

ARREST / NOTICE TO APPEAR				Juvenile Referral Report				1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1800 1 Juvenile				
ADMINISTRATIVE	OBTS Number				Agency ORI Number				Agency Name				Agency Report Number (N.T.A.'s only)			
	FLO 500000				PALM BEACH COUNTY SHERIFF'S OFFICE				06- 17104524							
	ChargeType: <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance Check as many as apply. <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other								Weapon Seized / Type 1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>				Multiple Clearance Indicator			
	1 Location of Arrest (Including Name of Business) 22100 S STATE RD 7, BOCA RATON, FL 33428				Location of Offense (Business Name, Address) 22100 S STATE RD 7, BOCA RATON, FL 33428											
	Date of Arrest 07/19/2017		Time of Arrest 1755		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle			
	Name (Last, First, Middle) Feldman, Joshua, William															
	Alias (Name, DOB, Soc. Sec. #, Etc.)															
	Race: W - White 1 - American Indian W M Date of Birth 05/23/1994 Height 5'09 Weight 170 Eye Color Grn Hair Color Brn Complexion Light Build Med Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description) Sleeve with Star left arm Marital Status Single Religion Indication of: Y N Unk. Alcohol Influence <input type="checkbox"/> <input type="checkbox"/> Drug Influence <input type="checkbox"/> <input type="checkbox"/>															
	Local Address (Street, Apt. Number) (City) (State) (Zip) Phone (561) 674-8925 Residence Type: 1. City 2. County 3. Florida 4. Out of State At Large, Boca Raton, FL 33428															
	Permanent Address (Street, Apt. Number) (City) (State) (Zip) Phone () Address Source , ()															
Business Address (Name, Street) (City) (State) (Zip) Phone () Occupation																
D/L Number, State F435439941830, FL				Soc. Sec. Number				INS Number				Place of Birth (City, State) Philadelphia, PA		Citizenship USA		
Co-Defendant Name (Last, First, Middle) Race Sex Date of Birth <input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <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"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile																
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other: 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. 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)																
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No Description of Property Value of Property																
Drug Activity S. Sell R. Smuggle K. Dispense/ M. Manufacture/ Z. Other Drug Type B. Barbiturate H. Hallucinogen P. Paraphernalia/ U. Unknown N. N/A B. Buy D. Deliver Produce/ C. Cocaine M. Marijuana S. Equipment Z. Other P. Possess T. Traffic E. Use Cultivate E. Amphetamine E. Heroin O. Opium/Deriv. S. Synthetics																
Charge Description TRESPASS AFTER WARNING Counts 1 Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N Statute Violation Number 810.09(2B) Violation of ORD # NA Drug Activity Drug Type Amount / Unit Offense # 17104524																
Drug Activity Drug Type Amount / Unit Offense # 17104524 Warrant / Capias Number NA Bond 500 NO LOC M																
Charge Description RESIST OFFICER WITHOUT VIOLENCE Counts 1 Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N Statute Violation Number 843.02 Violation of ORD # NA Drug Activity Drug Type Amount / Unit Offense # 17104524 Warrant / Capias Number NA Bond 500																
Charge Description Counts 1 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 1 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) 20																
Court Date and Time Month August Day 21 Year 2017 Time 0930 AM <input checked="" type="checkbox"/> PM <input 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 07/19/2017 95																
Signature of Defendant (or Juvenile and Parent /Custodian) SCANNED JUL 20 2017																
HOLD for other Agency Name: D. S. C. GILYARD <input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other				Signature of Arresting Officer X				Name Verification (Printed by Arrestee) (PRINT) JUL 20 2017								
				Name of Arresting Officer (Print) D/S C. WINK I.D. # 8778												
Transporting Officer Butterworth ID # 123456789 Agency GREEN - STATE ATTORNEY YELLOW - AGENCY																
Witness here if subject signed with an -X" 1 OF 1																

ADMIN	OBTS Number		PROBABLE CAUSE AFFIDAVIT			1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		Juvenile
	Agency ORI Number	Agency Name								
DEF	FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE			06- 17104524		Agency Report Number			
CHARGES	ChargeType: Check as many as apply. 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other					Special Notes:				
VICTIM	Name (Last, First, Middle) Feldman, Joshua, William					Alias		Race	Sex	Date of Birth
	Charge Description TRESPASS AFTER WARNING			810.09(2B)		Charge Description RESIST OFFICER WITHOUT VIOLENCE			843.02	
	Charge Description			Charge Description						
	Victim's Name (Last, First, Middle) Walmart ,					Race		Sex	Date of Birth	
	Local Address (Street, Apt. Number)		(City)	(State)	(zip)	Phone ()		Address Source		
	Business Address (Name, Street)		(City)	(State)	(zip)	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.</p> <p>The Person taken into custody</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts.</p> <p><input type="checkbox"/> was observed by _____ who told that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p>										
<p>On the <u>19</u> day of <u>July</u> 20<u>17</u> at <u>1730</u> <input type="checkbox"/> A. M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p>										
<p>I responded to Walmart at 22100 S State Rd 7 Boca Raton, FL 33428 in reference a possible overdose call.</p>										
<p>Upon arrival I made contact with David Feldman who said his son Joshua Feldman (23) was in the rear store bathroom and refused to come out. David said Joshua has a drug addiction and believes he overdosed because he has been locked inside for 45 minutes and was mumbling when he tried talking to him.</p>										
<p>D/S Jacobs and I went to the rear bathroom. I spoke to Joshua through the locked door who said he would come outside however didn't. Palm Beach County Fire Rescue arrived on scene and attempted to get Joshua to come outside. Joshua flushed the toilet four times. Joshua refused to exit the bathroom and PBCFR used tools to attempt to gain entry causing damage to the door. Joshua opened the door and refused to be transported to the hospital and did not want PBCFR looking for needle marks on his arms.</p>										
<p>I spoke with assistant store manager [REDACTED] who stated he wanted Joshua trespassed from the store. Joshua began running around the store to avoid us. I located Joshua crouched down behind a freezer in the dairy area of the store. D/S Jacobs and I told Joshua he was trespassed from the store and needed to leave. Joshua took off running saying he was not trespassed. I spoke to a customer at the front of the store who said they saw Joshua running towards the garden section. I found Joshua crouched down behind a register in the garden section.</p>										
<p>I told Joshua he was under arrest for trespassing and to place his hand behind his back. I grabbed Joshua's wrist and told him to turn around. Joshua pulled away from me and I told him to place his hands behind his back. Joshua did not cooperate and continually pulled away from me. I did a leg sweep taking Joshua to the ground. I felt Joshua attempt to get up. I held him down and D/S Jacobs placed him into handcuffs checking for proper fit and double lock.</p>										
<p>David Feldman and Keith completed a written sworn statement.</p>										
<p>Based on the above facts and circumstances I established probable cause to arrest Joshua Feldman for 1 count of trespassing after warning and 1 count of resisting an officer without violence.</p>										
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p><u>D/S C. WINK</u></p> <p>(Signature of Arresting/Investigative Officer)</p>										
<p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>19</u> day of <u>July</u> 20<u>17</u> by <u>D/S C. Wink</u></p> <p>(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification and/or produced <u>SCANNED</u> Known</p> <p><u>16070</u></p> <p>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>										
<p>JUL 20 2017</p>										
<p>PAGE <u>1</u> OF <u>1</u></p>										