

2016mm12585

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

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

1 Juvenile

OBTS Number				ARREST / NOTICE TO APPEAR Juvenile Referral Report				1. Arrest 3. Request For Warrant 2. N.T.A. 4. Request For Capias															
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 16138367</b>																			
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				If Weapon Seized Enter Type				Multiple Clearance Indicator 0 1															
Location of Arrest (including Name of Business) <b>11638 ELLISON WILSON RD ,19</b>				Location of Offense (including Name of Business) <b>11638 ELLISON WILSON RD ,19</b>				Location of Vehicle															
Date of Arrest <b>10/13/2016</b>		Time of Arrest <b>05:26</b>		Booking Date		Booking Time		Jail Date		Jail Time													
Name (Last, First, Middle) <b>ELLIS TODD STEPHEN</b>								Alias (Name, DOB, Soc. Sec. #, Etc.)															
Race W - White    I - American Indian B - Black    O - Oriental/Asian		Sex <b>W M</b>		Date of Birth <b>07/05/1967</b>		Height <b>6'1</b>		Weight <b>220</b>		Eye Color <b>GREEN</b>		Hair Color <b>BROWN</b>		Complexion <b>LIGHT</b>		Build <b>LARGE</b>							
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)								Marital Status <b>SINGLE</b>		Religion <b>UNKOWN</b>		Indication of Alcohol Influence Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk											
Local Address (Street, Apt. Number) <b>11638 ELLISON WILSON RD ,19</b>				City		State <b>FL</b>		Zip <b>33408</b>		Phone <b>561-260-3123</b>		Residence Type: 1. City    3. Florida 2. County    4. Out of State				2							
Permanent Address (Street, Apt. Number) <b>SAME AS ABOVE</b>				City		State		Zip		Phone		Address Source <b>VERBAL</b>											
Business Address (Street, Apt. Number)				City		State		Zip		Phone		Occupation <b>UNKNOWN</b>											
DL Number, State <b>E420-817-67-245-0</b>			Social Security Number			INS Number			Place of Birth <b>SMITHTOWN, NY</b>			Citizenship <b>US</b>											
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"/> Other <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"/> Other <input type="checkbox"/> 5. Juvenile									
<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				Court of First Deposition: <input type="checkbox"/> 1. Held/Processed within Dept. and Released <input type="checkbox"/> 2. TOT HRS/DYS <input type="checkbox"/> 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								Grade							
<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. Amphetamines		B. Barbiturates C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana		P. Paraphenale/ Equipment		U. Unknown Z. Other			
Charge Description <b>SIMPLE BATTERY</b>								Counts <b>1</b>		Domestic Violence <input type="checkbox"/> Y <input checked="" 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		Offense # <b>16138367</b>				Warrant/Capias Number				Bond									
Charge Description								Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" 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 checked="" 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 checked="" 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)								<b>SCANNED</b>															
Court Date and Time								OCT 14 2016 10:00 AM - 10:00 PM 10/14/2016															
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 <i>TKcaron 18654</i>				Name Verification (Printed by Arrestee)															
Name																							
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal				Resisted Arrest <input type="checkbox"/> Other				Name of Arresting Officer <b>D/S T. REARDON</b>				ID # <b>18654</b>				(PRINT)							
Intake Deputy				ID #		Pouch #		Transporting Officer		ID #		Agency						Page					
								<b>D/S J. BLACKBURN 7133</b>		<b>PBSO</b>													
Witness here if subject signed with an 'X'																1 of 1							

OBTS Number

## PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

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>16138367</b>		
Charge Type: Check as many as apply	<input checked="" 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 _____	Special Notes			
Defendant Name (Last, First, Middle) <b>ELLIS</b>	<b>TODD</b>	<b>STEPHEN</b>	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>07/05/1967</b>
Charge <b>SIMPLE BATTERY</b>	Charge				
Charge	Charge				
Victim Name (Last, First, Middle) <b>WHITNEY</b>	<b>TAMMY</b>	<b>LEE</b>	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>02/28/1979</b>
Local Address (Street, Apt. Number) <b>11638 ELLISON WILSON RD ,19</b>	City <b>NORTH PALM BEACH</b>	State <b>FL</b>	Zip <b>33408</b>	Phone <b>(561) 225-5667</b>	Address Source <b>VERBAL</b>
Business Address (Street, Apt. Number)	City	State	Zip	Phone	Occupation <b>SELF EMPLOYED</b>
The undersigned 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 type="checkbox"/> was observed by _____ who told _____ <input type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.			
On the <u>13</u> day of <u>OCTOBER</u> 20 <u>16</u> at <u>0448</u>		<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM			

I responded to a domestic dispute at 11638 Ellison Wilson Road, Unit 19, unincorporated North Palm Beach, Florida 33408. I was informed by PBSO Dispatch that the complainant had wine and water thrown on her. The complainant also stated to PBSO Dispatch that her boyfriend, Todd Ellis, was hitting his head on the wall and the table to make it appear that she had struck him.

Upon my arrival, I made contact with Tammy Whitney outside of the residence. She was crying and shaking. Her clothes also smelled very strongly of alcohol. She stated that her boyfriend, Todd Ellis, had picked her up from a friend's house at approximately 0330 after their previous argument earlier in the evening (Reference PBSO Case Number 16138340). They had picked up food and a few bottles of wine before returning home.

Once they had returned to their residence, she stated that she was sitting on the couch in the living room when they began to have another argument. During the argument, Todd threw part of a bottle of wine onto Tammy.

Tammy showed me a video recording on her cellphone. In the recording, I heard Tammy asking Todd to leave her alone multiple times. Todd stated that he wasn't going to leave her alone and that he didn't trust her. Tammy went into her bedroom and laid down where I could hear Todd continuing to aggravate the situation.

I spoke with Todd inside the residence. He stated that he picked Tammy up from her friend's and brought her back to their residence. He had laid down in his room and while in bed, Tammy threw a bottle of water on him unprovoked. Todd then stated he would not say what happen next. When Todd saw Tammy was giving a statement Todd said Tammy had swung at him and he ran into the wall. When asked to give a statement Todd refused to give a sworn statement.

Inside the residence, I noticed a considerable dent in the living room wall that had not been present when I responded to the residence earlier in the evening. Tammy informed me that Todd had tried to bash his head into the wall so that it would appear that she hit him.

Due to the above stated facts, and Tammy's sworn statement there is probable cause to charge Todd Ellis with simple domestic battery, per F.S.S. 784.03(1)(a)(1), as Todd Ellis intentionally threw liquids onto Tammy Whitney against her will.

The foregoing instrument was sworn to and affirmed before me this <u>13</u> day of <u>OCTOBER</u> 20 <u>2016</u> , by:  <u>D/S G. LYNCH 8568</u>	<u>D/S T. REARDON</u> <u>18654</u>  <u>Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)</u>  <u>Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)</u>
<u>Name of Arresting/Investigating Officer</u> <u>Reardon 18654</u>  <u>Signature of Arresting/Investigating Officer</u>	
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