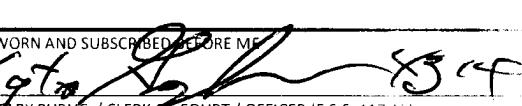


ARREST / NOTICE TO APPEAR Juvenile Referral Report				1. Arrest	3. Request for Warrant	1	Juvenile				
OBTS Number		RIVIERA BEACH POLICE DEPARTMENT		2. N.T.A.		4. Request for Capias					
Agency ORI Number		Agency Name		Agency Report Number							
FL0500700		RIVIERA BEACH POLICE DEPARTMENT		84-1-00378							
Charge Type:		<input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> Check as many as apply. <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		Weapon Search Type		Multiple Clearance Indicator					
Location of Arrest (Including Name of Business)		1257 Beach Rd Riviera Beach, FL 33404		Location of Offense (Business Name, Address)		1257 Beach Rd Riviera Beach					
Date of Arrest		1-14-2017	Time of Arrest	23:08	Booking Date	Booking Time	Det. Case	Jail Time	Location of Vehicle		
Name (Last, First, Middle)		Creel Jennifer		Age (M/F), DOB, Soc. Sec. # (Ex. 11)							
Race		Race	Sex	Date of Birth	Height	Weight	Color	Hair Color	Complexion	Build	
W - White B - Black		I - American Indian O - Oriental/Asian	W	F	10-10-1976	5'5	120	Blue	Blonde	Light	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)											
Local Address (Street, Apt. Number)		(City)		1257 Beach Rd Apt 4 Riviera Beach		FL	33404	Phone	654-353-1829		
Permanent Address (Street, Apt. Number)		(City)		405 Sherwood Ave Honeyapath		South Carolina	29644	Phone	1. City 2. County 3. Florida 4. Out of State		
Business Address (Street, Apt. Number)		(City)						Phone	1. Defendant		
D/L Number, State		Soc. Sec. Number		INS Number		Place of Birth		Anderson, SC		Citizenship	
N/A						Anderson, SC				US	
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth			1. Arrested	3. Felony	5. Juvenile
									2. At Large	4. Misdemeanor	
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth			1. Arrested	3. Felony	5. Juvenile
									2. At Large	4. Misdemeanor	
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other		Name (Last) (First)								Residence Phone	
Address (Street, Apt. Number)		(City)								Business Phone	
Notified by: (Name)				Date							
Released To: (Name)		Relationship				FCIC/NCIC		Date		Time	
The above address was provided by defendant and/or defendant's parents. The court and/or defendant was told of the address and Juvenile Court Clerk's Office informed of any change of address.						Signed 9-26-2016				Grade	
<input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No (Reason)											
Recovery Information											
N/A 1. Voluntary 2. Located Not Returned 3. Hospitalized 4. H.R.S. Custody 5. Law Enforcement Custody											
Drug Activity S. Sell R. Smuggle K. Dispense/ M. Manufacture E. Other		Drug Type		N. N/A		Drug Type		P. Paraphernalia/		U. Unknown	
N/A B. Buy D. Deliver Distribute		Produced/ Cultivate		A. Amphetamine		Q. Heroin		M. Marijuana		Z. Other	
P. Possess T. Traffic E. Use											
Charge Description				Counts	Domestic Violence		Statute Violation Number		Violation of ORD #		
Criminal mischief				1	<input type="checkbox"/> Yes <input type="checkbox"/> No		806.13(1b2)				
Drug Activity		Drug Type	Amount/Unit	Offense #		Warrant/Capias Number		Bond			
N	N	N		17-00378							
Charge Description				Counts	Domestic Violence		Statute Violation Number		Violation of ORD #		
					<input type="checkbox"/> Yes <input type="checkbox"/> No						
Drug Activity		Drug Type	Amount/Unit	Offense #		Warrant/Capias Number		Bond			
Charge Description				Counts	Domestic Violence		Statute Violation Number		Violation of ORD #		
					<input type="checkbox"/> Yes <input type="checkbox"/> No						
Drug Activity		Drug Type	Amount/Unit	Offense #		Warrant/Capias Number		Bond			
Charge Description				Counts	Domestic Violence		Statute Violation Number		Violation of ORD #		
					<input type="checkbox"/> Yes <input type="checkbox"/> No						
Drug Activity		Drug Type	Amount/Unit	Offense #		Warrant/Capias Number		Bond			
<input 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 reverse side.		Location, Court, Room, Number, Address									
						3188 PGA BLVD P.1m Beach Gardens FL					
Court Date and Time											
Month		Day		Year		Time					
Feb		5/26		2017		8:30 AM					
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSES 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)											
HOLD for other Agency				Signature of Arresting Officer		Date Signed					
Name: <i>X</i> <i>MCFC</i> <i>6/3/17</i>						Name Verification (Printed by Arresting Officer) (PRINT)					
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:				Name of Arresting Officer (Print)		ID #					
				Ofc. M. Ferazzoli		6312					
Intake Deputy <i>Officer Stoner/2202</i>				Pouch #		Transporting Officer		ID #		Agency	
						Ofc. M. Ferazzoli		6312		PEPD	
										Witness here is subject arrested with an X	
										PAGE	
										1 OF 1	

OBTS Number FL0500700		PROBABLE CAUSE AFFIDAVIT			1. <input type="checkbox"/> Request For Warrant 2. <input type="checkbox"/> A. Request for Capias	1	JUVENILE	N
ADMIN	Agency Ori Number	Agency Name RIVIERA BEACH POLICE DEPARTMENT			Case Number 134-11-00378			
	Charge Type Check As Many As Apply	1. <input type="checkbox"/> Felony 2. <input type="checkbox"/> Traffic Felony	3. <input type="checkbox"/> Misdemeanor 4. <input type="checkbox"/> Traffic Misdemeanor	5. <input type="checkbox"/> Ordinance 6. <input type="checkbox"/> Other	General Notes			
DEF	Name (Last, First, Middle) Creel Jennifer		Age	Sex F	Date of Birth 10-12-76			
CHARGE	Charge Description Criminal mischief		Charge Description					
VICTIM	Victims Name (Last, First, Middle) Ellis Jeffrey		Age	Sex M	Date of Birth 1-12-65			
Local Address (Street, Apt. Number) 1257 Beach RD Apt 4		(City) Riviera Beach	(State) FL	Phone 33404	Address Source Defendant			
Business Address (Name, Street)		(City)	(State)	Phone	Occupation			
<p>The undersigned certifies and 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 in custody...</p> <p><input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ to have committed the below acts, and I further certify that he/she saw the above person commit the below acts.</p> <p><input type="checkbox"/> confessed to _____ <input type="checkbox"/> admitted to having committed the below acts, and I further certify that he/she saw the above person commit the below acts.</p> <p><input checked="" type="checkbox"/> I am bound to have sworn out the below arrest warrant from my (described) investigation</p> <p>On the <u>14th</u> day of <u>January</u>, 2017, at <u>11:30 AM</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specify if includes acts constituting cause for arrest.)</p>								
PROBABLE CAUSE STATEMENT	<p>In the City Of Riviera Beach, Palm Beach County, Florida the following incident occurred:</p> <p>On Saturday, January 14, 2017, at approximately 10:50 PM, I responded to 1257 Beach Rd Apt 4, in regards to a report of a vandalism. The reporting person, Jeffrey Ellis (w/m 1-12-65) advised that his girlfriend, Jennifer Creel (w/f 10-12-76) was at his apartment damaging his property. Upon my arrival, myself and Ofc. J. Summers ID# 5563 found the apartment door unsecured. Several items in the apartment were scattered throughout the apartment and a coffee table was turned upside down. Myself, and Ofc. Summers announced that the presence of Riviera Beach Police were making entry in the apartment to search it. Contact was with Creel in a bedroom closet, Creel was detained at that time.</p> <p>Creel stated the condition of the apartment had been that way for several days. Ellis was not at the apartment upon my arrival, however Contact was later made with Ellis outside his apartment. He stated that he and Creel have been dating on and off for approximately one year and that Creel had recently moved in with him from North Carolina at the end of, December 2016. Creel was placed in the back of my patrol car as Ellis checked on the condition of his apartment. Ellis told me that Creel had been at the Seaside bar and grill located at 1257 Beach Rd. Ellis stated that a patron from the bar contacted him and told him that Creel had been kicked out of the bar and stated she was going back to the apartment to mess it up.</p>							
	<p>SWORN AND SUBSCRIBED BEFORE ME  1-14-17</p> <p><input type="checkbox"/> CLERK OF COURT / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p>DATE</p>							
ADMINISTRATIVE	SIGNATURE OF SHERIFF OR INVESTIGATING OFFICER  1-14-17				NAME OF OFFICER OR INVESTIGATOR G. M. Hernandez		PAGE 1 of 2	

VICTIM NOTIFICATION FORM

This form must be filled out in a case involving one of the following crimes:

- Homicide (Ch. 782)
- Sexual Offense (Ch. 794)
- Attempted Murder
- Attempted Sexual Offense
- Stalking (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.)

Upon completion, this form must accompany the booking paperwork. If applying for a warrant, attach this form to the filing packet.

1. **Incident Report** 14-00378 **Agency** Riviera Beach Police Department
Offense: Criminal mischief January
Suspect/Offender: Creel Jennifer
D. O. B.: 10-12-76 **Race:** W **Sex:** F

2. **Warrant #s:** _____

3. **Complete one (1) of the following:**

a. **Victim's Name:** Ellis Jeffrey D
Address: 1257 Beach RD Apt 4
City: Riviera Beach **State:** FL **Zip:** 33404
Home #: 864-353-1829 **Work #:** _____ **Other:** _____

b. **Victim's next of kin:** _____
Address: _____
City: _____ **State:** _____ **Zip:** _____
Home #: _____ **Work #:** _____ **Other:** _____

c. **Victim's designated contact other than next of kin (for example: a friend or neighbor):**
Name: _____
Address: _____
City: _____ **State:** _____ **Zip:** _____
Home #: _____ **Work #:** _____ **Other:** _____

4. **Relevant identification or case numbers assigned to the case (please** _____

WAIVER: I CHOOSE NOT TO COMPLETE THIS VICTIM NOTIFICATION FORM, AND UNDERSTAND THAT I AM WAIVING MY RIGHT TO BE NOTIFIED OF THE RELEASE OF THE SUSPECT/OFFENDER.

Signature of person waiving notification: _____

Printed name of person waiving notification: _____

Officer's Name: Ofc. M. Ferazzoli **I.D. #** 6512 **Date:** _____