

0493473

ARREST / NOTICE TO APPEAR

NA

OBTS Number	Agency ORI Number 0501700			Agency Name Jupiter Police Department			Agency Report Number (N.T.A.'s only) 5, 4 17-005541			1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input checked="" type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	<input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other	If Weapon Seized Enter Type	Hands, Feet, Fist, Teeth			Multiple Clearance Indicator		
Location of Offense (Business Name, Address)													
Date of Arrest 11/19/2017	Time of Arrest 00:50	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle							
Name (Last, First, Middle) ADELMAN, JENNY VIOLETA													
Alias:													
Race W - White	Sex F	Date of Birth 03/14/1980	Height 5'02	Weight 110	Eye Color BLACK	Hair Color BLACK	Complexion FAIR	Build Thin	Marital Status M	Religion OTHER	Indication of Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>	Indication of Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)													
Local Address (Street, Apt. Number) (City) (State) (Zip) 1667 W FREDERICK SMALL RD, JUPITER, FL 33458						Phone (772) 828-8740		Residence Type: 1. City 3. Florida 2. County 4. Out of State 1					
Permanent Address (Street, Apt. Number) (City) (State) (Zip) 1667 W FREDERICK SMALL RD, JUPITER, FL 33458						Phone (772) 828-8740		Address Source FL DL					
Business Address (Name, Street) (City) (State) (Zip) STONE GALLERY, WEST PALM BEACH						Phone		Occupation Marketing					
D/L Number, State A345438805940 / FL	Soc. Sec. Number	INS Number			Place of Birth (City, State) Peru, IL			Citizenship US					
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth		<input type="checkbox"/> 1. Arrested	<input type="checkbox"/> 3. Felony	<input type="checkbox"/> 5. Juvenile			
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth		<input type="checkbox"/> 1. Arrested	<input type="checkbox"/> 3. Felony	<input type="checkbox"/> 5. Juvenile			
Name (Last, First, Middle)													
Residence Phone													
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	VICTIM NOTIFICATION REQUIRED					
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													
S. Sell N. N/A P. Possess													
B. Buy D. Deliver T. Traffic													
R. Smuggle 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-SIMPLE (TOUCH OR STRIKE)						Statute Violation Number 784.03(1)(A)(1)			Violation of ORD #				
Drug Activity	Drug Type N	Amount / Unit	Offense # 17-005541	Counts 1	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number		Bond					
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	Warrant / Capias Number		Bond					
Charge Description						Statute Violation Number NOV 19 AM 3:47			Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number		Bond					
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													
Explain:													
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail				PROPERTY - Received By				Released By		Released To			
<input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health				Date Transported				Time Transported		Other			
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 COMTEMPT 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 Verification (Printed by Arrestee)			PAGE				
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest						Name of Arresting Officer (Print) MATONTI, JOHN			I.D. # 384 1186				
<input type="checkbox"/> Suicidal <input type="checkbox"/> Other						Name of Arresting Officer (Print) MATONTI, JOHN			I.D. # 384 1186				
Intake Deputy Spruss 8107						Transporting Officer Matonti			I.D. # 384 JPD				
Pouch #						Agency			Witness here if subject signed with an				

NOV 19 2017

261

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County
Narrative Continuation

A D M I N	Date / Time 11/19/2017 02:29	Agency Name JUPITER POLICE DEPARTMENT	Agency Report Number 5 4 17-005541
	Agency ORI Number FL 0501700		

On 11-19-17 at approximately 0014 hours, I was dispatched to [REDACTED] in reference to an alleged domestic disturbance. Upon my arrival, I made contact with Jenny Adelman (w/f 3-14-80) and [REDACTED] (w/m 4-29-80) [REDACTED] at the above address and [REDACTED] [REDACTED] r. All three children, [REDACTED] (w/m 6-8-05), [REDACTED] (w/f 3-24-07) and [REDACTED] (w/f 9-16-09) were not at home at the time of the incident.

Jenny Adelman stated the following: She attended a work function in West Palm Beach and told [REDACTED] that she would be home sometime between 2200 and 2230. She was unable to leave the function at the time she initially told [REDACTED] and when she called him to make him aware, he became very upset and began arguing with her on the phone. She advised that when she arrived home, her clothes and personal items from her closet were scattered on the back patio. She also stated that when she walked in the door, [REDACTED] attacked her. She stated that he grabbed her arms, punched her in the face, and threw her cell phone across the room, breaking the screen. Jenny Adelman did present an abrasion on her right wrist and red marks on both arms in which she declined any medical attention for. Jenny Adelman became uncooperative and refused to write a statement.

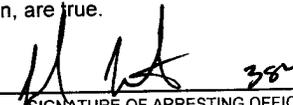
[REDACTED] stated the following: [REDACTED] (Jenny Adelman) went out drinking with her coworkers and called to say that she would be home later than originally stated. He then became upset because this is not the first time she has done this and he told her not to come home tonight. He then went and gathered some of her belongings from her closet and tossed them onto the back patio. He also advised that [REDACTED] did return home, became angry when she observed her clothing on the patio and immediately attacked him when he opened the door for her. [REDACTED] stated that she began scratching at his face and neck while stating how much she hates him. She attempted to punch him and in defense, he grabbed her arms in an attempt to restrain her. [REDACTED] had abrasions to the left side of his face above his ear and also to the right and back side of his neck, consistent with his statement. [REDACTED] declined medical attention for his injuries and completed a witness statement.

Based upon my above described investigation, I determined that Jenny Adelman was the primary aggressor in the domestic altercation and I found probable cause to arrest her for Simple Battery (Domestic), pursuant to F.S.S. 784.03(1) as she did actually and intentionally touch or strike [REDACTED] against his will. Therefore, I arrested Jenny Adelman for the above charge. I applied the handcuffs behind her back, checked for proper spacing, and double locked them. I then transported Jenny Adelman to Palm Beach County Jail without incident.

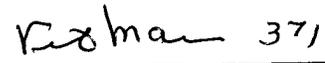
Photographs of [REDACTED] injuries were taken and submitted to evidence. A Domestic Violence pamphlet was given to [REDACTED] and I obtained the signed receipt from him. A Victim notification form was also completed. I submitted the signed Domestic Violence receipt and witness statement with my report, to the Jupiter Police Department.

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 19 day of November, 2017.


NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

SCANNED
NOV 19 2017

VICTIM NOTIFICATION FORM

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

- **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 #: 17-005541 Agency: Jupiter Police Department
Offense: Domestic Battery
Suspect/Offender: Jenny Adelman
D.O.B. 3-14-80 Race: W Sex: F

2. Warrant #(s): _____

3a. Victim's Name: [REDACTED] D.O.B. 4-29-80 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: John Matonti I.D. # 384/1186 Date: 11-19-17

1 copy = Corrections or State Attorney (Warrant Application)

1 Copy = Warrants Section

SCANNED
1 copy = Central Records
NOV 19 2017

SUSPECT/OFFENDER: _____

COURT CASE/WARRANT #:
(FOR WARRANT USE ONLY)