

ARREST / NOTICE TO APPEAR

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

1

JUVENILE

OBTS Number	Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 5, 4 18-001347	
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 NONE		Multiple Clearance Indicator
Location of Arrest (Including Name of Business) 1152 UNIVERSITY BLVD			Location of Offense (Business Name, Address) 1152 UNIVERSITY BLVD 21, JUPITER, FL 33458			
Date of Arrest 03/10/2018	Time of Arrest 00:49	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
Name (Last, First, Middle) SELLERS, MICHAEL JASON			Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White B - Black	Sex M	Date of Birth 08/08/1977	Height 6'02	Weight 210	Eye Color BLUE	Hair Color BLONDE /
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)			Marital Status S	Religion OTHER	Indication of: Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input type="checkbox"/> Unk. <input checked="" type="checkbox"/>	
Local Address (Street, Apt. Number) (City) (State) (Zip) 1231 CEDAR GROVE RD, BUCKHEAD, GA 30625			Phone (706) 347-1069		Residence Type: 1. City 3. Florida 2. County 4. Out of State 4	
Permanent Address (Street, Apt. Number) (City) (State) (Zip) 1231 CEDAR GROVE RD, BUCKHEAD, GA 30625			Phone (706) 347-1069		Address Source GA DL	
Business Address (Name, Street) (City) (State) (Zip)			Phone		Occupation	
D/L Number, State 040739697 /	Soc. Sec. Number	INS Number	Place of Birth (City, State) MILAGEVILLE, GA,		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 <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor
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 <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ Name (Last, First, Middle)						Residence Phone
<input type="checkbox"/> Legal Custodian						Business Phone
Address (Street, Apt. Number) (City) (State) (Zip)			Notified by: (Name) Date Time			JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated
Released To: (Name) Relationship			Date 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.						School Attended Grade
<input type="checkbox"/> Yes, by: _____ <input type="checkbox"/> No: _____						Property Crime? <input type="checkbox"/> Yes <input checked="" 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. Disperses/ 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 DISORDERLY CONDUCT - DISORDERLY INTOXICATION			Statute Violation Number 856.011	Violation of ORD #		
Drug Activity N	Drug Type	Amount / Unit	Offense # 18-001347	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number
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
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
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			
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
<input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health			Date Transported			Time Transported
Transported By			Date Transported			Time Transported
<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) North County PALM BEACH GARD			Court Date and Time 04/11/2018 08:30:00
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.						No Photo Available
Signature of Defendant (or Juvenile and Parent/Custodian)				Date Signed		
HOLD FOR Other Agency		Signature of Arresting Officer Matonti		Name Verification (Printed by Arrestee)		
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Name of Arresting Officer (Print) MATONTI JOHN		(PRINT) SCANNED		
Intake Deputy	I.D. #	Pouch #	Transporting Officer Matonti	I.D. # 384/1186	Agency JPD	
Witness here if subject signed with an "X"						

2018 MAR 11 AM 8:34
PALM BEACH COUNTY
GUN CLUB BRANCH

SCANNED

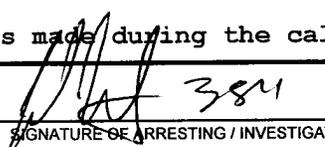
MAR 13 2018

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

A D M I N	OBTS Number		Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 5 4 18-001347		
	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						Special Notes:		
	Name (Last, First, Middle) SELLERS, MICHAEL JASON							Race W	Sex M
C H A R G E S	Charge Description 856.011 DISORDERLY CONDUCT - DISORDERLY INTOXICATION				Charge Description				
	Charge Description				Charge Description				
V I C T I M	Victim's Name (Last, First, Middle) STATE OF FLORIDA,						Race	Sex	Date of Birth
	Local Address (Street, Apt. Number) (City) (State) (Zip) 210 MILITARY TRL, JUPITER, FL 33458				Phone		Address Source		
	Business Address (Name, Street) (City) (State) (Zip) SELF				Phone (561) 746-6201		Occupation GOVERNMENT		
<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 type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the 10 day of March, 2018 at 02:18 (Specifically include facts constituting cause for arrest.)</p> <p>On 3-10-18 at approximately 0034 hours, I was dispatched to 1152 University Blvd. Apt. # 21, Jupiter, FL. 33458, in reference to an unknown male inside of the complainant's residence. Upon arrival, Northcom Dispatch advised me that the front door was unlocked and the complainant had locked herself inside the bedroom.</p> <p>Upon entering the residence, I observed a white male wearing a yellow shirt and blue jeans, asleep on the complainant's couch. The caller's husband, Jacob Realmuto (WM 03-18-91) came to the hallway and advised myself and Officer Morgan that he did not know who the individual was on the couch nor did he invite him inside. He advised that he and his wife were in a great deal of fear when they began hearing noises inside their residence and observed a male in their home. Realmuto advised that he just wanted the male removed from his home.</p> <p>The male on the couch, later identified as Michael Sellers (W/M 8-8-77) was extremely disoriented, and smelled of an unknown alcoholic beverage. He was slurring his speech and very incoherent while trying to answer my questions. He did not know where he was and how he arrived there. He was unable to provide a local address and only possessed a Georgia Driver's license. Sellers was removed from the residence.</p> <p>Based upon my above investigation, I found that Michael Sellers was intoxicated and endangered the safety of another person or property, or was intoxicated or drank an alcoholic beverage in a public place or in or upon a public conveyance and caused a public disturbance, contrary to Florida Statute 856.011(1). I advised Seller's that he was under arrest for disorderly intoxication and I placed him into handcuffs, checked the spacing and double locked them. Sellers was subsequently transported to Palm Beach County Jail, on Gun Club Road without incident.</p> <p>I utilized my Body Worn Camera for all statement's made during the call for service.</p>									
A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME				SIGNATURE OF ARRESTING / INVESTIGATING OFFICER				
	 MORGAN, CHRISTOPHER NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)				 MATONTL, JOHN (1186) NAME OF OFFICER (PLEASE PRINT)				
	03/10/2018 DATE				03/10/2018 DATE				