

J# 0541402

PH 2340

Marsy's Law CVI FL. Const. Art. 1 § 16(b)

Check if Supplement is Attached

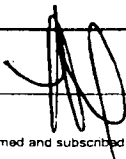
1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias [1] Juvenile [N]

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report				Agency Report Number (N.T.A.'s only) 0 6 - 23-081412	
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 - 23-081412	
Charge Type: Check as many as apply. <input checked="" 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		If Weapon Seized	Multiple Clearance Indicator
Location of Arrest (including Name of Business)				Location of Offense (Business Name, Address)			
Date of Arrest 06/22/2023		Time of Arrest 1100	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
Name (Last, First, Middle)				Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White B - Black	I - American Indian O - Oriental/Asian	Sex W F	Date of Birth	Height 5'2	Weight 110	Eye Color Brn	Hair Color Blk
Complexion Light	Build Sma	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) Multiple	Marital Status Married	Religion NONE	Indication of Alcohol Influence Drug Influence Y N Unk	Residence Type: 1. City 2. County 3. Florida 4. Out of State	Address Source FL DL
Local Address (Street, Apt. Number)		(City)		(State)		(Zip)	
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)	
Business Address (Name, Street)		(City)		(State)		(Zip)	
D/L Number, State H636064666680, FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) Charleston, SC	
Citizenship US		Co-Defendant (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large	<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
Co-Defendant (Last, First, Middle)		Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large	<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:	Name (Last)		(First)		(Middle)		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)		Date	Time	School Attended	Grade		
The above address was 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's Office (Phone (561) 355-6511) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No (Reason)				Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> 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	Charge Description Battery On A Person Over 65 Years Old	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Statute Violation Number 784.08(2c)	Warrant / Capias Number	Bond NIB	Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation of ORD #
Drug Activity N	Drug Type N	Amount / Unit N/A	Offense # 23-081412	Warrant / Capias Number	Bond	Charge Description	Counts
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond	Charge Description	Counts
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond	Charge Description	Counts
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond	Charge Description	Counts
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond	Charge Description	Counts
Location (Court, Room Number, Address)							
Court Date and Time							
Month	Day	Year	Time	A.M.			
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED TO 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 BE ISSUED							
Signature of Defendant (or Juvenile and Parent/Custodian)				Date Signed 06/22/2023			
HOLD for other agency		Signature of Arresting Officer X		Name Verification (Printed by Arrestee)			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:	Name of Arresting Officer (Print) D/S H. Paulson		I.D. # 7713	(PRINT) SLM	PAGE	
Intake Deputy M. Jeanilho	I.D. # 713	Pouch # 2340	Transporting Officer D/S H. Paulson	I.D. # 7713	Agency PBSO	Witness here if subject signed with an "X"	

SCANNED

2023 CF 005377 AXX

FILED PBC WEST COUNTY 23 JUN 23 AM 8:10

		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 NTA		3 Request for Warrant 4 Request for Capias		1	Juvenile	N
ADMIN	OBTS Number					Agency ORI Number	Agency Name		Agency Report Number	
	FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE				23-081412				
DEF	Charge Type	<input type="checkbox"/> 1 Felony <input type="checkbox"/> 3 Misdemeanor <input type="checkbox"/> 5 Ordinance <input type="checkbox"/> 2 Traffic Felony <input type="checkbox"/> 4 Traffic Misdemeanor <input type="checkbox"/> 6 Other		Special Notes						
	Name (Last, First, Middle)	[REDACTED]				Aliases	Race	Sex	Date of Birth	
CHARGES	Charge Description	Battery On A Person Over 65 Years Old		784.08(2c)		Charge Description				
	Charge Description					Charge Description				
VICTIM	Victim's Name (Last, First, Middle)	[REDACTED]				Race	Sex	Date of Birth		
	Local Address (Street, Apt Number)	(City)	(State)	(Zip)	Phone	Address Source				
	Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation				
<p>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</p> <p>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 <u>22nd</u> day of <u>June</u> 20 <u>23</u> at <u>0930</u> <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p>										
<p><input type="checkbox"/> Marsy's Law CVI FL. Const. Art. 1 § 16(b)</p> <p>On the above date and time, I was dispatched to a Domestic Dispute call at [REDACTED] D/S M. Fongemie (PBSO ID # 6277) arrived on scene before me and had the situation handled. He advised me that [REDACTED] have started the process to get divorced, but are still living together. Both of them have established rooms in the residence and they have keys to access these rooms. A verbal altercation ensued over a bathroom that [REDACTED] had established for him and his son. [REDACTED] has an adult son (who has a different father) living in the home. [REDACTED] demanded [REDACTED] to open the bathroom that he has locked, so her son could use the shower. D/S Fongemie thought the issue was resolved and we left the scene.</p> <p>Less than 10 minutes after we cleared the scene, PBSO Dispatched received another call from [REDACTED] She had alleged that she was battered.</p> <p>We arrived back on scene and were met outside by [REDACTED] and his mother [REDACTED] The two of the stated that when PBSO left the scene, [REDACTED] went upstairs to the original bathroom in question. She started banging on the door with a pry bar trying to get the door open. [REDACTED] yelled at [REDACTED] that the door was unlocked, so she need to stop hitting it with the pry bar. A couple minutes later, [REDACTED] went upstairs and saw [REDACTED] removing the door lock. She yelled down at her son and they both went upstairs. [REDACTED] put the door knob with the locking mechanism down on the counter top while she was trying to remove the rest of the door look. [REDACTED] grabbed this door knob. [REDACTED] started yelling for him to give it back to her. This is when the physical altercation took place. [REDACTED] said he did not see [REDACTED] raise the pry bar in attempt to strike him, but [REDACTED] stated that is what she saw. She decided to step in between the two of them, because she didn't want things to get physical. That's when [REDACTED] punched her with a closed fist in the back of her head. Then she said she had to defend herself against [REDACTED] and started fighting back. [REDACTED] corroborated with what his mother said. It must be noted that [REDACTED] did have some small lacerations on her arm. We had both of them provide us with Sworn Recorded Statements</p>										
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH  D/S H. Paulson 7/13 (Signature of Arresting /Investigative Officer)									
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>22</u> day of <u>June</u> 20 <u>23</u> by <u>D/S H. Paulson</u> (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification Type of identification produced <u>Known</u>									
Notary Public, Clerk of Court, Officer (F.S.S. 11 7 1 D)										

PROBABLE CAUSE AFFIDAVIT

1 Arrest
2 NTA
3 Request for Warrant
4 Request for Capias

1

Juvenile

N

ADMIN	Agency ORI Number FLO 5 0 0 0 0 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 23-081412
	Charge Type Check as many as apply <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		Special Notes

DEF	Name (Last, First, Middle)	Alias	Race W	Sex F	Date of Birth
-----	----------------------------	-------	-----------	----------	---------------

CHARGES	Charge Description Battery On A Person Over 65 Years Old	784.08(2c)	Charge Description
---------	-------------------------------------------------------------	------------	--------------------

VICTIM	Victim's Name (Last, First, Middle)	Race W	Sex F	Date of Birth
--------	-------------------------------------	-----------	----------	---------------

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. was observed by _____ who told that he/she saw the arrested person commit the below acts.

confessed to _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.

On the 22nd day of June 20 23 at 0930 A.M P.M (Specifically include facts constituting cause for arrest.)

Marsy's Law CVI
FL. Const. Art. 1 § 16(b)

(Continuation) We then interviewed _____ separately. _____ stated that _____ and his mother attacked her for no reason. She said she was removing the door lock and they attacked her? I asked _____ if this was _____ locked established bathroom? She said this was a common bathroom and everyone has access to it. I then advised _____ that _____ could go into the main bedroom and use the main bedroom bathroom. She stated no. This was her established bathroom and bedroom and he has no right to use it. That's when I replied to her, just like his established bedroom and bathroom. She tried arguing that this was not the same. I then asked _____ if her adult son had his own full bathroom downstairs? She said, "Yes, but that does not matter?" I then advised her if she didn't remove the lock, then the physical altercation would probably not have happened? _____ did have injuries to her wrist as well.

Based on my investigation, _____ was the primary aggressor. _____ was arrested and being charged with Battery to a Person Over 65 Years Old per Florida State Statute 784.08(2c). _____ was transported to Wellington Regional Medical Center due to her injuries. Once she was medically cleared, she was placed into the rear passenger seat of my PBSO marked patrol vehicle and transported out the PBSO West Detention Center.

NOT A CRIMINAL RECORD

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer) D/S H. Paulson 7713

The foregoing instrument was sworn to or affirmed and subscribed before me this 22 day of June 20 23 by D/S H. Paulson

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

Notary Public, Clerk of Court, Officer (F.S.S. 11 7. 10)



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"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input checked="" type="checkbox"/>	415.107(1)	Other: Vulnerable adult abuse records and reports	1-4
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2023016316	Date: 6/23/2023
	Specialist Name/ID: Chantel Daniels/30347