

21 MM 8217AMB
ARREST / NOTICE TO APPEAR

1 Arrest (No Warrant) 3 Request for Warrant
 2 NTA 4 Request for Capias
 5 Juvenile Referral

1 JUVENILE

OBTS Number: []
 Agency ORI Number: **0500200** Agency Name: **Boca Raton Police Department** Agency Report Number (N.T.A.'s only): **3, 2 2021-012923**
 Charge Type: 1 Felony 2 Traffic Felony 3 Misdemeanor 4 Traffic Misdemeanor 5 Ordinance 6 Other
 If Weapon Seized: Enter Type: **UNARMED** Multiple Clearance Indicator: []
 Location of Offense (Business Name, Address): [REDACTED]

Date of Arrest: **11/01/2021** Time of Arrest: **04:09** Booking Date: **11/01/2021** Booking Time: **04:19** Jail: **11/01/2021** **05:41** **NONE**

Name (Last, First, Middle): **OCAMPO, CHRISTIAN DANIEL** Alias: []
 Race: **W - White** Sex: **M** Date of Birth: **06/12/1987** Height: **5'07** Weight: **190** Eye Color: **BROWN** Hair Color: **BLACK** Complexion: **LIGHT** Build: **Medium**
 Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): []
 Marital Status: **S** Religion: **CHRISTIAN** Indication of Alcohol Influence: Yes No Unk
 Local Address (Street, Apt. Number): [REDACTED] (City): [REDACTED] (State): [REDACTED] (Zip): [REDACTED] Phone: **(561) 305-9618**
 Business Address (Name, Street): **BCC,** (City): [REDACTED] (State): [REDACTED] (Zip): [REDACTED] Phone: **(561) 674-2811** Occupation: **Student**
 D.I. Number, State: **0251104872120 / FL** Soc. Sec. Number: [REDACTED] INS Number: [REDACTED] Place of Birth (City, State): **LAS ANGELES, CA** Citizenship: **US**

Co-Defendant Name (Last, First, Middle): [] Race: [] Sex: [] Date of Birth: []
 Co-Defendant Name (Last, First, Middle): [] Race: [] Sex: [] Date of Birth: []

Parent Other: [] Name (Last, First, Middle): [REDACTED] Residence Phone: []
 Legal Custodian Address (Street, Apt. Number): [REDACTED] (City): [REDACTED] (State): [REDACTED] (Zip): [REDACTED] Business Phone: []
 Notified by: (Name): [REDACTED] Relationship: []
 Released To: (Name): [REDACTED] Relationship: []
 The above address was provided by defendant and/or defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.
 Property Crime? Yes No Description of Property: [] Value of Property: []

NO JURY VICTIM NOTIFICATION REQUIRED

Drug Activity: **S Sell** **R Smuggle** **K Dispense/Distrib** **M Manufacture/Produce/Cultivate** **Z Other** Drug Type: **N N/A** **A Amphetamine** **B Barbiturate** **C Cocaine** **E Heroin** **H Hallucinogen** **M Marijuana** **O Opium/Deriv** **P Paraphernalia/Equipment** **S Synthetic** **U Unknown** **Z Other**

Charge Description: **BATTERY - BATTERY (SIMPLE)** Statute Violation Number: **784.03(1A1)** Violation of ORD #: []
 Drug Activity: [] Drug Type: **N** Amount / Unit: [] Offense #: [] Counts: **1** Domestic Violence: Y N Warrant / Capias Number: [] Bond: []

Charge Description: [] Statute Violation Number: [] Violation of ORD #: []
 Drug Activity: [] Drug Type: [] Amount / Unit: [] Offense #: [] Counts: [] Domestic Violence: Y N Warrant / Capias Number: [] Bond: []

Charge Description: [] Statute Violation Number: [] Violation of ORD #: []
 Drug Activity: [] Drug Type: [] Amount / Unit: [] Offense #: [] Counts: [] Domestic Violence: Y N Warrant / Capias Number: [] Bond: []

Health / Apparent Physical Condition of Defendant: **FAIR** Any knowledge of the following: Mental Escape Risk Medication Deformities Injuries
 Check which applies: Released O.R. Released to Parent/Guardian T.O.T. County Jail Posted Bond South County Mental Health
 PROPERTY - Received By: **BRPD** Released By: **BRPD** Released To: **COUNTY JAIL**
 Transported By: **BRPD** Date Transported: **11/01/2021** Time Transported: **05:41** Other: []

INSTRUCTION NO. 1 - Mandatory appearance in court
 INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.
 Location (Court, Room): **South County 200 W Atlantic Ave Delray Beach, FL 33444**
 Court Date and Time: []
 I 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): [REDACTED] Date Signed: []

No Photo Available

HOLD for Other Agency: [] Signature of Arresting Officer: [REDACTED] Name Verification (Printed by Arrestee): []
 Dangerous Resisted Arrest Suicidal Other
 Name of Arresting Officer (Print): **GRUBBS, A. D.** I.D.#: **853**
 Transporting Officer: **A. GRUBBS** I.D.#: **888** Agency: **BRPD**
 Witness here if subject signed with: []

COURT STATE ATTORNEY AGENCY CENTRAL RECORDS JAIL CRIME ANALYSIS P.I.O. DEFENDANT

J# 0342970

PH 3977

FILED
 NOV - 2 2021
 PALM BEACH COUNTY, FL
 JUDGE: JOSEPH A. ANNETTO
 CLERK: GUNCLER
 AM 6:09

PROBABLE CAUSE AFFIDAVIT

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias

1 JUVENILE

A D M I N I S T R A T I V E	OETS Number	Agency ORI Number FL FL0500200		Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2021-012923
	Charge Type: Check as many as apply	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	Special Notes:

D E F E N D A N T	Name (Last, First, Middle) OCAMPO, CHRISTIAN DANIEL	Alias	Race W	Sex M	Date of Birth 06/12/1987
	Charge Description 784.03(1A1) BATTERY- BATTERY (SIMPLE)	Charge Description	Charge Description	Charge Description	Charge Description

V I C T I M	Arrest Name and First Middle	Race	Sex	Date of Birth

The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.

The Person taken into custody ...

committed the below acts in my presence. was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.

confessed to _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.

On the 1 day of November, 2021 at 04:39 (Specifically include facts constituting cause for arrest.)

On 10/1/2021, at approximately 0331 hours, I responded with my emergency lights and sirens activated to [REDACTED] in reference to a domestic battery.

Upon my arrival, I met with the caller, Martine Pierre, who stated that that she heard what appeared to be a physical altercation coming from a neighboring apartment [REDACTED].

I knocked on the door of [REDACTED] and was met by [REDACTED] who was crying and was visibly upset. [REDACTED] stated that her boyfriend, W/M Christian Ocampo (DOB: 6/12/1987), was inside of the apartment. I called out to Ocampo multiple times until he appeared.

I asked Ocampo multiple times what had occurred, but he was uncooperative and repeatedly stated that it was "just normal boyfriend/girlfriend stuff." It should be noted that Ocampo appeared to be intoxicated and was slurring his words and had red glassy eyes. After asking, Ocampo gave me permission to search the apartment. While checking the apartment I observed a office chair knocked over in the bedroom.

I then spoke with [REDACTED] who advised the following chain of events occurred: on the evening of 10/31/2021, Ocampo and [REDACTED] were celebrating Halloween at a party when Ocampo got mad at [REDACTED] and stormed out for unknown reasons. [REDACTED] then went back to her apartment. When Ocampo returned to the apartment early in the morning on 11/31/2021 he did not have his keys. Ocampo began throwing rocks at the apartment window so that he could be let inside. After [REDACTED] let Ocampo into their shared apartment, he began arguing with [REDACTED] and began to push, grab, and strike [REDACTED]. The altercation carried its way into the bedroom where Ocampo pushed [REDACTED] into an office chair, knocking it over. [REDACTED] also advised at some point during the incident, Ocampo struck her with an open hand on the left side of her head, near her temple. [REDACTED] had visible red marks/scratches on both of her arms, the middle of her upper chest, and swelling on the right side of her temple. Along with red marks on her right foot. When asked about the red marks on her foot, [REDACTED] stated that

A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER	
	<u>PATTERSON, MARC P</u> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	<u>GRUBBS, ALEC DANIEL (853)</u> NAME OF OFFICER (PLEASE PRINT)	
	<u>11/01/2021</u> DATE	<u>11/01/2021</u> DATE	
		PAGE 1 OF 2	

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

1. Arrest 3. Request for Warrant
2. N.T.A. 4. Request for Copies

1 JUVENILE

A D M I N I S T R A T I V E	OBTS Number	Agency Name		Agency Report Number
	Agency ORI Number FL FLO500200	BOCA RATON POLICE DEPARTMENT		3 2 2021-012923

Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input checked="" type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	Special Notes:
	<input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other	

Name (Last, First, Middle) OCAMPO, CHRISTIAN DANIEL	Alias	Race W	Sex M	Date of Birth 06/12/1987
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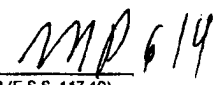
Ocampo stepped on her foot multiple times during the altercation. [redacted] also stated that her and Ocampo have been dating for 3 years and were currently living together.

My investigation determined that Ocampo struck [redacted] against her will and that both parties meet the criteria for a domestic relationship.

Based on the aforementioned details, probable cause exists to charge Christian Ocampo with the following:

- 1) 784.03(1)(A)(1) - Simple Battery

NOT A CERTIFIED COPY

A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME	
	PATTERSON, MARC P	
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
	11/01/2021	GRUBBS, ALEC DANIEL (853)
	DATE	NAME OF OFFICER (PLEASE PRINT)
		11/01/2021
		DATE

VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been committed:

- Homicide (Ch. 782)
- Sexual Offense (Ch. 794)
- Attempted Murder
- Attempted Sexual Offense
- Stalking (F.S. 784.048)
- Domestic Violence - (This includes any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking or any criminal offense resulting in physical injury or death of one family member or household member by another, who is or was residing in the same single dwelling.)

Upon completion, this form must accompany the booking paperwork.
If applying for a warrant, attach this form to the filing packet.

1. Incident Report#: 2021012923 Agency: BRIP
Offense: Battery Domestic
Suspect/Offender: Christen Ucamp
D.O.B. 6/12/87 Race: W Sex: M

2. Warrant#(s): _____

3.a. Victim's name: _____
Address: _____
City: _____
Home#: _____

b. Victim's next of kin, friend or neighbor: _____
Address: _____
City: _____ State: _____ Zip: _____
Home#: _____ Work#: _____ Other: _____

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY BE SUBJECT TO CONFIDENTIALITY.

Victim/Relation Notification Waiver and Confidential Information Request.

(check applicable boxes)

- Waiver: I choose not to be notified when the arrestee is released from custody.
- Confidential: Pursuant to F.S.119.07 (3)(S)1, I request that the address and telephone number on this form be kept confidential (applicable only to sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery, or domestic violence cases).
Other confidentiality provisions of Florida State Statutes may also be applicable

Signature of person waiving notification: _____

Printed name of person waiving notification: _____

Officer's Name: A. Grubbs I.D.# 853 Date: 11/1/21
White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records

SUSPECT/OFFENDER: _____

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT#: _____



Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2021027453	Date: 11/02/2021
	Specialist Name/ID: T Howard/7185