0506100

19mm2963

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500400

Agency Name: Delray Beach Police Department

Agency Report Number (N.T.A.'s only): 4 | 0 | 19-003873

Charge Type: Check as many as apply. 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other

If Weapon Seized — Enter Type: Hands/fist/feet/teeth

Multiple Clearance Indicator: 1

Location of Arrest (Including Name of Business): 301 NE 3RD AVE DELRAY BEACH

Location of Offense (Business Name, Address): 301 NE 3RD AVE, DELRAY BEACH, FL 33444

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
03/10/2019	22:46	03/10/2019	22:56	03/10/2019	22:46	

DEFENDANT

Name (Last, First, Middle): GHANEM, JACOB MICHAEL

Alias: Alias (Name, DOB, Soc. Sec. #, Etc.)

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	12/09/1992	6'01	170	GREEN	BLACK	LIGHT	MEDIUM

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description):

Marital Status: S

Religion: NOT INDICA

Indication of: Alcohol Influence Yes ☒ No ☐ Unk. ☐ Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 299 NE SPANISH TRL, BOCA RATON, FL 33432

Phone: (561) 822-7739

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 299 NE SPANISH TRL, BOCA RATON, FL 33432

Phone: (561) 822-7739

Address Source:

Business Address (Name, Street) (City) (State) (Zip):

Phone:

Occupation:

D/L Number, State: G550433924490 / FL

Soc. Sec. Number: [redacted]

INS Number:

Place of Birth (City, State): BOCA RATON, FL,

Citizenship: US

CO-DEF

Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other: Name (Last, First, Middle) | Residence Phone

Address (Street, Apt. Number) (City) (State) (Zip) | Business Phone

Notified by: (Name) | Date | Time | JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated

Released To: (Name) | Relationship | Date | Time

VICTIM NOTIFICATION REQUIRED

The above address was provided by ☐ defendant and/or ☐ 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.
☐ Yes, by: ☐ No:

School Attended | Grade

Property Crime? ☐ Yes ☒ No | Description of Property | Value of Property

CODE

Drug Activity: N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Disperses/ 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. Synthetic U. Unknown Z. Other

CHARGE

Charge Description: SIMPLE BATTERY(TOUCH OR STRIKE) | Statute Violation Number: 784.03(1A1) | Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☒ Y ☐ N		NO BOND.

CHARGE

Charge Description | Statute Violation Number | Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

CHARGE

Charge Description | Statute Violation Number | Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By | Released By | Released To

Transported By | Date Transported | Time Transported | Other

NOTICE TO APPEAR

☐ INSTRUCTION NO. 1 - Mandatory appearance in court
☒ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): South County 200 W Atlantic Ave Delray Beach, FL 33444

Court Date and Time

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.

Signature of Defendant (or Juvenile and Parent/Custodian) | Date Signed

No Photo Available

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☒ Suicidal ☐ Other

Issued Copy | I.D. # | Pouch #

Signature of Arresting Officer

Name of Arresting Officer (Print): ROBERTS, ROGER J | I.D. #: 1088

Transporting Officer: ROBERTS | I.D. #: 1088 | Agency: DBPD

Name Verification (Printed by Arrestee) (PRINT)

MAR 11 AM 12:36

Witness here if subject signed with an "X".

PAGE 1 OF 1

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

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DOMESTIC VIOLENCE PROBABLE CAUSE AFFIDAVIT

Palm Beach County

ADMIN

Date / Time	Agency ORI Number	Agency Name	Agency Report Number
03/10/2019 22:54	FL 0500400	DELRAY BEACH POLICE DEPARTMENT	4 0 19-003873

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
GHANEM, JACOB MICHAEL		W	M	12/09/1992

CHRG

Charge Description: 784.03(1A1) SIMPLE BATTERY(TOUCH OR STRIKE)

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
SHAPIRO-WOHL, STEPHANIE MORGAN	W	F	06/03/1994

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
299 NE SPANISH TRL, BOCA RATON, FL 33432	(561) 305-5776	

Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation

ADDITIONAL INFORMATION

	Written	Taped	Oral
DEFENDANT'S STATEMENTS:	☐	☒	☐
VICTIM'S STATEMENTS:	☐	☒	☐

OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): **SCARED, CRYING, BRUISED**

RELATIONSHIP BETWEEN VICTIM & SUSPECT: **DATING**

		YES	NO	
PHOTOGRAPHS:	Scene:	☐	☒	
	Victim:	☒	☐	
911 CALL:		☒	☐	CALLER: **WITNESS**
WEAPON USED:		☒	☐	TYPE: **HANDS**
WITNESSES:		☒	☐	(If YES, attach witness list)
INJURIES:		☒	☐	
MEDICAL TREATMENT:		☒	☐	
AT:	Scene:	☒	☐	PARAMEDICS: **DBFD**
	Hospital:	☐	☒	PHYSICIAN(S) / HOSPITAL:
ACT COMMITTED IN PRESENCE OF MINOR(S):		☐	☒	NAMES/AGES:
H. R. S. NOTIFIED:		☐	☒	
VICTIM PREGNANT:		☐	☒	
VIOLATION OF RESTRAINING ORDER:		☐	☒	CASE #:
PRIOR HISTORY OF DOMESTIC VIOLENCE:		☐	☒	
ALCOHOL OR DRUGS INVOLVED:		☒	☐	

NARR

See page 2 for narrative.

STATE OF FLORIDA
COUNTY OF PALM BEACH

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 10 day of March, 2019.

RASOR, JEFFREY
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

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

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DOMESTIC VIOLENCE PROBABLE CAUSE
AFFIDAVIT
Palm Beach County
Narrative Continuation

ADMIN	Date / Time	Agency ORI Number	Agency Name	Agency Report Number
	03/10/2019 22:54	FL 0500400	DELRAY BEACH POLICE DEPARTMENT	4 | 0 | 19-003873

NARRATIVE

This incident occurred in the City of Delray Beach, Palm Beach County FL.

On 03/10/19 I was dispatched to the area of 301 NE 3rd Ave. in reference to a white male and white female having an argument. Upon arrival I met with W/F Stephanie Shapiro-Wohl who was crying and very upset. After a few minutes Wohl calmed down and stated that she and her boyfriend got into a physical altercation. Wohl said that she came to downtown Delray Beach with a friend and the two subjects were at a nearby bar. Wohl went to leave the bar and noticed the tire to her car was flat and she called her boyfriend, W/M Jacob Ghanem. Ghanem arrived on scene and the two subjects started to have a verbal dispute over how to repair the vehicle. Wohl stated that she attempted to walk away from Ghanem because she was upset and Ghanem grabbed her, picked her up and put her in his vehicle. Wohl showed me a bruise on the inside of her left bicep where she said Ghanem grabbed her. Wohl was able to get out of the vehicle and her friend who lives nearby, W/M Trenton Broers came out to see what was going on.

I then spoke with Ghanem who said that he and Wohl were having an argument because she would not let him repair the tire on her car. Ghanem said that Wohl became very upset and she started to tic due to her Tourette Syndrome. Ghanem indicated that when Wohl becomes stressed or upset she will start to tic and as a result she will sometimes hit herself. Ghanem said he grabbed Wohl and was holding her against his chest in an attempt to prevent Wohl from hitting herself. While holding Wohl, she was able to bite him twice, once on the left side of his chest and once on the right wrist. Ghanem sustained two red marks on the areas he said he was bit.

I contacted W/M Trenton Broers who said that he could hear two people arguing from inside of his apartment. Broers said the argument went on for several minutes and he decided to check outside and see what was going on. Broers looked out of his upstairs window and saw Ghanem pick up Wohl and "throw" her into his vehicle. Broers went downstairs because he recognized Wohl and was going to make sure everything was okay. By the time Broers made it outside Wohl was out of the vehicle and police had arrived on scene. This sworn statement was recorded on my department issued body worn camera.

Based on the above facts, probable cause exists to charge W/M Jacob Ghanem with Simple Battery per F.S.S. 784.03(1A1).

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STATE OF FLORIDA
COUNTY OF PALM BEACH

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 10 day of March, 2019.

RASOR, JEFFREY
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

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

VICTIM NOTIFICATION FORM

This form must be filled out in a case involving one of the following crimes:

- **Homicide** (Ch. 782)
- **Sexual Offense** (Ch. 794)
- **Attempted Murder**
- **Attempted Sexual Offense**
- **Stalking** (S. 784.048)
- **Domestic Violence** - (This includes any assault, agg. assault, battery, agg. battery, sexual assault, sexual battery, stalking, agg. 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.)

Upon completion, this form must accompany the booking paperwork. If applying for a warrant, attach this form to the filing packet.

SUSPECT/OFFENDER:_____

COURT CASE/WARRANT #:_____
(FOR WARRANTS USE ONLY)

1. Incident Report #: 19-3873 Agency: DBPD
   Offense: Simple Battery
   Suspect/Offender: Jacob Ghanem
   D.O.B. 12/9/92 Race: W Sex: M

2. Warrant #(s):_____

3. Complete one (1) of the following:

   a. Victim's name: Stephanie Shapiro-Wohl
   Address: 299 NE Spanish Trl
   City: Boca Raton State: FL Zip: 33432
   Home #: 561-305-5776 Work #:_____ Other:_____

   b. Victim's next of kin:_____
   Address:_____
   City:_____ State:_____ Zip:_____
   Home #:_____ Work #:_____ Other:_____

   c. Victim's designated contact other than next of kin (for example: a friend or neighbor):
   Name:_____
   Address:_____
   City:_____ State:_____ Zip:_____
   Home #:_____ Work #:_____ Other:_____

4. Relevant identification or case numbers assigned to the case (please specify):
   _____

WAIVER: I CHOOSE NOT TO COMPLETE THIS VICTIM NOTIFICATION FORM, AND UNDERSTAND THAT I AM WAIVING MY RIGHT TO BE NOTIFIED OF THE RELEASE OF THE SUSPECT/OFFENDER.

Signature of person waiving notification: _____
Printed name of person waiving notification:_____

Officer's Name : Roberts I.D.: 1088 Date: 3/10/19

White-Warrants Division Yellow-Corrections or State Attorney (Warrant Application) Pink-Central Records

PBSO #0029-A Stock F-4403

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PALM BEACH COUNTY
SHERIFF'S OFFICE
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐	119.071(2)(h)	Other: Identity of victim of sexual battery, lewd and lascivious offense upon a person less than 16 yrs old, cheld abuse, or other sexual offense.	
	☐	119.0712(2)	Other: Personal information contained in a motor vehicle record	

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REVIEW COMPLETED BY

Booking Number: 2019008300	**Date:** 3/11/2019
	Specialist Name/ID: M. Tooks #8557