

17 MM 1245

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

1 Juvenile

OBTS Number			ARREST / NOTICE TO APPEAR Juvenile Referral Report								
Agency ORI Number FLO 5 0 0 0 0 0			Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 06 17032429					
Charge Type Check as many as apply <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input 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 0 1					
Location of Arrest (Including Name of Business) 14555 SOUTHERN BLVD			Location of Offense (Including Name of Business) LOXAHATCHEE FL 33470			14555 SOUTHERN BLVD LOXAHATCHEE FL 33470					
Date of Arrest Jan 28, 2017	Time of Arrest 05:20	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle					
Name (Last, First, Middle) MELVIN REBECCA KAY						Alias (Name, DOB, Soc. Sec. #, Etc.)					
Race W-White I-American Indian B-Black O-Asian/Pacific		Sex W F	Date of Birth 09/29/1991	Height 5'0	Weight 145	Eye Color HAZEL	Hair Color BRN	Complexion LIGHT	Build MED		
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATTOOS ALL OVER BODY						Marital Status SINGLE	Religion N/A	Indication of: Y N Alcohol Influence <input type="checkbox"/> <input checked="" type="checkbox"/> Drug Influence <input type="checkbox"/> <input checked="" type="checkbox"/>			
Local Address (Street, Apt. Number) 16931 93RD RD N			City LOXAHATCHEE	State FL	Zip 33470	Phone	N/A	Residence Type: 1. City 3. Florida 2. County 4. Out of State			
Permanent Address (Street, Apt. Number)			City	State	Zip	Phone		Address Source: VERBAL			
Business Address (Street, Apt. Number)			City	State	Zip	Phone		Occupation N/A			
Def. Number, State M-415-731-91-849-0	Social Sec.		INS Number	Place of Birth WEST PALM BEACH FL			Citizenship USA				
Co-Defendant Name (Last, First, Middle) KELLY MICHAEL			Race P	Sex W M	Date of Birth 3/23/1992	1. Arrested <input checked="" type="checkbox"/> 2. At Large <input type="checkbox"/>	3. Felony <input type="checkbox"/> 4. Misdemeanor <input checked="" type="checkbox"/> 5. Juvenile <input type="checkbox"/>				
Co-Defendant Name (Last, First, Middle)			Race	Sex	Date of Birth	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"/>				
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> 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 561 355-2526) informed of any address change <input type="checkbox"/> Yes, by (Name) <input type="checkbox"/> No: (Reason)						School Attended					
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property						Value of Property			
Drug Activity 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. Perspiration/ Equipment	U. Unknown Z. Other
Charge Description TRESPASS AFTER WARNING			Counts 1	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 810.09 2b			Violation or ORD. #			
Drug Activity N	Drug Type N	Amount/Unit N/A	Offense # 17032429		Warrant/Capias Number			Bond			
Charge Description			Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number			Violation or 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 or 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 or ORD. #			
Drug Activity	Drug Type	Amount/Unit	Offense #		Warrant/Capias Number			Bond			
Location (Court, Address, Room Number) West County Justice Complex 2950 State Road 15 Belle Glade, FL, 33430											
Court Date and Time Month MARCH		Day 7	Year 2017	Time 09:00	AM <input checked="" type="checkbox"/>	PM <input type="checkbox"/>					
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			Signature of Arresting Officer			Name Verification (Printed by Arrestee)					
Name											
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Other			Name of Arresting Officer D/S BARRIOS			ID # 17625					
Inmate Deputy		ID #	Pouch #	Transporting Officer	ID #	Agency	Page				
				D/S BARRIOS	17625	PBSO					
Witness here if subject signed with an "X"											
1 of											

OBTS Number

PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

Agency ORI Number FLO 5 0 0 0 0 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06	17032429		
Charge Type: <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		
Defendant Name (Last, First, Middle) MELVIN		REBECCA		KAY	Race W Sex F Date of Birth 09/29/1991
Charge TRESPASS AFTER WARNING		Charge			
Charge		Charge			
Victim Name (Last, First, Middle) BOONIES		RESTAURANT AND LOUNGE		Race	Sex
Local Address (Street, Apt. Number) 14555 SOUTHERN BLVD		City LOXAHATCHEE	State FL	Zip 33470	Phone 561-273-3021
Business Address (Street, Apt. Number)		City	State	Zip	Phone 5610753-9991
I the undersigned swear 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"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input type="checkbox"/> confessed to admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.					
On the 28 day of JANUARY 20 17 at 05:00 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM					

On 1/28/17 at about 4:37 hours I was dispatched to Boonies Restaurant and Lounge located at 14555 Southern Blvd Loxahatchee FL 33470 in reference to several subjects fighting. Upon arrival there were several subjects outside the establishment. I made contact with the security guard named Mathew Henn who advised that several subjects were fighting and causing a disturbance at the bar. He advised that he wanted a couple of subjects trespass from the property because he saw them instigating for the fight.

I then advised several subjects that they were no longer welcomed at the bar and they had to leave. A subject named Michael Kelly started to get agitated and went back to the bar after I already told him he had to leave because he was trespass from the property. A female named Rebecca Melvin who was with Michael also refused to leave after I told her several times.

Based on my investigation, probable cause exists to charge Michael Kelly and Rebecca Melvin for Trespass after warning pursuant to F.S.S 810.09 2b.

The foregoing instrument was sworn to and affirmed before me this **28** day of **JANUARY** 20 **17**, by:

A. Sinnott 23163

Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)
C. J. Sinnott

Name of Arresting/Investigating Officer
D/S BARRIOS 17625

Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)
C. J. Sinnott

Signature of Arresting/Investigating Officer
J. B. Barrios

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