0545015 23MM9765 1886

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

OBTS Number

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Juvenile

ADMINISTRATIVE

Agency ORI Number: FL0 5 0 2 6 0 0

Agency Name: PALM BEACH GARDENS POLICE DEPT.

Agency Report Number (N.T.A.'s only): 78-1-1-1 23005851

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 Clearance Indicator

Location of Arrest (including Name of Business): 168 Santa Barbara Way, PBG, FL 33410

Location of Offense (Business Name, Address): 168 Santa Barbara Way PBG, FL 33410

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
11523	2232	11/5/23				

DEFENDANT

Name (Last, First, Middle): Sharpe, Hunter, M.

Alias (Name, DOB, Soc. Sec. #, Etc.)

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	11 21 1981	6'02	200	Green	Brown	Light	Med

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): Partially Bald.

Marital Status: M — Religion: Jewish

Indication of: Alcohol Influence ☐ Y ☐ N ☐ Unk; Drug Influence ☐ Y ☐ N ☐ Unk

Local Address (Street, Apt. Number) (City) (State) (Zip): 168 Santa Barbara Way PBG, FL 33410

Mobile Phone: (561) 225-6270

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 1

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 168 Santa Barbara Way PBG, FL 33410

Phone: (561) 225-6270

Address Source: FL DL

Business Address (Name, Street) (City) (State) (Zip)

Phone: ( )

Occupation: Lawyer

DL Number, State: S610 333 81 4210

Soc. Sec. Number: [redacted]

INS Number

Place of Birth (City, State): Tampa, FL

Citizenship: USA

CO-DEF

Co-Defendant (Last, First, Middle)	Race	Sex	Date of Birth		
				☐ 1. Arrested ☐ 2. At Large	☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
Co-Defendant (Last, First, Middle)	Race	Sex	Date of Birth		
				☐ 1. Arrested ☐ 2. At Large	☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other: Name (Last) (First) (Middle)

Residence Phone ( )

Address (Street, Apt. Number) (City) (State) (Zip)

Business Phone ( )

(1) NO BOND

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 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 (561) 355-6511) informed of any change of address. ☐ Yes, by: (Name) ☐ No (Reason)

School Attended Grade

Property Crime? ☐ Yes ☐ No

Description of Property

Value of Property

CODE

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

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Simple Battery	1	☒ Y ☐ N	784.03 (1)(A)(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
				DOMESTIC	

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

NOTICE TO APPEAR

Location (Court, Room Number, Address)

Court Date and Time

Month Day Year Time A.M. P.M.

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

I consent to receive text reminders of court date(s) and times for this case by automated technology to the mobile number identified above. I understand that standard text message rates may apply, and that I may revoke this consent via the text message system if I choose. Signature

ADMIN

HOLD for other agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Intake Deputy I.D. # Pouch #: C. O'Neal 7206

Signature of Arresting Officer: X 571

Name of Arresting Officer (Print) I.D. # Agency: J. Nieves 571 PBGPD

Transporting Officer I.D. # Agency: J. Nieves 571 PBGPD

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X"

PAGE ___ OF ___

PBSO #0148 REV. 10/22 DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

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PROBABLE CAUSE AFFIDAVIT

ADMIN

OBTS Number:

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

JUVENILE:

Agency ORI Number	Agency Name	Agency Report Number
FL FL0502600	Palm Beach Gardens Police Department	7 | 8 | 23-005851

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)	Alias	Race	Sex	Date of Birth
SHARPE, HUNTER MCKINLEY		W	M	11/21/1981

CHARGES

Charge Description	Charge Description
784.03(1)(A)(1) BATTERY-SIMPLE (TOUCH OR STRIKE)	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
SHARPE, CLAIRE H	W	F	01/18/1981

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
168 SANTA BARBARA WAY 417, PALM BCH GDNS, FL 33410	(561) 635-4488	FLDL
Business Address (Name, Street) (City) (State) (Zip)	**Phone**	**Occupation**

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable grounds to believe, and does believe that the above named Defendant committed the following violation 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 committ the below acts.
- ☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 16 day of November, 2023 at 01:09 (Specifically include facts constituting cause for arrest.)

On Wednesday, November 15, 2023, I responded to 168 Santa Barbara Way in the City of Palm Beach Gardens, Palm Beach County in reference to a suspicious incident. My Body-worn camera was activated during this incident.

Upon arrival, I met with Sharpe, Claire, H. who provided her Florida driver`s license for identification. Claire provided me with a sworn statement of the incident. Claire stated that she did not call 911 but probably her sister did due to their prior conversation. Claire allowed me to look at her cell phone conversation with her sister named Chloe on her contacts. In the text message conversation, Claire stated that she was scared and that Hunter drugged Tucker. She requested her sister to call 911. Her sister made the initial 911 call. Claire stated her son Tucker Sharpe (W/M 03/16/19) was throwing up, defecating a few times, and rolling his eyes backward after her husband Hunter M. Sharpe gave him some cough medicine. Claire stated that she thought that her husband Hunter Sharpe drugged her son. Claire also stated that a verbal argument ensued between her and Hunter when she asked Hunter what type of medication, he had given Tucker. Claire stated that Hunter told her he gave Tucker cough medication. Claire also mentioned that her son Tucker told her that Hunter gave him medication. Claire stated she was in the bathroom giving Tucker a bath after he defecated when her husband Hunter tried to take her phone away from her causing the phone to fall to the ground. She also stated that Hunter pushed her by her shoulder causing her to hit her face with the edge of the bathroom countertop. Claire sustained swelling under her left eye. Claire stated that they had similar situations in the past in which she had been pushed and shoved by Hunter. Claire stated she would seek medical attention after her son was evaluated. Hunter was transported by PBGFR to St. Mary`s Hospital for medical evaluation. Run number 23012664. Claire was provided with a domestic violence pamphlet.

During the course of my investigation, I met Hunter M. Sharpe who provided his Florida driver`s license for identification. At the moment Hunter arrived at his residence Fire

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

TRUDEAU, RYAN
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

11/16/2023
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

NIEVES, JOHANNA (571)
NAME OF OFFICER (PLEASE PRINT)

11/16/2023
DATE

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

ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL FL0502600	Palm Beach Gardens Police Department	7 | 8 | 23-005851

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)	Alias	Race	Sex	Date of Birth
SHARPE, HUNTER MCKINLEY		W	M	11/21/1981

PROBABLE CAUSE STATEMENT

Rescue was about to transport his son Tucker to Palm Beach Gardens Medical Center. Hunter came in with some bed sheets and stated he went out to buy bed sheets. Pre-Miranda I asked Hunter if he was willing to answer any questions regarding Tucker`s medical situation. Hunter refused to answer any questions and stated that he did not want to answer any questions without his lawyer present. Hunter has explained the reason for our presence at his residence. I read Hunter his Miranda Rights from my Department-issued Miranda Rights Card. Post-Miranda Hunter refused to answer any questions regarding the incident.

During my investigation, I was not able to gather any evidence of Hunter drugging Tucker.

Based on the findings of my investigation, I find probable cause to charge Hunter M. Sharpe with Simple Battery according to F.S.S. 784.03 (1)(A)(1).

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

TRUDEAU, RYAN
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

11/16/2023
DATE

571
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

NIEVES, JOHANNA (571)
NAME OF OFFICER (PLEASE PRINT)

11/16/2023
DATE

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.

SUSPECT/OFFENDER:_____

COURT CASE/WARRANT #:_____
(FOR WARRANTS USE ONLY)

1. Incident Report #: 23-005851 Agency: PBGPD
   Offense: Simple Battery
   Suspect/Offender: Hunter U. Sharpe
   D.O.B. 11/21/81 Race: W Sex: M

2. Warrant #(s):_____

3. Complete one (1) of the following:

   a. Victim's name: Claire Sharpe
      Address: 168 Santa Barbara Way
      City: PBG State: FL Zip: 33410
      Home #: 5616354488 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 person waiving notification: _____
Printed name of person waiving notification:_____

Officer's Name : J. Nieves I.D.: 571 Date: 11/15/23

White-Warrants Division **Yellow-Corrections or State Attorney (Warrant Application)** **Pink-Central Records**

PBGPD FORM-054

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Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☐	119.071(2)(e)	Confession	
Public Info. Exemptions	☐	FL Const. Art. I, s. 16(b)(5)	Marsy's Law – victim information shall be redacted. The term "victim" also includes the victim's lawful representative, the parent or guardian of a minor, or the next of kin of a homicide victim. The term "victim" does not include the accused (ref. page 99 of the CRTM for additional information)	
	☐	119.071(2)(j)	Home/employment telephone number, home/employment address, or personal assets of a person who has been the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence	
	☐	119.0712(2)	Personal information contained in a motor vehicle record	
	☐	316.650(11)	Driver information contained in a uniform traffic citation	
	☐	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
Florida Rules of Judicial Administration 2.420	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	☐	(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	☐			
	☐			
	☐			
	☐			

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REVIEW COMPLETED BY

Booking Number: 2023030282	**Date:** 11/16/2023
	Specialist Name/ID#: T.HOWARD/7185