

0482352

17MM12790

2906

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1. Arrest 3. Request for Warrant
2. N.T.A. 4. Request for Capias **1** Juvenile **N**

ADMINISTRATIVE	OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06- 17141183															
	Charge Type: Check as many as apply.		3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/>		5. Ordinance <input type="checkbox"/> 6. Other <input type="checkbox"/>		Weapon Seized / Type 2 1. Yes 2. No															
	Multiple Clearance Indicator 01																					
DEFENDANT	Location of Arrest (Including Name of Business) 1910 LAKE WORTH RD LW FL 33460				Location of Offense (Business Name, Address) 1910 LAKE WORTH RD, LW FL 33460																	
	Date of Arrest 10/19/2017	Time of Arrest 1245	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle															
	Name (Last, First, Middle) Shippee, Christopher, Ryan				Alias (Name, DOB, Soc. Sec. #, Etc.)																	
CO-DEF	Race W - White - American Indian B - Black O - Oriental/Asian	Sex M	Date of Birth 04/11/1981	Height 5'07	Weight 165	Eye Color BRW	Hair Color BRW	Complexion MED	Build MED													
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE				Marital Status SINGLE	Religion BAPTIST	Indication of: Alcohol Influence Y N Unk. Drug Influence <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>															
	Local Address (Street, Apt. Number) (City) (State) (Zip) 2107 N Dixie Hwy, West Palm Beach, FL 33407				Phone () NONE		Residence Type: 1. City 2. County 3. Florida 4. Out of State 1															
	Permanent Address (Street, Apt. Number) (City) (State) (Zip)				Phone ()		Address Source FL DL															
	Business Address (Name, Street) (City) (State) (Zip)				Phone ()		Occupation NONE															
	D/L Number, State S100116811310, FL		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) WARWICK, RI		Citizenship USA													
	Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <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"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile														
	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other:				Residence Phone ()				Business Phone ()													
	Address (Street, Apt. Number) (City) (State) (Zip)																					
JUVENILE	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 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 (Phone 395-2526) informed of any change of address. <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															
CHARGE	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		Drug Type N. N/A A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetics		U. Unknown Z. Other	
	Charge Description DISORDERLY CONDUCT				Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 877.03				Violation of ORD #											
	Drug Activity N		Drug Type N		Amount / Unit N/A		Offense # 17141183		Warrant / Capias Number				Bond									
	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number				Violation of 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 of 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 of ORD #											
	Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number				Bond									
	Location (Court, Room Number, Address) 3228 GUN CLUB RD WPB FL 33406				Court Date and Time Month NOV Day 14TH Year 2017 Time 0830 AM X PM				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. 10/19/2017				SCANNED									
Signature of Defendant (or Juvenile and Parent /Custodian)				Date Signed																		
HOLD for other Agency Name:		Signature of Arresting Officer X		Name of Arresting Officer (Print) JOHNSON		I.D. # 9193		Name Verification (Printed by Arresting Officer) OCT 20 2017														
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Name of Arresting Officer (Print) JOHNSON		I.D. # 9193		Name of Arresting Officer (Print) JOHNSON		(PRINT)				PAGE										
Intake Deputy [Signature]		I.D. #		Pouch #		Transporting Officer PEREZ		ID # 19479		Agency PBSO		Witness here if subject signed with an -X" 1 OF 1										

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

OBT'S Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile	N
ADMIN	Agency ORI Number FLO 500000	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06-17141183					
	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:	
CHARGES	Name (Last, First, Middle) Shippee, Christopher, Ryan		Alias	Race W	Sex M	Date of Birth 04/11/1981		
	Charge Description DISORDERLY CONDUCT	877.03	Charge Description					
VICTIM	Victim's Name (Last, First, Middle) EL BODEGON, ,		Race	Sex	Date of Birth N/A			
	Local Address (Street, Apt. Number) (City) (State) (zip)		Phone	Address Source				
	Business Address (Name, Street) (City) (State) (zip)		Phone	Occupation				
	1910 LAKE WORTH RD LW FL 33460		(561) 9676999					
<p>The undersigned certifies and 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 my (described) investigation.</p> <p>On the 19TH day of OCT 2017 at 1230 <input type="checkbox"/> A. M. <input checked="" type="checkbox"/> P. M. (Specifically include facts constituting cause for arrest.)</p> <p>ON 10/19/17 I RESPONDED TO ASSIST LT. A. JOHNSON AT 1910 LAKE WORTH RD (EL BODEGON) IN THE CITY OF LAKE WORTH, PALM BEACH COUNTY, FL WITH A DISTURBANCE. UPON MY ARRIVAL LT JOHNSON ADVISED THAT HE WITNESSED W/M CHRISTOPHER SHIPPEE YELLING OBSCENITIES AND CAUSING A DISTURBANCE AT THE BUSINESS. HE DETAINED SHIPPEE AND CALLED FOR BACK UP. I ALSO SPOKE WITH STORE EMPLOYEE, DONANLD HEATON. HEATON STATED THAT WHILE WALKING INTO WORK HE NOTICED SHIPPEE SHOUTING OBSCENITIES AND SCARING CUSTOMERS AND THEY WERE WALKING IN/OUT OF THE BUSINESS. HE TOLD SHIPPEE TO LEAVE AND SHIPPEE REFUSED. SHIPPEE BEGAN SHOUTING LOUDER AND STARTED CALLING HEATON RUDE NAMES AND TRYING TO INTIMIDATE HIM. HE WAS ADVISED THE POLICE WOULD BE CALLED AT THE SAME TIME AS LT JOHNSON RESPONDED TO THE DISTURBANCE, AS HE WAS ALREADY IN THE AREA. HEATON ALSO STATED THAT SEVERAL CUSTOMERS APPROACHED EMPLOYEES ABOUT SHIPPEE SITTING ABOUT 10-15 FEET FROM THE DOOR SCREAMING AT THEM AND INTIMIDATING THEM. SHIPPEE WAS ARRESTED FOR DISORDER CONDUCT AND TRESPASSED FROM THE PROPERTY.</p> <p>BASED ON THE ABOVE LISTED FACTS PROBABLE CAUSE EXISTS TO CHARGE SHIPPEE WITH 1 COUNT DISORDERLY CONDUCT WHEREBY HE DID UNLAWFULLY COMMIT SUCH ACTS AS ARE OF A NATURE TO CORRUPT PUBLIC MORALS OR OUTRAGE THE SENSE OF PUBLIC DECENCY, OR AFFECT THE PEACE AND QUIET OF PERSONS WHO MAY WITNESS THEM, OR ENGAGE IN BRAWLING OR FIGHTING, OR ENGAGED IN CONDUCT CONSITUTING A BREACH OF THE PEACE OF DISORDERLY CONDUCT.</p>								
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH		JOHNSON					
	(Signature of Arresting/Investigative Officer)		The foregoing instrument was sworn to or affirmed and subscribed before me this <u>19</u> day of <u>OCT</u> 20 <u>17</u> by <u>JOHNSON</u>					
	(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced		<u>LEO</u> SCANNED					
PEREZ #19479		OCT 20 2017						
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)		PAGE <u>1</u> OF <u>1</u>						