ARREST / NOTICE TO APPEAR OBTS Number 1. Arrest 2. N.T.A. 3. Request for Warrant Juvenile Referral Report 4. Request for Capias Agency ORI Number Agency Name Agency Report Number (N.T.A.'s only) 06- 17-027453 PALM BEACH COUNTY SHERIFF'S OFFICE FLO 500000 ChargeType: Check as many as apply. Weapon Seized / Type
2 1. Yes
2. No 5. Ordinance Multiple 1. Felony 3. Misdemeanor 6. Other Clearance 02 2. Traffic Felony 4. Traffic Misdemeanor Location of Arrest (Including Name of Business) Location of Offense (Business Name, Address) 7600 Camino Real, Boca Raton, Fl, 33433 Date of Arrest Time of Arrest **Booking Date Booking Time** Jail Date Jail Time Location of Vehicle Name (Last, First, Middle) Alias (Name, DOB, Soc. Sec. #, Etc.) Woods, Kalib, D Race W - White I - American Indian B - Black 0- Oriental/Asian Date of Birth Sex Height Weight Eve Color Hair Color Complexion Build В 9/22/1994 M 6'4 190 Brown Black dark med Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description) Marital Status Indication of: Alcohol Influence Unk • Religion Ä Single unk Drug Influence Local Address (Street, Apt. Number) (State (Zip) Phone Residence Type 1. City 2. County Florida
 Out of State 135 NW 20th Street, Boca Raton, Fl, 33431 1904 278-2848 12 Permanent Address (Street, Apt. Number) (State) (Zip) Phon verbal Business Address (Name, Street) (State) Phone (City) (Zip) Occupation Student D/I Number State Soc. Sec. Number INS Number Citizenship Place of Birth (City, State) W-320-504-94-342-0 US Co-Defendant Name (Last, First, Middle) Date of Birth Race ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile 1. Arrested 2. At Large 3. Felony
4. Misdemeanor
5. Juvenile Co-Defendant Name (Last, First, Middle) ☐ 1. Arrested 2. At Large Legal Custodian
Other: Address (Street, Apt. Number) (State) (City) (Zip) Notified by: (Name) Juvenile Disposition
1. Handled/ processed within Dept. and Released. Date Time 2. TOT HRS / DYS 3. Incarcerated Released To: (Name) Date Time The above address provided by ☐defendant and / or ☐defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. ☐ Yes, by: (Name) ☐ No: (Reason) School Attended Grade Property Crime? Description of Property Value of Property Drug Activity N. N/A P. Possess P. Paraphernalia/ Equipment S. Synthetics Drug Type N. N/A A. Amphetamine R. Smuggle D. Deliver E. Use H. Hallucinogen M. Marijuana O. Opium/Deriy. U. Unknow S. Sell B. Buy T. Traffi K. Dispense Distribute Produce/ Cultivate C. Cocaine E. Heroin 7 Other Charge Description Statute Violation Number Violation of ORD # Counts Violence ☐Y • N Felony Battery (causes great bodily hrm 784.041(1) Drug Activity Drug Type Amount / Unit Offense # Warrant I Capias Number Ν 17-027453 Charge Description Domestic Statute Violation Number Counts Violation of ORD # Violence Simple Battery 784.03(1)(a)(1) Drug Activity Drug Type Amount / Unit Offense # Warrant / Capias Number 下人百 Domestic Violence Charge Description Counts Statute Violation Number Violation of ORD # Drug Activity Drug Type Amount I Uni Offense # Warrant / Capias Number Domestic Violence Charge Description Counts Statute Violation Number Violation of ORD # Drug Activity Drug Type Amount / Unit Offense # Warrant / Capias Number Bond Location (Court, Room Number, Address) Court Date and Time Day Time AM Year A AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I 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) 907) Name Name of Arresting Officer
DS Ingram Resisted Arrest (PRINT) Dangerous 1.80#h 9581 Suicidal Other: DS Ingram PAGE Intake Deputy I.D. # Pouch # Transporting Officer ID# Agency Witness here if subject signed with an -X of 1 DISTRIBUTION: WHITE - COURT COPY

| П | OBTS Number | | PROBABLE CAUSE AFFIDAVIT | | | 1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias 3 | | | | | |
|---|---|-----------------------------|--------------------------|--|------------------------------------|--|-----------|--|-----------------------|---|---------------|
| DMIN | Agency ORI Number FLO 5 0 0 0 0 0 | ACH COUNTY SHERIFF'S OFFICE | | | Agency Report Number 06- 17-027453 | | | | | | |
| ¥ | ChargeType: X 1. Felony | | | | | | | | | | |
| DEF | Name (Last, First, Middle) Name (Last, First, Middle) Race Sex Date of Birth M 9/22/1994 | | | | | | | | | 1 | |
| | Charge Description Charge Description | | | | | | | 784.03(1)(a)(1) | | | |
| Charge Description Felony Battery (causes great bodily hrm 784.041(1) Charge Description Charge Description Charge Description Charge Description Charge Description Charge Description | | | | | | | | | | | |
| ٥ | Victim's Name (Last, First, Middle) | | | | | | | | 1 | | |
| ICTIM | Reese, Stephan, D Local Address (Street, Apt. Number) (City) (State) (zip) Phone | | | | | | | В | Address Source Verbal | | |
| ΛIC | 815 Indian Street, Boca Raton, Fl, 33431 Business Address (Name, Street) (City) (State) (z | | | | | Phone Occupation | | | | | |
| Н | The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant co | | | | | | committee | Student ommitted the following violation of law. | | | |
| | The Person taken into custody committed the below acts in my presence. was observed bywho told | | | | | | | | | | |
| | confessed to that he/she saw the arrested person commit the below acts. admitting to the below facts. | | | | | | | | | | |
| | On the 31 day of January 20 17 at 0800 🗵 A. M. 🗆 P.M. (Specifically include facts constituting cause for arrest.) | | | | | | | | | | |
| | On 1/16/17 at approximately 1730hrs I arrived at 17901 State Rd 7(District 7 substation), Boca Raton, Fl,33498 in reference to a delayed battery. | | | | | | | | | | |
| | Upon arrival I made contact with Stephan Reese who wrote the following in sworn written statement. "On January 13th, at around 2:00 a.m I | | | | | | | | | | |
| | was at a party a Camino Real (The Venue). My friend Adrian Muckle was approached by another student from our school, Kalib Woods (African American male around 6'8)." Stephan said that Kalib walked towards Adrian and attempted to punch him but Stephan was able to | | | | | | | | | | |
| | push Adrian out of the way avoiding the punch. Kalib swung at Stephan hitting him in the jaw with a closed fist knocking him to the ground. At that point Kalib and several unknown subjects began punching and kicking Stephan and Adrian while they were on the ground. Stephan added | | | | | | | | | | |
| | that Kalib and the other unknown male subjects stomped on his head and stomach while on the ground. Stephan said that Venue security broke up the fight and Adrian drove him to West Boca Medical Center for treatment. Stephan advised that Kalib was upset with Adrian over a foul in a | | | | | | | | | | |
| | basketball game the occurred over a year ago. Stephan will undergo surgery for his broken jaw suffered in the fight in the next few weeks. | | | | | | | | | | |
| | Stephan said that Kalib is a fellow student, football player at FAU and he could identify him. | | | | | | | | | | |
| | On 1/20/17 at approximately 1500hrs Adrian Muckle arrived at 17901 U.S Highway 441 (District 7 substation), Boca Raton, fl, 33498. Adrian completed a sworn written statement and wrote the following. " Early friday morning January 13 between the times of 2 and 3, my friend | | | | | | | | | | |
| LN∃ | Stephan Reese and I were assaulted at an event by several other individuals there. 1 of the individuals identified was Khaleb Woods, a football player at FAU. Stephan and I were together at the event minding our own business when Khaleb approached me with no t-shirt and said | | | | | | | | | | |
| STATEME | remember all that stuff you were talking. I turned and got Stephan's attention and when I turned around Stephan took a punch that was intended | | | | | | | | | | |
| E STA | for myself and I was hit from behind and stomped on by Khaleb as well as others that were involved. When I was able to get up they all began to run out of the building. Later that day, after visiting the hospital for Stephan's injuries I went home and discovered I had internal bleeding when I | | | | | | | | | | |
| AUSE | noticed the color my urine was real dark and black. I was taken to the hospital where I was hospitalized for 5 days(Jan 13th-Jan18th). I determined Khaleb Woods initiated the whole assault because in the past I have received several threats from him in person multiple times and | | | | | | | | | | |
| PROBABLE C | over social media (Twitter) where he basically states at the next event he seen me he was going to assault me. I want to prosecute Khaleb Woods for the assault." | | | | | | | | | | |
| OBA | | | | | | | | | | | |
| PR | On January 22, 2017 at around approximately 1505hrs I met with Stephan and his mother Lucienne Reese at 17901 U.S. Highway 441 (District 7 substation), Boca Raton, Fl, 33428. Lucienne advised that Stephan underwent surgery on January 20th, 2017 to reconstruct his broken jaw caused | | | | | | | | | | en jaw caused |
| | by the impact of Kalib striking him in the face. Stephan signed an authorization for medical release form and it was submitted into evidence. Stephan had difficulty speaking due to his jaw being wired shut. Stephan completed a sworn written statement and wrote the following. " Due to | | | | | | | | | | |
| Ì | the assault by Calib Woods on Friday, the 13th of January at Venue (7600 W Camino Real) I received a broken jaw. That afternoon I was taken to West boca Medical by a friend, Adrian Muckle, and was told that I would need surgery for my jaw. On friday, January 20th, I had to undergo | | | | | | | | | | |
| | surgery at the Boca Raton, Oral Facial and Implant surgery LLC to repair my jaw. The surgery required wiring throughout my mouth and for my teeth to be locked shut, limiting my ability to talk." Stephan added that he will be unable to eat solid foods for several weeks. | | | | | | | | | | |
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| | Based on my investigation, Stephan Reese and Adrian Muckle's statements I find probable cause exists for the arrest of Kalib Woods for felony battery and simple battery. | | | | | | | | | | |
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| | STATE OF FLORIDA COUNTY OF PALM BEACH DS INGRAM | | | | | | | | | | |
| | COUNTY OF PALM BEACH DS Ingram | | | | | | | | | | |
| ΓΙVΕ | (Signature of Arresting/Investigative Officer) The foregoing instrument was sworn to or affirmed and subscribed before me this 31 day of 20 Ingram by Ingram | | | | | | | | | | |
| ADMINISTRATIVE | The foregoing instrument was sworn to or affirmed and subscribed before me this 31 day of January [Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced known | | | | | | | | | | |
| MINI | D/s/ | 796 # 80 | | | 1300 or identificati | on produc | | | | | PAGE |
| ¥ | Notary Public, Clerk of Court, Officer (F | .S.S. 117,10) | | | | | | | | | 1 OF 1 |
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