

Broward County Sheriff's Office M





CIS#	301700105 BCCN# 881495									Booking Sheet Control Date and Time						
OBTS	609228119	9228119 Print Clearance 05/02/17 12 34 54 Prints Yes										05/02/17 14 08 33				
Arrest #	SP 1700105		Offen	se Repo	ort#	2017-0	1750		····•	Ağency	, St	EMINOLE				
Last Namè Fırst Mıddle	FERI	NANDEZ	Z, ARIA	NNA						SSN#						
Race	Sex	Height	Weight	Eyes	Haır	Comp	Age Adn	nitted DOE	3	Place o	f Birth	State	•	FDLE		
н	F	502	140	BRO	BRO	OLV	42	1/12/1	975	MIAMI		FLO	RIDA	4141303		
Permanent Address 3220 SW 24TH TERRACE MIAMI FL 33145										Months of Residence						
Arrest Date	05/02/17 1	0 27 00	P	lace of A	Arrest 1	SEMINO	DLE WAY		Arrestii	ng Officer	9 082 C	SHIELDS				
Inmate Logg	ed Date	05/02/17	7 11 49 2	24	Inmate	Log Type	FULL IN	TAKE	Pl	lace Admitt	ed	MAIN				
Intake Comn	nents CO/S	P/29/54 8	075 WC	15105				76,2								
Alias Last n	ame, Fırst, M	ddle, DOB	B AGU	RTO, A	RIANNA	, ,01/12/1	975					77				
Alias Last na	ame, First, M	ddle, DOE	B AGU	RTO, A	RIANA,	01/12/19	75				325		№	~		
Alias Last na	ame, First, M	ddle, DOE	3 AGU	RTO, A	MANNA,	,01/12/1	975				ON	双艺	3			
Alias Last na	ame, First, M	ddle, DOE	3 AGU	NTO, A	RIANNA	, ,01/12/1	975				35	ÉCE -3	ن د	ŕ		
Warrants Of	ficer ld bs15	105		-1							ŠQU	C.K.	오	3		
Scars,Marks	,Tattoos										Z	CO	<u></u>	7		
Tattoos Wrist, left "JACOB" HINDI LACE GRAPHICS									cs		-	75. 75.	T&MCENT 1:40			
Tattoos		ı	Wrist, rigl	ht		"VICTO	RIA" (RED	INK)								
Tattoos		E	Buttocks			(RT) k	(OI FISH									
Release Date/Time Release Reason							Release Authorized By									
Charge No	Charg	e Initiatioi	n Date	Stat	tute		Warrant/C	apıas	Level		Гуре		Bon			
1	0	5/02/17 13		784	03-1a1(HG)			1M	D H	OLD FO	R MAG	\$0.00	d Amount		
1 Charges	0 TOUCH OR		3 59		,	,	Comment	s	1M	р н	OLD FO	R MAG	\$0.00			

* End of Report *

Public Deputy Clerk of the Court or Assistant State Attorney

Print Type or Stamp Commissioned Name of Notary Public

(SEAL)

Seventeenth Judicial Circuit

Broward County

State of Florida

FIRST APPEARANCE/ARREST FORM

(SHOULD ADDITIONAL SPACE BE NEEDED, USE THE PROBABLE CAUSE AFFIDAVIT CONTINUATION (BSO DB#2a))

Orig State Attorney Filing Agency Arresting Agency

BSO DB #2 (Revised 05/00)

0-8075 29/54-8075 WC-15/05

State of Florida

BSO DB #2a (Revised 05/00)

PROBABLE CAUSE AFFIDAVIT CONTINUATION

ARREST # OBTS# Filing Agency
SEMINOLE PD Offense Report Local ID # FDLE SS# FBI 2017-01750 Fırst SUF Defendant's Last Name Middle Alias/Street Name Citizenship **FERNANDEZ ARIANNA** Name of victim(s) (if corporation exact legal name and state of incorporation) Count # Offenses Charged WC# / Citation # (if applicable). -Sor CapiasAVarrant # Probable Cause Affidavit Before me this date personally appeared O SHIELDS, CHRISTINA (9082) who being first duly swo 2 day of May (year) 2017 at I SEMINOLE WAY, HOLLYWOOD, FL 33314 the above named defendant committed the above offenses charged and the facts showing probable cause to believe the same are as follows advised that her boyfriend and her were involved in a verbal argument because he wanted to stay and gamble and she wanted to leave. She stated at no time was there a physical altercation. Hard Rock Hotel and Casıno President Auggie Cipollini approaced me after speaking with Fernandez and advised that he observed the female striking the male in the valet (pick up area). He stated she punched him with a close fist in the upper chest area and he began clapping. At this time, contact was made with Fernandez a second time and I asked her if she recalled striking her boyfriend of 6 months of which they reside together. She stated no, there was no physical altercation. Contact was made with the surveillance room where the video of the incident revealed white female Arianna Fernandez willfully striking her boyfriend one time in the upper chest area with a closed fist, he did not strike back as he continued to walk away. At this time, contact was made with Fernandez and I placed her under arrest for domestic battery. the above statement is correct and true to the best of my knowledge and belief O'SHIELDS, CHRISTINA (9082) Operations Officer's Name/CCN Officer's Division STATE OF FLORIDA COUNTY OF BROWARD Sworn to (or affirmed) and subscribed before me this _ _**2**___ day of ___ May POLICE OFFICER O'SHIELDS, CHRISTINA (name and title), who is personally known to me or has produced as identification puty Clerk of the Court or Assistant State Attorney (SEAL) Print Type or Stamp Commissioned Name of Notary Public Seventeenth Judicial Circuit FIRST APPEARANCE/ARREST FORM Court **Broward County**

COURT COPY

Oria 2nd

State Attorney Filing Agency

Arresting Agency