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Marsy's Law FL Const. Art. 1 § 16(b) – ***Contains Confidential/Sensitive Information***

VINE Notification

OBTS NUMBER	**ARREST / NOTICE TO APPEAR** Juvenile Referral Report	DOCUMENT TYPE 1 - Arrest	JUVENILE

ADMINISTRATIVE

AGENCY ORI NUMBER	AGENCY NAME	AGENCY REPORT NUMBER
FL0500000	PALM BEACH COUNTY SHERIFF'S OFFICE	26077683-1-

CHARGE TYPE	OTHER CHARGE TYPE	WEAPON SEIZED	WEAPON TYPE	MULTIPLE CLEARANCE INDICATOR
MISDEMEANOR		No		N - Not Applicable

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

DATE OF ARREST	TIME OF ARREST	BOOKING DATE	BOOKING TIME	JAIL DATE	JAIL TIME	LOCATION OF VEHICLE
07/16/2026	10:26					

DEFENDANT

NAME (LAST, FIRST, MIDDLE)	ALIAS (FIRST, MIDDLE, LAST)
[redacted]	

RACE	SEX	DATE OF BIRTH	HEIGHT	WEIGHT	EYE COLOR	HAIR COLOR	COMPLEXION	BUILD
W	M	[redacted]	6' 2"	240	Brown	Brown	fair	Large

SCARS, MARKS, TATTOOS, ETC.	MARITAL STATUS	RELIGION	ALCOHOL INDICATION	DRUG INDICATION
	Married	n/a	N/A	N/A

LOCAL ADDRESS (STREET & APT #, CITY, STATE, ZIP)	MOBILE PHONE	RESIDENCE TYPE
[redacted]		County
PERMANENT ADDRESS (STREET & APT #, CITY, STATE, ZIP) Same as local	PHONE (954) 857-9140	ADDRESS SOURCE fldl
BUSINESS ADDRESS (STREET & APT #, CITY, STATE, ZIP)	PHONE	OCCUPATION

DRIVER'S LICENSE NUMBER	STATE	SOCIAL SECURITY NUMBER	INS NUMBER	PLACE OF BIRTH	CITIZENSHIP
C325855540000	FL	[redacted]		Brooklyn NY	USA

CHARGE

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

COUNTS	DOMESTIC	DRUG ACTIVITY	DRUG TYPE	AMOUNT/UNIT
2	Yes	Not Applicable	Not Applicable	0

OFFENSE #	WARRANT / CAPIAS #	BOND
26077683		none

NOTICE TO APPEAR

COURT LOCATION	COURT DATE	COURT TIME
Criminal Justice Complex - 3238 Gun Club Rd, West Palm Beach 33406		

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 Haverman	
INTAKE DEPUTY / ID #	POUCH #	REPORTING OFFICER / ID # / AGENCY B. Stephan / 48751
		WITNESS ABOVE IF SUBJECT SIGNED WITH AN "X"

VICTIM NOTIFICATION REQUIRED

FILED PBC - GUN CLUB
'26 JUL 17 AM 5:59

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DSTS NUMBER	PROBABLE CAUSE AFFIDAVIT		DOCUMENT TYPE	JUVENILE
			1 - Arrest	

ADMINISTRATIVE

AGENCY ORI NUMBER	AGENCY NAME	AGENCY REPORT NUMBER
FL0500000	PALM BEACH COUNTY SHERIFF'S OFFICE	26077683

CHARGE TYPE	OTHER CHARGE TYPE	SPECIAL NOTES
MISDEMEANOR		

DEFENDANT

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

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	F	[redacted]

LEGAL ADDRESS (STREET & APT #, CITY, STATE, ZIP)	PHONE	ADDRESS SOURCE
[redacted]	[redacted]	verbal
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 GILCHRIST, JALYN 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 July 16th, 2026 at approximately 08:11, I responded to [redacted] regarding a domestic disturbance.

Upon arrival, I made contact with [redacted] (victim 1), who was standing outside the apartment with the witness [redacted].

[redacted] provided the following sworn taped statement. She woke up after arriving home from work at 04:00 hours. She heard her father, [redacted] (suspect), yelling at her mother, [redacted] (victim 2), calling her a "stupid fucking handicap bitch." [redacted] observed [redacted] slap [redacted]. When [redacted] intervened, [redacted] asked who she thought she was talking to him in his house. [redacted] then attempted to punch [redacted]. [redacted] told [redacted] she was on probation and would call the police if he touched her. [redacted] ran outside the apartment toward the parking lot and [redacted] chased her. [redacted] attempted to call 911 but [redacted] charged at her and grabbed her from behind. [redacted] stated [redacted] wrapped his armed around her from behind and tried to get her phone from her [redacted] reported [redacted] told her "you bitch, you should have been dead anyways" and ordered her to leave his house. [redacted] left upper arm had visible scratches, and her chest showed redness from the struggle. Photographs of the scratches were taken and submitted to evidence.com.

I made contact with witness [redacted], who was walking her dog and witnessed the altercation that occurred outside. [redacted] stated she was standing near a trash can when she heard yelling from the hallway. [redacted] observed [redacted] fumbling with her phone while saying she would call police. [redacted] charged at [redacted] as she held her phone. [redacted] observed [redacted] grab [redacted] from behind and make a prying motion with his arms, attempting to open [redacted] arms. I obtained [redacted] sworn statement and released her from the scene.

I made contact with [redacted] who provided a sworn taped statement. [redacted] stated the incident began when she dropped a spoon that morning. [redacted] then shoved her shoulder. [redacted] stated she had no visible injuries and did not require medical assistance. I did not injuries on [redacted] [redacted] confirmed she

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wanted to prosecute [redacted] for the battery. [redacted] reported [redacted] has abused her for many years.

I provided victim rights brochures to both [redacted]. Both victims requested their information remain confidential and requested notification if [redacted] was arrested and released from custody.

Based on my investigation and witness statements I established probable cause that [redacted] committed Domestic Battery on [redacted].

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	Signature of Notary Public / Clerk of Court / Officer (F.S. 117.10)
Name of Arresting/Investigating Officer M. Havemann	Name of Notary Public / Clerk of Court / Officer (F.S. 117.10) R. Bradshaw 48751
Date 07/16/26	Date 7/16/26

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OSTS NUMBER	PROBABLE CAUSE AFFIDAVIT		DOCUMENT TYPE	JUVENILE
			1 - Arrest	

ADMINISTRATIVE

AGENCY ORI NUMBER	AGENCY NAME	AGENCY REPORT NUMBER
FL0500000	PALM BEACH COUNTY SHERIFF'S OFFICE	26077683

CHARGE TYPE	OTHER CHARGE TYPE	SPECIAL NOTES
MISDEMEANOR		

DEFENDANT

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

CHARGE

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

VICTIM

NAME (LAST, FIRST, MIDDLE)	RACE	SEX	DATE OF BIRTH
[redacted]	W	F	[redacted]

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

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 GILCHRIST, JALYN 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.

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I made contact with witness [redacted] who was walking her dog and witnessed the altercation that occurred outside. [redacted] stated she was standing near a trash can when she heard yelling from the hallway. [redacted] observed [redacted] fumbling with her phone while saying she would call police. [redacted] charged at [redacted] as she held her phone. [redacted] observed [redacted] grab [redacted] from behind and make a prying motion with his arms, attempting to open [redacted] arms. I obtained [redacted] sworn statement and released her from the scene.

I made contact with [redacted] who provided a sworn taped statement. [redacted] stated the incident began when she dropped a spoon that morning. [redacted] then shoved her shoulder. [redacted] stated she had no visible injuries and did not require medical assistance. I did not injuries or [redacted] confirmed she

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wanted to prosecute [redacted] for the battery. [redacted] reported [redacted] has abused her for many years.

I provided victim rights brochures to both [redacted]. Both victims requested their information remain confidential and requested notification if [redacted] was arrested and released from custody.

Based on my investigation and witness statements I established probable cause that [redacted] committed Domestic Battery on [redacted]

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	Signature of Notary Public / Clerk of Court / Officer (F.S. 117.10)
Name of Arresting/Investigating Officer M. Hawthawn 37527	Name of Notary Public / Clerk of Court / Officer (F.S. 117.10) R. Simpson 48751
Date 07/16/26	Date 7/16/26

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Palm Beach County Sheriff's Office

DOMESTIC VIOLENCE/DATING VIOLENCESUPPLEMENTAL PROBABLE CAUSE FORM

(Submit this form with the original Probable Cause affidavit)

Suspect: [redacted] **DOB:** [redacted] **Case #:** 26077683-1-

Victim: [redacted] **DOB:** [redacted] **Race:** W **Sex:** F

Relationship between Victim and Defendant: IL - Parent Of Child Fm Rltshp

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:** _____

Victim Pregnant: ☐ Yes ☑ No **If yes,** _____ **weeks** _____ **months**

Injuries: ☐ Yes ☑ No **Description:** _____

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: _____

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

First words Victim said when you responded to scene:

Can I see your eyes? Oh, you're handsome.

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): redness near chest and scratches on the left upper arm.

☐ Upset ☐ Crying ☐ Fearful ☐ Hysterical ☐ Afraid ☐ Calm ☑ Nervous

☐ Complained of pain ☐Other _____

Victim Contact Information:

Local Address: [redacted]

Phone: **Home** [redacted] **Work** (___)____-_____ **Cell** (___)____-_____

Employer: _____

Name of Relative: _____ **Phone** (___)_____-_____

Address: _____

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Palm Beach County Sheriff's Office

DOMESTIC VIOLENCE/DATING VIOLENCESUPPLEMENTAL PROBABLE CAUSE FORM

(Submit this form with the original Probable Cause affidavit)

Suspect: [redacted] **DOB:** [redacted] **Case #:** 26077683-1-

Victim: [redacted] **DOB:** [redacted] **Race:** W **Sex:** F

Relationship between Victim and Defendant: A - Spouse

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:** ____

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: ____

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

First words Victim said when you responded to scene: ____

It all started when I dropped a spoon

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): crying

☐ Upset ☐ Crying ☐ Fearful ☐ Hysterical ☐ Afraid ☐ Calm ☑ Nervous

☐ Complained of pain ☐Other ____

Victim Contact Information:

Local Address: [redacted]

Phone: **Home** ([redacted] **Work** (___)____-____ **Cell** (___)____-____

Employer: ____

Name of Relative: [redacted] **Phone** [redacted]

Address: [redacted]

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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	Click or tap here to enter text.
	☐	119.071(2)(e)	Confession	Click or tap here to enter text.
	☐	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.	Click or tap here to enter text.
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.	1-10
	☐	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	Click or tap here to enter text.
	☐	119.0712(2)	Personal information contained in a motor vehicle record	Click or tap here to enter text.
	☐	316.650(11)	Driver information contained in a uniform traffic citation	Click or tap here to enter text.
	☐	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	Click or tap here to enter text.
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	1-10
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses	Click or tap here to enter text.
	☐	Click or tap here to enter text.		Click or tap here to enter text.
	☐	Click or tap here to enter text.		Click or tap here to enter text.
Other	☐	Click or tap here to enter text.		Click or tap here to enter text.
	☐	Click or tap here to enter text.		Click or tap here to enter text.
	☐	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
	☐	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

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REVIEW COMPLETED BY

Booking Number: 2026019140	**Date:** 7/17/2026
	Specialist Name/ID#: ANGELA PINKNEY/7796