T# 0543842 23mm 8294 mB

P# 48

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500400

Agency Name: Delray Beach Police Department

Agency Report Number (N.T.A.'s only): 40 23-012927

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: UNARMED

Multiple Clearance Indicator: 1

Location of Arrest (Including Name of Business): 237 SW 3RD AVE DELRAY BEACH, FL 33444

Location of Offense (Business Name, Address): 237 SW 3RD AVE, DELRAY BEACH, FL 33444

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
09/30/2023	22:40	09/30/2023	22:50			

DEFENDANT

Name (Last, First, Middle): BROOKER, MELODY DAWN

Alias:

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	F	09/17/1983	5'04	180	BRO	BRO	LGHT	Med

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description)

Marital Status: S — Religion: N/A

Indication of: Alcohol Influence ☐ Yes ☐ No ☐ Unk. ☑ — Drug Influence ☑

Local Address (Street, Apt. Number) (City) (State) (Zip) Phone: 237 SW 3RD AVE, DELRAY BEACH, FL 33444

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

Permanent Address (Street, Apt. Number) (City) (State) (Zip) Phone: 237 SW 3RD AVE, DELRAY BEACH, FL 33444

Address Source

Business Address (Name, Street) (City) (State) (Zip) Phone — Occupation

D/L Number, State	INS Number	Place of Birth (City, State)	Citizenship
B626544838370 / [redacted]		Miami, FL	US

CO-DEF

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

JUVENILE

☐ Parent ☐ Other: ☐ Legal Custodian

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 Department and Released 2. TOT JAC 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 355-2526) informed of any change of address.
☐ Yes, by: ☐ No:

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. Dispenses/ 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 1

Charge Description	Statute Violation Number	Violation of ORD #
SIMPLE BATTERY(TOUCH OR STRIKE)	784.03(1A1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☒ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By — Released By — Released To

Transported By — Date Transported — Time Transported — Other

NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court
☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): South County 200 W Atlantic Ave Delray Beach, FL 33444

Court Date and Time: 10/26/2023 08:30:00

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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

No Photo Available

Signature of Defendant (or Juvenile and Parent/Custodian) — Date Signed OCT 1 AM 3:52

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Issuing County: Broward — I.D. #: 18342 — Pouch #

Signature of Arresting Officer: S DiScalfani

Name of Arresting Officer (Print): DISCALFANI, STEPHANIE — I.D. #: 1248

Transporting Officer: DISCALFANI — I.D. #: 1248 — Agency: DBPD

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X".

FILED PBC - GUN CLUB
'23 OCT 1 PM 12:50

1 OF 1

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DOMESTIC VIOLENCE PROBABLE CAUSE AFFIDAVIT

Palm Beach County

ADMIN

Date / Time	Agency ORI Number	Agency Name	Agency Report Number
09/30/2023 23:41	FL 0500400	DELRAY BEACH POLICE DEPARTMENT	40 23-012927

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
BROOKER, MELODY DAWN		W	F	09/17/1983

CHRG

Charge Description: 784.03(1A1) SIMPLE BATTERY(TOUCH OR STRIKE)

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
HARRIS, CHRISTOPHER JAMES	W	M	11/04/1989

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
237 SW 3RD AVE, DELRAY BEACH, FL 33444	(912) 256-1446	
Business Address (Name, Street) (City) (State) (Zip)	**Phone**	**Occupation**

ADDITIONAL INFORMATION

	Written	Taped	Oral
DEFENDANT'S STATEMENTS:	☐	☒	☐
VICTIM'S STATEMENTS:	☐	☒	☐

OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): **LACERATIONS, BRUISES**

RELATIONSHIP BETWEEN VICTIM & SUSPECT: **BF/GF**

		YES	NO	
PHOTOGRAPHS:	Scene:	☐	☒	
	Victim:	☒	☐	
911 CALL:		☒	☐	CALLER: **MELODY BROOKER**
WEAPON USED:		☐	☒	TYPE:
WITNESSES:		☐	☒	(If YES, attach witness list)
INJURIES:		☒	☐	
MEDICAL TREATMENT:		☐	☒	
AT:	Scene:	☐	☒	PARAMEDICS:
	Hospital:	☐	☒	PHYSICIAN(S) / HOSPITAL:
ACT COMMITTED IN PRESENCE OF MINOR(S):		☐	☒	NAMES/AGES:
H. R. S. NOTIFIED:		☐	☒	
VICTIM PREGNANT:		☐	☒	
VIOLATION OF RESTRAINING ORDER:		☐	☒	CASE #:
PRIOR HISTORY OF DOMESTIC VIOLENCE:		☐	☒	
ALCOHOL OR DRUGS INVOLVED:		☐	☒	

NARR

The following incident occurred in the City of Delray Beach, Palm Beach County, Florida.

On 9/30/23, at 2144 hours, I responded to 237 SW 3rd Ave in reference to a domestic disturbance. Upon arrival, I met with the caller, Melody Brooker, who gave a sworn statement. Brooker stated that her and her boyfriend,

STATE OF FLORIDA
COUNTY OF PALM BEACH

Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.

S. [signature]
SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 30 day of September, 2023

[signature] 1002
LEON, OSCAR
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

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

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DOMESTIC VIOLENCE PROBABLE CAUSE
AFFIDAVIT
Palm Beach County
Narrative Continuation

ADMIN	Date / Time		
	09/30/2023 23:41		
	Agency ORI Number	Agency Name	Agency Report Number
	FL 0500400	DELRAY BEACH POLICE DEPARTMENT	4 0 23-012927

NARRATIVE

Christopher Harris, were arguing after going to dinner. Brooker stated that they both were in an uber back home and continued to argue after exiting the vehicle. Brooker advised that as they were walking up the driveway, Harris punched her in the face with a closed fist, which made her fall to the ground and break a tooth. Brooker stated that Harris then started to yell at her to get up at which point she ran to her vehicle and called the police.

I then spoke to Harris who gave a sworn statement advising the following. Harris stated that he and Brooker have been together for one year and he has been living at this location for that whole time. Harris advised that after going to dinner, he and Brooker began to argue about statements his family was making. Harris stated that after getting out of the uber, Brooker became irate and started to hit him multiple times in the face. Harris stated that Brooker hit him three times and then slipped and fell on the driveway. Harris advised that as he went to help her up, she started to scream that she was going to call 911.

The back of Brooker`s dress appeared to be wet which is consistent with Brooker slipping and falling onto the wet driveway. A piece of Brooker`s tooth was chipped, however I did not observe any markings or bruising on Brooker`s left side of her face. I observed lacerations on Harris` right side of his face, a bruise underneath his left eye, and a split lip.

It was determined through my investigation and evidence that Brooker was the primary aggressor in this incident.

Based on the above facts Probable Cause exists to charge Melody Brooker with Simple Battery per F.S.S. 784.03(1A1).

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STATE OF FLORIDA
COUNTY OF PALM BEACH

Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.

S. [signature]
SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 30 day of September, 2023

LEON, OSCAR
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

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

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**
- **Dating Violence**

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

1. Incident Report #: 23-12927 Agency: DBPD
   Offense: Simple Battery (Domestic)
   Suspect/Offender: Brooker, Melody
   D.O.B. 9/17/83 Race: W Sex: F

2. Warrant #(s): _____

3.a. Victim's name: Harris Christopher D.O.B. 11/4/89 Race: W Sex: M
   Address: 237 SW 3rd Ave
   City: Delray Beach State: FL Zip: 33444
   Home #: 912-256-1446 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: _____ I.D. #_____ Date: _____

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

PBSO #0029A REV. 05/11

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

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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	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2023025800	**Date:** 10/1/2023
	Specialist Name/ID: T.Howard/7185