

0483061

18MM 4713

3889

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

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

Juvenile  N

ADMINISTRATIVE	OBTS Number	Agency ORI Number FLO 5 0 2 6 0 0		Agency Name PALM BEACH GARDENS POLICE DEPT.		Agency Report Number (N.T.A.'s only) 7 8 11 8 10 0 2 5 3 8 1 1					
	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	Multiple Clearance Indicator				
	Location of Arrest (Including Name of Business) Marriott 4200 RCA Blvd PB6 FL				Location of Offense (Business Name, Address) Marriott 4200 RCA Blvd PB6 FL						
DEFENDANT	Date of arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle				
	Name (Last, First, Middle) Sperbeck, Jeremy Micah							Alias (Name, DOB, Soc. Sec. #, Etc.)			
	Race	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build		
	W - White B - Black	I - American Indian O - Oriental	1 W M	0.5.0.2.8.5	510	163	Haz	Bro	Lt	Med	
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) Tattoo all over body				Marital Status	Religion	Indication of Alcohol/Drug Influence				
	Local Address (Street, Apt. Number) 12172 Olive Jones Rd Apt 103 Tampa FL 33625				(City)	(State)	(Zip)	Phone (561) 294-1968	Residence Type: 1. City 2. County 3. Florida 4. Out of State		
	Permanent Address (Street, Apt. Number) 12172 Olive Jones Rd Apt 103 Tampa FL 33625				(City)	(State)	(Zip)	Phone	Address Source Verbal		
	Business Address (Name, Street)				(City)	(State)	(Zip)	Phone	Occupation Self employed		
	D/L Number, State	Sec. Sec. Number		INS Number		Place of Birth (City, State)		Citizenship			
	S161433851620 FL	[REDACTED]		[REDACTED]		Dunedin, FL		US			
CO-DEF.	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				
JUVENILE	Parent Legal Custodian			Name (Last, First, Middle)			Residence Phone				
	Other:			Name (Last, First, Middle)			Business Phone				
	Address (Street, Apt. Number)			Address (Street, Apt. Number)			Address (Street, Apt. Number)				
	Notified by: (Name)			Date	Time	Juvenile Disposition	2. TOT DCF				
	Released To: (Name)			Relationship	Date	Time	3. Incarcerated				
The above address was provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parent. The child and / or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.						School Attended	Grade				
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No						Description of Property	Value of Property				
CHARGE	Drug Activity	S. Sell	R. Smuggle	K. Dispense/Distribute	M. Manufacture/Produce/Cultivate	Z. Other	Drug Type	B. Barbiturate	H. Hallucinogen	P. Paraphernalia/Equipment	U. Unknown
	N. N/A	B. Buy	D. Deliver	E. Use			N. N/A	C. Cocaine	M. Marijuana	S. Synthetic	Z. Other
	P. Possess	T. Traffic					A. Amphetamine	F. Heroin	O. Opium/Deriv.		
	Charge Description	Counts	Domestic Violence	Statute Violation Number		Violation of ORD #					
	Assault - Domestic	01	X	7,8,4,10,11							
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond						
N	N	N/A	18-0025 38		None						
Charge Description	Counts	Domestic Violence	Statute Violation Number		Violation of ORD #						
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond						
Charge Description	Counts	Domestic Violence	Statute Violation Number		Violation of ORD #						
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond						
Charge Description	Counts	Domestic Violence	Statute Violation Number		Violation of ORD #						
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond						
NOTICE TO APPEAR	<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)								
	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.		Date Signed								
ADMIN.	HOLD for other Agency Name:		Signature of Arresting Officer		Name Verification (Printed by Arrestee)						
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print)		(PRINT) SCANNED						
	Intake Deputy	Pouch #	Transporting Officer	I.D. #	Agency	Witness heard object signed with an "X"					
JS [Signature]		M. Valerib	497	PB6	APR 23 2018	1 OF 1					

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

A D M I N	Date / Time <b>04/22/2018 03:36</b>	Agency Name <b>PALM BEACH GARDENS POLICE</b>		Agency Report Number <b>7   8   18-002538</b>	
	Agency ORI Number <b>FL 0502600</b>	Name (Last, First, Middle) <b>SPERBECK, JEREMY MICAH</b>		Race <b>W</b>	Sex <b>M</b>
C H R G	Charge Description <b>784.011 ASSAULT - DOMESTIC</b>				
	Victim's Name (Last, First, Middle) <b>ANDERSEN, RACHEL FRANCES</b>			Race <b>W</b>	Sex <b>F</b>
V I C T I M	Local Address (Street, Apt. Number) (City) (State) (Zip) <b>12172 OLIVE JONES RD 103, TAMPA, FL 33625</b>		Phone <b>(407) 924-3433</b>		Address Source
	Business Address (Name, Street) (City) (State) (Zip)		Phone		Occupation

DEFENDANT'S STATEMENTS:	Written <input type="checkbox"/>	Taped <input checked="" type="checkbox"/>	Oral <input type="checkbox"/>	OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): <b>UPSET</b>
VICTIM'S STATEMENTS:	Written <input type="checkbox"/>	Taped <input checked="" type="checkbox"/>	Oral <input type="checkbox"/>	

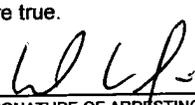
RELATIONSHIP BETWEEN VICTIM & SUSPECT  
**B.F. / G.F.**

PHOTOGRAPHS:	Scene: <input checked="" type="checkbox"/>	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
	Victim: <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
911 CALL:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	CALLER: <b>MARRIOTT</b>
WEAPON USED:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	TYPE:
WITNESSES:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(If YES, attach witness list)
INJURIES:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
MEDICAL TREATMENT:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
AT: Scene:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PARAMEDICS:
Hospital:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PHYSICIAN(S) / HOSPITAL:
ACT COMMITTED IN PRESENCE OF MINOR(S):	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NAMES/AGES:
H. R. S. NOTIFIED:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
VICTIM PREGNANT:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
VIOLATION OF RESTRAINING ORDER:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	CASE #:
PRIOR HISTORY OF DOMESTIC VIOLENCE:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
ALCOHOL OR DRUGS INVOLVED:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

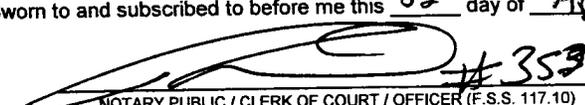
On Sunday, April 22, 2018 at 3:36 am I responded to the Marriott located at 4000 RCA Boulevard within the City of Palm Beach Gardens, Palm Beach County, Florida in reference to a suspicious incident. A female called the front desk at the Marriott and said something was wrong with her husband, to call 911, and hung up the phone. My body worn camera was activated during this call.

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 22 day of April, 2018.

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

**SCANNED**  
**APR 23 2018**

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County  
Narrative Continuation

A D M I N I S T R A T I V E	Date / Time <b>04/22/2018 03:36</b>	Agency ORI Number <b>FL 0502600</b>	Agency Name <b>PALM BEACH GARDENS POLICE</b>	Agency Report Number <b>7   8   18-002538</b>
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Upon arrival, I went up to the 7th floor of the hotel and was immediately met by the male half, Jeremy Sperbeck, who appeared extremely intoxicated. Sperbeck attempted to push his way past us and onto the elevator. Sperbeck was placed into handcuffs and sat on the ground. I asked Sperbeck to explain what happened tonight, but he refused to answer any questions and kept repeating to ask Rachel what happened.

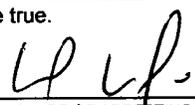
I met with Sperbeck's girlfriend, Rachel Andersen, who explained earlier in the night they went out to a cigar bar where Sperbeck consumed several shots of alcohol. Andersen stated while in the Uber ride on the way back to the Marriott, Sperbeck became aggressive because he thought the Uber driver was being flirtatious with Andersen. Once they arrived at the Marriott, Sperbeck continued to be aggressive with Andersen. When they reached their hotel room, Andersen unlocked the door with the key card and Sperbeck pushed it opened from behind her. Andersen attempted to walk into the room but stumbled to the ground. Sperbeck walked up in an aggressive manner and stood over her in a threatening manner. Due to Sperbeck's increasingly hostile behavior, Andersen stated she was in fear that Sperbeck was going to push or hit her at that point, but he didn't. Sperbeck began destroying their hotel room by throwing different objects around the room causing damage. Sperbeck broke the phone, removed the tv from the table stand, knocked a lamp over, etc. Andersen and Sperbeck have been dating over a year and share a residence in Tampa, FL.

Based on the above information, I find that probable cause exists to charge Sperbeck with domestic assault pursuant to F.S.S. 784.011.

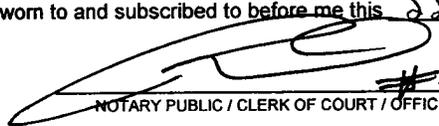
NOT A CERTIFIED COPY

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 22 day of April, 2018.

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

SCANNED  
APR 23 2018

**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, agg. assault, battery, agg. battery, sexual assault, sexual battery, stalking, agg. 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 #: 18-002538 Agency: PBG PD  
 Offense: Domestic violence - Assault  
 Suspect/Offender: Jeremy M Sperbeck  
 D.O.B. 05/02/1985 Race: W Sex: M

2. Warrant #(s): \_\_\_\_\_

3. Complete one (1) of the following:

a. Victim's name: Rachel, E Andersen  
 Address: 12172 Olive Jones RD - Apt 103  
 City: Tampa State: FL Zip: 33625  
 Home #: 407 924 3433 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 specify):  
 \_\_\_\_\_

**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. **APR 23 2018**

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

Officer's Name: M. Valerio ID.: 487 Date: 4/22/18

SUSPECT/OFFENDER: Jeremy M Sperbeck  
 COURT CASE/WARRANT #: 18-002538  
 (FOR WARRANTS USE ONLY)