

**7th. Judicial Circuit 707
Charging Affidavit - FLAGLER**

Arrest # _____

Bk # 15-1279

Pg #1 of 4

<input checked="" type="checkbox"/> ARREST <input type="checkbox"/> NOTICE TO APPEAR <input type="checkbox"/> AFFIDAVIT <input type="checkbox"/> C.C. <input type="checkbox"/>		<input type="checkbox"/> ADULT <input checked="" type="checkbox"/> JUVENILE <input type="checkbox"/>		Total Case Number:	
(ORI) FL: 0 1 8 0 0 0 0		Agency Name: Flagler County Sheriff's Office		Agency Case Number: 2015-00059876	
FCIC/NCIC Check? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		OBTS# <u>1806044018</u>		Date Arrested: 6/11/2015 Time of Arrest: 19:30	
ADDRESS OF ARREST: 3058, CR 305, RD, BUNNELL, Florida, 32110				Arrested By: Gomez Kevin ID Number: 572	
DEFENDANT		Name (L.F.M.): Weeks, Duane, W		A.K.A.:	
DOB: 1980 Age: 34		Driver's Lic ID No.: W200-179-80-366-0		Sex: Male Race: White	
Height: 6 2 Weight: 220		Hair: Brown Eyes: Brown		State: Florida Year Expires: _____	
Scars, Marks, Tattoos:		Business & Occupation:		Statement: Yes <input type="checkbox"/> No <input checked="" 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"/>	
Address -Mailing Permanent (STREET, APT. NUMBER)		(CITY)		(STATE) ZIP CODE RESIDENCE PHONE	
Address-Local (STREET, APT. NUMBER)		(CITY)		(STATE) ZIP CODE RESIDENCE PHONE	
6247 CR 305 RD		Bunnell		Florida 32110 (386)437-3222	
Address-Other(Employer School) (STREET, APT. NUMBER)		(CITY)		(STATE) ZIP CODE BUS SCHOOL PHONE	
CHARGES		DOMESTIC VIOLENCE? YES <input checked="" type="checkbox"/>		Attachments: Affidavits <input checked="" type="checkbox"/> Statements <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/> DCJ <input type="checkbox"/>	
#1 Charge: Criminal Mischief		FEL <input type="checkbox"/> MISD <input checked="" type="checkbox"/> ORD <input type="checkbox"/>		PS ORD: 806.13 Citation No.: NONE Bond: 500	
#2 Charge: Agg Assault With Deadly Weapon		FEL <input checked="" type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>		PS ORD: 784.021.1A Citation No.: NONE Bond: NONE	
#3 Charge: Felony Battery With Prior Conviction		FEL <input checked="" type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>		PS ORD: 784.03.2 Citation No.: NONE Bond: NONE	
CO-DEFENDANT		Co-Def #1 Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel <input type="checkbox"/> Misd <input type="checkbox"/> Tra <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"/> Tra <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 11th day of <u>June</u> , 2015, at approximately <u>19:30</u> A.M. <u>X</u> P.M. at <u>3258 CR 305 RD</u> within <u>Franklin Flagler</u> County, violated the law and did then and there.					
On 6/11/2015 at approximately 6:00pm I responded to, 3258 CR 305, Bunnell (Hollar and Green Farms) in reference to a domestic disturbance that resulted in a vehicle crash.					
Prior to my arrival Dep. Prevatt made contact at, 4803 CR 305 with Nikki Johnson (victim) and her crashed vehicle, a white Hyundai bearing FL tag 361 YCS. Nikki advised that she and her live in boyfriend of approximately one month Duane Weeks Jr. (defendant) were involved in a physical altercation. Nikki then advised that upon leaving the Bimini bar the two argued inside the vehicle					
Supervisor Approved: Woodward, Bernard					
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		SIGNATURE OF JUVENILE PARENT OR GUARDIAN	
Sworn to and subscribed before me, the undersigned This <u>11th</u> day of <u>June</u> , 20 <u>15</u>		I swear affirm the above statements are correct and true.		Juve Disp. CITATION No.	
Name: <i>[Signature]</i>		OFFICER'S COMPLAINTANT'S SIGNATURE		Name: <i>[Signature]</i>	
Notary Public <input type="checkbox"/> Law Enforcement or Corrections Officer <input type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/> Type of Identification:		NAME (PRINTED) <u>Gomez</u>		ID NUMBER <u>572</u>	
OFFICIAL USE ONLY		Route Number & Facility:			

707 - COURT COPY

Witness/Victim/Evidence Form 707-A

Arrest
 Affidavit
 Notice to Appear

 Adult
 Juvenile

Court Case Number

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Defendant Name: Weeks, Duane, W		Agency Case Number: 2015-00059876	
Name (L,F,M): JOHNSON, NIKKI	Vic <input checked="" type="checkbox"/> Wit <input type="checkbox"/>	Race: White	Sex: M <input type="checkbox"/> F <input checked="" type="checkbox"/>
Age: 25	DOB: 1989	SSN: ---	
Address: 176 MAIN ST BUNNELL, Florida		Zip: 32110-	Home Phone: 9289
Bus/School Address:		Zip:	Statement: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Relative/Contact Name:		Relative/Contact Address:	Bus. Phone:
Name (L,F,M): TAYLOR, PAULA		Vic <input type="checkbox"/> Wit <input checked="" type="checkbox"/>	Race: White
Age: 33	DOB: 1981	SSN: ---	
Address: 75 CR 305 ST BUNNELL, Florida		Zip: 32110-	Home Phone: 8707
Bus/School Address:		Zip:	Statement: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Relative/Contact Name:		Relative/Contact Address:	Bus. Phone:
Name (L,F,M): WEEKS, DUANE, WILLIAM		Vic <input type="checkbox"/> Wit <input checked="" type="checkbox"/>	Race: White
Age: 57	DOB: 1958	SSN: ---	
Address: 2356 CR 305 ST BUNNELL, Florida		Zip: 32110	Home Phone: 3388
Bus/School Address:		Zip:	Statement: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Relative/Contact Name:		Relative/Contact Address:	Bus. Phone:
Name (L,F,M):		Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:
Age:	DOB:	SSN:	
Address (#, Street, City, State):		Zip:	Home Phone:
Bus/School Address:		Zip:	Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>
Relative/Contact Name:		Relative/Contact Address:	Bus. Phone:
Name (L,F,M):		Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:
Age:	DOB:	SSN:	
Address (#, Street, City, State):		Zip:	Home Phone:
Bus/School Address:		Zip:	Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>
Relative/Contact Name:		Relative/Contact Address:	Bus. Phone:
Name (L,F,M):		Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:
Age:	DOB:	SSN:	
Address (#, Street, City, State):		Zip:	Home Phone:
Bus/School Address:		Zip:	Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>
Relative/Contact Name:		Relative/Contact Address:	Bus. 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
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

572
Cooper FCSD

Investigating Officer

ID Number

Agency

707-A - COURT COPY

Narrative 707-B Supplement

Arrest
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 Adult
 Juvenile

Court Case Number:

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Defendant Name: Weeks, Duane, W		Agency Case Number: 2015-00059876	
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:

outside the country store located at 1480 CR 305 at which time Duane physically grabbed her by her neck with one hand and demanded for her to go buy cigarettes. Duane then advised her to just drive him to the farm, Hollar and Green. Once inside the farm building Nikki advised Duane was grabbing her against her will and smashing her head into the wall several times. Duane Sr. (witness) was also present at the time and advised Duane Jr. to give her back her keys so she could leave.

Upon leaving the farm Nikki advised that Duane Jr. acquired a farm vehicle a silver Mitsubishi Lancer bearing North Carolina tag AAF2294 and started to chase her recklessly down CR 305. Nikki advised that she was in fear that he was going to smash into the back of her so to avoid collision she attempted to pull into a the driveway located at 4803 CR 305 and crashed into a parked trailer. The vehicle had major front end damage and Nikki sustained a minor cut to her left pinky finger. Duane Sr. was also witnessed driving behind Duane Jr. in a white and silver station wagon bearing North Carolina tag YZS5713 in attempts to stop his son.

Paula Taylor (witness) observed the reckless driving around the curve and observed the vehicle crash. Paula then observed the other two vehicles leave the scene.

Nikki advised that at some point in the altercation Duane Jr. smashed her cell phone valued at \$150.00

It should be noted that Duane Jr. has a history of violence in Flagler County. Duane was found guilty and convicted on 10/30/2001 of Felony Battery and was sentenced to two years in state penitentiary.

Duane Jr. was located next to Hollar and Green in the front yard of 3058 CR 305 and was taken into custody without incident and transported to FCIF.

Photographs were obtained of the victim as well as the road and the grass where the reckless driving occurred on CR 305. Nikki and Paula both provide voluntary witness statements and they will be attached.

Taser Axon MVR was utilized on scene by myself and Deputy Prevatt as well and will be uploaded

Sworn in and subscribed before me, the undersigned this <u>10th</u> day of <u>April</u> , <u>2015</u> Name: <u>[Signature]</u>	I swear/affirm the above statements are correct and true. <u>[Signature]</u> GOMEZ SR OFFICER'S/COMPLAINANT'S SIGNATURE	Right thumb
Notary Public <input type="checkbox"/> Law Enforcement Officer <input type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>	NAME (PRINTED) <u>GOMEZ</u>	ID NUMBER <u>572</u>
Type of Identification:		

707-B - COURT COPY

Narrative 707-B Supplement

Arrest
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 Adult
 Juvenile

Court Case Number:

Defendant Name: Weeks, Duane, W		Agency Case Number: 2015-00059876	
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:

as evidence.

Sworn to and subscribed before me, the undersigned this <u>1/17</u> day of <u>JANUARY</u> , 20 <u>15</u> . Name: <u>[Signature]</u>	I swear/affirm the above statements are correct and true. <u>[Signature]</u> OFFICER'S/COMPLAINANT'S SIGNATURE	Right thumb
Notary Public <input type="checkbox"/> Law Enforcement Officer <input type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>	NAME (PRINTED) <u>Cornel</u> ID NUMBER <u>572</u>	
Type of Identification:		

707-B - COURT COPY