

J-0524646

21MM5193

P-3274

AD MIN IS TR A T I O N	OBT Number		ARREST / NOTICE TO APPEAR		1. Arrest (No Warrant) 3. Request for Warrant 6. Arrest (Warrant) 4. Request for Copies 2. N.T.A. 5. Juvenile Referral		1	JUVENILE
D E F E N D A N T	Agency ORI Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N.T.A.'s only) 3, 2 2021-008257			
	Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type UNARMED	
	Location of Arrest (Including Name of Business) 131 S FEDERAL HWY BOCA RATON, 131 S FEDERAL HWY 630,				Location of Offense (Business Name, Address) 131 S FEDERAL HWY 630, BOCA RATON, FL 33432			
	Date of Arrest 07/16/2021		Time of Arrest 02:46		Booking Date 07/16/2021		Booking Time 02:56	
	Jail Date 07/16/2021		Jail Time 04:26		Location of Vehicle			
	Name (Last, First, Middle) HOLBROOKS, LACY DAWN							
	Alias: Alias (Name, DOB, Soc. Sec. #, Etc.)							
	Race W - White A - American Indian O - Oriental/Asian W		Sex F		Date of Birth 07/11/1997		Height 5'04	
	Weight 105		Eye Color GREEN		Hair Color BLONDE		Complexion LIGHT	
	Build Small		Marital Status S		Religion CHRISTIAN		Indication of Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unit <input type="checkbox"/>	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT UR SHOULDER / ORCHIDS								
Local Address (Street, Apt. Number) 131 S FEDERAL HWY 630, BOCA RATON, FL 33432				(City) (State) (Zip)		Phone (305) 322-8803		
Permanent Address (Street, Apt. Number) 131 S FEDERAL HWY 630, BOCA RATON, FL 33432				(City) (State) (Zip)		Phone (305) 322-8803		
Business Address (Name, Street) (City) (State) (Zip)				Phone (305) 322-8803		Address Source FLDL		
Occupation								
D/L Number, State H416524977510 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) OUT OF STATE, GA.		
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		
Name (Last, First, Middle) Parent <input type="checkbox"/> Other <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Address (Street, Apt. Number) (City) (State) (Zip)								
Notified by: (Name) Date Time JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incompetent								
Relationship Date Time								
The above address was provided by <input type="checkbox"/> defendant and/or <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No								
Description of Property Value of Property								
Drug Activity N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Dispense/ Distribute 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. Pseudoephedrine/ Equipment S. Synthetic U. Unknown Z. Other								
Charge Description BATTERY - BATTERY (SIMPLE)								
Statute Violation Number 784.03(1A1)								
Violation of ORD #								
Drug Activity N Drug Type N Amount / Unit /								
Offense # 2021-008257								
Counts 1								
Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N								
Warrant / Copies Number								
Charge Description								
Statute Violation Number								
Violation of ORD #								
Drug Activity /								
Drug Type /								
Amount / Unit /								
Offense #								
Counts								
Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N								
Warrant / Copies Number								
Charge Description								
Statute Violation Number								
Violation of ORD #								
Drug Activity								
Drug Type								
Amount / Unit								
Offense #								
Counts								
Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N								
Warrant / Copies Number								
Health / Apparent Physical Condition of Defendant GOOD								
Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Delinquency <input type="checkbox"/> Injuries								
Enlighten:								
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail								
PROPERTY - Received By PHILLIPS								
Released By PHILLIPS								
Released To WALTER								
Transported By WALTER								
Date Transported 07/16/2021								
Time Transported 04:45								
Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444								
Court Date and Time 07/16/2021 04:24:53								
INSTRUCTION NO. 1 - Mandatory appearance in court INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.								
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)								
Date Signed								
HOLD For Other Agency								
Signature of Arresting Officer PHILLIPS, J.								
Name of Arresting Officer (Print) PHILLIPS, J.								
ID.# 824								
Transporting Officer OFC WALTER								
ID.# 848								
Agency BRPD								
Name Verification (Printed by Arrestee) SCANNED								
(PRINT)								
PAGE 1 of 1								

OBT Number		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	Agency ORI Number FL 0500200		Agency Name BOCA RATON POLICE DEPARTMENT		Agency Report Number 3 2 2021-008257				
	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) HOLBROOKS, LACY DAWN				Race W		Sex F		Date of Birth 07/11/1997
	Charge Description 784.03(1A1) SIMPLE BATTERY DOMESTIC				Charge Description				
V I C T I M	Victim's Name (Last, First, Middle) LECLERCQ, ALEXANDRE ALAIN				Race W		Sex M		Date of Birth 08/24/1994
	Local Address (Street, Apt. Number) (City) (State) (Zip) 131 SOUTH FEDERAL HWY, BOCA RATON, FL 33432				Phone (561) 430-7977		Address Source		
C A U S E	Business Address (Name, Street) (City) (State) (Zip) FAU				Phone		Occupation STUDENT		
	<p>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.</p> <p>The Person taken into custody ...</p> <p><input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>16</u> day of <u>July</u>, <u>2021</u> at <u>02:46</u> (Specifically include facts constituting cause for arrest.)</p> <p>On 7/16/2021 at approximately 0107 hours, I responded to 131 S. Federal Hwy. Apt. #630 (Camden Apts.) reference a domestic disturbance. Upon arrival, I met with the defendant Lacy Holbrooks who advised that during the course of an argument with her longtime boyfriend (victim 1) he placed her in a bear hug and when she tried to get away, he hit her in the face with her cell phone. Holbrooks explained that the cell phone was in a case with a strap attached and victim 1 held the strap, swung the phone, and hit her on the outside of her left eye. There was noticeable bruising and swelling to Holbrooks left eye which Officer Ricciardi took pictures of and tagged for evidence on her MVR. Holbrooks stated that the altercation took place inside the bathroom of her apartment. Holbrooks advised that victim 1 left the scene prior to police arrival. She provided me with his phone number.</p> <p>I called victim 1 and briefly spoke with him over the phone until he agreed to meet with me in person. Officer Ricciardi and I met with victim 1 in front of The Mark apartments at 9 Plaza Real S. in Boca Raton. Victim 1 stated that he and Holbrooks had been dating for approximately three years and recently Holbrooks went through his phone and saw that he was messaging another girl, thus the reason for the argument. Victim 1 said that he was at a friend's apartment but decided to return to his apartment (where he lives with Holbrooks) to retrieve clothes and the dog's food. He said when he returned home he noticed that items had been thrown around and his bathroom was trashed. He said Holbrooks admitted to trashing his bathroom because she was upset about the messages she read on his phone. Victim 1 explained that at that time he asked Holbrooks to clean the bathroom and then he left the apartment without incident. Victim 1 advised that he returned two hours later to bring Holbrooks food but when he returned the bathroom was still not cleaned. He explained at that time he said to Holbrooks "why are you being such a bitch" and without any notice Holbrooks used her right hand and close fist punched victim 1 in his left temple. There was visible redness to the area therefore photos were captured and tagged for evidence. Victim 1 said that after Holbrooks punched</p>								
A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME				SIGNATURE OF ARRESTING / INVESTIGATING OFFICER				
	SHANNAHAN, TIMOTHY C NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10) <u>07/16/2021</u> DATE				PHILLIPS, JEFFREY (824) NAME OF OFFICER (PLEASE PRINT) <u>07/16/2021</u> DATE				

A D M I N D E F P R O B A B L E C A U S E S T A T E M E N T A D M I N I S T R A T I V E	Case Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Copies		1	JUVENILE
	Agency ORI Number		Agency Name		Agency Report Number					
	FL 0500200		BOCA RATON POLICE DEPARTMENT		3 2 2021-008257					
	Charge Type: <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		Special Notes:							
Name (Last, First, Middle)					Alias		Race	Sex	Date of Birth	
HOLBROOKS, LACY DAWN							W	F	07/11/1997	
<p>him, she grabbed a motorized face brush and threw it in his direction. The brush missed victim 1 but he advised that it bounced off the wall and hit Holbrooks on the outside of her left eye, thus the reason for the bruising and swelling. Victim 1 said that the brush broke into two pieces and was last seen on the bathroom floor. He said that once Holbrooks realized her eye was swollen she said that she was "going to call the cops and tell them that he did this". Victim 1 said at that time he was attempting to leave the apartment (note, his right foot was in a walking boot and was using crutches to assist him with getting around) and Holbrooks kicked his crutch then punched him in the back of the head. The punch caused a small laceration where a small amount of blood was visible, and minor swelling to the back of his head. Victim 1 stated he then left the apartment and drove to his friend's apartment.</p> <p>Officer Ricciardi and I responded back to the original address, 131 S. Federal Hwy. Apt. #630 where we once again met with Holbrooks. I read Holbrooks her Constitutional Warnings from a department issued warnings card to which she waived her rights and decided to talk with me. I asked Holbrooks if she punched victim 1 in his left temple after he called her a bitch? She said she did not remember doing so. I asked Holbrooks if she threw a motorized face brush at victim 1 which missed and in turn hit her in the face causing her injuries. At first, Holbrooks denied having such a brush but later, after she invited us inside the apartment and the brush was observed on the bathroom floor, broken into two pieces, she remembered that she did own one. She said she was unsure how it broke. I then asked Holbrooks if she kicked victim 1's crutch then punched him in the back of the head to which she claimed that she didn't and any injury to victim 1's head was caused by him falling in the hallway in front of the apartment. It should be noted that the hallway is carpeted throughout, and it seems highly unlikely that the laceration and swelling to victim 1's head could have been a result of a fall.</p> <p>Based on my investigation and the statements provided by all parties involved it was determined that Lacy Holbrooks was in direct violation of F.S.S 784.03(1a1) - Battery (domestic) after she closed fist punched victim 1 in his left temple and in the back of his head. Holbrooks was placed under arrest, she was handcuffed behind her back (double locked and checked for tightness) and transported to the BRPD holding facility for processing. Once the necessary paperwork was complete, Holbrooks was transported and turned over to intake deputies at the PBCJ.</p>										
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>SWORN AND SUBSCRIBED BEFORE ME</p> <p style="text-align: center;">SHANNAHAN, TIMOTHY C</p> <p style="text-align: center;">NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p style="text-align: center;">07/16/2021</p> <p style="text-align: center;">DATE</p> </div> <div style="width: 45%;"> <p style="text-align: center;"><i>[Signature]</i></p> <p style="text-align: center;">SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p style="text-align: center;">PHILLIPS, JEFFREY (824)</p> <p style="text-align: center;">NAME OF OFFICER (PLEASE PRINT)</p> <p style="text-align: center;">07/16/2021</p> <p style="text-align: center;">DATE</p> </div> </div>										
									PAGE	2 OF 2

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#: 2021008257 Agency: Boca Raton Police Department
Offense: Simple Battery (domestic)
Suspect/Offender: LACY HOLBROOKS
D.O.B. 07/11/1997 Race: White Sex: Female
2. Warrant#(s): _____
- 3.a. Victim's name: Alexandre Leclercq D.O.B. 8/24/94 Race: White Sex: Male
Address: 131 S Federal Hwy Apt 1030
City: Boca Raton State: FL Zip: 33432
Home#: _____ Work#: _____ Other: 561 4307977
- 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: Phillips I.D.# 824 Date: July 13 2021
White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records

SUSPECT/OFFENDER: _____

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT#: _____

SCANNED



**PALM BEACH COUNTY
SHERIFF'S OFFICE**
Florida State Statute Exemption Sheet

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"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2021017583	Date: 7/17/2021
	Specialist Name/ID: J. Beck/9007

SCANNED
JUL 17 2021