

2020mm005/43A44N/B

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number	Agency ORI Number FLO 50000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-20061186	
Charge Type: Check as many as apply:	<input type="checkbox"/> 1. Felony	<input checked="" type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	Weapon Seized / Type 1. Yes 2. No		Multiple Clearance Indicator
Location of Arrest (Including Name of Business) Filing			Location of Offense (Business Name, Address) 925 Village Rd, PBG FL 33410			
Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle

Name (Last, First, Middle) Hamlin, Trina, Kay			Alias (Name, DOB, Soc. Sec. #, Etc.) None					
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex W F	Date of Birth 09/30/56	Height 5'3	Weight 119	Eye Color Brown	Hair Color Brown	Complexion Medium	Build Medium
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) Unk			Marital Status Single	Religion Unk	Indication of: Alcohol Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk. Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk.			
Local Address (Street, Apt. Number) (City) (State) (Zip)			Phone (561) 339-0871		Residence Type: 1. City 2. County 3. Florida 4. Out of State 3			
Permanent Address (Street, Apt. Number) (City) (State) (Zip)			Phone () ()		Address Source United States Postal Service			
Business Address (Name, Street) (City) (State) (Zip) USPS 3330 Fairchild Gardens Ave PBG, FL 33410			Phone () ()		Occupation Mail carrier			
D/L Number, State H545811568500		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) Unk	Citizenship US	

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile

<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> 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
The above address 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 (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)			School Attendance Grade
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No	Description of Property	Value of Property	

Drug Activity N. N/A S. Sell B. Buy P. Possess 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
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Charge Description Simple Battery	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 784.03(1)(a)(1)	Violation of ORD #
Drug Activity N	Drug Type N	Amount / Unit N	Offense # 20061186	Warrant / Capias Number
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number

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

HOLD for other Agency Name:	Signature of Arresting Officer X	Name Verification (Printed by Arrestee) (PRINT)
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:	D/S Maduri 9151
Intake Deputy I.D. #	Pouch #	Transporting Officer ID # Agency
Witness here if subject signed with an "X"		1 OF 1

PROBABLE CAUSE AFFIDAVIT

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

Juvenile N

OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06-20061186	
Charge Type: Check as many as apply.		Special Notes:		Name (Last, First, Middle) Hamlin, Trina, Kay		Alias None	
<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		Race W	
Sex F		Date of Birth 09/30/56		Charge Description Simple Battery 784.03(1)(a)(1)		Charge Description	
Charge Description		Charge Description		Charge Description		Charge Description	
Victim's Name (Last, First, Middle) Harris III, Robert, L.		Race B		Sex M		Date of Birth 01/19/67	
Local Address (Street, Apt. Number) (City) (State) (zip)		Phone (772) 284-1223		Address Source United States Postal Service			
Business Address (Name, Street) (City) (State) (zip)		Phone (772) 485-0131		Occupation USPS Manager			
<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. 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 23rd day of April 2020 at 1:34 <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p>On 04/23/20 at approximately 1255 hours, I received a phone message to return the complainant's call concerning an incident that took place earlier this month under related PBSO case #20057150. The incident occurred within the Lost Tree Village community located at 925 Village Rd in unincorporated Palm Beach Gardens, FL 33408 within Palm Beach County. Based on the phone conversation, it was necessary to meet with the complainant at the United States Post Office located at 3330 Fairchild Gardens Ave Palm Beach Gardens, FL 33410.</p> <p>Upon arrival, contact was made with the complainant identified as B/M Robert L. Harris III (01/19/67) determined to be the branch manager of this USPS location. Also, two supervisors that were present that witnessed the incident that day. These supervisors were identified as W/M Kimel Menendez (05/06/83) and B/M Kenneth D. Perry (10/26/65). The other involved party not currently present is the USPS mail carrier employee identified as W/F subject, Trina K. Hamlin (09/30/56).</p> <p>It was learned that Manager Harris and Supervisors Menendez and Perry went to confront mail carrier Hamlin currently located within the Lost Tree Village community. The purpose of this meeting on-site was to conduct a street observation. Upon discovering that she did not possess her driver's license which is violation of USPS policy, she was relieved of her duties including repossessing the USPS vehicle including its contents. Mail carrier Hamlin refused to exit the USPS vehicle and ignored their multiple requests to follow their guidance. Manager Harris reached into the USPS vehicle to retrieve the key from the ignition when mail carrier Hamlin purposely struck him on the right wrist twice utilizing a fist followed by a single slap. The actions of mail carrier Hamlin was witnessed by both supervisors on scene.</p> <p>After the incident occurred, Manager Harris and Supervisors Menendez and Perry returned to the USPS office when swelling was discovered. Supervisor Menendez took digital photos and completed their in-house paperwork. Manager Harris complained of injury to his right wrist, so he sought medical treatment at the Jupiter Medical Center. Since his medical treatment, Manager Harris' right wrist is now in a brace. All pertinent USPS and medical paperwork including photos were immediately reviewed and turned into PBSO evidence.</p> <p>Sworn written statements were obtained from Manager Harris and Supervisors Menendez and Perry. This incident was brought to the attention of the Postal Inspector and referred to PBSO as Manager Harris authorized to press charges against mail carrier Hamlin. A DL photo of mail carrier Hamlin was presented to Manager Harris for the purpose of a familiarization photo which was verified to be true and accurate. Manager Harris was issued a Victim's Rights and Case Information form with victim pamphlet and advised to contact PBSO should he have additional concern.</p> <p>Contact was made with the security of Lost Tree Village community, however they were not aware of the battery that occurred during the incident. Finally, I attempted several times in establishing telephone contact with mail carrier Hamlin but no contact made for a possible interview. Based on the findings of this investigation, I believe probable cause exist for the violation of FSS 784.03(1)(a)(1) Simple Battery and request a warrant.</p>							
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p><i>[Signature]</i> D/S Maduri</p> <p>(Signature of Arresting/Investigative Officer)</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>23rd</u> day of <u>April</u> 20<u>20</u> by <u>Maduri</u></p> <p>(Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification. Type of identification produced _____)</p> <p><i>[Signature]</i></p> <p>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>							