26MM6784MB OS64778 2201

OBTS NUMBER		DOCUMENT TYPE	JUVENILE
	ARREST / NOTICE TO APPEAR Juvenile Referral Report	1 - Arrest	No

ADMINISTRATIVE

AGENCY ORI NUMBER	AGENCY NAME	AGENCY REPORT NUMBER
FL0500000	PALM BEACH COUNTY SHERIFF'S OFFICE	26080003-1-

CHARGE TYPE	OTHER CHARGE TYPE	WEAPON SEIZED	WEAPON TYPE	MULTIPLE CLEARANCE INDICATOR
MISDEMEANOR		No		C - Count Arrestee

LOCATION OF ARREST (BUSINESS NAME, ADDRESS)	LOCATION OF OFFENSE (BUSINESS NAME, ADDRESS)
[redacted]	[redacted]

DATE OF ARREST	TIME OF ARREST	BOOKING DATE	BOOKING TIME	JAIL DATE	JAIL TIME	LOCATION OF VEHICLE
07/24/2026	22:42					

DEFENDANT

NAME (LAST, FIRST, MIDDLE)	ALIAS (FIRST, MIDDLE, LAST)
Noda Hernandez, Karina,	

RACE	SEX	DATE OF BIRTH	HEIGHT	WEIGHT	EYE COLOR	HAIR COLOR	COMPLEXION	BUILD
W	F	01/30/1998	5' 6"	130	Brown	Brown	Light	~~Thin~~ Small

SCARS, MARKS, TATTOOS, ETC.	MARITAL STATUS	RELIGION	ALCOHOL INDICATION	DRUG INDICATION
	Single	None	Yes	No

LOCAL ADDRESS (STREET & APT #, CITY, STATE, ZIP)	MOBILE PHONE	RESIDENCE TYPE
[redacted]		County
PERMANENT ADDRESS (STREET & APT #, CITY, STATE, ZIP)	**PHONE**	**ADDRESS SOURCE**
Same as local	(561) 370-4705	DL
BUSINESS ADDRESS (STREET & APT #, CITY, STATE, ZIP)	**PHONE**	**OCCUPATION**
		Registered Tech

DRIVER'S LICENSE NUMBER	STATE	SOCIAL SECURITY NUMBER	INS NUMBER	PLACE OF BIRTH	CITIZENSHIP
H655514985300	FL	[redacted]		Montreal CANADA (USE WHEN PROVINCE IS NOT	USA

1) NO Bond

CHARGE

STATUE NUMBER & CHARGE DESCRIPTION / VIOLATION OF ORD #				
784.03(1)(a)(1) - TOUCH OR STRIKE - MIS			VIC... REQUIRED	
COUNTS	**DOMESTIC**	**DRUG ACTIVITY**	**DRUG TYPE**	**AMOUNT/UNIT**
1	Yes			
OFFENSE #	**WARRANT / CAPIAS #**	**BOND**		
26080003				

NOTICE TO APPEAR

COURT LOCATION	COURT DATE	COURT 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 / JUVENILE AND PARENT OR CUSTODIAN	DATE

I CONSENT TO RECEIVE TEXT REMINDERS OF COURT DATE(S) AND TIMES FOR THIS CASE BY AUTOMATED TECHONOLOGY 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

ADMINISTRATIVE

HOLD FOR OTHER AGENCY	SIGNATURE OF ARRESTING OFFICER	NAME VERIFICATION (PRINT BY ARRESTEE)
CAUTIONS	NAME OF ARRESTING OFFICER Fowler, Jake (45064)	
INTAKE DEPUTY / ID # DS Williams #12240	POUCH #	TRANSPORTING OFFICER / ID # / AGENCY Fowler, Jake (45064)	WITNESS ABOVE IF SUBJECT SIGNED WITH AN "X"

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JUL 25 0:15

FILED PBC - GUN CLUB--
'26 JUL 25 AM 7:11

SCANNED
JUL 25 2026

OBTS NUMBER	PROBABLE CAUSE AFFIDAVIT		DOCUMENT TYPE	JUVENILE
			1 - Arrest	No

ADMINISTRATIVE

AGENCY ORI NUMBER	AGENCY NAME	AGENCY REPORT NUMBER
FL0500000	PALM BEACH COUNTY SHERIFF'S OFFICE	26080003

CHARGE TYPE	OTHER CHARGE TYPE	SPECIAL NOTES
MISDEMEANOR		

DEFENDANT

NAME (LAST, FIRST, MIDDLE)	RACE	SEX	DATE OF BIRTH
Noda Hernandez, Karina,	W	F	01/30/1998

CHARGE

STATUE NUMBER & CHARGE DESCRIPTION / VIOLATION OF ORD #
784.03(1)(a)(1) - TOUCH OR STRIKE - MIS

VICTIM

VICTIM'S NAME (LAST, FIRST, MIDDLE)	RACE	SEX	DATE OF BIRTH
[redacted]	W	M	[redacted]

LOCAL ADDRESS (STREET & APT #, CITY, STATE, ZIP)	PHONE	ADDRESS SOURCE
[redacted]	[redacted]	

BUSINESS ADDRESS (STREET & APT #, CITY, STATE, ZIP)	PHONE	OCCUPATION

PROBABLE CAUSE STATEMENT

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 [WITNESS] admitting to the below facts.
- ☐ Was observed by [WITNESS] who told [WITNESS] 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 July 24th, 2026, at approximately 9:58 P.M., I, Deputy J. Fowler, was dispatched to [redacted] in reference to a domestic disturbance. As deputies approached the residence, we could hear an active verbal disturbance coming from inside.

Deputies then made contact with [redacted] at the front door. While speaking with [redacted] he explained that his stepdaughter, Karina Hernandez, had gotten into an argument with her boyfriend, who left the area. After the argument, Karina began screaming throughout the residence. It should be noted that while deputies were speaking with [redacted] we could still hear Karina screaming from inside the residence.

[redacted] explained that while Karina continued to scream and act emotionally, she attempted to leave the residence while intoxicated. Due to this, he attempted to prevent her from leaving to go after her boyfriend. During the incident, [redacted] stated Karina struck him and scratched him in the face. While speaking with [redacted] deputies observed a large, fresh red scratch mark on his left cheek, consistent with his statement regarding the physical altercation. Deputies also observed additional scratch marks on his neck.

Deputies then spoke with Karina, who appeared to be intoxicated. Karina provided a statement consistent with [redacted] account, stating that when [redacted] attempted to prevent her from leaving, she resisted his efforts and accidentally scratched him in the face. When deputies stepped outside to complete the necessary paperwork, they heard another verbal disturbance coming from inside the residence a short time later.

Based on the injuries observed on [redacted] and his statement, Karina was determined to be the primary aggressor and was subsequently arrested for violating F.S.S. 784.03(1)(a)(1), Battery (Domestic Violence). Karina was transported to the Palm Beach County Jail without incident.

After Karina was taken into custody, [redacted] refused to provide a sworn statement, have his injuries photographed, or complete any paperwork. [redacted] injuries were captured on deputies' body-worn cameras.

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SCANNED
JUL 25 2026

Case cleared by arrest.

ADMINISTRATIVE	
State of Florida, County of Palm Beach, The foregoing instrument was sworn to or affirmed and subscribed before me:	
Signature of Arresting / Investigating Officer #45064	Signature of Notary Public / Clerk of Court / Officer (F.S. 117.10)
Name of Arresting/Investigating Officer Fowler, Jake (45064)	Name of Notary Public / Clerk of Court / Officer (F.S. 117.10)
Date 7-24-26	Date 7/24/26

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SCANNED
JUL 25 2026

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)
- **Sexual Offense** (Ch. 794)
- **Attempted Sexual Offense**
- **Dating Violence**
- **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.**

Upon completion, this form must accompany the booking paperwork.
If applying for a warrant, attach this form to the filing packet.

1. Incident Report #: 26000J Agency: PBSO
   Offense: Battery F.S.S 784.03(1)(a)(1)
   Suspect/Offender: Karina Noda Hernandez
   D.O.B. 1-30-93 Race: White Sex: Female

2. Warrant #(s): _____

3.a. Victim's name: [redacted] D.O.B. [redacted] Race: W Sex: M
   Address: [redacted]
   City: [redacted] State: [redacted] Zip: [redacted]
   Home #: Refused Work #: _____ Other: _____

b. Victim's next of kin, friend or neighbor: _____
   Address: _____
   City: _____ State: _____ Zip: _____
   Home #: _____ Work #: _____ 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: Fouly I.D. # 015067 Date: 7-24-26

White = Corrections or State Attorney (Warrant Application) Yellow = Warrants Section Pink = Central Records

PBSO #0029A REV. 05/11

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JUL 25 2026

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SUSPECT/OFFENDER

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

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	
	☐	119.071(2)(j)1.e.	Name of a law enforcement officer who, in the course of their duties became a victim, is confidential and exempt for 72 hours after the incident. This information is exempt for an additional 60 days after the initial 72 hours	
Public Info. Exemptions	☒	119.071(2)(j)1.b.(I)	Identity, home or employment phone number, home or employment address, or any other information that could be sued to locate or harass the victim	1-3,5
	☐	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: 2026020013	**Date:** 7/25/2026
	Specialist Name/ID#: C. Daniels/ 30347

SCANNED
JUL 25 2026