

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

Arrest # _____ Bk # _____ Pg # 1 of 4

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: 2018 301317 MMDB	
(ORI) FL: <u>FL0640000</u>	Agency Name: <u>VOLUSIA COUNTY SHERIFF'S OFFICE</u>		Agency Case Number: <u>180002698</u>
FCIC/NCIC Check? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	OBTS # _____	U.C.R. _____	Date Arrested: <u>02-03-2018</u> Time of Arrest: <u>0006</u>
ADDRESS OF ARREST (Street, City, State, Zip): <u>4024 CALUSA LN. ORMOND BEACH FL</u>		Arrested By: <u>Bernard, Jaydel</u>	ID Number: <u>8833</u>
DEFENDANT	NAME (Last) <u>PREIS</u> (First) <u>DAWN</u> (Middle) <u>ERIN</u>	A.K.A.: _____	Sex: <u>F</u> Race: <u>W</u>
DOB: <u>09-20-1967</u>	Age: <u>50</u> Driver's Lic./ ID No.: _____	State: <u>FL</u> Year Expires: <u>2018</u>	S.S.# - _____
Height: <u>5' 05</u>	Weight: <u>130</u> Hair: <u>BLN</u> Eyes: <u>HAZ</u>	P.O.B. (City, State, Country): <u>FL</u>	Statement: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Scars, Marks, Tattoos: _____	Business & Occupation: _____	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) <u>4024 CALUSA LANE</u>		(CITY) <u>ORMOND BEACH</u> (STATE) <u>FL</u>	ZIP CODE <u>32174</u> RESIDENCE PHONE <u>(386) 852-2475</u>
Address - Local (STREET, APT. NUMBER) _____		(CITY) _____ (STATE) _____	ZIP CODE _____ RESIDENCE PHONE _____
Address - Other (Employer/School) (STREET, APT. NUMBER) _____		(CITY) _____ (STATE) _____	ZIP CODE _____ BUS/SCHOOL PHONE _____

CHARGES	DOMESTIC VIOLENCE? Yes <input checked="" 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: <u>1</u>
#1 Charge: <u>Battery Touch/Strike</u>	FEL <input type="checkbox"/> MISD <input checked="" type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: <u>784.03(1)(A)1</u>	Citation No.: _____ Bond: <u>NO BOND</u>
#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 (Last) _____ (First) _____ (Middle) _____	Race: _____ Sex: _____ DOB: _____	Age: _____
#2 NAME (Last) _____ (First) _____ (Middle) _____	Race: _____ Sex: _____ DOB: _____	Age: _____

NARRATIVE The undersigned certifies and swears that there is probable cause to believe the above-named defendant, on the 03 day of February, 2018, at approximately 1206 a.m. p.m. at 4024 CALUSA LANE ORMOND BEACH within Volusia County, violated the law and did then and there:

1 By touching or striking the victim against his will without causing injury. The victim/defendant have been married for 22 years and living as a family.
 2
 3 On 02/02/2018 at approximately 2317 hours, Deputy Bernard was dispatched and responded to 4024 Calusa Lane, Ormond Beach, in reference to
 4 the report of a disturbance. Upon arrival, contact was made with Richard J. Preis (V1) who stated the following information;
 5
 6 Preis (V1) advised on 02/02/2018 at approximately 2300 hours, he was driving home after picking up his grandson, Dylan R. Preis (W1). Preis (V1)
 7 stated as soon as they got home, he observed his golf bag and pressure washer by the curb and his work clothes and uniforms were on the ground in
 8 a pile next to his truck. Preis (V1) further stated, he was met at the door by his wife of 22 years, Dawn E. Preis (D1), who accused him of cheating
 9 "like she always does". Preis (V1) stated, he tried to ignore her and walk by her, but she continued to be aggressive and was pushing him. Preis (V1)
 10 stated when he walked into the bathroom, she grabbed him by the arm, and brushed him with her forearm in his forehead. He then went into the
 11 garage and call 911. Preis (V1) at no time during the argument did he become physical with Preis (D1). Preis (V1) completed a written statement
 12 detailing the incident, which is attached to the report.
 13
 14 Deputies then contacted Dylan R. Preis (W1) inside the residence. Preis (W1) advised after he returned from the skating rink, Preis (V1) and Preis
 15 (D1) got into a verbal argument. Preis (W1) observed Preis (D1) start to push Preis (V1) several times as he was trying to walk away. Preis (W1) then

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 _____	JUVE DISP. _____
SIGNATURE OF JUVENILE PARENT OR CUSTODIAN _____		CITATION No. _____	

Sworn to and subscribed before me, the undersigned this <u>03</u> day of <u>February</u> , <u>2018</u> , Name: <u>[Signature]</u>	I swear/affirm the above statements are correct and true <u>[Signature]</u> OFFICER'S/COMPLAINANT'S SIGNATURE	Rt Thumb
Notary Public <input type="checkbox"/> Law Enforcement or Corrections Officer <input checked="" type="checkbox"/>	<u>BERNARD, JAYDEL</u> <u>8833</u> NAME (PRINTED) ID NUMBER	
Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>		
Type of Identification: _____		

Volusia**Notice to Appear Instruction Sheet**

Follow these instructions according to the boxes checked.

Court Case Number:
Agency Case Number:

- Mandatory Court Appearance -- You MUST appear at COURT. You will receive a Notice of Arraignment from the County Clerk's Office at the mailing address you have given. Failure to appear at the time and place designated, will result in a warrant being issued for your arrest.**
- Court Appearance Not Mandatory -- You MUST comply with EITHER A or B:**

**PAYMENTS SHOULD BE MADE PAYABLE TO:
CLERK OF THE COURT.**

A. Pay the Fine: You must complete the waiver information below and either mail or personally present this citation at the Clerk's Office checked below, from 8:00 a.m. to 4:30 p.m., Monday through Friday within 15 days of the issuance of this Notice to Appear. ***Fines may be paid in cash, personal check, money order or certified check made payable to: Clerk of the Court . (DO NOT MAIL CASH.)***

Total fine and costs you must pay: \$ _____

B. Contest the Citation: You MUST request that a court date be set within 15 days of the issuance of this Notice to Appear (if the 15th day falls on a Saturday, Sunday or legal holiday, the period is extended to the next working day) by either appearing between the hours of 8:00 a.m. and 10:00 a.m. at the Clerk's Office checked below, or by mailing your written request to the Clerk of the Court at the address checked below.

COUNTY CLERK'S OFFICES:

- Volusia County Courthouse, room B155, 101 N. Alabama Avenue, Deland, FL, 32724
- Court House Annex, room 109, 125 E. Orange Avenue, Daytona Beach, FL, 32114
- Volusia County Courthouse, room 6, 124 N. Riverside Drive, New Smyrna Beach, FL, 32169

I agree to appear at the time and place as designated above to answer the listed charge(s) or pay the fine and costs. I understand that if I willfully fail to request a court date and/or fail to appear before the court as required by this Notice to Appear, or fail to pay the indicated fine and costs on or before the date set forth above, I may be held in contempt of court and a warrant for my arrest will be issued.

DEFENDANT'S SIGNATURE (MANDATORY): _____

ATTENTION: PERSONS WITH DISABILITIES

If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact Court Administration, 125 E. Orange Avenue, Ste.300, Daytona Beach, FL 32114; Telephone: 386-257-6096 within two (2) working days of your receipt of this notice: If you are hearing or voice impaired, call 1-800-955-8771 or 1-800-955-8770. **THIS IS NOT A COURT INFORMATION LINE.**

Plea and Waiver Information

If this notice indicates that you have the option to pay a fine or appear in court and you choose to pay the fine, follow the instructions in paragraph A above. Read and sign this page. This page MUST be returned to the clerk's office with your fine payment.

- In consideration of my not appearing in court, I enter my plea on the affidavit in this case, for the offense charged, waiving my right to be present and the reading of the affidavit. I understand the nature of the charge(s) against me and hereby enter my plea of guilty or nolo contendere (no contest) .
- In doing so, I understand the nature of the charge(s) against me, I understand that I waive my right to counsel, the right to a trial before a judge or jury, the right to a continuance, and the right to appeal. Payment of this fine will result in adjudication of guilt to this charge being withheld.
- By my signature, I acknowledge that I understand the above statements. I am not under the influence of alcohol or drugs. I also certify that my address listed below is correct.

Defendant's Signature: _____
(First) (Middle) (Last)

Date: _____

Defendant's Name (print): _____

Defendant's Address: _____

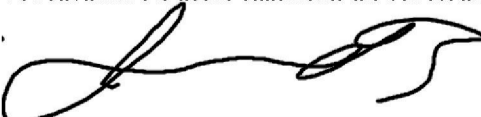
Narrative Supplement 707-B

Arrest
 Affidavit
 Notice to Appear
 Adult
 Juvenile

Court Case Number:

Defendant Name: PREIS	(Last)	(First) DAWN	(Middle) ERIN	Agency Case Number: 180002698
CHARGES	DOMESTIC VIOLENCE? Yes <input checked="" 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: 1	
	#	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:	

16 went to his room and only heard them verbally arguing.
 17
 18 Deputy Bernard then contacted Preis (D1) in the kitchen. Preis (D1) stated the following;
 19
 20 Preis (D1) stated on 02/02/2018 at approximately 1900 hours, she and Preis (V1) had an argument about him cheating before he took Preis (W1) to
 21 the skating rink. Preis (D1) advised she kept calling Preis (V1) to make sure he was going to pick up Preis (W1), and received no response. Preis
 22 (D1) stated she went to leave to pick up Preis (W1), but as she left she observed Preis (V1) and Preis (W1) coming down the street. Preis (D1) also
 23 stated she was very upset and kept asking where Preis (V1) was and that Preis (V1) kept provoking her by calling her a "whore and a bitch". Preis
 24 (D1) also stated she while inside the residence she physically tried to turn Preis (V1) around by grabbing his arms so she could see his face, and if
 25 he was telling the truth. Preis (D1) Preis (V1) walked into the garage without physically touching her and called 911. Preis (D1) completed a written
 26 statement detailing the incident which is attached to the report.
 27
 28 Through Deputy Bernard's investigation, it was determined based on the written/verbal statements and Preis (D1) admission, that she was the
 29 primary aggressor. Deputy Bernard then took Preis (D1) into custody for simple battery DV and transported her to the VCBJ. Photographs were taken
 30 of the scene and of Preis (V1). Deputy Bernard uploaded the photographs to the VCSO Digital Crime Scene Database. Deputy Bernard supplied
 31 Preis (V1) with Rights and Remedies DV Packet as required by law, which he signed for. Deputy Bernard also Preis (V1) with the case number and
 32 advised if he need further assistance to contact the Sheriff's Office.
 33
 34 It should be noted neither party requested/needed medical assistance. It should be further noted Preis (D1) has no prior criminal history.
 35
 36 Faxed to DCF

Sworn to and subscribed before me, the undersigned this <u>03</u> day of <u>February</u> , 2018 Name: <u>th L 1660</u>	I swear/affirm the above statements are correct and true 	Right Thumb
Notary Public <input type="checkbox"/> Law Enforcement Officer <input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/> Type of Identification:	OFFICER'S/COMPLAINANT'S SIGNATURE BERNARD, JAYDEL 8833 NAME (PRINTED) ID NUMBER	

Witness/Victim/Evidence Form 707-A

Arrest
 Affidavit
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 Juvenile

Court Case Number:

Page # 4 of 4

Defendant (Last) (First) (Middle) Name: PREIS DAWN ERIN			Agency Case Number: 180002698		
Name: (Last) (First) (Middle) PREIS RICHARD J			Vic <input checked="" type="checkbox"/> Wit <input type="checkbox"/>	Race: W	Sex: M <input checked="" type="checkbox"/> F <input type="checkbox"/>
Address (#, Street, City, State): 4024 CALUSA LN. ORMOND BEACH FL			Zip: 32714	Age: 53	DOB: 04-26-1964
Bus/School Address:			Zip:	Home: Phone:	Statement: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Relative/Contact Name			Relative/Contact Address:		
Name: (Last) (First) (Middle) PREIS DYLAN R			Vic <input type="checkbox"/> Wit <input checked="" type="checkbox"/>	Race: W	Sex: M <input checked="" type="checkbox"/> F <input type="checkbox"/>
Address (#, Street, City, State): 4024 CALUSA LN ORMOND BEACH FL			Zip: 32714	Age: 12	DOB: 11-09-2005
Bus/School Address: ORMOND MIDDLE SCHOOL			Zip:	Home: Phone:	Statement: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Relative/Contact Name			Relative/Contact Address:		
Name: (Last) (First) (Middle)			Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:	Sex: M <input type="checkbox"/> F <input type="checkbox"/>
Address (#, Street, City, State):			Zip:	Age:	DOB:
Bus/School Address:			Zip:	Home: Phone:	Statement: <input type="checkbox"/> Yes <input type="checkbox"/> No
Relative/Contact Name			Relative/Contact Address:		
Name: (Last) (First) (Middle)			Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:	Sex: M <input type="checkbox"/> F <input type="checkbox"/>
Address (#, Street, City, State):			Zip:	Age:	DOB:
Bus/School Address:			Zip:	Home: Phone:	Statement: <input type="checkbox"/> Yes <input type="checkbox"/> No
Relative/Contact Name			Relative/Contact Address:		
Name: (Last) (First) (Middle)			Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:	Sex: M <input type="checkbox"/> F <input type="checkbox"/>
Address (#, Street, City, State):			Zip:	Age:	DOB:
Bus/School Address:			Zip:	Home: Phone:	Statement: <input type="checkbox"/> Yes <input type="checkbox"/> No
Relative/Contact Name			Relative/Contact Address:		
Name: (Last) (First) (Middle)			Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:	Sex: M <input type="checkbox"/> F <input type="checkbox"/>
Address (#, Street, City, State):			Zip:	Age:	DOB:
Bus/School Address:			Zip:	Home: Phone:	Statement: <input type="checkbox"/> Yes <input type="checkbox"/> No
Relative/Contact Name			Relative/Contact Address:		

EVIDENCE COLLECTED

Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
BWC			
Owner Name (Last) (First) (Address)		(Phone)	Value
5 PHOTOS OF THE SCENE AND V1			
Owner Name (Last) (First) (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.

BERNARD, JAYDEL
Investigating Officer

J D 8833
8833
ID Number

VCSSO
Agency