0531318 22MM3479AMB 2894

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE

OBTS Number	
Agency ORI Number	FLO 500000
Agency Name	PALM BEACH COUNTY SHERIFF'S OFFICE
Agency Report Number (N.T.A.'s only)	06- 22-062901
ChargeType: Check as many as apply.	☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other
Weapon Seized / Type (1. Yes 2. No)	2
Multiple Clearance Indicator	01
Location of Arrest (Including Name of Business)	5430 Buchanan Road, Delray Beach, FL 33484
Location of Offense (Business Name, Address)	5430 Buchanan Road, Delray Beach, FL 33484
Date of Arrest	05/01/2022
Time of Arrest	20:43
Booking Date	
Booking Time	
Jail Date	
Jail Time	
Location of Vehicle	

DEFENDANT

Name (Last, First, Middle)	GOMEZ, LAURA, WJ
Alias (Name, DOB, Soc. Sec. #, Etc.)	
Race (W - White I - American Indian B - Black O - Oriental/Asian)	W
Sex	F
Date of Birth	10/02/1977
Height	5'01"
Weight	120
Eye Color	Brown
Hair Color	Red
Complexion	Light
Build	Small
Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description)	Tattoos on Right Foot
Marital Status	Married
Religion	NONE
Indication of: Alcohol Influence / Drug Influence	Alcohol Influence: Y ☒ N ☐ Unk. ☐; Drug Influence: Y ☐ N ☐ Unk. ☒
Local Address (Street, Apt. Number) (City) (State) (Zip)	5430 BUCHANAN RD , DELRAY BEACH, FL 33484
Phone	(305) 927-0931
Residence Type (1. City 2. County 3. Florida 4. Out of State)	2
Permanent Address (Street, Apt. Number) (City) (State) (Zip)	,
Phone	( )
Address Source	Driver's License
Business Address (Name, Street) (City) (State) (Zip)	
Phone	( )
Occupation	Behavioral Thearpist
D/L Number, State	G520521778620, FL
Soc. Sec. Number	[redacted]
INS Number	
Place of Birth (City, State)	Tachira, Venezuela
Citizenship	US

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth		
				☐ 1. Arrested ☐ 2. At Large	☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
				☐ 1. Arrested ☐ 2. At Large	☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other:

Residence Phone ( )

Address (Street, Apt. Number) (City) (State) (Zip)

Business Phone ( )

Notified by: (Name) Date Time

Juvenile Disposition: 1. Handled / processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated

Released To: (Name) Relationship 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? ☐ Yes ☒ No | Description of Property | Value of Property

VICTIM NOTIFICATION REQUIRED

CODE

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. Paraphernalia/ Equipment S. Synthetics U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Battery (Domestic Violence)	1	☒Y ☐N	~~784.01 (1)~~ 784.03 1A1	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		22-062901		

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

NOT A CERTIFIED COPY

NOTICE TO APPEAR

Location (Court, Room Number, Address)

Court Date and Time: Month Day Year Time AM PM

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: 05/01/2022

ADMIN

HOLD for other Agency Name:	No Detainer
☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☑ Other:	
Intake Deputy	Cpl. Cy 3340
Signature of Arresting Officer	x D/S James Coppola 36858
Name of Arresting Officer (Print)	D/S James Coppola
I.D. #	36858
Transporting Officer	D/S James Coppola
ID #	36858
Agency	PBSO
Name Verification (Printed by Arrestee) (PRINT)	
Witness here if subject signed with an -X"	
PAGE	1 OF 1

MAY 1 PM11:24

SCANNED MAY 02 2022

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PBSO #148 REV. 8/97

PROBABLE CAUSE AFFIDAVIT

OBTS Number:

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

Juvenile: N

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 22-062901

Charge Type: Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
GOMEZ, LAURA,		H	F	10/02/1977

CHARGES

Charge Description	Charge Description
Battery (Domestic Violence) 784.03 1A1 ~~784.01 (1)~~	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
GOMEZ CAMPOS, JAVIER,	H	M	10/26/1974

Local Address (Street, Apt. Number) (City) (State) (zip)	Phone	Address Source
5430 BUCHANAN RD , DELRAY BEACH, FL 33484	(786) 260-9415	
Business Address (Name, Street) (City) (State) (zip)	**Phone**	**Occupation**
Electrician	( )	

PROBABLE CAUSE STATEMENT

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.
☐ confessed to _____ admitting to the below facts.
☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
☒ was found to have commited the below acts, resulting from my (described) investigation.

On the 1st day of May 2022 at 8:27 ☐ A.M. ☒ P.M. (Specifically include facts constituting cause for arrest.)

I responded to the address of 5430 Buchanan Road, in unincorporated Delray Beach, Florida, regarding a domestic disturbance in progress.

While en-route, PBSO Dispatch advised the caller stated he was in a physical altercation with his wife.

Upon my arrival, I first met and spoke to the victim outside of the residence. The victim was identified as Javier Gomez Campos. Gomez Campos stated the following: Just prior to my arrival, he and his wife (Laura Gomez) began to argue over "projects" around their house that he hasn't finished. According to Gomez Campos, he and his wife have been drinking alcohol, and the argument became worse. While he and his wife were arguing, she punched him in the face several times. While speaking to Gomez Campos, I observed a laceration over his left eye that was bleeding and slight swelling. This injury appeared to be consistent with Gomez Campos' statements. I asked Gomez Campos if his wife had hit him with anything else, and he said no. Gomez Campos advised he sustained the injury because of the wedding ring his wife wears. I asked Gomez Campos if he had hit his wife at any time, and he said no. Gomez Campos stated he and Gomez have been married for six years and have a five-year-old son together. I asked Gomez Campos if anyone was inside the residence when this incident occurred who may have witnessed what happened, and he said no.

I then entered the residence where Laura Gomez was, and Gomez-Campos waited outside. I asked Gomez what happened this evening. Gomez was crying and appeared to be upset. Gomez told me she and Gomez Campos got into an argument over "projects" that he doesn't finish around their house. I asked Gomez if she hit Gomez-Campos, and she said no. I asked Gomez how her husband got the injuries to his face, and she did not know. I asked Gomez if her husband had hit her, and she said no. While speaking to Gomez, I could see dried blood on the blouse she was wearing near the collar. I also observed Gomez was wearing a diamond wedding ring. I did not observe any injuries to Gomez. I asked Gomez if anyone was inside the residence when this incident occurred that may have witnessed what happened, and she said no.

After speaking to both Gomez Campos and Gomez, I determined probable cause did exist to arrest Gomez for battery in conjunction with domestic violence which is a violation of F.S.S. 784.03 (1). Due to the fact that Gomez intentionally struck Gomez-Campos against his will, and in doing so caused a laceration over his left eye. Furthermore, Gomez Campos and Gomez are husband and wife that reside together and have a five-year-old son together.

Gomez was placed under arrest and secured in handcuffs. The handcuffs were double-locked and checked for proper fit. Gomez was transported to the Palm Beach County Jail without incident.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S James Coppola 36858 D/S James Coppola
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 1st day of May 2022 by D/S James Coppola

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced LEO

38451
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

PBSO #0004 REV. 04/01 DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY

Palm Beach County Sheriff's Office

DOMESTIC VIOLENCE/DATING VIOLENCESUPPLEMENTAL PROBABLE CAUSE FORM

(Submit this form with the original Probable Cause affidavit)

Suspect: GOMEZ, LAURA, DOB: 10/02/1977 Case #: 22-062901

Victim: GOMEZ CAMPOS, JAVIER, DOB: 10/26/1974 Race: H Sex: M

Relationship between Victim and Defendant: Husband and wife

Photographs: Scene × Yes No Victim ¯ Yes ¯ No Defendant_ Yes No

911 Call: × Yes No Caller:

Weapon Used: × Yes No Type: Hands/fists

Witness: Yes × No Name:

Victim Pregnant: Yes × No If yes, ___ weeks _____ months

Injuries: × Yes No Description: Laceration over left eye

Medical Treatment: Yes × No

At Scene: Yes × No Paramedics:

At Hospital: Yes × No Hospital: Physician:

Are Children Living in Home? × Yes ¯ No DCF Notified? ×Yes ¯ No

Name: Javier Gomez DOB: 12 /08 /2016

Name: DOB: ___/___/_____

Name: DOB: ___/___/___

Injunction Yes × No Case #:

No Contact Order Yes × No Case #:

Alcohol or Drugs × Yes No Unknown

Prior History of Domestic/Dating Violence Yes × No

Defendant's Statements × Yes No If yes, written recorded oral

First words Defendant said when you responded to scene: Me and my husband got into an argument.

Victim's Statements × Yes ¯ No If yes, written recorded oral

First words Victim said when you responded to scene: Me and my wife got into an argument

Did the Victim contact anyone other than police within an hour of the incident regarding the incident?

¯ Yes ×No If yes, name: phone (___)___ -_____

Observations of Victim (Physical & Emotional):

Upset Crying Fearful Hysterical Afraid × Calm Nervous

Complained of pain Other

Victim Contact Information:

Local Address: 5430 BUCHANAN RD , DELRAY BEACH, FL 33484

Phone: Home (786) 260-9415 Work (___)___ -_____ Cell (___)___ -_____

Employer: Electrician

Name of Relative: Phone (___)_____-_____

Address:

VICTIM NOTIFICATION FORM

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

- **Homicide** (Ch. 782)
- **Attempted Murder**
- **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.)
- **Sexual Offense** (Ch. 794)
- **Attempted Sexual Offense**

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

SUSPECT/OFFENDER: **GOMEZ, LAURA,** (FOR WARRANTS USE ONLY) COURT CASE/WARRANT#.

1. Incident Report #: **22-062901** Agency: **PBSO**
   Offense: **Battery (Domestic Violence)**
   Suspect/Offender: **GOMEZ, LAURA,**
   D.O.B. **10/02/1977** Race: **H** Sex: **F**

2. Warrant # (s):

3.a. Victim's name: **GOMEZ CAMPOS, JAVIER,** D.O.B. **10/26/1974** Race: **H** Sex: **M**
   Address: **5430 BUCHANAN RD**
   City: **DELRAY BEACH, FL 33484**
   Home #- **(786) 260-9415** Work #: **0** Other:

b. Victim's next of kin, friend or neighbor:
   Address:
   City:
   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:** I request the information on this form be kept confidential (applicable only to sexual battery, stalking, child abuse, harassment or domestic violence cases).

Signature of person waiving notification:

Printed name of person waiving notification: **GOMEZ CAMPOS, JAVIER,**

Deputy's Name: **D/S James Coppola** I.D.# **36858** Date: **05/01/2022**

White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records

PBSO 00029A REV. 4199

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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2022011428	**Date:** 5/2/2022
	Specialist Name/ID: M. Tooks #8557