

22mm 2407MB

ARREST / NOTICE TO APPEAR

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

1

JUVENILE

AD M I N I S T R A T I O N	OBT Number		Agency ORI Number 0502000		Agency Name Lantana Police Department		Agency Report Number (N.T.A.'s only) 614 22-001262		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias		1		JUVENILE			
D E F E N D A N T	Charge Type: Check as many as apply ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		If Weapon Seized Enter Type		Multiple Citations Indicate		1									
	Location of Arrest (Including Name of Business) 184 NEPTUNE DR HYPOLUXO FL 33462, 184 NEPTUNE DR,						Location of Office (Business Name, Address) 184 NEPTUNE DR, HYPOLUXO, FL 33462									
	Date of Arrest 03/26/2022		Time of Arrest 23:38		Booking Date 03/26/2022		Booking Time 23:48		Jail Date 03/27/2022		Jail Time 00:42		Location of Vehicle N/A			
	Name (Last, First, Middle) SHUMWAY, TANIA ANN						Alias (Name, DOB, Soc. Sec. #, Etc.)									
	Race W - White B - Black O - Oriental/Asian W		Sex F		Date of Birth 03/24/1983		Height 5'01		Weight 130		Eye Color BROWN		Hair Color BLONDE		Complexion LIGHT	
	Build Small						Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT BACK SHOULDER / CROSS						Indication of: Alcohol Influence Drug Influence Yes ☒ No ☐ Unk. ☐			
	Local Address (Street, Apt. Number) 184 NEPTUNE DR, HYPOLUXO, FL 33462						(State) FL		(Zip) 33462		Phone (321) 302-6532		Residence Type: 1. City 2. County 3. Out of State 1			
	Permanent Address (Street, Apt. Number) 184 NEPTUNE DR, HYPOLUXO, FL 33462						(State) FL		(Zip) 33462		Phone (321) 302-6532		Address Source FL DL			
	Business Address (Name, Street) 184 NEPTUNE DR, HYPOLUXO, FL 33462						(State) FL		(Zip) 33462		Phone (954) 303-9454		Occupation			
	DL Number, State S500801836040 / FL						Sec. Sec. Number [REDACTED]		INS Number [REDACTED]		Place of Birth (City, State) MELBOURNE, FL		Citizenship US			
C O D E F	Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth		☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile			
	Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth		☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile			
	☐ Parent ☐ Legal Custodian ☐ Other: _____						Name (Last, First, Middle)						Residence Phone			
	Address (Street, Apt. Number)						(City)		(State)		(Zip)		Phone			
	Notified by: (Name)						Date		Time		JUVENILE DISPOSITION REQUIRED		2. TOT IAC 3. Incarcerated			
	Released To: (Name)						Relationship		Date		Time					
	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.						School Attended				Grade					
	☐ Yes, by: _____ ☐ No: _____						Property Crime? ☐ Yes ☒ 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. Paraphernalia/ Equipment S. Synthetic		U. Unknown Z. Other			
C H A R G E	Charge Description BATTERY						Statute Violation Number 784.03(1)(A)(1)		Violation of ORD # 784.03(1)(A)(1)							
	Drug Activity		Drug Type N		Amount / Unit		Offense #		Counts		Domestic Violence ☒ Y ☐ N		Warrant / Capias Number			
	Charge Description						Statute Violation Number		Violation of ORD #							
	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence ☐ Y ☐ N		Warrant / Capias Number			
	Charge Description						Statute Violation Number		Violation of ORD #							
	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence ☐ Y ☐ N		Warrant / Capias Number			
	Health / Apparent Physical Condition of Defendant OK						Any knowledge of the following: Explain: ☐ Mental ☐ Escape Plan ☐ Medication ☐ Deformation ☐ Injuries									
	Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail ☐ Pooled Bond ☐ South County Mental Health						PROPERTY - Received By TUANG		Released By MORALES		Released To PBCI					
	Transported By MORALES						Date Transported 03/27/2022		Time Transported 00:43		Other					
	N O T I C E T O A P P E A R	☐ 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)				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)						Date Signed										
HOLD for Other Agency						Signature of Arresting Officer [Signature]		Name Verification (Printed by Arrestee)								
☐ Dangerous ☐ Resisted Arrest ☐ Seizure ☐ Other						Name of Arresting Officer (Print) MORALES (HYPO), LUIS		I.D. # H778		(PRINT)						
Issued Deputy Buillo						Patch # 16342		Transporting Officer MORALES		I.D. # 778		Agency LANTA				
												PAGE 1 of 1				
												Witness here if subject signed with an "X".				

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

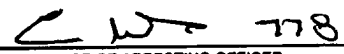
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DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

A D M I N	Date / Time 03/26/2022 23:01		Agency Name LANTANA POLICE DEPARTMENT		Agency Report Number 6 4 22-001262	
	Agency ORI Number FL 0502000					
D E F	Name (Last, First, Middle) SHUMWAY, TANIA ANN				Race W	Sex F
					Date of Birth 03/24/1983	
C H R G	Charge Description 784.03 (1)(A)(1) BATTERY					
	Victim's Name (Last, First, Middle) SHUMWAY, TODD MICHAEL				Race W	Sex M
V I C T I M	Local Address (Street, Apt. Number) (City) (State) (Zip) 184 NEPTUNE DRIVE, HYPOLUXO, FL 33462				Phone (954) 303-9454	
	Business Address (Name, Street) (City) (State) (Zip)				Address Source	
					Occupation	
O B S E R V E R	DEFENDANT'S STATEMENTS: Written ☐ Taped ☒ Oral ☐		OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): UPSET			
	VICTIM'S STATEMENTS: Written ☐ Taped ☒ Oral ☐					
A D D I T I O N A L I N F O R M A T I O N	RELATIONSHIP BETWEEN VICTIM & SUSPECT SPOUSE					
	PHOTOGRAPHS: Scene: ☐ YES ☒ NO Victim: ☒ YES ☐ NO 911 CALL: ☒ YES ☐ NO CALLER: VICTIM WEAPON USED: ☐ YES ☒ NO TYPE: WITNESSES: ☐ YES ☒ NO (If YES, attach witness list) INJURIES: ☒ YES ☐ NO MEDICAL TREATMENT: ☐ YES ☒ NO AT: Scene: ☐ YES ☒ NO PARAMEDICS: Hospital: ☐ YES ☒ NO PHYSICIAN(S) / HOSPITAL: ACT COMMITTED IN PRESENCE OF MINOR(S): ☐ YES ☒ NO NAMES/AGES: H. R. S. 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					
N A R R	On 03/26/2022 at approx 2301 hrs, I (Ofc Morales ID 778) responded to 184 Neptune Dr in reference to a domestic violence investigation. On the 911 call the Victim, Todd M Shumway (06/25/1964) stated he was hit in the face by his wife, Tania Shumway (03/24/1983).					
	STATE OF FLORIDA COUNTY OF PALM BEACH Appeared before me, _____ 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 before me this <u>27</u> day of <u>March</u>, <u>2022</u>. JOHNSON, SHAWN NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)					

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

Narrative Continuation

A D M I N	Date / Time 03/26/2022 23:01		
	Agency ORI Number FL 0502000	Agency Name LANTANA POLICE DEPARTMENT	Agency Report Number 6 4 22-001262
N A R R A T I V E	Upon arrival, Todd was waiting outside for the police. I then put Todd under oath and took his statement. Todd stated his wife was jealous of an incident that occurred the night before when another woman touched him. Tonight, Tania started drinking heavily and after a short argument Tania punched Todd twice on the left side of his head. I noticed Todd had a small lump and redness near his left eye and redness on his left temple. Pictures were taken. I then went to meet with Tania. Tania was in the rear of the house screaming, crying and appeared to be extremely intoxicated. Post-Miranda, Tania confessed hitting Todd because he's a liar. Tania had no visible injuries. Tania was taken into custody (hancuffed and checked for tightness). Tania was taken to the Lantana Police Department and later lodged into the PBCJ for Simple Battery. BWC available.		
	STATE OF FLORIDA COUNTY OF PALM BEACH Appeared before me, _____ 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 before me this <u>27</u> day of <u>March</u>, <u>2022</u>. JOHNSON, SHAWN NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

VICTIM NOTIFICATION FORM

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

- Homicide (Ch. 782)
- Sexual Offense (Ch. 794)
- Attempted Murder
- Attempted Sexual Offense
- Stalking (S. 784.048)
- 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 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#: 22-001262 Agency: Lantana PD
Offense: Battery
Suspect/Offender: Julia Shumway
D.O.B. 03/24/83 Race: W Sex: F
2. Warranty #(s): _____
3. Complete one (1) of the following:
 - a. Victim's name: Todd Michael Shumway
Address: 184 Neptune Dr Hypoluxo FL 33462
City: _____ State: _____ Zip: _____
Home #: 954-303-9454 Work #: _____ Other#: _____
 - b. Victim's next of kin: Rusty Shumway
Address: 732 NE 19th Ave Fort Lauderdale 33301
City: _____ State: _____ Zip: _____
Home #: 954-732-2434 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 person waiving notification: _____

Printed name of person waiving notification: _____

Officer's Name: L. Morales I.D.: 778 Date: 02/26/22

SUSPECT/OFFENDER: Shumway, Todd
COURT CASE/WARRANT #: _____
(FOR WARRANT USE ONLY)



**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: 2022007887

Date: 3/27/2022

Specialist Name/ID: Chantel Daniels/30347