

0497272

1858

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1 Arrest 3 Request For Warrant 1 Juvenile
2 NTA 4 Request For Capas 1

OBTS Number		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06 18116512	
Agency ORI Number FL 5 0 0 0 0		Agency Name		Agency Report Number	
Charge Type Check as many as apply <input checked="" type="checkbox"/> 1 Felony <input type="checkbox"/> 2 Traffic Felony <input 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 N/A		Multiple Clearance Indicator 3	
Location of Arrest (Including Name of Business) 120 N G ST. LAKE WORTH, FL 33460		Location of Offense (Including Name of Business) 632 N C ST. LAKE WORTH, FL 33460			
Date of Arrest 9/5/2018	Time of Arrest 1927	Booking Date 9/5/2018	Booking Time	Jail Date	Jail Time
Name (Last, First, Middle) LAMAR CHAD RUSSEL		Alias (Name, DOB, Sex, Soc # Etc)			
Race W White B Black O Oriental/Asian W	Sex M	Date of Birth 10/27/1973	Height 5'11	Weight 215	Eye Color BLUE
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE		Marital Status SINGLE		Religion	
Local Address (Street, Apt. Number) 632 N C ST. LAKE WORTH FL 33460		Phone 561-305-4180		Residence Type 1 City 2 County 3 Florida 4 Out of State 1	
Permanent Address (Street, Apt. Number)		City		Address Source VERBAL	
Business Address (Street, Apt. Number)		City		Occupation REAL ESTATE AGENT	
DL Number, State L-560-116-73-387-0	Social Security Number		INS Number	Place of Birth Greensboro North Carolina	Citizenship USA
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)				Phone
Address (Street, Apt. No.)		City	State	Zip	Business Phone
Notified By (Name)		Date	Time	Juvenile Detention 1 Handed/Processed within 2 TOT HRS (hrs)	
Released To (Name)		Relationship		VICTIM NOTIFICATION REQUIRED	
The above address was provided by <input type="checkbox"/> defendant and/or <input type="checkbox"/> defendant's parent. The child and parent was told to come to the Juvenile Court Clerk's Office (Phone 561 355 2533) informed of any address change. <input type="checkbox"/> Yes by Name <input type="checkbox"/> No (Parent)		School Attended		Grade	
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	K Struggle D Deliver E Use	K Expertise/Distribute	M Manufacture/Produce/Cultivate	Z Other
Charge Description SIMPLE BATTERY (DOMESTIC RELATED)		Counts 2	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 784.03(1)(A)(1)	Violation or ORD #
Drug Activity	Drug Type	Amount/Unit	Offense # 18116512	Warrant/Capias Number	Bond
Charge Description AGGRAVATED BATTERY KNEW VICTIM WAS PREGNANT		Counts 1	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 784.045(1)(B)	Violation or ORD #
Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" 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 checked="" 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) 3228 GUN CLUB RD. WEST PALM BEACH, FL 33406					
Court Date and Time Month Day Year Time AM <input type="checkbox"/> PM <input checked="" 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 HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.					
Signature of Defendant (or Juvenile and Parent/Custodian)			Date Signed		
Name <input checked="" type="checkbox"/> Dangerous <input type="checkbox"/> Suietal		Referred Arrest <input type="checkbox"/> Other		Name Verification (Printed by Arrestee)	
Name of Arresting Officer I. GOODMAN		ID # 26786		(PRINT)	
Transporting Officer Goodman 26786 (P/S)		Agency PSO		Page 1 of 1	
Witness here if subject signed with an "X"					

Handwritten signature/initials

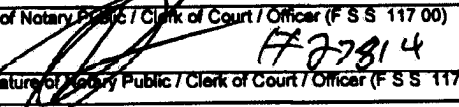

0011 SEP -6 PM 5:22
WEST PALM BEACH
GUN CLUB

OBTS Number		PROBABLE CAUSE AFFIDAVIT			1 Arrest	3 Request For Warrant	1	Juvenile	N
Agency ORI Number FLO 5 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 06		18116512		
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 _____		Special Notes							
Defendant Name (Last, First, Middle) LAMAR CHAD RUSSEL					Race W	Sex M	Date of Birth 10/27/1973		
Charge SIMPLE BATTERY (DOMESTIC RELATED)					Charge AGGRAVATED BATTERY KNEW VICTIM WAS PREGNANT				
Victim Name (Last, First, Middle) WEINTRAUB MICHELLE					Race W	Sex F	Date of Birth 11/7/1975		
Local Address (Street, Apt. Number) 632 N C ST.		City LAKE WORTH	State FL	Zip 33460	Phone (561) 235-8378		Address Source VERBAL		
Business Address (Street, Apt. Number)		City	State	Zip	Phone		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</p> <p><input type="checkbox"/> confessed to admitting to the below facts</p> <p><input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation</p> <p>On the <u>4TH</u> day of <u>SEPTEMBER</u> 20 <u>18</u> at <u>1:01</u> <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM</p>									

On 9/3/2018 at 2358 hours I arrived at 632 N C St. in the City of Lake Worth, Florida located in Palm Beach County in reference to a domestic battery investigation.

Upon my arrival I met with a white female who was standing outside of her residence in a bathrobe, a tank top and a pair of shorts. The white female who would later be identified verbally as Michelle Weintraub was visibly shaking as she clutched her forearms around her chest, hugging herself tightly. I approached, introduced myself and asked her if she could tell me what had happened this evening. Michelle told me that she and her boyfriend of seven years had gone out this evening to downtown Lake Worth and upon returning home both of them had gone into the bedroom where they had laid down together. Michelle was on her phone sending an email to herself when Chad asked to see what she was writing. Michelle refused and Chad became upset and grabbed her phone from her. Upon seeing what she had written, he became irate and refused to give the phone back to her. Michelle insisted that he give her the phone back and he refused, continuing to read what she had written. Michelle told me that she wanted to use the bathroom and with the room being dark she asked Chad for her phone so that she could use it as a

Michelle told me that she reached over the bed from where she was sitting on the end of it and attempted to retrieve her phone from Chad. Upon seeing her attempt to retrieve the phone, Chad grabbed her by the shoulders and pushed her away from him, flinging her off of the bed and across the room. Michelle was propelled backwards at which time she fell, striking the back of head on an end table in the corner of the room. At this time I asked Michelle if she had any injuries to the back of her head and she told me "yes". Michelle turned around and showed me an area on the back of her head that was dark and matted down with blood. The hair was stuck to her head but she was able to part it slightly to show me a one inch gash i the back of her skull with fresh blood that was beginning to dry. She also said that at the time, after falling and hitting her head she screamed out in pain and told Chad that she was hurt. Chad told her that she was bulshitting and that she wasn't hurt. Michelle responded by touching the back of her head and showing Chad a trail of blood on her hand indicating to him that she was injured. Michelle told me that at this point, she tried to once again obtain her phone and Chad physically prevented her by doing so by pushing her by the shoulders. Michelle pleaded with Chad to please stop as she lay crying on the floor of the bathroom. Chad left the residence at this time in a Dodge Ram of Unknown color. Chad was unavailable for comment as he would not pick up his cell phone.

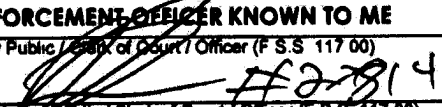
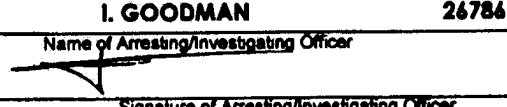
The foregoing instrument was sworn to and affirmed before me this <u>4</u> day of <u>SEPTEMBER</u> 20 <u>18</u> , by	
LAW ENFORCEMENT OFFICER KNOWN TO ME	I. GOODMAN 26786
Name of Notary Public / Clerk of Court / Officer (F S S 117 00)	Name of Arresting/Investigating Officer
 Signature of Notary Public / Clerk of Court / Officer (F S S 117 00)	 Signature of Arresting/Investigating Officer
	Page 1 of 1

OBTS Number		PROBABLE CAUSE AFFIDAVIT			1 Arrest 2 N T A	3 Request For Warrant 4 Request For Capias	1	Juvenile	N
Agency ORI Number FLO 5 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 06		18116512		
Charge Type Check as many as apply <input checked="" type="checkbox"/> 1 Felony <input checked="" type="checkbox"/> 2 Traffic Felony		3 Misdemeanor 4 Traffic Misdemeanor		5 Ordinance 6 Other		Special Note			
Defendant Name (Last, First, Middle) LAMAR CHAD RUSSEL					Race W	Sex M	Date of Birth 10/27/1973		
Charge SIMPLE BATTERY (DOMESTIC RELATED)					Charge AGGRAVATED BATTERY KNEW VICTIM WAS PREGNANT				
Victim Name (Last, First, Middle) WEINTRAUB MICHELLE					Race W	Sex F	Date of Birth 11/7/1975		
Local Address (Street, Apt. Number) 632 N C ST.		City LAKE WORTH	State FL	Zip 33460	Phone (561) 235-8378		Address Source VERBAL		
Business Address (Street, Apt. Number)		City	State	Zip	Phone		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</p> <p><input type="checkbox"/> confessed to admitting to the below facts.</p> <p><input type="checkbox"/> was observed by _____ who told that he/she saw the arrested person commit the below acts</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation</p> <p>On the 4TH day of SEPTEMBER 20 18 at 1:01 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM</p>									

I asked Michelle if she had any other injuries besides the one to the back of her skull and she told me that she was pregnant. I asked her how many weeks or months into her pregnancy she was and she told me that she estimated five or six weeks. She also informed me that it was Chad's child and that he was aware that she was pregnant as they had been discussing the "issue" over dinner much to the distaste of Chad who as per Michelle, did not want to keep the baby.

Throughout the entirety of the interview, Michelle would sob as she retold the events of the evening. When she would gesture during a memory of the event, I watched as her hands shook in fright. I asked Michelle if her hands normally shook and he responded by sobbing and telling me that this was too much to handle and that she had no idea why she had called as she was scared of Chad and what he would do if she got him in "trouble".

Due to my investigation, the statement provided by Michelle along with the physical evidence, I find probable cause to charge Chad with violating F.S.S 784.03(1)(A)(1) the crime of simple battery. I find that Chad did on two occasions touch and strike Michelle against her will. Additionally, I find that Chad did knowingly and intentionally touch and strike Michelle knowing full well that she was pregnant at the time of the battery in violation of F.S.S. 784.045(1)(B), Aggravated battery (pregnant female).

The foregoing instrument was sworn to and affirmed before me this <u>4</u> day of <u>SEPTEMBER</u> 20 <u>18</u> , by	
LAW ENFORCEMENT OFFICER KNOWN TO ME	I. GOODMAN 26786
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Name of Arresting/Investigating Officer
	
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Signature of Arresting/Investigating Officer
	Page 2 of 1

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

Defendant: LAMAR CHAD RUSSEL DOB: 10/27/1973 Case #: 18116512
Victim: WEINTRAUB MICHELLE DOB: 11/7/1975 Race: W Sex: F

Relationship between Victim and Defendant: _____

Photographs: Scene Yes No Victim Yes No Defendant Yes No

911 Call: Yes No Caller: MICHELLE WEINTRAUB

Weapon Used: Yes No Type: _____

Witness: Yes No Name: _____

Victim Pregnant: Yes No If yes, 6 Weeks _____ Months

Injuries: Yes No Description: LACERATION TO THE REAR OF THE SKULL

Medical Treatment: Yes No

At Scene: Yes No Paramedics: PALM BEACH FIRE RESCUE RUN #1893398

At Hospital: Yes No Hospital: _____ Physician: _____

Are children living in the 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: I CANT HANDLE THIS, IM SCARED.

Did the Victim contact anyone other than the 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: 632 N C ST.

LAKE WORTH FL 33460

Phone: Home: (561) 235-8378 Work: _____ Cell: _____

Employer: _____

Name of Relative: _____ Phone: _____

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 #: 18116512 Agency: Palm Beach County Sheriff's Office
Offense: SIMPLE BATTERY (DOMESTIC RELATED)
Suspect/Offender: LAMAR CHAD RUSSEL
DOB: 10/27/1973 Race: W Sex: M

2. Warrant #(s): _____

3.a. Victim's Name: WEINTRAUB MICHELLE DOB: 11/7/1975 Race: W Sex: F
Address: 632 N C ST.
City: LAKE WORTH State: FL Zip: 33460
Home #: (561) 235-8378 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: I. GOODMAN ID #: 26786 Date: _____

White = Corrections or State Attorney (Warrant Application)

Yellow = Warrants Section

Pink = Central Records

SUSPECT/OFFENDER

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT #



Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xlii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2018029825	Date: 9/5/2018
	Specialist Name/ID: J. Beck/9007