

ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		JUVENILE	
OBTS Number		Agency ORI Number 0502000		Agency Name Lantana Police Department		Agency Report Number (N.T.A.'s only) 6, 4 17-001865			
Charge Type: Check as many as apply. <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized		Enter Type HAND/FEET/FIST		Multiple Clearance Indicator 3			
Location of Arrest (Including Name of Business)									
Date of Arrest 07/24/2017		Time of Arrest 07:48		Booking Date		Booking Time		Jail Date	
Jail Time		Location of Vehicle							
Name (Last, First, Middle) BARRAS, BLAKE READE									
Alias (Name, DOB, Soc. Sec. #, Etc.)									
Race W - White B - Black		Sex W		Date of Birth 01/09/1972		Height 5'09		Weight 200	
Eye Color BLUE		Hair Color BROWN		Complexion LIGHT		Build Medium			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status S		Religion CHRISTIAN		Indication of: Alcohol Influence Drug Influence		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>	
Local Address (Street, Apt. Number) 116 OCEAN CAY WAY, HYPOLUXO, FL 33462		(City) FL		(State) FL		(Zip) 33462		Phone (561) 405-0616	
Permanent Address (Street, Apt. Number) 116 OCEAN CAY WAY, HYPOLUXO, FL 33462		(City) FL		(State) FL		(Zip) 33462		Phone (561) 405-0616	
Business Address (Name, Street) GEO GROUP INC., 621 NW 87TH AVE ST, #500, BOCA RATON, FL 33487		(City) FL		(State) FL		(Zip) 33487		Phone (561) 405-0616	
D/L Number, State B620076720090 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) NEW IBERIA, LA,		Citizenship US	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		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"/>	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		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"/>	
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____		Name (Last, First, Middle)		Residence Phone					
<input type="checkbox"/> Legal Custodian		Address (Street, Apt. Number)		(City)		(State)		(Zip)	
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 <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 353-2526) informed of any change of address.		School Attended		Grade					
<input type="checkbox"/> Yes, by: _____		<input type="checkbox"/> No: _____		Property Crime? <input type="checkbox"/> Yes <input checked="" 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. Disperses/ 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 784.041(2)(A) DOMESTIC BATTERY BY STRANGULATION		Statute Violation Number 784.041(2)(A)		Violation of ORD #			
Drug Activity N		Drug Type N		Amount / Unit /		Offense # 17-001865		Counts 1	
Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond					
Charge Description DOMESTIC BATTERY - SIMPLE TOUCH / STRIKE		Statute Violation Number 784.03 (1)(A)(1)		Violation of ORD #					
Drug Activity N		Drug Type N		Amount / Unit /		Offense # 17-001865		Counts 1	
Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond					
Charge Description FALSE IMPRISONMENT		Statute Violation Number 787.02(1)(A)		Violation of ORD #					
Drug Activity N		Drug Type N		Amount / Unit /		Offense # 17-001865		Counts 1	
Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond					
Health / Apparent Physical Condition of Defendant		Any knowledge of the following: Explain:		<input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries					
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond		<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health		<input type="checkbox"/> T.O.T. County Jail		PROPERTY - Received By		Released By	
Transported By		Date Transported		Time Transported		Other			
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.		Location (Court, Room)		Court Date and 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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.		Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed					
HOLD for Other Agency		Signature of Arresting Officer FROMMER, JOSEPH L.		Name Verification (Printed by Arrestee) FROMMER, JOSEPH L.		ID. # 859		PAGE 1 OF 1	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Intake Deputy Frommer 859 LPD		ID. # 859		Agency LPD	
Witness here if subject signed with an "X"									

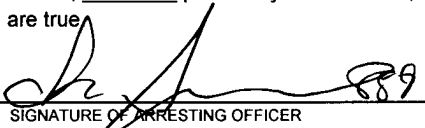
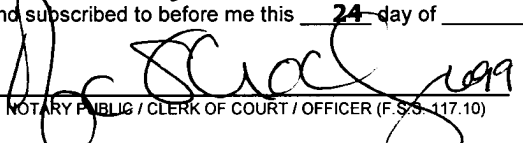
☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ DEFENDANT

SCANNED
JUL 25 2017

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

A D M I N	Date / Time 07/24/2017 07:48		Agency ORI Number FL 0502000		Agency Name LANTANA POLICE DEPARTMENT		Agency Report Number 6 4 17-001865	
	Name (Last, First, Middle) BARRAS, BLAKE READE		Alias		Race W		Sex M	
D E F	Charge Description 784.041(2)(A) BATTERY BY STRANGULATION							
	Name (Last, First, Middle) [REDACTED]		Race W		Sex F		Date of Birth 11/02/1983	
C H R G	Business Address (Name, Street) [REDACTED]		(City) [REDACTED]		(State) [REDACTED]		(Zip) [REDACTED]	
	Phone [REDACTED]		Occupation UNEMPLOYED					
V I C T I M	DEFENDANT'S STATEMENTS: Written <input type="checkbox"/> Taped <input type="checkbox"/> Oral <input checked="" type="checkbox"/>		OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): SHAKEN, SCARED, CRYING					
	VICTIM'S STATEMENTS: <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>							
A D D I T I O N A L	RELATIONSHIP BETWEEN VICTIM & SUSPECT [REDACTED]							
	<p>PHOTOGRAPHS: Scene: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Victim: <input checked="" type="checkbox"/> <input type="checkbox"/></p> <p>911 CALL: <input checked="" type="checkbox"/> <input type="checkbox"/> CALLER: VICTIM</p> <p>WEAPON USED: <input type="checkbox"/> <input checked="" type="checkbox"/> TYPE:</p> <p>WITNESSES: <input type="checkbox"/> <input checked="" type="checkbox"/> (If YES, attach witness list)</p> <p>INJURIES: <input checked="" type="checkbox"/> <input type="checkbox"/></p> <p>MEDICAL TREATMENT: <input type="checkbox"/> <input checked="" type="checkbox"/></p> <p>AT: Scene: <input type="checkbox"/> <input checked="" type="checkbox"/> PARAMEDICS:</p> <p>Hospital: <input type="checkbox"/> <input checked="" type="checkbox"/> PHYSICIAN(S) / HOSPITAL:</p> <p>ACT COMMITTED IN PRESENCE OF MINOR(S): <input type="checkbox"/> <input checked="" type="checkbox"/> NAMES/AGES:</p> <p>H. R. S. NOTIFIED: <input type="checkbox"/> <input checked="" type="checkbox"/></p> <p>VICTIM PREGNANT: <input type="checkbox"/> <input checked="" type="checkbox"/></p> <p>VIOLATION OF RESTRAINING ORDER: <input type="checkbox"/> <input checked="" type="checkbox"/> CASE #: LPD 16-002468</p> <p>PRIOR HISTORY OF DOMESTIC VIOLENCE: <input checked="" type="checkbox"/> <input type="checkbox"/></p> <p>ALCOHOL OR DRUGS INVOLVED: <input checked="" type="checkbox"/> <input type="checkbox"/></p>							
N A R R	On Monday, July 24th, 2017, at approximately 0748 hours, I responded to [REDACTED] in reference to a female requesting the Police.							
	Upon my arrival, I observed a white female running towards my patrol vehicle. The female continued to look							
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p>Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.</p> <p> SIGNATURE OF ARRESTING OFFICER</p> <p>Sworn to and subscribed to before me this <u>24</u> day of <u>July</u>, <u>2017</u>.</p> <p> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p>								

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

SCANNED

JUL 25 2017

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County
Narrative Continuation

A D M I N N A R R A T I V E	Date / Time 07/24/2017 07:48		
	Agency ORI Number FL 0502000	Agency Name LANTANA POLICE DEPARTMENT	Agency Report Number 6 4 17-001865
	<p>behind her as if someone was following her. The female, later identified as [REDACTED] (11/2/83), was crying and shaking nonstop. [REDACTED] had bruises all over her face and neck. [REDACTED] kept repeating that she needed help. Once I got [REDACTED] to calm down, she began to tell me that an incident happened last night at approximately 1800 hours between her and [REDACTED] Blake Barras (1/9/72). [REDACTED] advised that they were both consuming alcohol together. Barras became upset with the fact that [REDACTED] has nude photographs of her. Both subjects continued to argue until Barras punched [REDACTED] on right side of her eye/forehead with a closed fist. The force from the punch caused [REDACTED] to fall to the ground and on her back. Barras then straddled on top of [REDACTED] and put both of his hands around her neck, blocking her airway. [REDACTED] advised that she was having a difficult time breathing. [REDACTED] attempted to scream for help but had a hard time speaking due to Barras strangling her. [REDACTED] then said to Barras "Blake let me go please let me go". Barras then told [REDACTED] to shut up and he stuck her two times on the left side of her face and one time on the right side. Barras then continued to strangle [REDACTED] and then placed a pillow over her face. [REDACTED] advised that she was begging Barras to keep her alive and Barras stated that if she called the Police that he would kill her and then put a bullet in his mouth. Barras then took [REDACTED]'s keys and cell phone and wouldn't let her leave the residence.</p> <p>[REDACTED] was in fear for her life and stated that she was too scared to call for help last evening. [REDACTED] waited all night and into the morning until she felt safe to get her phone and keys and left the residence. [REDACTED] called 9-1-1 as soon as she ran outside.</p> <p>Officers later made contact with Barras who confirmed that they were drinking together and got into an argument, but denied any physical allegations. At first, Barras stated that he didn't know how [REDACTED] received her injuries. Barras then changed his story saying that she fell down at the pool the other day. I then asked Barras again what happened and he changed his story one more time saying that [REDACTED] got into a fight with another female the other day. Barras was very inconsistent with his story and believes that he was being set up.</p> <p>Barras was placed under arrest for Domestic Battery, Domestic Battery by Strangulation, and False Imprisonment. Barras was transported to the Lantana Police Department for processing and later lodged in the Palm Beach County Jail. A Victim Notification Form was completed and will be turned over to the booking desk at CJ.</p> <p>[REDACTED] completed a written statement and the domestic violence forms. (8) digital photographs were taken and placed into evidence.</p> <p>Nothing further to report at this time.</p>		
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. _____ SIGNATURE OF ARRESTING OFFICER Sworn to and subscribed to before me this <u>24</u> day of <u>July</u> , <u>2017</u> . _____ NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)			

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COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS 5 2017 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.

1. Incident Report#: 17-001865 Agency: LANTANA PD
Offense: DOMESTIC BATTERY
Suspect/Offender: BLAKE BARRIS
D.O.B. 01/09/72 Race: W Sex: M

2. Warranty #(s): _____

3. Complete one (1) of the following:

a. Victim's
Address: _____
City: _____
Home #: _____

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: _____ Zip: _____
Home #: _____ 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: FROMMER, J. I.D.: 859 Date: 07/24/17

SUSPECT/OFFENDER: BLAKE BARRIS

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