

J# 0495619 18CF260 (P) PCH# 2020

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

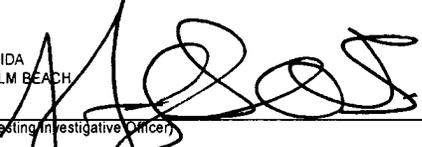
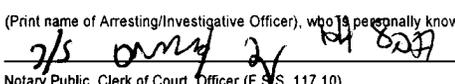
1. Arrest 3. Request for Warrant
2. N.T.A. 4. Request for Capias 1 Juvenile N

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- 18-036483					
	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				Weapon Seized / Type 2 1. Yes 2. No		Multiple Clearance Indicator 01					
	Location of Arrest (Including Name of Business) 23277 BOCA CHICA CIR , BOCA RATON, FL 33433				Location of Offense (Business Name, Address) 23277 BOCA CHICA CIR , BOCA RATON, FL 33433							
	Date of Arrest 02/08/2018	Time of Arrest 2203	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle					
Name (Last, First, Middle) Little, Hunter, Austin								Alias (Name, DOB, Soc. Sec. #, Etc.)				
Race W - White I - American Indian B - Black O - Oriental/Asian W		Sex M	Date of Birth 12/09/1996	Height 6'02	Weight 220	Eye Color BLUE	Hair Color BROWN	Complexion LIGHT	Build HEAVY			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE				Marital Status Single	Religion NONE	Indication of Influence Y N Unk. Alcohol Influence <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Drug Influence <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
Local Address (Street, Apt. Number) (City) (State) (Zip) 11427 Boca Woods Ln, Boca Raton, FL 33428				Phone () 561-914-1325	Residence Type 1. City 2. County 3. Florida 4. Out of State							
Permanent Address (Street, Apt. Number) (City) (State) (Zip) 11427 Boca Woods Ln, Boca Raton, FL 33428				Phone ()	Address Source							
Business Address (Name, Street) (City) (State) (Zip) ()				Phone ()	Occupation							
D/L Number, State L340321964490, FL		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) BOCA RATON, FL		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"/> 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)				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 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)				
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No				Description of Property		Value of Property						
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 BATTERY ON PERSON 65 YOA OR OLDER				Counts 1	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 784.08(2)(c)		Violation of ORD #				
Drug Activity N	Drug Type N	Amount / Unit	Offense # 18-036483	Warrant / Capias Number		Bond						
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD # FEB 9 AM 1:48				
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)												
Court Date and Time Month Day Year Time AM												
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. 02/08/2018												
Signature of Defendant (or Juvenile and Parent /Custodian)								Date Signed				
HOLD for other Agency Name:				Signature of Arresting Officer [Signature]				Name Verification (Printed by Arrestee)				
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:				Name of Arresting Officer (Print) J. Torres				I.D. # 7768				
Intake Deputy Spann 8101		I.D. #	Pouch #	Transporting Officer [Signature]		ID # 627 p20		Agency		Witness here if subject signed with an -X"		

No Bond

NOT A VICTIM NOTIFICATION REQUIRED

2018 FEB -9 AM 5:37
SHARON R. B...
PALM BEACH COUNTY
GUN CLUB
ANCH

OBTS 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	Agency Name	Agency Report Number					
	FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 18-036483					
CHARGES	Charge Type: Check as many as apply.		Special Notes:					
	<input 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					
VICTIM	Name (Last, First, Middle) Little, Hunter, Austin			Alias	Race W	Sex M	Date of Birth 12/09/1996	
	Charge Description BATTERY ON PERSON 65 YOA OR OLDER			784.08(1)(2)(c)				
Victim's Name (Last, First, Middle) Campo, Jose, Angel			Race O	Sex M	Date of Birth 09/10/1932			
Local Address (Street, Apt. Number) 23277 Boca Chica Circle, Boca Raton, FL 33433			(City)	(State)	(zip)	Phone () 561-394-3797	Address Source PRESENT	
Business Address (Name, Street)			(City)	(State)	(zip)	Phone ()	Occupation	
<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 8TH day of FEBRUARY 20 18 at 10:03 <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p>ON 2/8/18 AT APPROXIMATELY 2055 HOURS, I RESPONDED TO 23277 BOCA CHICA CIR, BOCA RATON, FL 33433 IN REFERENCE TO A DOMESTIC INCIDENT. CALLER REPORTED THAT HER GRANDSON PUSHED HIM TO THE FLOOR.</p> <p>UPON ARRIVAL, I SPOKE WITH JOSE CAMPO WHO TOLD ME THAT HIS GRANDSON, HUNTER LITTLE, HAD LIVED WITH HIM FOR APPROXIMATELY ONE WEEK AND WAS TO LEAVE THE FOLLOWING DAY FROM THE DATE OF THIS INCIDENT. LITTLE JUST GOT DONE TAKING A SHOWER AND CAME OUT THE BATHROOM WITH JUST A TOWEL AROUND HIS WAIST. CAMPO WAS UPSET AND TOLD LITTLE NOT TO WALK AROUND THE HOUSE WITH NO CLOTHES ON. LITTLE PICKED UP AN UNDERWEAR, WHICH HE THOUGHT WAS HIS, AND A PAIR OF PANTS. HE TOLD LITTLE TO PUT THE UNDERWEAR BACK, BECAUSE IT DID NOT BELONG TO HIM. AS LITTLE WAS WALKING FROM THE BATHROOM TO THE BEDROOM, CAMPO ASKED LITTLE WHEN HE WAS LEAVING. IT WAS AT THAT POINT, LITTLE GOT ANGRY AND STARTED COMING AT HIM. FEARING THAT LITTLE WAS GOING TO HURT HIM, HE PICKED UP A 5 LB WEIGHT DUMB BELL IN AN ATTEMPT TO PROTECT HIMSELF. LITTLE PUSHED HIM CAUSING TO FALL TO THE FLOOR AND HIT HIS HEAD AGAINST THE WALL. LITTLE, THEN, PICKED UP A BROOM POINTED IT AT HIM AND TOLD HIM TO STAY AWAY AND WHEN CAMPO SAID THAT HE WAS GOING TO CALL 911, LITTLE PUT ON HIS CLOTHES AND LEFT THE HOUSE.</p> <p>I SPOKE WITH HUNTER LITTLE WHO SAID THAT HE NEVER PUSHED CAMPO. HE THOUGHT THAT CAMPO WAS GOING TO HIT HIM WITH THE DUMBBELL, BUT CAMPO LOST HIS FOOTING AND FELL BACK ON HIS OWN.</p> <p>BASED ON THE ABOVE, IT WAS DETERMINED THAT LITTLE WAS THE PRIMARY AGGRESSOR AND DID PUSH HIS GRAND FATHER, JOSE CAMPO, CAUSING HIM TO FALL TO THE FLOOR. HUNTER LITTLE WAS PLACED UNDER ARREST FOR BATTERY ON PERSON 65 YOA OR OLDER PURSUANT TO F.S.S 784.08(1)(2)(c).</p>								
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH							
								
	(Signature of Arresting/Investigative Officer)							
The foregoing instrument was sworn to or affirmed and subscribed before me this 8TH day of FEBRUARY 20 18 by J. FORGES								
(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced _____								
								
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)								
PAGE 1 OF 1								