

0436173

12mm12158

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		Juvenile	
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, 1, 123966					
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		Multiple Clearance Indicator					
Location of Arrest (Including Name of Business) 10154 Aspen Way Palm Beach Gardens FL 33410		Location of Offense (Business Name, Address) N/A							
Date of Arrest 07.30.12		Time of Arrest 1649		Booking Date		Booking Time		Jail Date	
Name (Last, First, Middle) Snider Jessica M.		Alias (Name, DOB, Soc. Sec. #, Etc.) None known							
Race W - White B - Black O - Oriental/Asian		Sex F		Date of Birth 01.25.91		Height 5-5		Weight 140	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) None Visible		Marital Status S		Religion unk		Indication of: Alcohol Influence Drug Influence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Unk			
Local Address (Street, Apt. Number) 10154 Aspen Way Palm Beach Gardens FL 33410		(City) Palm Beach Gardens		(State) FL		(Zip) 33410		Phone (813) 951-3098	
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Address Source Records	
Business Address (Name, Street)		(City)		(State)		(Zip)		Occupation Student	
DLE Number, State 5536433915250		Soc. Sec. Number 095789854		INS Number		Place of Birth (City, State) WFLA FL		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	
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other		Name (Last)		(First)		(Middle)		Residence Phone	
Address (Street, Apt. Number)		(City)		(State)		(Zip)		Business Phone	
Notified by: (Name)		Date		Time		Juvenile Disposition 1. Handled/Processed within Dept. and Released. 2. OT HRS/DYS 3. Incarcerated		VICTIM NOTIFICATION REQUIRED	
Released To: (Name)		Relationship						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 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)		School Attended				Grade			
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property				Value of Property			
Drug Activity N. 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 O. Opium/Derm		P. Paraphernalia/ Equipment S. Synthetic	
U. Unknown Z. Other		Charge Description Batter Sample		Counts 01		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 789.03 (1)	
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number		Violation of ORD #	
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number		Violation of ORD #	
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number		Violation of ORD #	
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number	
<input type="checkbox"/> Instruction No. 1 <input type="checkbox"/> 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)							
Court Date and Time		Month		Day		Year		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 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 X		Name Verification (Printed by W. Agent) SCANNED		Date Signed JUL 31 2012		PAGE 1 OF 1	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) K. Wilson		I.D. # 279		Agency PBGPD	
Intake Deputy		Pouch #		Transporting Officer Hayashi		I.D. # 408		Witness here if subject signed with an "X"	

DISTRIBUTION:

WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - JAIL

GOLD - DEFENDANT

## DOMESTIC VIOLENCE PROBABLE CAUSE

## AFFIDAVIT

Palm Beach County

A D M I N	Date / Time <b>07/30/2012 17:01</b>		Agency ORI Number <b>FL 0502600</b>		Agency Name <b>PALM BEACH GARDENS POLICE</b>		Agency Report Number <b>7   8   12-003966</b>									
	Name (Last, First, Middle) <b>SNIDER, JESSICA MARIE</b>						Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>01/25/1991</b>							
C H A R G E	Charge Description <b>784.03(1)(A)(1) BATTERY-SIMPLE (TOUCH OR STRIKE)</b>															
	Victim's Name (Last, First, Middle) <b>SNIDER, PATRICIA KATHLEEN</b>						Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>05/09/1954</b>							
V I C T I M	Local Address (Street, Apt. Number) (City) (State) (Zip) <b>10154 ASPEN WAY, PALM BEACH GDNS, FL 33410</b>				Phone <b>(561) 799-4100</b>		Address Source <b>SELF</b>									
	Business Address (Name, Street) (City) (State) (Zip) <b>PBG</b>				Phone		Occupation <b>CLERK</b>									
	<table border="0"> <tr> <td>DEFENDANT'S STATEMENTS:</td> <td>Written <input type="checkbox"/></td> <td>Taped <input type="checkbox"/></td> <td>Oral <input type="checkbox"/></td> <td rowspan="2">OBSERVATIONS OF VICTIM (PHYSICAL &amp; EMOTIONAL): <b>REDNESS ON UPPER LEFT ARM</b></td> </tr> <tr> <td>VICTIM'S STATEMENTS:</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>								DEFENDANT'S STATEMENTS:	Written <input type="checkbox"/>	Taped <input type="checkbox"/>	Oral <input type="checkbox"/>	OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): <b>REDNESS ON UPPER LEFT ARM</b>	VICTIM'S STATEMENTS:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
DEFENDANT'S STATEMENTS:	Written <input type="checkbox"/>	Taped <input type="checkbox"/>	Oral <input type="checkbox"/>	OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): <b>REDNESS ON UPPER LEFT ARM</b>												
VICTIM'S STATEMENTS:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													
RELATIONSHIP BETWEEN VICTIM & SUSPECT <b>MOTHER/DAUGHTER</b>																
A D D I T I O N A L  I N F O R M A T I O N	PHOTOGRAPHS:		Scene:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>											
			Victim:	<input checked="" type="checkbox"/>	<input type="checkbox"/>											
	911 CALL:			<input type="checkbox"/>	<input checked="" type="checkbox"/>	CALLER:										
	WEAPON USED:			<input type="checkbox"/>	<input checked="" type="checkbox"/>	TYPE:										
	WITNESSES:			<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	PARAMEDICS:										
	Hospital:			<input type="checkbox"/>	<input 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 type="checkbox"/>	<input checked="" type="checkbox"/>											
N A R R	On 7/30/12, at approximately 4:07 pm, I was dispatched to 10154 Aspen Way, Palm Beach Gardens, Palm Beach County, Florida, in reference to a report of a domestic dispute between mother and daughter.															
	On arrival, I met with Sgt. Glass who spoke to victim Patricia Snider who advised the following:															
STATE OF FLORIDA COUNTY OF PALM BEACH Appeared before me, <u>                    </u> personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true. <u>                    </u> #299 SIGNATURE OF ARRESTING OFFICER Sworn to and subscribed to before me this <u>30</u> day of <u>July</u> , <u>2012</u> . <u>                    </u> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.40)																

2012 JUL 31 AM 5:41  
 STATE OF FLORIDA  
 COUNTY OF PALM BEACH  
 GUN CLUB BRANCH  
 STATIONED DOCK, CLERK  
 PALM BEACH COUNTY, FL

SCANNED

JUL 31 2012

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

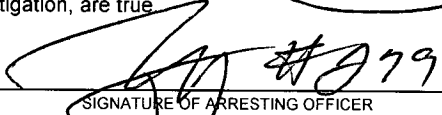
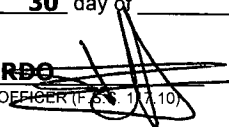
CRIME ANALYSIS

P. I. O.

## 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>07/30/2012 17:01</b>	Agency ORI Number <b>FL 0502600</b>	Agency Name <b>PALM BEACH GARDENS POLICE</b>	Agency Report Number <b>7   8   12-003966</b>
	<p>Earlier this day Patricia and her daughter, Jessica Snider were arguing when Jessica began punching herself in the head stating she wanted to kill herself. She then picked up a glass coaster and began striking herself in the head again stating she wanted to kill herself. Jessica then turned her aggression toward Patricia and struck her two times with a closed fist striking her upper left arm causing minor swelling and redness. Patricia then called the police.</p> <p>When I arrived on scene I spoke to Patricia who reiterated the aforementioned statement. She then displayed her upper left arm and I observed minor redness.</p> <p>Det. Rigney and I attempted to speak to Jessica however she was argumentative and repeatedly asked questions regarding what the Palm Beach County Jail was like and if she would be in a cell by herself.</p> <p>Based on the results of my investigation, Jessica Snider is charged with simple battery, domestic related, contrary to F.S.S. 784.03(1). In addition to this arrest, an involuntary Baker Act was completed on Jessica due to her current mental state and desire to harm herself. She was transported to the Palm Beach County Jail without incident.</p> <p>Patricia Snider completed a sworn witness statement and was issued a Domestic Violence Notice of Legal Rights and Remedies packet. A Victim Notification form was also completed. Nothing further.</p>			
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p>Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.</p> <p> SIGNATURE OF ARRESTING OFFICER</p> <p>Sworn to and subscribed to before me this <u>30</u> day of <u>July</u>, <u>2012</u>.</p> <p> <b>GUILLEN, EDUARDO</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 11.10)</p> <p><b>SCANNED</b> <b>JUL 31 2012</b></p>				

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.