

0356640

2008

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number	Agency ORI Number FLO 502600		Agency Name Palm Beach Gardens Police Department		Agency Report Number (N.T.A.'s only) 78- 17006485	
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input checked="" type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	Weapon Seized / Type 1. Yes 2. No		Multiple Clearance Indicator
Location of Arrest (Including Name of Business) Gardens Parkway / Westport Drive, PBG, FL 33410			Location of Offense (Business Name, Address) 11910 Kew Gardens Ave, PBG, FL 33410			
Date of Arrest 11/05/2017	Time of Arrest 02:06hrs	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle Kauff's Towing 4701 East Ave, WPB

Name (Last, First, Middle) Melvin, Joshua Coty						Alias (Name, DOB, Soc. Sec. #, Etc.)		
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex M	Date of Birth 01/03/1993	Height 602	Weight 155	Eye Color BRO	Hair Color BRO	Complexion LGT	Build MED
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) (T) Chest - Loyalty, Pride, Rosemary; (T) L-Arm - Angel, Dove, 3 Roses				Marital Status Single	Religion Christian	Indication of Alcohol Influence Drug Influence Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/> 3. Florida 4. Out of State 3		
Local Address (Street, Apt. Number) 7511 SE Sandpiper Street		(City) Hobe Sound	(State) FL	(Zip) 33455	Phone (561) 685-2895	Residence Type: 1. City 2. County 3. Florida 4. Out of State 3		
Permanent Address (Street, Apt. Number) Same as Local Address		(City)	(State)	(Zip)	Phone () Same	Address Source FL Driver's License		
Business Address (Name, Street) All Hooked Up Detailing		(City) Hobe Sound	(State) FL	(Zip) 33455	Phone ()	Occupation Owner		
D/L Number, State M415423930030 - FL		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) Boynton Beach, FL	Citizenship USA	

Co-Defendant Name (Last, First, Middle) Theel, Bailey Brooke	Race W	Sex F	Date of Birth 11/25/1996	<input checked="" type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large	<input checked="" 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. Handed or processed within Dept. and Released.	2. TOT HRS / DYS 3. Incarcerated
Released To: (Name)	Relationship		Date	Time
The above address 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 (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/deriv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other
Charge Description BATTERY-SIMPLE (TOUCH OR STRIKE)					Counts 1	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 784.03(1)(A)(1)		Violation of ORD #	
Drug Activity N	Drug Type N	Amount / Unit N/A	Offense # 1		Warrant / Capias Number		Bond			
Charge Description					Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #		Warrant / Capias Number		Bond			
Charge Description					Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #		Warrant / Capias Number		Bond			
Charge Description					Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #		Warrant / Capias Number		Bond			

Location (Court, Room Number, Address) North County Courthouse 3188 PGA Blvd, Palm Beach Gardens, FL 33410					
Court Date and Time Month December Day 6 Year 2017 Time 10:00 AM <input checked="" type="checkbox"/>					
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 [Signature]	Name Verification (Printed by Agent) NOV 5 AM 7:45
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:	(PRINT)
Transporting Officer Ofc. Cameron Carver	ID # 471	Agency PBGPD
Witness here if subject signed with an "X"		

NOT A CRIMINAL RECORD

VICTIM NOTIFICATION REQUIRED

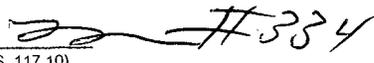
NO BOND

NOV 5 AM 7:45
NOV 6 2017
SCANNED
NOV 10 6 2017

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

A D M I N	Date / Time 11/05/2017 02:06		Agency ORI Number FL 0502600		Agency Name PALM BEACH GARDENS POLICE		Agency Report Number 7 8 17-006485		
	Name (Last, First, Middle) MELVIN, JOSHUA COTY						Race W	Sex M	Date of Birth 01/03/1993
C H I R G E	Charge Description 784.03(1)(A)(1)								
	Victim Name (Last, First, Middle) [REDACTED]						Race W	Sex F	Date of Birth 11/25/1996
V I C T I M	Business Address (Name, Street) (City) (State) (Zip) [REDACTED]						Phone [REDACTED]		Address Source DHSMV
	Occupation WAITRESS								
DEFENDANT'S STATEMENTS: Written <input type="checkbox"/> Taped <input checked="" type="checkbox"/> Oral <input type="checkbox"/>			OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL):						
VICTIM'S STATEMENTS: Written <input type="checkbox"/> Taped <input checked="" type="checkbox"/> Oral <input type="checkbox"/>			COOPERATIVE						
RELATIONSHIP BETWEEN VICTIM & SUSPECT [REDACTED]									
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 type="checkbox"/> NO <input checked="" type="checkbox"/>								
	Victim: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>								
	911 CALL: <input checked="" type="checkbox"/>		CALLER: EYEWITNESS						
	WEAPON USED: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		TYPE:						
	WITNESSES: <input checked="" type="checkbox"/>		(If YES, attach witness list)						
	INJURIES: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>								
	MEDICAL TREATMENT: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>								
	AT: Scene: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		PARAMEDICS:						
	Hospital: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		PHYSICIAN(S) / HOSPITAL:						
	ACT COMMITTED IN PRESENCE OF MINOR(S): YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		NAMES/AGES:						
H. R. S. NOTIFIED: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>									
VICTIM PREGNANT: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>									
VIOLATION OF RESTRAINING ORDER: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		CASE #:							
PRIOR HISTORY OF DOMESTIC VIOLENCE: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>									
ALCOHOL OR DRUGS INVOLVED: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>									
N A R R	On Sunday, November 5, 2017 at 1:56am, I was dispatched to the area of 11910 Kew Gardens Avenue, Palm Beach Gardens, in Palm Beach County, FL 33410 in reference to a domestic battery. While responding, dispatch advised that a black pick-up truck transporting the subjects was leaving the scene. Sergeant LeBlanc #363 saw a black pick-up truck in the general area of the incident and initiated an investigatory traffic stop. Sergeants								
	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 <u>5</u> day of <u>November</u> , <u>2017</u> .									
BEATH, DENNIS  #334 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)									

CERTIFIED COPY

SCANNED
NOV 06 2017
P. I. O.

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

Narrative Continuation

A D M I N	Date / Time 11/05/2017 02:06	Agency ORI Number FL 0502600	Agency Name PALM BEACH GARDENS POLICE	Agency Report Number 7 8 17-006485
	N A R R A T I V E LeBlanc and Beath #334 got out with a Joshua Melvin (driver) and [REDACTED] (passenger, sitting in the back seat). Both showed signs of physical altercation with bruises and blood on faces and hands.			

Upon my arrival, I made contact with Aaron Goodwin, the eyewitness. Aaron provided a sworn-oral statement advising the following:

Aaron came downstairs from his apartment to walk his dog when he heard yelling coming from across the parking lot. The yelling came from the tennis court parking lot, across from the apartment complex Arron lives in. Aaron initially was approximately 100 yards to the west of where the battery took place. Aaron heard a male and female yelling. Aaron stated the parking lot was illuminated, and was able to see a male and female sitting on the tailgate of a black pick-up truck. Aaron saw both the male and female hitting each other, and could hear the sound of skin making contact with skin. After hearing a thud sound, which Aaron described as something hitting metal, he didn't hear the female yelling anymore. Aaron got into his vehicle to drive closer as he called the police. By the time Aaron got to the gate of his apartment complex, he saw the black truck pull out of the parking lot, make a right onto Kew Gardens and another right at Valencia Gardens. Approximately a minute later, Aaron saw a marked police car and informed the officer of the direction the black-truck went.

I drove over to the parking lot adjacent to the tennis courts. I saw a broken tumbler, empty Bud-Light beer can, blood drops and pools of blood spanning approximately 75 feet on the north side of the parking lot. In the pool of blood at the stop-bar, I observed what appeared to be a (woman's size) right bloody footprint. I also observed a large pool of water, indicating the vehicle sat for an extended period of time in the parking lot. I documented the scene via my department issued body worn camera.

I went to the scene of the traffic stop where I met with [REDACTED] and Joshua. Both were read their Miranda Warnings from a pre-printed card by Sergeant Beath.

I observed [REDACTED] to have bruising, scratches and small lacerations across her face. In addition, her left nostril was bloody, and her left foot appeared to have been cut between her toes. [REDACTED] hand was also bloody. While speaking with [REDACTED] I could detect the odor of an unknown alcoholic beverage coming from her breath. According to Officer Leskow #429, [REDACTED] refused emergency medical services assessment.

Post Miranda, [REDACTED] stated that she suffered all her injuries at a bar (unknown name or location) when she got into a fight with "some people." [REDACTED] eventually stated that the people she fought with were her high school friends, but could not remember their names. [REDACTED] continuously used terms as "frisky," "immature," and "rambunctious," to describe her behavior at the bar however, she did not further explain her actions. Baily attributed her behavior at the bar due to her level of intoxication. When asked how Joshua became injured, she stated he must have been when he tried to "pull her back" from the fight. [REDACTED] stated Joshua did not fight anyone at the bar. When asked about the scene in the parking lot, [REDACTED] denied any physical fighting at that scene and denied getting physical with Joshua. When asked why they were in that parking lot, [REDACTED] stated she didn't want Joshua to drive all the way to her residence, so she told him to pull into the parking lot so she could walk home. According to Sergeants Beath and LeBlanc, details of [REDACTED] story varied each time she was interviewed.

I observed Joshua to have bruising and scratches across his face. Joshua's hands were also bloody and had a cut on his right cuticle. While speaking with Joshua, I noticed his eyes were watery and glassy. I could also

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 5 day of November, 2017.

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

SCANNED
NOV 06 2017

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 11/05/2017 02:06	Agency Name PALM BEACH GARDENS POLICE		Agency Report Number 7 8 17-006485
	Agency ORI Number FL 0502600			

detect the odor of an unknown alcoholic beverage coming from his breath. According to Officer Leskow, Joshua refused emergency medical services assessment.

Post Miranda, Joshua stated that while at Johnny Mango's (71 E Indiantown Road #805, Jupiter, FL 33477) a slight altercation occurred with another patron over a UFC fight. Joshua stated he received a scratch across face when the argument turned physical, the male who hit him was apologetic and did not cause any further incident at the bar. Joshua and [redacted] stayed and continued watched the UFC fight. After the UFC fight, Joshua and [redacted] left to bring her home. [redacted] wanted to go to his house, but Joshua's mother does not want her coming around. Joshua stated that [redacted] parents don't want him coming over to their house. [redacted] began to hit and punch herself in the face and got out of his truck at the parking lot. Both began to argue and got into a lover's quarrel over going to each other's residences. In frustration, [redacted] threw her Tervis tumbler at his truck, making a loud thud noise. This action caused her Tervis to break, consistent with the broken cup at the scene. Joshua stated he didn't know [redacted] was bleeding and denies a physical fight in the parking lot. Joshua also denied [redacted] getting into a fight at the bar and didn't know she was bleeding.

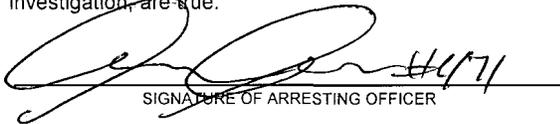
Joshua's truck was searched incident to arrest. Blood smears were observed on the outside of truck, on the passenger door handle and driver side. The windows had condensation on them and the dashboard had a residue on it, from some type of liquid being thrown on it. There were blood smears on the passenger floorboard and Bud Light cans in the back seat, the same type of can found at the parking lot. Joshua's truck was towed by Kauff's Towing to their tow yard located at 4701 East Avenue, West Palm Beach, FL 33401.

Based on my investigation, I determined that the blood located at the scene is consistent with heavy nose bleed that [redacted] had from her left nostril; the bloody footprint at the scene consistent with the blood on [redacted] right foot; the Bud Light can consistent with the cans found in the back seat of the truck and broken Tervis consistent with [redacted] statement. In addition, the inconsistent accounts from Joshua and [redacted] coupled with the sworn eyewitness statement, I find probable cause to charge both Joshua Melvin and [redacted] with Simple Battery, in violation of F.S.S 784.03(1) (A) (1). It is important to note that Joshua and [redacted] have been in a relationship for the past two-years. Both were provided Victim Rights pamphlets and Victim Notification forms. Joshua and [redacted] were transported to the Palm Beach County Jail without incident.

BWC used.

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 5 day of November, 2017.

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

SCANNED
NOV 06 2017

VICTIM NOTIFICATION FORM

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

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

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

1. Incident Report #: 17006485 Agency: PBG PD
 Offense: Domestic Battery
 Suspect/Offender: [REDACTED]
 D.O.B. 5/11/96 Race: White Sex: Female

2. Warrant #(s): _____

3. Complete one (1) of the following:

a. Victim's name: [REDACTED]
 Address: [REDACTED]
 City: [REDACTED] State: [REDACTED] Zip: [REDACTED]
 Home #: [REDACTED] 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.

SCANNED
NOV 06 2017

Signature of person waiving notification: _____
Printed name of person waiving notification: _____

Officer's Name: Cameron Carver I.D.: 471 Date: 11/5/17

SUSPECT/OFFENDER: [REDACTED]

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

