

7th. Judicial Circuit 707
Charging Affidavit - FLAGLER

Arrest # _____

Bk # _____

Pg #1 of 3

ARREST <input checked="" type="checkbox"/> NOTICE TO APPEAR <input type="checkbox"/> AFFIDAVIT <input type="checkbox"/> C.C. <input type="checkbox"/>		ADULT <input checked="" type="checkbox"/> JUVENILE <input type="checkbox"/>		Court Case Number: 2015 MM 001132	
(ORI) FL: 0 1 8 0 0 0 0		Agency Name: Flagler County Sheriff's Office		Agency Case Number: 2015-00107996	
FCIC/NCIC Check? Yes <input type="checkbox"/> No <input type="checkbox"/>		OBTS# 1601044967		Date Arrested: 10/22/2015 Time of Arrest: 15:16	
ADDRESS OF ARREST: 5000, PALM, AVE, BUNNELL, Florida, 32110				Arrested By: HART LAUREN ID Number: 655	
DEFENDANT		Name (L.F.M.): WATTS, GAGE, RYAN		A.K.A.:	
DOB: 12/30/1995		Age: 19		Sex: Male Race: White	
Height: 5 7		Weight:		Hair:	
Scars, Marks, Tattoos:		Business & Occupation:		Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Probation: Yes <input type="checkbox"/> No <input type="checkbox"/>		Sexual Predator: Yes <input type="checkbox"/> No <input type="checkbox"/>		English: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Address-Mailing Permanent		(STREET, APT. NUMBER)		(CITY) (STATE) ZIPCODE RESIDENCE PHONE	
Address-Local		(STREET, APT. NUMBER)		(CITY) (STATE) ZIPCODE RESIDENCE PHONE	
Address-Other(Employer/School)		(STREET, APT. NUMBER)		(CITY) (STATE) ZIPCODE BUS SCHOOL PHONE	
CHARGES		DOMESTIC VIOLENCE? YES <input type="checkbox"/>		Attachments: Affidavit(s) <input type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/> DUI <input type="checkbox"/> Total Charges:	
#1	Charge: Battery Domestic Violence	FEL <input type="checkbox"/> MISD <input checked="" type="checkbox"/> ORD <input type="checkbox"/>		FS ORD: 784.03dv	
#2	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>		FS ORD:	
#3	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>		FS ORD:	
CO-DEFENDANT		Co-Def #1. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel <input type="checkbox"/> Misd. <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>		Co-Def #2. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel <input type="checkbox"/> Misd. <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>	
#1 NAME(L.F.M.):		Race:		Sex: DOB: Age:	
#2 NAME(L.F.M.):		Race:		Sex: DOB: Age:	
NARRATIVE The undersigned certifies and swears that there is a probable cause to believe the above names defendant, on the 22th day of October, 2015, at approximately 15:16 A.M. X P.M. at 5000 PALM AVE within Flagler County, violated the law and did then and there.					
On 10/22/2015 at approximately 2:47 PM I received a call to respond to 5000 Palm Avenue, Bunnell, Florida, 32110, in reference to a domestic violence.					
I arrived on scene and was met out at the road of the residence by Gage Watts. He stated that he got into a physical fight with his brother [REDACTED]. He stated that [REDACTED] asked him for a cigarette and he told him no and they began to get into a verbal argument over it. He stated that as they were arguing [REDACTED] walked away from him and Gage stated that he pursued Kobe into the bedroom of the residence. Gage stated that they continued to talk "smack" to each other and Gage hit [REDACTED] when [REDACTED] kicked him. He stated that they both began to wrestle and their other brother, Joseph Samuel's, broke them up and called the police.					
Supervisor Approved: fink Fink, Michael Charles 10/22/2015 16:16					
NOTICE TO APPEAR		MANDATORY APPEARANCE <input type="checkbox"/>		YOU NEED NOT APPEAR IN COURT BUT MUST COMPLY WITH INSTRUCTIONS ON THE REVERSE SIDE OF YOUR COPY <input type="checkbox"/>	
FINE AND COSTS AMOUNT:					
I AGREE TO APPEAR IN COURT HEREIN TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE INDICATED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED, OR PAY THE LISTED FINE, I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST WILL BE ISSUED.					
SIGNATURE OF DEFENDANT		DATE		RELATIONSHIP TO JUVENILE	
Sworn to and subscribed before me, the undersigned		I swear affirm the above statements are correct and true.		Rt Thumb	
This 22th day of Oct 2015		[Signature]		OFFICER'S COMPLAINT'S SIGNATURE	
Name:		NAME(PRINTED)		ID NUMBER	
Notary Public <input type="checkbox"/> Law Enforcement or Corrections Officer <input type="checkbox"/>		Inmate Number & facility:			
Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>					
Type of Identification:					
OFFICIAL USE ONLY					

707 - COURT COPY

Witness/Victim/Evidence Form 707-A

☒ Arrest
☐ Affidavit
☐ Notice to Appear

☐ Adult
☐ Juvenile

Court Case
Number:

Pg 2 of 3

Defendant Name: WATTS, GAGE, RYAN		Agency Case Number: 2015-00107996	
Name (L,F,M): [REDACTED]	Vic <input checked="" type="checkbox"/> Wit <input type="checkbox"/>	Race: White	Sex: M <input checked="" type="checkbox"/> F <input type="checkbox"/>
Address 5000 PALM AVE BUNNELL, Florida (# Street, City, State):		Age: 17	DOB: [REDACTED]/1997
Bus/School Address:		Zip: 32110-	Home Phone: (386)437-1812
Relative/Contact Name:		Statement: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Relative/Contact Address:		Bus Phone:	
Relative/Contact Address:		Phone:	
Name (L,F,M): SAMUELS, JOSEPH, DAKOTA	Vic <input type="checkbox"/> Wit <input checked="" type="checkbox"/>	Race: White	Sex: M <input checked="" type="checkbox"/> F <input type="checkbox"/>
Address 5000 PALM AVE BUNNELL, Florida (# Street, City, State):		Age: 22	DOB: [REDACTED] 1993
Bus/School Address:		Zip: 32110-	Home Phone: (386)437-1812
Relative/Contact Name:		Statement: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Relative/Contact Address:		Bus Phone:	
Relative/Contact Address:		Phone:	
Name (L,F,M):	Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:	Sex: M <input type="checkbox"/> F <input type="checkbox"/>
Address (# Street, City, State):		Age:	DOB:
Bus/School Address:		Zip:	Home Phone:
Relative/Contact Name:		Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Relative/Contact Address:		Bus Phone:	
Relative/Contact Address:		Phone:	
Name (L,F,M):	Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:	Sex: M <input type="checkbox"/> F <input type="checkbox"/>
Address (# Street, City, State):		Age:	DOB:
Bus/School Address:		Zip:	Home Phone:
Relative/Contact Name:		Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Relative/Contact Address:		Bus Phone:	
Relative/Contact Address:		Phone:	
Name (L,F,M):	Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:	Sex: M <input type="checkbox"/> F <input type="checkbox"/>
Address (# Street, City, State):		Age:	DOB:
Bus/School Address:		Zip:	Home Phone:
Relative/Contact Name:		Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Relative/Contact Address:		Bus Phone:	
Relative/Contact Address:		Phone:	
Name (L,F,M):	Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:	Sex: M <input type="checkbox"/> F <input type="checkbox"/>
Address (# Street, City, State):		Age:	DOB:
Bus/School Address:		Zip:	Home Phone:
Relative/Contact Name:		Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Relative/Contact Address:		Bus Phone:	
Relative/Contact Address:		Phone:	

EVIDENCE COLLECTED

Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Owner(Name)	(Address)	(Phone)	Value
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Owner(Name)	(Address)	(Phone)	Value
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount

I certify that the foregoing is a complete list of witnesses/victims & evidence known to me.

[Signature]
Investigating Officer

655
ID Number

FLSO
Agency

707-A - COURT COPY

Narrative 707-B Supplement

☒ Arrest
☐ Affidavit
☐ Notice to Appear

☐ Adult
☐ Juvenile

Court Case
Number:

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Defendant Name: WATTS, GAGE, RYAN	Agency Case Number: 2015-00107996
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CHARGES		DOMESTIC VIOLENCE? YES <input type="checkbox"/>	Attachments: Affidavit(s) <input type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/>		Total Charges:
#	Charge:		FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No: Bond:
#	Charge:		FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No: Bond:
#	Charge:		FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No: Bond:

Gage had scratches on his neck and photographs were taken. Gage wrote a written statement.

I spoke with [REDACTED] who stated that he asked Gage for a cigarette and Gage refused to give him a cigarette. He stated that Gage has been drinking and becomes an "asshole" when he drinks. [REDACTED] stated that he began to get into a verbal argument with Gage over him not giving him a cigarette. [REDACTED] stated that he walked away from Gage to end the argument and Gage followed him into the bedroom of the residence screaming at him. [REDACTED] stated that Gage hit him and then they both began to wrestle around in the bedroom. He stated that Joseph broke them up and he called the police. [REDACTED] had what appeared to be the beginning of a black eye. Deputy Jurec took photographs of [REDACTED]. [REDACTED] wrote a written statement.

Joseph stated that he heard [REDACTED] and Gage in the bedroom fighting and he broke them up. Joseph stated that he did not want to be involved and he refused to write a written statement.

Gage Watts was placed into custody for domestic violence and transported to Flagler County Inmate Facility without incident. All photographs will be uploaded and statements submitted to be added to the report.

Nothing further.

L.Hart/655

Sworn to and subscribed before me, the undersigned this <u>22nd</u> day of <u>October</u> , 2015.	I swear/affirm the above statements are correct and true.	Right thumb
Name: <u>L.Hart</u>	<u>Lauren Hart</u> OFFICER'S/COMPLAINANT'S SIGNATURE	
Notary Public <input type="checkbox"/> Law Enforcement Officer <input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>	NAME(PRINTED) <u>Lauren Hart</u>	ID NUMBER <u>655</u>
Type of Identification:		

707-B - COURT COPY