

7th. Judicial Circuit 707  
Charging Affidavit - FLAGLER

Arrest # \_\_\_\_\_ Bk # \_\_\_\_\_

Pg #1 of 3

ARREST <input type="checkbox"/> NOTICE TO APPEAR <input type="checkbox"/> AFFIDAVIT <input checked="" type="checkbox"/> C.C. <input type="checkbox"/>		ADULT <input checked="" type="checkbox"/> JUVENILE <input type="checkbox"/>		Court Case Number: 2021 CF 000421	
(ORD) FL: 0   1   8   0   0   0   0		Agency Name: Flagler County Sheriff's Office		Agency Case Number: 2021-00036317	
FCIC/NCIC Check? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		OBTS#		Date Arrested: 04/20/2021	
ADDRESS OF ARREST:		Arrested By: Landi John		Time of Arrest: 08:35	
DEFENDANT Name (L,F,M): JOHNSON, REBA, LYNN		A.K.A.:		ID Number: 167	
DOB: 02/25/2003		Age: 18		Sex: Female	
DOB: 02/25/2003		Age: 18		Race: WHITE	
Height: 5 5		Weight:		Hair: BROWN	
Eyes: BROWN		POB (City, St, Country):		Statement: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Scars, Marks, Tattoos:		Business & Occupation: MATANZAS HIGH SCHOOL Student		Citizenship: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Probation: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Sexual Predator: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		English: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Deaf/Mute: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Address-Mailing/Permanent (STREET, APT. NUMBER) (STATE) ZIPCODE RESIDENCE PHONE			
Address-Local (STREET, APT. NUMBER) (CITY) (STATE) ZIPCODE RESIDENCE PHONE		10 RIDDLE DR PALM COAST Florida 32137- (356)225-4940			
Address-Other(Employer/School) (STREET, APT. NUMBER) (CITY) (STATE) ZIPCODE BUS/SCHOOL PHONE		3535 PIRATE NATION WAY PALM COAST Florida 32137- (386)447-1575			
CHARGES DOMESTIC VIOLENCE <input type="checkbox"/> FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/> Documents: Affidavit(s) <input type="checkbox"/> Statement(s) <input checked="" type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/> DUI <input type="checkbox"/>		Total Charges: 1			
#1 Charge: BATTERY - ON SCHOOL PERSONNEL		FEL <input checked="" type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/> FS/ORD: 784.081.2.C		Citation No.: Bond:	
#2 Charge:		FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/> FS/ORD:		Citation No.: Bond:	
#3 Charge:		FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/> FS/ORD:		Citation No.: Bond:	
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 20th day of April, 2021, at approximately 08:35 X A.M. P.M. at 3535 Pirate Nation Way within Flagler County, violated the law and did then and there.			
On April 20, 2021 while working as the School Resource Deputy at Matanzas High School I was advised by Dean of Students T. Wooleyhan that we had a delayed physical disturbance in a classroom and a teacher was struck by a student. I made contact with [REDACTED] and asked her what happened. [REDACTED] stated that Reba Johnson was upset at her online teacher and she began cursing. [REDACTED] stated that Reba began threatening her telling her that she will "punch her in the fucking face, pull your hair and beat your fucking ass". [REDACTED] further stated that she turned around and Reba struck her with a closed fist across her back. [REDACTED] stated that she stepped away and Reba continued to make threats to her. [REDACTED] stated that she had several					
Supervisor Approved: Dailey, Joseph 04/20/2021					
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"/>	
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.		FINE, AND COSTS AMOUNT:			
SIGNATURE OF DEFENDANT		DATE		RELATIONSHIP TO JUVENILE	
Sworn to and subscribed before me, the undersigned This 20 day of April, 2021		I swear/affirm the above statements are correct and true.		Rt Thumb	
Name: [Signature]		OFFICER'S/COMPLAINANT'S SIGNATURE			
Notary Public <input type="checkbox"/> Law Enforcement or Corrections Officer <input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>		Type of Identification:		NAME (PRINTED) ID NUMBER	
OFFICIAL USE ONLY		Inmate Number & facility:			

Unofficial Document

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: <b>JOHNSON, REBA, LYNN</b>		Agency Case Number: <b>2021-00036317</b>	
Name (L,F,M): <b>Almonte, Joel,</b>	Vic <input checked="" type="checkbox"/> Wit <input type="checkbox"/>	Race: <b>HISPANIC</b>	Sex: <b>M</b> <input checked="" type="checkbox"/> <b>F</b> <input type="checkbox"/>
Address <b>3535 Pirate Nation Way Palm Coast, Florida</b> (# Street, City, State):		Zip: <b>32137-</b>	Age: <b>26</b> DOB: <b>11/08/1994</b> SSN: <b>--</b>
Bus/School Address: <b>3535 PIRATE NATION WAY PALM COAST, Florida</b>		Home Phone: <b>(386)447-1575</b>	Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>
Relative/Contact Name:		Relative/Contact Address:	Bus. Phone: <b>(386)447-1575</b>
Name (L,F,M): [REDACTED]		Vic <input checked="" type="checkbox"/> Wit <input type="checkbox"/>	Race: [REDACTED]    Sex: [REDACTED]    Age: [REDACTED]    DOB: [REDACTED]    SSN: [REDACTED]
Address (#, Street, City, State): [REDACTED]		Zip: <b>32137-</b>	Statement: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Bus/School Address: <b>3535 PIRATE NATION WAY PALM COAST, Florida</b>		Home Phone: <b>(386)447-1575</b>	Bus. Phone: <b>(386)447-1575</b>
Relative/Contact Name:		Relative/Contact Address:	Phone:
Name (L,F,M): <b>DAVIS, PHOENIX,</b>		Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race: [REDACTED]    Sex: <b>M</b> <input type="checkbox"/> <b>F</b> <input checked="" type="checkbox"/>
Address <b>3535 PIRATE NATION WAY PALM COAST, Florida</b> (#, Street, City, State):		Zip: <b>32137-</b>	Age: <b>31</b> DOB: <b>09/27/1989</b> SSN: <b>--</b>
Bus/School Address: <b>3535 PIRATE NATION WAY PALM COAST, Florida</b>		Home Phone: <b>(386)447-1575</b>	Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>
Relative/Contact Name:		Relative/Contact Address:	Bus. Phone: <b>(386)447-1575</b>
Name (L,F,M): [REDACTED]		Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race: [REDACTED]    Sex: <b>M</b> <input type="checkbox"/> <b>F</b> <input type="checkbox"/>
Address (#, Street, City, State): [REDACTED]		Zip: [REDACTED]	Age: [REDACTED]    DOB: [REDACTED]    SSN: [REDACTED]
Bus/School Address: [REDACTED]		Home Phone: [REDACTED]	Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>
Relative/Contact Name:		Relative/Contact Address:	Phone: [REDACTED]
Name (L,F,M): [REDACTED]		Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race: [REDACTED]    Sex: <b>M</b> <input type="checkbox"/> <b>F</b> <input type="checkbox"/>
Address (#, Street, City, State): [REDACTED]		Zip: [REDACTED]	Age: [REDACTED]    DOB: [REDACTED]    SSN: [REDACTED]
Bus/School Address: [REDACTED]		Home Phone: [REDACTED]	Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>
Relative/Contact Name:		Relative/Contact Address:	Phone: [REDACTED]

Unofficial Document

### 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
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.

Investigating Officer \_\_\_\_\_ ID Number \_\_\_\_\_ 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: <b>JOHNSON, REBA, LYNN</b>	Agency Case Number: <b>2021-00036317</b>
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CHARGES	DOMESTIC VIOLENCE?	YES	Attachments: Affidavit(s)	Statement(s)	NTA Schedule	Report	Traffic Infraction(s)	Total Charges: 1
#	Charge:		FEL	MISD	ORD	FS/ORD:	Citation No:	Bond:
#	Charge:		FEL	MISD	ORD	FS/ORD:	Citation No:	Bond:
#	Charge:		FEL	MISD	ORD	FS/ORD:	Citation No:	Bond:

Para's in the room when this incident happened. [REDACTED] requested to sign Charges against Reba for battery and sign a willingness to prosecute form along with the Victim's Right to Confidentially form.

I made contact with Phoenix Davis, Joel Almonte. Both Para's stated that they witnessed Reba strike [REDACTED] while she was in the classroom. See written statements that were provided by the witnesses.

Commander K. Burroughs arrived on scene and requested she take [REDACTED] into my office to look at her injuries. Commander Burroughs took a photo [REDACTED] back and advised me at this time she did not have any visible injury. I placed the photo that Commander took into AEGIS.

Unofficial Document

[REDACTED] signed the Charging Affidavit and I submitted it to the State's Attorney's Office for review.

No further information.

Sworn to and subscribed before me, the undersigned this <u>20</u> day of <u>April</u> , 2021	I swear/affirm the above statements are correct and true.	Right thumb
Name: <u>[Signature]</u>	<u>[Signature]</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"/>	<u>XANNA BAKER</u> NAME(PRINTED)	ID NUMBER
Type of Identification:		

707-B - COURT COPY