

0490/80

NH

3544

ARREST / NOTICE TO APPEAR

A D M I N I S T R A T I O N		OBTS Number		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE		
Agency ORI Number		Agency Name		Agency Report Number (N.T.A.'s only)		9 4 2017-0014597					
0500800		West Palm Beach Police Department									
Charge Type: Check as many as apply.		<input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other				If Weapon Seized Enter Type		Multiple Clearance Indicator			
Location of Arrest (Including Name of Business) 500-BLK FERN ST				Location of Offense (Business Name, Address) 500 FERN ST BLK, WEST PALM BEACH, FL 33401							
Date of Arrest 07/30/2017		Time of Arrest 22:31		Booking Date		Booking Time		Jail Date		Jail Time	
Location of Vehicle											
Name (Last, First, Middle) BARNELL, GREGORY DAREN											
Alias: Alias (Name, DOB, Soc. Sec. #, Etc.)											
Race W - White 1 - American Indian B - Black O - Oriental/Asian		Sex W M		Date of Birth 04/27/1984		Height 5'10		Weight 190		Eye Color BROWN	
Marital Status S		Hair Color BROWN		Complexion LIGHT		Build MED		Religion UNX			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)											
Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input type="checkbox"/> Unk. <input checked="" type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk.											
Local Address (Street, Apt. Number) 2561 GALLIANO CIR, WINTER PARK, FL 32792		(City)		(State)		(Zip)		Phone (321) 624-3517		Residence Type: 1. City 3. Florida 2. County 4. Out of State 3	
Permanent Address (Street, Apt. Number) 2561 GALLIANO CIR, WINTER PARK, FL 32792		(City)		(State)		(Zip)		Phone (321) 624-3517		Address Source FL DL	
Business Address (Name, Street)		(City)		(State)		(Zip)		Phone		Occupation	
D/L Number, State B654284841470 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) THREE, MI, United States		Citizenship US			
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor	
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor	
JUVENILE VICTIM NOTIFICATION Name (Last, First, Middle) No Bond Address (Street, Apt. Number) City State Zip Business Phone											
Notified by: (Name) Date Time JUVENILE DISPOSITION 1. Held Processed within Department and Released 2. TOT JAC 3. Incarcerated											
Released To: (Name) Relationship Date Time School Grade											
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 355-2526) informed of any change of address.											
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Description of Property Value of Property											
C O D E Drug Activity S. Sell R. Smuggle K. Disperses/ N. N/A B. Buy D. Deliver M. Manufacture/ P. Possess T. Traffic E. Use Z. Other Drug Type B. Barbiturate H. Hallucinogen P. Paraphernalia/ N/A C. Cocaine M. Marijuana Equipment U. Unknown A. Amphetamine E. Heroin O. Opium/Deriv. Z. Other											
C H A R G E Charge Description BATTERY - BATTERY (SIMPLE) Statute Violation Number 784.03(1)(a) / Violation of ORD #											
Drug Activity Drug Type Amount / Unit Offense # N / 2017-0014597 Counts Domestic Violence Warrant / Capias Number Bond											
C H A R G E Charge Description Statute Violation Number Violation of ORD #											
Drug Activity Drug Type Amount / Unit Offense # Counts Domestic Violence Warrant / Capias Number Bond											
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Drug Activity Drug Type Amount / Unit Offense # Counts Domestic Violence Warrant / Capias Number Bond											
I N T A K E Health / Apparent Physical Condition of Defendant Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries Explain:											
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail PROPERTY - Received By Released By Released To											
Check which applies: <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health											
I N T A K E Transported By Date Transported Time Transported Other											
N O T I C E <input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.											
Location (Court, Room) Criminal Justice CRIMINAL JUSTICE COMPLEX Court Date and Time 08/29/2017 13:00:00 3228 GUN CLUB ROAD											
T O A P P E A R 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 COMTEMPT 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 1928				Name Verification (Printed by Arrestee) 1928			
DAS. B. SHATAARA #7623				Name of Arresting Officer (Last, First, Middle) BRIDEAU, CHARLES				I.D. # 01928			
Intake Deputy I.D. #				Transporting Officer I.D. #				Agency			
SCANNED Witness hereof subject signed with an X											

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

11.3.1.2017

PAGE 1 OF 1

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

A	Date / Time
D	07/30/2017 21:35
M	
N	

Agency ORI Number	Agency Name	Agency Report Number
FL 0500800	WEST PALM BEACH POLICE DEPARTMENT	9 4 2017-0014597

D	Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
E	BARNELL, GREGORY DAREN		W	M	04/27/1984

C	Charge Description
H	784.03(1) BATTERY - BATTERY (SIMPLE)

V	Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
I	BARR, AMANDA NICHOLE	W	F	10/20/1988

C	Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
T	2561 GALLIANO CIRCLE, WINTER PARK, FL 32792	(407) 797-0101	FL DL

M	Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation
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DEFENDANT'S STATEMENTS:	Written <input type="checkbox"/>	Taped <input checked="" type="checkbox"/>	Oral <input type="checkbox"/>	OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL):
VICTIM'S STATEMENTS:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	UPSET

RELATIONSHIP BETWEEN VICTIM & SUSPECT			
BYFRND / GRLFND			

PHOTOGRAPHS:	Scene: <input checked="" type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Victim:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
911 CALL:	<input checked="" type="checkbox"/>	<input type="checkbox"/> CALLER: WITNESS	
WEAPON USED:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	TYPE:
WITNESSES:	<input checked="" type="checkbox"/>	<input type="checkbox"/> (If YES, attach witness list)	
INJURIES:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
MEDICAL TREATMENT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
AT: Scene:	<input checked="" type="checkbox"/>	<input type="checkbox"/> PARAMEDICS: WPBFR #1	
Hospital:	<input checked="" type="checkbox"/>	<input type="checkbox"/> PHYSICIAN(S) / HOSPITAL:	
ACT COMMITTED IN PRESENCE OF MINOR(S):	<input type="checkbox"/>	<input checked="" type="checkbox"/> NAMES/AGES:	
H. R. S. NOTIFIED:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
VICTIM PREGNANT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
VIOLATION OF RESTRAINING ORDER:	<input type="checkbox"/>	<input checked="" type="checkbox"/> CASE #:	
PRIOR HISTORY OF DOMESTIC VIOLENCE:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
ALCOHOL OR DRUGS INVOLVED:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

On Sunday, July 30, 2017, at 2045 hours, I responded to the 500-Blk of Fern St in reference to a Domestic Battery incident. While on scene, I made contact with all parties involved.
The witness, Kimberly Key (W/F DOB 03/21/1952) advised that she was walking on the south side of the

STATE OF FLORIDA COUNTY OF PALM BEACH
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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 30 day of July, 2017.

REKDAHL, CHRISTOPHER
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

SCANNED
JUL 31 2017

COURT

STATE ATTORNEY

CENTRAL RECORDS

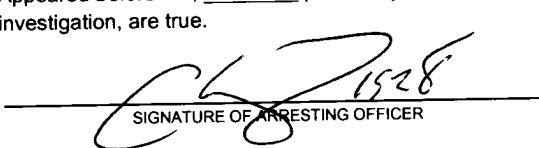
JAIL

CRIME ANALYSIS

P. I. O.

DOMESTIC VIOLENCE PROBABLE CAUSE
AFFIDAVIT

Palm Beach County
Narrative Continuation

A D M I N	Date / Time 07/30/2017 21:35		
	Agency ORI Number FL 0500800	Agency Name WEST PALM BEACH POLICE DEPARTMENT	Agency Report Number 9 4 2017-0014597
<p>N A R R A T I V E</p> <p>500-Blk of Fern St when she heard screaming. Key then observed a W/M, later identified as Gregory Barnell (DOB 04/27/1984), and a W/F, later identified as Amanda Barr (DOB 10/20/1988), engaged in a physical altercation on the north side of the street. Key stated (Sworn / BWC) that she watched as Barnell held Barr by both arms, slammed her into a vehicle, and threw her down to the ground.</p> <p>Barnell and Barr, who have been intimately involved for more than a year, live together but do not have children in common.</p> <p>Barnell stated (post Miranda / BWC) that he was trying to get his cell phone from Barr's purse but she was resisting. According to Barnell, in an attempt to retrieve his phone from the purse, Barr fell to the ground. Barnell stated that he did not intend to cause harm to Barr.</p> <p>Barr, who was visibly upset, stated that she did not believe Barnell meant to hurt her. She also indicated that she did not want to "press charges."</p> <p>Barr suffered minor abrasions on her elbows and lower back from the fall to the pavement. Barr, who suffers from anxiety, was transported to Good Samaritan Hospital as a precaution.</p> <p>Based on the above facts, I find Probable Cause exists to charge Gregory Barnell with Domestic Simple Battery pursuant to F.S.S. 784.03(1).</p> <p><i>NOT A CERTIFIED COPY</i></p>			
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p>Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.</p> <p> _____ SIGNATURE OF ARRESTING OFFICER</p> <p>Sworn to and subscribed to before me this <u>30</u> day of <u>July</u>, <u>2017</u>.</p> <p><u>REKDAHL, CHRISTOPHER</u> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p>SCANNED JUL 31 2017</p>			

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.