

0489520		ARREST / NOTICE TO APPEAR		330	
OBTS Number		Agency ORI Number		Agency Name	
Agency Report Number (N.T.A.'s only)		5		4	
17-003318		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		NONE	
Multiple Clearance Indicator		Location of Arrest (Including Name of Business)		SAME AS LOCATION	
Date of Arrest		Time of Arrest		Booking Date	
07/08/2017		02:06		Booking Time	
Jail Date		Jail Time		Location of Vehicle	
Name (Last, First, Middle)		Alias:		Alias (Name, DOB, Soc. Sec. #, Etc.)	
SAUNDRY, CAPRI AMBER		Race		Sex	
W - White		1 - American Indian		2 - Black	
O - Oriental/Asian		W		F	
Date of Birth		Height		Weight	
04/21/1989		5'07		140	
Eye Color		Hair Color		Complexion	
BROWN		BROWN		MEDIUM	
Build		Thin		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)	
TATT LOR ANKLE / BLUE STARS SPELL "CAPRI"		Marital Status		Religion	
S		OTHER		Indication of:	
Local Address (Street, Apt. Number)		(City)		(State)	
6359 RIVERWALK LN 5, JUPITER, FL 33418		(803) 230-4761		Residence Type:	
Permanent Address (Street, Apt. Number)		(City)		(State)	
6359 RIVERWALK LN 5, JUPITER, FL 33418		(803) 230-4761		Address Source	
Business Address (Name, Street)		(City)		(State)	
THIRSTY TURTLE,		Phone		Occupation	
D/L Number, State		Soc. Sec. Number		INS Number	
S536101896410 / FL		JUPITER, FL, United		US	
Co-Defendant Name (Last, First, Middle)		Race		Sex	
Co-Defendant Name (Last, First, Middle)		Race		Sex	
Parent		Other:		Name (Last, First, Middle)	
Legal Custodian		Address (Street, Apt. Number)		(City)	
Notified by: (Name)		Date		Time	
Released To: (Name)		Relationship		Date	
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.		School Attended	
Grade		Property Crime?		Description of Property	
Value of Property		Drug Activity		S. Sell	
R. Smuggle		K. Disperses/		M. Manufacture/	
Z. Other		Drug Type		B. Barbiturate	
H. Hallucinogen		P. Paraphernalia/		U. Unknown	
Z. Other		A. Amphetamine		E. Heroin	
O. Opium/Deriv.		S. Synthetic		N. N/A	
C. Cocaine		P. Possess		T. Traffic	
E. Use		Charge Description		Statute Violation Number	
BATTERY-SIMPLE (TOUCH OR STRIKE)		784.03(1)(A)(I)		Violation of ORD #	
Drug Activity		Drug Type		Amount / Unit	
N		17-003318		Counts	
Domestic Violence		Warrant / Capias Number		Bond	
Charge Description		Statute Violation Number		Violation of ORD #	
Drug Activity		Drug Type		Amount / Unit	
Offense #		Counts		Domestic Violence	
Warrant / Capias Number		Bond		Charge Description	
Statute Violation Number		Violation of ORD #		Drug Activity	
Drug Type		Amount / Unit		Offense #	
Counts		Domestic Violence		Warrant / Capias Number	
Bond		Health / Apparent Physical Condition of Defendant		Any knowledge of the following	
Explain:		Check which applies:		Released O.R.	
Released to Parent/Guardian		T.O.T. County Jail		PROPERTY - Received By	
Released By		Released To		Transported By	
Date Transported		Time Transported		Other	
INSTRUCTION NO. 1 - Mandatory appearance in court		Location (Court, Room)		Court Date and Time	
INSTRUCTION NO. 2 - You need not appear in Court		but must comply with instructions on Page 2.		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 (or Juvenile and Parent/Custodian)		Date Signed		No Photo Available	
HOLD for Other Agency		Signature of Arresting Officer		Name Verification (Printed by Arrestee)	
Dangerous		Resisted Arrest		Suicidal	
Other		Name of Arresting Officer (Print)		I.D. #	
FERGUSON, RYAN		1202		Witness here if subject signed with an "X"	
Transporting Officer		I.D. #		Agency	
Pouch #		Initials		Page 1 OF 1	

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

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

A D M I N	Date / Time 07/08/2017 03:56		Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 5 4 17-003318																																																																																											
	Name (Last, First, Middle) SAUNDRY, CAPRI AMBER					Alias	Race W	Sex F	Date of Birth 04/21/1989																																																																																									
C H R G	Charge Description 784.03(1)(A)(1) BATTERY-SIMPLE (TOUCH OR STRIKE)																																																																																																	
	Victim's Name (Last, First, Middle) [REDACTED]					(State)	(Zip)	Race W	Sex M	Date of Birth 10/23/1987																																																																																								
V I C T I M	Business Address (Name, Street) [REDACTED]					(City)	(State)	(Zip)	Address Source VERBAL																																																																																									
	Occupation [REDACTED]																																																																																																	
D E F	DEFENDANT'S STATEMENTS:			Written <input type="checkbox"/>	Taped <input type="checkbox"/>	Oral <input checked="" type="checkbox"/>	OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL):																																																																																											
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N A R R	On July 8, 2017 at approximately 0140 hours, I was dispatched to [REDACTED] in reference to a domestic violence incident. Northcom was advising that the caller's [REDACTED] threw a plate of food and a bottle of wine in her face and took her keys; she was declining medic and mentioned the [REDACTED] left but now thinks he is returning. Upon arriving on scene I observed Officer Lowe (ID 363) making contact with an																																																																																																	
	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>8</u> day of <u>July</u> , <u>2017</u> . _____ COUNIHAN, JOSEPH NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)																																																																																																	

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

DOMESTIC VIOLENCE PROBABLE CAUSE

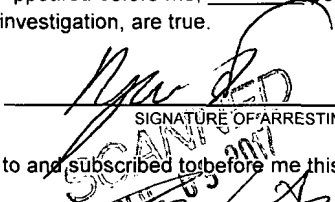
AFFIDAVIT

Palm Beach County
Narrative Continuation

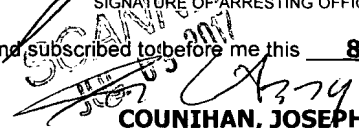
A D M I N	Date / Time 07/08/2017 03:56	Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT	Agency Report Number 5 4 17-003318
	<p>unknown subject later identified as W/M [REDACTED] (DOB: 10/23/87), who was [REDACTED] stated the following:</p> <p>Him and [REDACTED] W/F Capri, Amber, Saundry (DOB: 04/21/1989) were just coming back from getting food and eating at the dinner table. [REDACTED] advised that Saundry got angry because [REDACTED] grabbed her keys and wanted to leave to go out. [REDACTED] did not want her to leave because he advised she was intoxicated which started a verbal altercation. Saundry then struck [REDACTED] with a kick on the right side of his body and scratched his back numerous times which caused red marks. I observed red marks and scratches on [REDACTED] back which were consistent with nail marks. [REDACTED] advised he managed to get away and walked out of the house to wait for Saundry's sister to pick him up.</p> <p>I then proceeded to make contact with Saundry who stated the following: Saundry and [REDACTED] were eating in the dining room when [REDACTED] tried to grab her keys and leave. She stated [REDACTED] threw his plate at her and walked out of the house when Saundry said she was going to call the police on him. I did not observe any physical injuries to Saundry; however, she did have what appeared to be a stain from food on her shirt.</p> <p>Based on my investigation, I found probable cause to charge Saundry with simple battery (domestic). I advised Saundry she was under arrest for domestic battery, and I placed Saundry into handcuffs, which were checked for proper spacing; double locked, and placed her in to my patrol vehicle. Inside of the residence I observed several pieces of glass and miscellaneous items lying around the living room that confirmed an altercation occurred. Photographs were taken of the scene and the injuries to [REDACTED], which were later placed into evidence. On scene, [REDACTED] refused to write a sworn written statement, and he was issued a Domestic Violence Brochure. Saundry was transported to Jupiter Police Department for processing and then transported to the Palm Beach County Jail without incident.</p> <p>Capri A. Saundry did actually and intentionally touch or strike [REDACTED] against the will of [REDACTED] (or) did intentionally cause bodily harm to [REDACTED], contrary to Florida Statute 784.03(1). (1 DEG MISD).</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 8 day of July, 2017.


COUNIHAN, JOSEPH
 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)
- **Sexual Offense** (Ch. 794)
- **Attempted Murder**
- **Attempted Sexual Offense**
- **Stalking** (F.S. 784.048)
- **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 #: 17-003318 Agency: JUPITER P.D.
Offense: DOMESTIC BATTERY
Suspect/Offender: CAPRI A. SAUNDY
D.O.B. 10/23/87 Race: W Sex: F

2. Warrant #(s): _____

3.a. Victim's name: [REDACTED] D.O.B. 10/23/87 Race: W Sex: M
Address: [REDACTED]
City: [REDACTED]
Home: [REDACTED]

b. Victim's next of kin, friend or neighbor: NONE
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

SUSPECT/OFFENDER

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT #: