

OGTS 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		18099671		
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		Special Notes				
Defendant Name (Last, First, Middle) HAMMER GEORGE FREDERICK			Race W	Sex M	Date of Birth 01-10-82		
Charge POSSESSION OF HEROIN			Charge				
Victim Name (Last, First, Middle) Palm Beach County, FL			Race	Sex	Date of Birth		
Local Address (Street, Apt. Number)		City	State	Zip	Phone		Address Source
Business Address (Street, Apt. Number)		City	State	Zip	Phone		Occupation
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							
<input checked="" type="checkbox"/> committed the below acts in my presence			<input type="checkbox"/> was observed by _____ who told ROBINSON 24110 that he/she saw the arrested person commit the below acts				
<input type="checkbox"/> confessed to admitting to the below facts			<input type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation				
On the 21st day of JULY 20 18 at 1600 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM							

While conducting surveillance in the parking lot of the Bealls Outlet located at 9866 Military tr in Boynton Beach FL, Agent [redacted] observed the defendant George Frederick Hammer conduct a hand to hand narcotics transaction with a black male in a Blue in color Chevy Passenger car while his 10 month old daughter was in his custody. Agent [redacted] advised me of the situation and I made contact with the defendant as he was exiting the parking lot at the side entrance on Boynton Beach Blvd.

I immediately detained the defendant, placing him into handcuffs, double locked, checked for proper fit, and removed 7 capsules of heroin from his left front pocket FTP Marquis FTN Cobalt these 7 capsules weighed 7.2 grams TPW inside of a PBSO Evidence bag. I then placed the defendant into my patrol car. I contacted the defendants wife Jessica Brandt Hammer (W/F 06-17-1989) who came to the scene and took custody of their daughter Gabriella Rose Hammer (W/F 08-29-17). Both the mother and daughter left the scene without further incident. The defendant was then transported to the Palm Beach County Jail and released into the custody of corrections deputies without further incident.

I later contacted DCF per PBSO Policy due to the juvenile being present during this incident.

The foregoing instrument was sworn to and affirmed before me this <u>21st</u> day of <u>JULY</u> 20 <u>18</u> by		D/S A. ROBINSON		24110
_____ 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		

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Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
I/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 checked="" type="checkbox"/>	119.071(4)(c)	Undercover personnel.	3
	<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"/>	(xii) 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"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2018024332	Date: 07/22/2018
	Specialist Name/ID: D.Beavers/9606

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