

ARREST / NOTICE TO APPEAR

AD M I N I S T R A T I O N	OBTS Number		Agency ORI Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N.T.A.'s only) 3 2 2017-007759		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias 1		JUVENILE	
D E F E N D A N T	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 None/not Applicable		Multiple Clearance Indicator					
	Location of Arrest (Including Name of Business) 5150 TOWN CENTER CIR						Location of Offense (Business Name, Address) 5150 TOWN CENTER CIR, BOCA RATON, FL 33486					
	Date of Arrest 05/28/2017		Time of Arrest 23:23		Booking Date 05/28/2017		Booking Time 23:33		Jail Date		Jail Time	
	Name (Last, First, Middle) DI CHIARA, JAMI ANN		Alias:		Alias (Name, DOB, Soc. Sec. #, Etc.)							
C O D E F	Race W - White B - Black O - Oriental/Asian W		Sex F		Date of Birth 09/16/1979		Height 5'07		Weight 155		Eye Color BLUE	
	Hair Color BLONDE		Complexion LIGHT		Build Medium		Marital Status M		Religion CHRISTIAN		Indication of: Alcohol Influence Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>	
	Local Address (Street, Apt. Number) 9480 SW NUOVA WAY, PORT ST LUCIE, FL 34986		(City)		(State)		(Zip)		Phone (770) 990-6553		Residence Type: 1. City 2. County 3. Florida 4. Out of State 3	
	Permanent Address (Street, Apt. Number) 9480 SW NUOVA WAY, PORT ST LUCIE, FL 34986		(City)		(State)		(Zip)		Phone (770) 990-6553		Address Source DEFENDANT	
J U V E N I L E	Business Address (Name, Street) ALL SOUTH CLEANING & RESTORATI, 456 WARREN ROAD,		(City)		(State)		(Zip)		Phone (770) 990-6553		Occupation Self Employeed	
	D/L Number, State S260421798360 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) ATLANTA, GA, United		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			
C H A R G E	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian		Name (Last, First, Middle)		Address (Street, Apt. Number)		(City)		(State)		(Zip)	
	Notified by: (Name)		Date		Time		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated		Residence Phone		Business Phone	
	Released To: (Name)		Relationship		Date		Time		School Attended		Grade	
	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. <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					
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. Disperse/ 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 BATTERY / DOMESTIC BATTERY		Statute Violation Number 784.03(1)(a)		Violation of ORD #		Bond					
	Drug Activity N		Drug Type N		Amount / Unit /		Offense # 2017-007759		Counts 1		Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
C H A R G E	Charge Description		Statute Violation Number		Violation of ORD #		Bond					
	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	
	Charge Description		Statute Violation Number		Violation of ORD #		Bond					
	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	
I N T A K E	Health / Apparent Physical Condition of Defendant GOOD		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:		PROPERTY - Received By BACHAR		Released By BACHAR		Released To BACHAR		2017 MAY 30 AM	
	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 checked="" type="checkbox"/> T.O.T. County Jail		Date Transported 11 : : :		Time Transported		Other		South County 200 W Atlantic Ave Delray Beach, FL 33444		Photo Available	
	Transported By BACHAR		Location (Court, Room)		Court Date and Time							
	<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.											
T O A P P E A R	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 of Arresting Officer BACHAR, BRIAN		LD. # 793		Name Verification (Printed by Arrestee) MAY 29 AM 6:16					
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Transporting Officer BACHAR		LD. # 797		Agency 793					
	Witness here if subject stays with you										PAGE 1 OF 1	

SCANNED

MAY 20 2017

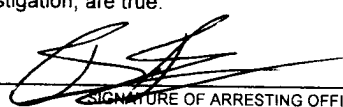
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3691
25/1/17
3780

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

A D M I N	Date / Time 05/29/2017 02:28	Agency ORI Number FL 0500200		Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2017-007759	
	Name (Last, First, Middle) DI CHIARA, JAMI ANN				Alias	Race W
D E F E N D A N T	Charge Description 784.03(1) BATTERY / DOMESTIC BATTERY					
<div style="background-color: black; height: 100px; width: 100%;"></div>						
DEFENDANT'S STATEMENTS: <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>			INJURED			
VICTIM'S STATEMENTS: <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
RELATIONSHIP BETWEEN VICTIM & SUSPECT MARRIED						
A D D I T I O N A L I N F O R M A T I O N	PHOTOGRAPHS:	Scene:	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
		Victim:	<input checked="" type="checkbox"/> <input type="checkbox"/>			
	911 CALL:	<input checked="" type="checkbox"/> <input type="checkbox"/>	CALLER: LOUIS DAVILA			
	WEAPON USED:	<input checked="" type="checkbox"/> <input type="checkbox"/>	TYPE: HANDS			
	WITNESSES:	<input checked="" type="checkbox"/> <input 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 checked="" type="checkbox"/>	PARAMEDICS:		
		Hospital:	<input type="checkbox"/> <input checked="" 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 checked="" 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"/>				
N A R R	On 05/28/2017 at approximately 2248 hours, I responded to 5150 Town Center Circle (Marriott) in reference to a domestic disturbance.					
Upon arrival I met with [REDACTED] outside his hotel room (1118). [REDACTED] had a small laceration on						
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.						
 793 SIGNATURE OF ARRESTING OFFICER						
Sworn to and subscribed to before me this <u>29</u> day of <u>May</u> , 2017.						
<u>DUBINSKY, SETH W</u> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.40)						

SCANNED

COURT

STATE ATTORNEY

CENTRAL RECORDS

MAY 20 2017 PRIME ANALYSIS

P. I. O.

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

Narrative Continuation

A D M I N	Date / Time 05/29/2017 02:28	Agency Name BOCA RATON POLICE DEPARTMENT		Agency Report Number 3 2 2017-007759
	Agency ORI Number FL 0500200			

the tip of his nose and blood on his shirt. He stated he arrived at his hotel room at approximately 2145 hours. Shortly after, [REDACTED] Jami Di Chiara arrived at the hotel room intoxicated. [REDACTED] stated he was laying down on the bed when [REDACTED] came in the room. He stated that she came in the room and began acting belligerent and asking him to have sex with her. When [REDACTED] declined, Jami called him an "asshole". [REDACTED] then told Jami that he [REDACTED] because of her ongoing drinking habits. [REDACTED] stated Jami then struck him in the face and genitals multiple times with her fists. In an attempt to get away from Jami, [REDACTED] took Jami's glasses off her face to prevent her from seeing. [REDACTED] stated she sees very poorly without her glasses and removing her glasses would be the best way for him to get away from her without any issues. During the altercation, Jami's glasses broke. [REDACTED] then placed his personal belongings into the pillow case so he could leave the room. As [REDACTED] attempted to leave the room through the door, Jami prevented him from leaving by blocking the door and pulling him away from it. At that time, front desk manger of the Marriott, Louis Davila arrived at the room because he received a call of a disturbance coming from room 1118. [REDACTED] advised that once the manger arrived, Jami let him leave the room. [REDACTED] also stated he never touched Jami during the incident. [REDACTED] was offered medical treatment but refused.

I then met with Jami Di Chiara who was inside of the hotel room. Jami appeared to be intoxicated and was very confused on why the police were there. After explaining to her why the police were there, she stated she never hit [REDACTED] When asked why [REDACTED] had marks on his face she stated he did it to himself. I then asked Jami what happened to her glasses as she attempted to hold them to her face. She stated that [REDACTED] broke the glasses when they were lying in bed together for no apparent reason. Jami could not give an answer to how her glasses broke. Jami admitted she could not see without her glasses, however she stated she saw [REDACTED] pack his personal belongings in the pillow case and attempted to leave, which was inconsistent to her statement regarding her vision. Jami also stated she never attempted to stop [REDACTED] from leaving the room.

I then met with the front desk manger, Louis Davila. Davila stated when he arrived at the 11th floor he could hear a loud argument. When he reached the room (1118), he witnessed Jami trying to pull [REDACTED] away from the door as the door opened. Davila stated Jami let [REDACTED] leave the room once she saw him.

Based on [REDACTED] statement and visible injuries, and the inconsistent statements provided by Jami, I developed probable cause to arrest Jami Di Chiara for Domestic Battery pursuant to F.S.S. 784.03(1) due to the fact she punched [REDACTED] multiple times in the face and genitals during an argument.

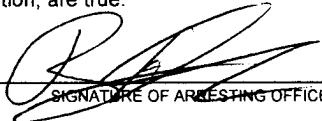
Written statements were provided by [REDACTED] and Louis Davila and were later submitted into evidence.

Officer McCabe took photos of [REDACTED] injuries and placed them into evidence.

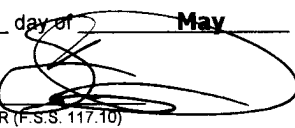
Michael was issued a domestic violence rights and remedies pamphlet. The signed receipt was submitted to the front desk.

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 29 day of May, 2017.


DUBINSKY, SETH W
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

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MAY 20 2017

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.