwelling)

Upon completion, this form must accompany the booking paperwork.

If applying for a warrant, attach this form to the filing packet.

1. Incident Report #: 17-003996 Agency: Jupiter Police Department  
Offense: Aggravated Battery Domestic  
Suspect/Offender: Jaclyn M. Klee  
D.O.B. 11-07-88 Race: W Sex: F
2. Warrant #(s): \_\_\_\_\_
- 3a. Victim's Name: [REDACTED] D.O.B. 06-16-84 Race: W Sex: M  
Address: [REDACTED]  
City: [REDACTED]  
Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Other: [REDACTED]
- 3b. Victim's Next of Kin, Friend or Neighbor: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Other: \_\_\_\_\_

NOTE: PURSUANT TO F.S.119.07, THE CONTENTS OF THIS FORM MAY BE SUBJECT TO CONFIDENTIALITY

## **Victim/Relation Notification Waiver and Confidential Information Request.**

(check applicable boxes)

- ☐ **Waiver:** I choose not to be notified when the arrestee is released from custody.
- ☐ **Confidential:** I request the information on this form be kept confidential (applicable only to sexual battery, stalking, child abuse, harassment or domestic violence cases).

Signature of person waiving notification: \_\_\_\_\_

Printed name of person waiving notification: \_\_\_\_\_

Officer's Name: Ofc. E. Raleigh JPD I.D. # 308/1022 Date: 08-16-17