

0519666 50-2020-CF-009315-AMB

P1792

DOMESTIC VIOLENCE PROBABLE CAUSE AFFIDAVIT PALM BEACH COUNTY

On the 14TH day of NOVEMBER 2020 at 21:56
Subject: HUGHES, PAIGE, CHANEL DOB: 04/22/1982 Case #: 20-056312
Charge Description: Simple Battery Domestic Statute #: 784.03.1A1
Victim: _____ DOB: _____ Race: W Sex: _____
Local Address: _____
Personal Contact: _____
Narrative:

On 11/14/2020 at approximately 21:56 hours, I responded to [REDACTED] in reference to a delayed domestic battery.

Upon my arrival I met with the caller W/M [REDACTED] (11/18/77), who provided a sworn statement alleging that his [REDACTED] of his child [REDACTED] was intoxicated and battered him and their [REDACTED]

[REDACTED] stated that he had arrived him with [REDACTED] and Paige was intoxicated. [REDACTED] stated that he went outside and while outside he heard [REDACTED] screaming and crying out for him. [REDACTED] stated that he went inside of the residence and observed Paige trying to take a shirt off of [REDACTED]. Due to Paige being unable to get [REDACTED]'s head and arms out of the shirt, Paige threw the shirt with her [REDACTED] in it. Thus causing [REDACTED] to roll off the bed and onto the floor. [REDACTED] stated that he immediately grabbed [REDACTED] and Paige had begun to batter him by punching, scratching and slapping him on the back of his head and on the left side of his upper body while he held [REDACTED] in his right arm. [REDACTED] stated that Paige then started throwing things down in the residence. [REDACTED] informed Paige that he was going to call the Police and she had left in her dark colored Range Rover. [REDACTED] refused medical attention.

While making contact with [REDACTED] I observed scratch marks and slight skin tearing from what appeared to be from the scratches. [REDACTED]'s shirt was also torn. Photographs of [REDACTED] were captured.

I made contact with [REDACTED] who was not willing to talk to me. I attempted to ask her about the incident and [REDACTED] responded by turning her head away from me. With the assistance of [REDACTED] I did not observe injuries to [REDACTED]'s person. Photographs of [REDACTED] were captured. [REDACTED] refused medical attention for [REDACTED].

My attempts to make contact with Paige were unsuccessful. Paige is believed to be staying in Jupiter for the night but resides at the address of the incident

Based on the above mentioned investigation, I have probable cause to charge Paige with Simple Domestic Battery pursuant to FSS 784.03.1A1 due to her battering [REDACTED] as well as Child abuse pursuant to FSS 827.03.1 due to her battering [REDACTED].

Mary's Law form completed. Exempt form public records form completed. Domestic Violence Brochure provided.

I made contact with DCF operator Jean 244 who stated that a report will be generated.

Master Recording Requested. BWC activated.

Defendant's Statement: Taped

Victim's Statement: Taped

Observation Of Victim (Physical and Emotional):

[REDACTED] scratch marks skin tearing from what appeared to be from the scratches. [REDACTED] no injuries

Relationship Between Victim and Suspect:

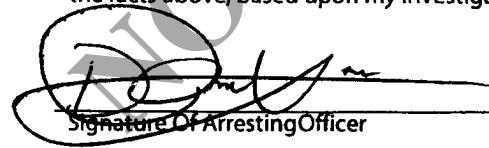
Paige is the [REDACTED] to [REDACTED] and [REDACTED] to [REDACTED]

Photographs: Scene: Yes No
Victim: Yes No
911 Call: Yes No Caller: _____
Tape Requested: Yes No
Weapon Used: Yes No Type: _____
Witnesses: Yes No
Injuries: Yes No
Medical Treatment: Yes No
At Scene Yes No Paramedics: _____
At Hospital Yes No Physician(s): _____
Hospital: _____
Act Committed In Presence Of Minor(s): Yes No
Name: _____ Age: 4
Name: _____ Age: _____
F.D.C.F. Notified: Yes No Victim Pregnant: Yes No
Violation Of Restraining Order: Yes No Case #: _____
Prior History Of Domestic Violence: Yes No
Alcohol Or Drugs Involved: Yes No Unknown

Victim Contact Information:

Phone Home: _____ Work: _____
Employer: Self Employed
Relative Name: _____ Phone: _____
Address: _____
City/State: _____

State Of Florida
County Of Palm Beach
Appeared before me, Jennings, (print name) personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.


Signature Of Arresting Officer

Sworn to and subscribed to me before this 15 day of NOV , 2020


Notary/Clerk Of Court/Officer (F.S.S. 117.10)

VICTIM NOTIFICATION FORM

This form must be filled out in a case involving one of the following crimes:

- **Homicide (Ch. 782)**
- **Attempted Murder**
- **Stalking (S. 784.084)**
- **Domestic Violence** (This includes any *Assault, Agg. Assault, Battery, Agg. Battery, Sexual Assault, Sexual Battery, Stalking, Agg. 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 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 #: 20-056312 Agency: Boynton Beach Police Department
Offense: Simple Battery Domestic
Suspect/Offender: HUGHES, PAIGE, CHANEL
DOB: 04/22/1982 Race: W Sex: F
2. Warrant # (s): _____
3. Complete one (1) of the following:
 - A. Victim's Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Home #: _____ Work #: _____ Other: _____
 - B. Victim's Next of Kin: _____
Address: _____
City: _____ State: _____ Zip: _____
Home #: _____ Work #: _____ Other: _____
 - C. Victim's designated contact other than next of kin (for example: a friend or neighbor):
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Home #: _____ Work #: _____ Other: _____
4. Relevant identification or case numbers assigned to the case (please specify):

WAIVER: I CHOOSE NOT TO COMPLETE THIS VICTIM NOTIFICATION FORM, AND UNDERSTAND THAT I AM WAIVING MY RIGHT TO BE NOTIFIED OF THE RELEASE OF THE SUSPECT/OFFENDER.

Signature of Victim: _____

Printed Name of Victim: _____

Officer's Name: Jennings I.D. #: 1000 Date: 11/15/2020



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

REVIEW COMPLETED BY

Booking Number: 2020026960	Date: 11/17/2020
	Specialist Name/ID: AM/31562