

J# 0477452

P#550

ARREST / NOTICE TO APPEAR
Juvenile Referral Report1. Arrest 3. Request For Warrant
2. N.T.A. 4. Request For Capias

1

Juvenile ☐

OBTS Number		Agency ORI Number FLO 5 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06 17-060114			
Charge Type: Check as many as apply <input 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 N/A		Multiple Clearance Indicator 0 1					
Location of Arrest (Including Name of Business) GREENACRES, FL 33463		Location of Offense (Including Name of Business) GREENACRES, FL 33463							
Date of Arrest Apr 4, 2017	Time of Arrest 0152	Booking Date Apr 4, 2017	Booking Time	Jail Date	Jail Time	Location of Vehicle 205 PERRY AVE, GREENACRES, FL			
Name (Last, First, Middle) WILLIAMS BRITNEY MARIE		Alias (Name, DOB, Soc. Sec. #, Etc.)							
Race W - White B - Black O - Oriental/Asian	Sex F	Date of Birth 06/29/86	Height 5'6	Weight 140	Eye Color BRO	Hair Color BLK	Complexion LIGHT	Build SLIM	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE		Marital Status SINGLE		Religion NONE		Indication of Alcohol Influence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unknown			
Local Address (Street, Apt. Number) 4190 SAN MARINO BLVD APT 101		City WEST PALM BEACH		State FL		Zip 33409		Phone 561-729-6791	
Permanent Address (Street, Apt. Number)		City		State		Zip		Address Source FL DL	
Business Address (Street, Apt. Number)		City		State		Zip		Occupation KENNEL CLUB	
D/L Number, State W-452-073-86-729-0, FL		Social Security Number		INS Number N/A		Place of Birth WEST PALM BEACH, FL		Citizenship US	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 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"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other		Name (Last, First, Middle)		City		State		Zip	
Address (Street, Apt. No.)		City		State		Zip		Business Phone	
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 <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 561 355-2526) informed of any address change. <input type="checkbox"/> Yes, by (Name) <input type="checkbox"/> No (Reason)		School Attended		Grade					
Property Crime? <input type="checkbox"/> Yes <input 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. Dispense/ Distribute		M. Manufacture/ Produce Cultivate	Z. Other
Charge Description BATTERY (DOMESTIC)		Counts 01		Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 784.03(1) A 1		Violation or ORD. #	
Drug Activity N		Drug Type N		Amount/Unit N/A		Offense # 17-060114		Warrant/Capias Number	Bond
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number		Violation or ORD. #	
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number	Bond
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number		Violation or ORD. #	
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number	Bond
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number		Violation or ORD. #	
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number	Bond
Location (Court, Address, Room Number)		SET BY JUDGE							
Court Date and Time		Day		Year		Time		AM <input type="checkbox"/>	
I AGREE TO APPEAR AT THE ABOVE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT I SHOULD WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE IN CONTEMPT 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 R. GILMORE		Name Verification (Printed by Arrestee)					
Name <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer R. GILMORE		ID # 14457					
Intake Deputy CPHARDEN		ID # 4916		Transporting Officer R. GILMORE		ID # PBSO		Page 1	
Witness here if subject signed with an "X"		SCANNED		APR 9 2017					

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 3. Request For Warrant 2. N.T.A. 4. Request For Capias		1	Juvenile <input type="checkbox"/>
Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06		17-060114	
Charge Type: Check as many as apply <input 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 _____		Special Notes					
Defendant Name (Last, First, Middle) WILLIAMS BRITNEY MARIE				Race W	Sex F	Date of Birth 06/29/86	
Charge BATTERY (DOMESTIC)				Charge			
Charge				Charge			
Victim Name (Last, First, Middle) [REDACTED]				Race B	Sex M	Date of Birth 08/12/80	
Local Address [REDACTED]				Address Source VICTIM			
Business Address (Street, Apt. Number) [REDACTED]		City [REDACTED]	State [REDACTED]	Zip [REDACTED]	Phone [REDACTED]	Occupation UNEMPLOYED	
<p>The undersign swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The person taken into custody...</p> <p><input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> confessed to admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.</p> <p>On the 4TH day of APRIL 20 17 at 0117 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM</p>							

On April 4, 2017 at approximately 0117 hours, Deputies responded to [REDACTED] Greenacres, Palm Beach County, Florida 33463 in reference to a domestic disturbance in progress. Upon arrival I made contact with the victim B/M [REDACTED] 08/12/80, who informed me of the following.


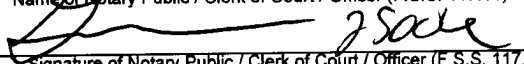
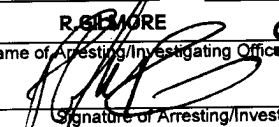
[REDACTED] told Deputy Green ID# 25006 while he was hanging out with his friends outside of his residence his ex girlfriend / baby's mother B/F Britney Williams showed up uninvited, and punched him in his eye. D/S Green advised when he arrived he observed [REDACTED] holding Williams by the arms preventing her from hitting him. I spoke with [REDACTED], and he advised he did not wish to speak anymore about what happened or fill out a sworn statement.

I spoke with Williams on scene who appeared to be intoxicated, and she advised that the two just "tussled". Williams stated she was getting text me from [REDACTED] that stated if her teams wins he wants to see her. Williams stated when she arrived there was other girl with [REDACTED] and thats how the argument started.

I observed [REDACTED] had a fresh cut on his left eye along with it swelling and turning black and blue. I also observed Williams with a small scratch mark on her left arm which appeared to been have caused by [REDACTED] when he was trying to stop Williams from punching him.

A witness W/F Devinne Attaway 01/15/90, advised she woke up due to the Williams started the altercation in the back yard. Attaway stated when she came out she observed Williams hitting [REDACTED] in the face and [REDACTED] trying to hold her back. I had Attaway fill out a sworn statement due to [REDACTED] not wanting to corporate.

Based on my investigation there is probable cause to charge Williams with Battery (Domestic). Williams did actually and intentionally touch or strike [REDACTED] against the will of [REDACTED] contrary to Florida statute 784.03(1). Williams was later transported to Palm Beach County Jail.

The foregoing instrument was sworn to and affirmed before me this <u>4TH</u> day of <u>APRIL</u> 20 <u>17</u> , by:			
 Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)		R. GILMORE Name of Arresting/Investigating Officer	
 Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)		 Signature of Arresting/Investigating Officer	
		SCANNED APR 04 2017 Page 1 of 1	

VICTIM NOTIFICATION FORM

- 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 #: 17-060114 Agency: Palm Beach County Sheriff's Office
Offense: BATTERY (DOMESTIC)
Suspect/Offender: WILLIAMS BRITNEY MARIE
DOB: 06/29/86 Race: W Sex: F

2. Warrant #(s): _____

3.a. Victim's Name: [REDACTED] DOB: 08/12/80 Race: B Sex: M
Address: [REDACTED]
City: [REDACTED] State: [REDACTED]
Home #: [REDACTED] 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 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: R.GILMORE ID #: 14457 Date: Apr 4, 2017

White = Corrections or State Attorney (Warrant Application)

Yellow = Warrants Section

Pink = Central Records

SCANNED
APR 04 2017

Palm Beach County Sheriff's Office
DOMESTIC VIOLENCE/DATING VIOLENCE SUPPLEMENTAL PROBABLE CAUSE FORM
(Submit this form with the original Probable Cause affidavit)

Suspect: BRITNEY, MARIE, WILLIAMS DOB: 06 / 29 / 1986 Case #: 17-060114

Victim: [REDACTED] DOB: 08 / 12 / 1980 Race: BLACK Sex: MALE

Relationship between Victim and Defendant: [REDACTED]

Photographs: Scene ☒ Yes ☐ No Victim ☒ Yes ☐ No Defendant ☒ Yes ☐ No

911 Call: ☒ Yes ☐ No Caller: _____

Weapon Used: ☐ Yes ☒ No Type: HAND

Witness: ☒ Yes ☐ No Name: DEVINNE ATTAWAY 01/15/90

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

Injuries: ☒ Yes ☐ No Description: BURISE ON LEFT EYE

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: [REDACTED] DOB: [REDACTED]

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: SHE PUNCHED ME IN THE EYE

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): _____

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

☐ Complained of pain ☐ Other _____

Victim Contact Information:

Local Address: [REDACTED] GREENACRES, FL 33463

Phone: Home () _____ - _____ Work () _____ - _____ Cell [REDACTED]

Employer: _____

Name of Relative: _____ Phone () _____

Address: _____

SCANNED
APR 04 2017