

0469954

ARREST / NOTICE TO APPEAR
Juvenile Referral Report1. Arrest 3. Request For Warrant
2. N.T.A. 4. Request For Capias

1 Juvenile

N

OBTS Number			ARREST / NOTICE TO APPEAR Juvenile Referral Report						1. Arrest 3. Request For Warrant 2. N.T.A. 4. Request For Capias			
Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE						Agency Report Number 06 17025717				
Charge Type: Check as many as apply 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor		5. Ordinance 6. Other						If Weapon Seized None				
								Multiple Clearance Indicator 0 1				
Location of Arrest (Including Name of Business) 4412 Davis Road			Location of Offense (Including Name of Business) 4421 Davis Road						Lake Worth, FL 33461			
Date of Arrest 01/12/2017	Time of Arrest 1422	Booking Date	Booking Time	Jail Date		Jail Time		Location of Vehicle				
Name (Last, First, Middle) Goldstein Jeffery Scott						Alias (Name, DOB, Soc. Sec. #, Etc.)						
Race W-White I-American Indian B-Black O-Oriental/Asian		Sex W M	Date of Birth 10/09/1973	Height 5'08"	Weight 150	Eye Color Brown	Hair Color Brown	Complexion Light	Build Medium			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) No Tattoos						Marital Status Single	Religion Jewish	Indication of: Alcohol Influence Drug Influence				
Local Address (Street, Apt. Number) 4412 Davis Road, #4		City Lake Worth	State FL	Zip 33461	Phone	None		Residence Type: 1. City 3. Florida 2. County 4. Out of State				
Permanent Address (Street, Apt. Number) 4412 Davis Road, #4		City Lake Worth	State FL	Zip 33461	Phone			Address Source				
Business Address (Street, Apt. Number)		City	State	Zip	Phone			Occupation Unemployed				
DL Number, State D5050876, California		Social Security Number		INS Number N/A	Place of Birth Hackensack, New Jersey		Citizenship U.S. Citizen					
Co-Defendant Name (Last, First, Middle) None						Race	Sex	Date of Birth	1. Arrested 2. At Large			
Co-Defendant Name (Last, First, Middle)						Race	Sex	Date of Birth	3. Felony 4. Misdemeanor 5. Juvenile			
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other		Name (Last, First, Middle)						Phone				
Address (Street, Apt. No.)		City						State	Zip	Business Phone		
Notified By (Name)		Date		Time		Juvenile Disposition: 1. Handled/Processed within Dept. and Released 2. TOT HRS/DYS 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 561-355-2526) informed of any address change <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)						School Attended						
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property						Value of Property				
Drug Activity 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	P. Paraphernal/ Equipment	U. Unknown Z. Other	
Charge Description Battery on Person (Older 65) - Domestic		Counts 1	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 784.08(2C)		Violation or ORD. #						
Drug Activity N	Drug Type N	Amount/Unit None	Offense # 17025717	Warrant/Capias Number		Bond None						
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation or ORD. #						
Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond						
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation or ORD. #						
Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond						
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation or ORD. #						
Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond						
Location (Court, Address, Room Number)												
Court Date and Time Month Day Year Time AM <input type="checkbox"/> PM <input type="checkbox"/>												
I AGREE TO APPEAR AT THE ABOVE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT I SHOULD 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		Signature of Arresting Officer D/S M. Avila #25488		Name Verification (Printed by Arrestee) (PRINT)								
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		Name of Arresting Officer D/S M. Avila		ID # 25488								
Intake Deputy D/S M. Avila		ID # 25488	Transporting Officer D/S M. Avila	ID # 25488	Agency PBSO							
SCANNED Unless here in subject signed with an 'X'												

JAN 13 2017

4:10 PM

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5:35

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1 of 1

OBTS Number

PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

N

Agency ORI Number FLO 5 0 0 0 0 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06	17025717
Charge Type: Check as many as apply <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes	
Defendant Name (Last, First, Middle) Goldstein		Race W	Sex M
Date of Birth 10/09/1973			
Charge Battery on Person (Older 65) - Domestic		Charge	
Charge		Charge	
Victim Name (Last, First, Middle) [REDACTED]		Race W	Sex M
Date of Birth 01/22/1943			
Local Address (Street, Apt. Number) [REDACTED] City [REDACTED]		Address Source	
Business Address (Street, Apt. Number) [REDACTED] City [REDACTED]		State [REDACTED]	Zip [REDACTED]
		Phone [REDACTED]	Occupation Retired
<p>The undersigned 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...</p> <p><input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> confessed to admitting to the below facts. <input type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.</p>			
<p>On the <u>12th</u> day of <u>January</u> 20 <u>17</u> at <u>1404</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM</p>			

On Thursday, January 12th, 2017 at approximately 1404 hours, I responded to 4412 Davis Road, Apt 4, Lake Worth, FL 33461 in reference to a domestic disturbance. The caller, white male, [REDACTED] (DOB: 01/22/1943) advised that [REDACTED] Jeffery Goldstein (DOB: 10/09/1973) had physically attacked him.

Upon arrival, I made contact with [REDACTED] outside of the residence. [REDACTED] did not have any injuries and advised he did not need medical attention. [REDACTED] explained the following (not verbatim):

At approximately 1345 hours, he arrived to Jeffery's residence to visit him. Jeffery demanded money from him and claimed that he stole money from him. When he refused to give Jeffery money, Jeffery got him into a choke hold and tried to pull him towards the ground. Another tenant witnessed what was happening and they had to pull Jeffery off of him.

I was approached by white male, Roger Boykin (DOB:04/10/1967) who advised that he was the one who pulled Jeffery off of [REDACTED]. Roger did not want to give a written or recorded statement but explained the following (not verbatim):

He observed Jeffery putting [REDACTED] into a headlock attempting to choke him while screaming about not giving him any money.

While speaking with Roger, Jeffery walked out of his residence. When I asked Jeffery what happened, he explained the following (not verbatim):

[REDACTED] came to visit him. He asked [REDACTED] for money at which time [REDACTED] balled up his hands into a fist and got into a fighting stance. He grabbed [REDACTED] hands and was trying to push him back.

Based on the statements made, I found probable cause to arrest Jeffery for Battery of Person over 65 years old (Domestic Violence). Jeffery was advised he was under arrest as I placed him into handcuffs (checked for tightness and double locked). Jeffery was later transported to the Palm Beach County Jail.

The foregoing instrument was sworn to and affirmed before me this	<u>12th</u>	day of	<u>January</u>	20	<u>17</u>	, by:
D/S Carpenter #6857						D/S M. Avila
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)						25488
[Signature]						SCANNED
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)						Page 1 of 1 JAN 3 2017

VICTIM NOTIFICATION FORM

- **Homicide** (Ch.782)
- **Attempted Murder**
- **Stalking** (F.S. 784.048)
- **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.
- **Sexual Offense** (Ch.794)
- **Attempted Sexual Offense**
- **Dating Violence**

Upon completion, this form must accompany the booking paperwork.

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

1. Incident Report #: 17025717 Agency: Palm Beach County Sheriff's Office

Offense: Battery on Person (Older 65) - Domestic

Suspect/Offender: Goldstein Jeffery Scott

DOB: 10/09/1973 Race: W Sex: M

2. Warrant #(s): _____

3.a. Victim's Name: _____ DOB: 01/22/1943 Race: W Sex: M

Address: _____

City: _____ State: _____ Zip: _____

Home #: _____ Work #: _____ Other #: _____

b. 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 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: _____

Deputy's Name: D/S M. Avila ID #: 25488 Date: 01/12/2017