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2022 NM 005388 AMB

1952

Marsy's Law CVI FL Const. Art. 1 § 18(b)		ARREST / NOTICE TO APPEAR Juvenile Referral Report		Check if Supplement is Attached	
OBTS Number		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias	
Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 0 6 - 22-084253	
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 N/A		Multiple Clearance Indicator 0 1	
Location of Arrest (including Name of Business)		Location of Offense (Business Name, Address)			
Date of Arrest 07/04/2022		Time of Arrest 18:57		Booking Date 07/04/2022	
Name (Last, First, Middle) Sotloff, Shirley, Pulwer		Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White O - American Indian B - Black		Sex W F		Date of Birth 10/9/1950	
Height 5'01		Weight 125		Eye Color Brown	
Hair Color Brown		Complexion Fair		Build Small	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status Married		Religion JEWISH	
Local Address (Street, Apt. Number) (City) (State) (Zip)		Phone (786) 694-5973		Indication of: Alcohol Influence Drug Influence Y N Unk	
Permanent Address (Street, Apt. Number) (City) (State) (Zip)		Phone () () ()		Residence Type: 1. City 2. County 3. Florida 4. Out of State	
Business Address (Name, Street) (City) (State) (Zip)		Phone () () ()		Address Source FL DL Retired	
D/L Number, State S341795508690, FL		Soc. Sec. Number		INS Number	
Co-Defendant (Last, First, Middle)		Race		Sex	
Co-Defendant (Last, First, Middle)		Race		Sex	
Parent Legal Custodian Other		Name (Last)		First	
Address (Street, Apt. Number) (City) (State) (Zip)		Residence Phone () () ()		Business Phone () () ()	
Notified by: (Name)		Date		Time	
Released To: (Name)		Relationship		Date	
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 (561) 355-8511) informed of any change of address. ☐ Yes, by: (Name) ☐ No (Reason)		School Attended		Grade	
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/ Possess		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	
Charge Description Simple Battery (Domestic)		Counts 1		Domestic Violence ☐ Y ☐ N	
Drug Activity N		Drug Type N		Amount / Unit	
Offense # 22-084253		State Violation Number 784.03(1)(a)(1)		Warrant / Capias Number	
Charge Description		Counts		Domestic Violence ☐ Y ☐ N	
Drug Activity		Drug Type		Amount / Unit	
Offense #		State Violation Number		Warrant / Capias Number	
Charge Description		Counts		Domestic Violence ☐ Y ☐ N	
Drug Activity		Drug Type		Amount / Unit	
Offense #		State Violation Number		Warrant / Capias Number	
Charge Description		Counts		Domestic Violence ☐ Y ☐ N	
Drug Activity		Drug Type		Amount / Unit	
Offense #		State Violation Number		Warrant / Capias Number	
Location (Court, Room Number, Address) Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600					
Court Date and Time Month Day Year Time A.M. P.M. 07/04/2022					
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 07/04/2022					
HOLD for other agency		Signature of Arresting Officer Name of Arresting Officer (Print) D/S D. Rodriguez		Name Verification (Printed by Arrestee) (PRINT)	
Dangerous Sufficient		I.D. # 9475		PAGE 1 of 1	
Intake Deputy CPL. C. GARCIA 324		Transporting Officer D/S D. Rodriguez 9475		Agency PBSO	
Witness here if subject signed with an "X"					

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		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 NTA		3 Request for Warrant 4 Request for Capias		I	Juvenile	N	
ADMIN	OBT Number		Agency ORI Number FLO. 5, 0, 0, 0, 0, 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 22-084253				
	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) Sotloff, Shirley, Pulwer				Alias		Race W	Sex F	Date of Birth 10/9/1950		
	Charge Description Simple Battery (Domestic)				784.03(1)(a)(1)		Charge Description				
CHARGES	Charge Description				Charge Description		Charge Description				
	Victim's Name (Last, First, Middle)				Race W		Sex F	Date of Birth			
VICTIM	Local Address (Street, Apt Number)				(City)	(State)	(Zip)	Phone		Address Source	
	Business Address (Name, Street)				(City)	(State)	(Zip)	Phone		Occupation	
The undersigned certifies and swears that I have just and reasonable grounds to believe, and do believe that the above named Defendant committed the listed violation(s) 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 committed the below acts, resulting from my (described) investigation. On the <u>4th</u> day of <u>July</u> 20 <u>22</u> at <u>6:57</u> ☐ A.M. ☒ P.M. (Specifically include facts constituting cause for arrest)											
☒ Mary's Law C/M FL. Const. Art. 1 § 18(b) On Monday, July 4, 2022 at approximately 1758 hours, I responded to _____ in unincorporated _____ Palm Beach County _____ in reference to a Domestic Simple Battery. Upon arrival, I made contact with the complainant, _____ identified verbally and he made the following statement: His _____ and _____ haven't had a good relationship for years due to his _____'s lifestyle and choices. On this day, when he left to pick up dinner for the family, his _____ called him to come home quickly. When he arrived home, his _____ was cleaning salad dressing off the floor when an argument broke out between her and _____. They fought each other in the living room and he called the police. I then made contact with _____ identified verbally and she made the following statement: "_____ hit me. I called her a slut and a whore". She was unable to give a coherent account of what happened to cause the fight. I repeatedly asked her to tell me what happened but she said she did not remember. I then made contact with _____ identified by Florida Driver's License and she made the following statement: Her _____ hasn't liked her in years. This morning her _____ brought her to a walk-in clinic for a particular problem. When they returned, her _____ called her a whore, a slut and a drug addict repeatedly. She continued yelling obscenities until she threw a bottle of salad dressing at the wall in anger. She did not hit her _____ with it, but the dressing splashed on the wall and floor making her _____ even angrier. When she realized she made a mess, she went to clean it up. While cleaning the floor, her _____ stood up out of her chair and started striking her all over her body in rage. She hit her back on the arm, but it was after repeated strikes from her _____. Her _____ had a few drinks for the holiday and believes that is what made her continue to hit her for so long and be so aggressive. It should be noted, Mr. _____ account of what happened was identical to the victim's statement. Statements were made in separate areas of the home. Probable cause exists that Mrs. _____ is in violation of F.S.S 784.03(1)(a)(1) Simple Battery (Domestic/ 1 count 1M). She was transported to the Main Detention Center for booking.											
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH				D/S D. Rodriguez						
	(Signature of Arresting Investigative Officer)										
The foregoing instrument was sworn to or affirmed and subscribed before me this <u>4</u> day of <u>July</u> 20 <u>22</u> by <u>D. Rodriguez</u> (Print name of Arresting Investigative Officer) who personally known to me and/or produced identification. Type of identification produced <u>Known Leo</u> Notary Public, Clerk of Court (Officer F.S.S. 11.7, 1.0) <u>52402</u>											

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Palm Beach County Sheriff's Office
DOMESTIC VIOLENCE/DATING VIOLENCE SUPPLEMENTAL PROBABLE CAUSE FORM
(Submit this form with the original Probable Cause affidavit)

Suspect: Sotloff, Shirley, Pulwer DOB: 10/9/1950 Case #: 22-084253

Victim: [REDACTED] DOB: [REDACTED] Race: W Sex: F

Relationship between Victim and Defendant: _____

Photographs: Scene ☐ Yes ☒ No Victim ☒ Yes ☐ No Defendant ☐ Yes ☒ No

911 Call: ☒ Yes ☐ No Caller: [REDACTED]

Weapon Used: ☐ Yes ☐ No Type: _____

Witness: ☒ Yes ☐ No Name: [REDACTED]

Victim Pregnant: ☐ Yes ☒ No If yes, weeks months

Injuries: ☒ Yes ☐ No Description: Bruises to forearms

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: _____ DOB: / /

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: This is wrong. [REDACTED] is a drug addict

Victim's Statements ☒ Yes ☐ No If yes, ☐ written ☐ recorded ☐ oral

First words Victim said when you responded to scene: I'm sick of this. All they do is treat me like garbage

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: [REDACTED]

Phone: Home [REDACTED] Work () - Cell () -

Employer: Unemployed

Name of Relative: [REDACTED] Phone () -

Address: [REDACTED] FL [REDACTED]

VICTIM NOTIFICATION FORM

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

- 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.

1. Incident Report #: 22-084253 Agency: PBSO
Offense: Simple Battery (Domestic)
Suspect/Offender: Sotloff, Shirley, Pulver
D.O.B. 10/9/1950 Race: W Sex: F

2. Warrant # (s): _____

3. a. Victim's name: _____ D.O.B. _____ Race: W Sex: F
Address: _____
City: _____
Home #- _____ Work #: 0 Other: _____

b. Victim's next of kin, friend or neighbor: _____
Address: _____
City: _____ FL _____ 33473
Home #: _____ Work #: N/A 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: _____

Deputy's Name: D. Rodriguez I.D.# 9475 Date: 07/04/2022
White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records
PBSO 00070A REV. 4/100

SUSPECT/OFFENDER:

Sotloff, Shirley, Pulver

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT#

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**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	☒	FL CONSTITUTION ARTICLE 1, 16(b)	Other: MARSY'S LAW	1-6
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2022017059	Date: 7/5/2022
	Specialist Name/ID: Pinkneya/7796

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