

0230148

2409

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report1. Arrest 3. Request For Warrant  
2. N.T.A. 4. Request For Capias

1

Juvenile

N

OBTS Number		Agency ORI Number <b>FLO 5 0 0 0 0 0</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number <b>06 17-097455</b>	
Charge Type: Check as many as apply		1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other <input type="checkbox"/>		If Weapon Seized Enter Type		Multiple Clearance Indicator	
Location of Arrest (Including Name of Business) <b>2425 2nd Ave. N., Apt. 126 Lake Worth, FL 33460</b>				Location of Offense (Including Name of Business) <b>2425 2nd Ave. N., Apt 126 Lake Worth, FL 33460</b>			
Date of Arrest <b>Jul 1, 2017</b>		Time of Arrest <b>23:43</b>		Booking Date		Booking Time	
Jail Date		Jail Time		Location of Vehicle			
Name (Last, First, Middle) <b>Drummond Phillip Dale</b>				Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex <b>M</b>		Date of Birth <b>04/18/1978</b>		Height <b>6'00</b>	
Weight <b>155</b>		Eye Color <b>Brown</b>		Hair Color <b>Brown</b>		Complexion <b>Light</b>	
Build <b>Small</b>		Marital Status <b>Married</b>		Religion <b>None</b>		Indication of: Alcohol Influence <input checked="" type="checkbox"/> Drug Influence <input checked="" type="checkbox"/>	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Indication of: Alcohol Influence <input type="checkbox"/> Drug Influence <input type="checkbox"/>		Indication of: Alcohol Influence <input type="checkbox"/> Drug Influence <input type="checkbox"/>		Indication of: Alcohol Influence <input type="checkbox"/> Drug Influence <input type="checkbox"/>	
Local Address (Street, Apt. Number) <b>2425 2nd Ave. N., Apt 126</b>		City <b>Lake Worth</b>		State <b>FL</b>		Zip <b>33460</b>	
Phone <b>561-598-7906</b>		Residence Type: 1. City 2. County 3. Florida 4. Out of State		1		Address Source <b>Defendant</b>	
Permanent Address (Street, Apt. Number)		City		State		Zip	
Business Address (Street, Apt. Number)		City		State		Zip	
Phone		Occupation <b>Plumber</b>					
D/L Number, State <b>D655664781380</b>		Social Security Number		INS Number		Place of Birth <b>West Palm Beach, FL</b>	
Citizenship <b>US</b>							
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
Parent Legal Guardian Other		Name (Last, First, Middle)		Phone			
Address (Street, Apt. No.)		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 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 561 355-2528) informed of any address change <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		P. Paraphernalia/Equipment		U. Unknown Z. Other			
Charge Description <b>Simple Battery (Dom. Related)</b>		Counts <b>1</b>		Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number <b>784.03(1)(a)(1)</b>	
Violation or ORD. #							
Drug Activity <b>N</b>		Drug Type <b>N</b>		Amount/Unit <b>N/A</b>		Offense # <b>17-097455</b>	
Warrant/Capias Number		Bond					
Charge Description		Counts		Domestic Violence		Statute Violation Number	
Violation or ORD. #							
Drug Activity		Drug Type		Amount/Unit		Offense #	
Warrant/Capias Number		Bond					
Charge Description		Counts		Domestic Violence		Statute Violation Number	
Violation or ORD. #							
Drug Activity		Drug Type		Amount/Unit		Offense #	
Warrant/Capias Number		Bond					
Charge Description		Counts		Domestic Violence		Statute Violation Number	
Violation or ORD. #							
Drug Activity		Drug Type		Amount/Unit		Offense #	
Warrant/Capias Number		Bond					
Location (Court, Address, Room Number) <b>TO BE SET</b>							
Court Date and Time Month Day Year Time AM PM							
I AGREE TO APPEAR AT THE ABOVE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT I SHOULD 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 <input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Signature of Arresting Officer <b>D/S A. REYKA</b> Name of Arresting Officer <b>D/S A. REYKA</b> ID # <b>17180</b>		Name Verification (Printed by Arrestee) (PRINT)		Page <b>1</b>	
Intake Date <b>THOMAS 1900</b>		Transporting Officer ID # <b>D/S A. REYKA 17180</b>		Agency <b>PBSO</b>		Witness here if subject signed with an "X" <b>SCANNED</b> <b>JUL 02 2017</b>	

OBTS Number		<b>PROBABLE CAUSE AFFIDAVIT</b>		1. Arrest    3. Request For Warrant 2. N.T.A.   4. Request For Capias		1	Juvenile	Y
Agency ORI Number <b>FLO 5 0 0 0 0 0</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number <b>06</b>		<b>17-097455</b>		
Charge Type Check as many as apply: <input type="checkbox"/> 1. Felony <input 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						
Defendant Name (Last, First, Middle) <b>Drummond Phillip</b>		Date		Race <b>W</b>		Sex <b>M</b>		Date of Birth <b>04/18/1978</b>
Charge <b>Simple Battery (Dom. Related)</b>				Charge				
Charge				Charge				
Victim Name		Race <b>B</b>		Sex <b>F</b>		Date of Birth <b>01/15/1979</b>		
Loc		Address Source <b>Victim</b>						
Business Address (Street, Apt. Number)		City		State		Zip		Phone
								Occupation <b>Unknown</b>
The undersign 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. The person taken into custody...								
<input type="checkbox"/> committed the below acts in my presence.  <input type="checkbox"/> confessed to admitting to the below facts.				<input checked="" type="checkbox"/> was observed by <b>VICTIM</b> who told <b>ME</b> that he/she saw the arrested person commit the below acts.  <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.				
On the <b>2</b> day of <b>July</b> 20 <b>17</b> at <b>10:30</b>				<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM				

I was dispatched to [REDACTED] in reference to a domestic disturbance in progress. While enroute to the call, PBSO Dispatch received information from a female that her daughter and son-in-law were in a verbal argument that had turned physical.

Upon my arrival, I met with a black female, later identified verbally as [REDACTED] stated that she and her two children had arrived home at their residence at [REDACTED] at approximately 21:30 hours. When [REDACTED] walked in the house, her husband, later identified as Phillip Drummond, was sitting on the couch watching television and drinking alcohol. [REDACTED] asked Phillip if he would go to their bedroom so the juveniles did not have to see him drinking. Phillip replied that he would leave when he was ready to, and stood up and walked toward [REDACTED] as if he was going to hit her. Their oldest child, identified as [REDACTED] stood up and placed himself between [REDACTED] and Phillip. [REDACTED] was afraid his [REDACTED] was going to get hit, so he shoved Phillip away from [REDACTED] and then took his younger [REDACTED] and went upstairs. [REDACTED] told the [REDACTED] to go to their bedroom before things escalated. She stated "Phillip then grabbed me by the throat and started slapping me in the face as I was trying to get him to let me go. I then snatched his hand away [but] he grabbed me by the arm" [REDACTED] stated she was able to "claw his hand away" and went outside to call the cops.

I spoke with [REDACTED] who expressed hesitation in explaining what happened inside the residence. He was afraid that anything he said was going to get him in trouble with his [REDACTED] and he did not want to be the reason his [REDACTED] went to jail. I explained to [REDACTED] that it is better to be honest, and he stated he would verbally tell me what happened but that he did not want to write a sworn statement in regards to the incident. He corroborated his [REDACTED] story, stating that he and his [REDACTED] had come home to eat dinner and watch television before bed. When they walked in the house, his [REDACTED] was sitting on the couch drinking. He heard his [REDACTED] ask his [REDACTED] to leave the room, when his [REDACTED] replied with a derogatory statement towards his mother that he could not remember but knew it was rude and disrespectful. He saw his [REDACTED] stand up and approach his [REDACTED] stated "I feared for my life and that my [REDACTED] would become violent with my [REDACTED]". He explained that his [REDACTED] is only violent and angry when he drinks, and such instances have become more frequent in recent months. [REDACTED] stepped between his [REDACTED] and tried to shove his [REDACTED] away from his [REDACTED] so that his [REDACTED] did not get hurt. This momentarily stopped Phillip, and [REDACTED] took his younger [REDACTED] and walked towards the stairs with him. As he was going upstairs [REDACTED] saw his [REDACTED] grab his [REDACTED] arm, but turned away and ran up to his bedroom before he could see or hear anything else.

[REDACTED] completed a sworn written statement, where she confirmed that Phillip had grabbed her neck and slapped her across the face multiple times. I did not observe any physical marks on her person, so photographs were not taken at this time. I attempted to speak to Phillip in regards to the incident, but he stated that he "did not do anything wrong" and wanted that statement documented in the report.

  
 OFFICER [REDACTED]

SCANNED  
 JUL 02 2017

Based on my investigation, I determined Phillip Drummond is in violation of F.S.S 784.03(1)(a)(1) - Simple Battery (Domestic Related), due to him actually and intentionally touching [REDACTED] arm against her will and subsequently striking her multiple times in the face.

Phillip was placed in handcuffs, which were double locked and checked for proper spacing. He was placed in the back of my patrol car, where he was booked into the Palm Beach County Jail without further incident.

The foregoing instrument was sworn to and affirmed before me this <u>1</u> day of <u>July</u> 20 <u>17</u> , by:	
<u>D/S B. GARCIA 18167</u>	<u>D/S A. REYKA 17180</u>
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Name of Arresting/Investigating Officer
<u>[Signature] 18167</u>	<u>[Signature]</u>
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Signature of Arresting/Investigating Officer

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NOT A CERTIFIED COPY

SCANNED  
JUL 02 2017

**Palm Beach County Sheriff's Office**

**DOMESTIC VIOLENCE/DATING VIOLENCE SUPPLEMENTAL PROBABLE CAUSE FORM**

(Submit this form with the original Probable Cause Affidavit)

Defendant: Phillip Dale Drummond DOB: 04/18/1978 Case #: 17-097455

Victim: [REDACTED] DOB: 01/15/1979 Race: B Sex: F

Relationship between Victim and Defendant: [REDACTED]

Photographs: Scene ☐ Yes ☒ No Victim ☐ Yes ☒ No Defendant ☐ Yes ☒ No

911 Call: ☒ Yes ☐ No Caller: Joan Preston

Weapon Used: ☐ Yes ☒ No Type: [REDACTED]

Witness: ☒ Yes ☐ No Name: [REDACTED]

Victim Pregnant: ☐ Yes ☒ No If yes,        Weeks        Months

Injuries: ☐ Yes ☒ No Description:       

Medical Treatment: ☐ Yes ☒ No

At Scene: ☐ Yes ☒ No Paramedics:       

At Hospital: ☐ Yes ☒ No Hospital:        Physician:       

Are children living in the home? ☒ Yes ☐ No DCF Notified? ☒ Yes ☐ No

Name: [REDACTED] DOB [REDACTED]

Name: [REDACTED] DOB [REDACTED]

Name:        DOB       

Injunction: ☐ Yes ☒ No Case #:       

No Contact Order: ☐ Yes ☒ No Case #:       

Alcohol or Drugs: ☒ Yes ☐ No ☐ Unknown

Prior history of Domestic/Dating Violence ☐ Yes ☒ No

Defendant's statements ☒ Yes ☐ No If yes, ☐ written ☐ recorded ☒ oral

First words Defendant said when you responded to scene: "I didn't do anything wrong to her"

Victim's statements ☒ Yes ☐ No If yes, ☒ written ☐ recorded ☐ oral

First words Victim said when you responded to scene: "I just want him to not drink in front of my kids"

Did the Victim contact anyone other than the police within an hour of the incident regarding the incident?

☒ Yes ☐ No If yes, name: Joan Preston phone 561) 420-3023

Observations of Victim (Physical & Emotional):       

☒ Upset ☒ Crying ☐ Fearful ☐ Hysterical ☐ Afraid ☐ Calm ☐ Nervous

☐ Complained of pain ☐ Other       

Victim contact information:       

Local Address: [REDACTED]

[REDACTED] [REDACTED]

Phone: Home: [REDACTED] Work:        Cell:       

Employer: UNK

Name of Relative: N/A Phone: SCANNED

JUL 02 2017

# VICTIM NOTIFICATION FORM

- Homicide (Ch.782)
- Attempted Murder
- Stalking (F.S. 784.048)
- Domestic Violence - (This includes any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated 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
- Dating Violence

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

1. Incident Report #: 17-097455 Agency: Palm Beach County Sheriff's Office  
Offense: Battery (Domestic Related)  
Suspect/Offender: Phillip Dale Drummond  
DOB: 04/18/1978 Race: B Sex: M

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

3.a. Victim's Name: [REDACTED] DOB: 01/15/1979 Race: B Sex: F  
Address: [REDACTED]  
City: [REDACTED] State: [REDACTED] Zip: [REDACTED]  
Home #: [REDACTED] Work #: \_\_\_\_\_ Other #: \_\_\_\_\_

b. Victim's next of kin, friend or neighbor: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Other #: \_\_\_\_\_

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY SUBJECT TO CONFIDENTIALITY.

## Victim/Relation Notification Waiver and Confidential Information Request

(Check applicable boxes)

- ☐ **Waiver:** I choose not to be notified when the arrestee is released from custody.
- ☐ **Confidential:** I request the information on this form be kept confidential (applicable only to sexual battery, stalking, child abuse, harassment or domestic violence cases).

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

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

Deputy's Name: D/S A Reyka ID #: 17180 Date: 7/2/2017

White = Corrections or State Attorney (Warrant Application)

Yellow = Warrants Section

Pink = Central Records