

04844624

ARREST / NOTICE TO APPEAR
Juvenile Referral Report1. Arrest 3. Request For Warrant
2. N.T.A. 4. Request For Capias

1 Juvenile

N

3454

OBTS Number

Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06		17-025942				
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 0 1				
Location of Arrest (Including Name of Business) 215 N FOUR SEASONS RD				Location of Offense (Including Name of Business) 215 N FOUR SEASONS RD						
Date of Arrest 1/12/2017	Time of Arrest 2328	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle N/A				
Name (Last, First, Middle) WAMSLEY MICHAEL				Alias (Name, DOB, Soc. Sec. #, Etc.) EUGENE						
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex W M	Date of Birth 2/12/1969	Height 6'00	Weight 170	Eye Color BLUE	Hair Color BROWN	Complexion LIGHT	Build MED		
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) /				Marital Status MARRIED		Religion N/A	Indication of Alcohol Influence Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk			
Local Address (Street, Apt. Number) 215 N FOUR SEASONS RD				City PBG	State FL	Zip 33410	Phone 561-260-7786	Residence Type 1. City 3. Florida 2. County 4. Out of State 2		
Permanent Address (Street, Apt. Number) 215 N FOUR SEASONS RD				City PBG	State FL	Zip 33410	Phone 561-260-7786	Address Source VERBAL		
Business Address (Street, Apt. Number)				City	State	Zip	Phone	Occupation CONSTRUCTION WORKER		
D/L Number, State W-524-545-69-052-0, FL		Social Security Nu [REDACTED]		INS Number		Place of Birth POINT PLEASANT, WV	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"/> Other <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"/> Other <input type="checkbox"/> 5. Juvenile			
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other	Name (Last, First, Middle) 16 BONO				Phone					
Address (Street, Apt. No.) City				State	Zip	Business Phone				
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 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 561-355-2526) informed of any address change <input type="checkbox"/> Yes, by (Name) <input type="checkbox"/> No: (Reason)				School Attended						
Property Crime <input type="checkbox"/> Yes <input type="checkbox"/> No				Description of Property				Value of Property		
Drug Activity N. WA P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Dispense/ Distribute	M. Manufacture/ Produce	Z. Other Cultivate	Drug Type N. N/A A. Amphetamine	B. Barbiturate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana	P. Paraphernalia/ Equipment	U. Unknown Z. Other
Charge Description DOMESTIC BATTERY				Counts 1	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 784.041(a)		Violation or ORD. # 1		
Drug Activity N	Drug Type N	Amount/Unit /	Offense # 17-025942	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Warrant/Capias Number / Bond		
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation or ORD. #		
Drug Activity	Drug Type	Amount/Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Warrant/Capias Number		
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation or ORD. #		
Drug Activity	Drug Type	Amount/Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Warrant/Capias Number		
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation or ORD. #		
Drug Activity	Drug Type	Amount/Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Warrant/Capias Number		
Location (Court, Address, Room Number)				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation or ORD. #		
Court Date and Time				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Warrant/Capias Number		
Month	Day	Year	Time	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation or ORD. #		
I AGREE TO APPEAR AT THE ABOVE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT I SHOULD 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				2017-01-13		
HOLD for Other Agency				Signature of Arresting Officer				Name Verification (Printed by Arrestee)		
Name				Name of Arresting Officer D/S P. SCARTOZZI				ID # 21289		
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other								(PRINT)		
Intake Deputy Thomas P. Scartozzi				Transporting Officer D/S P. SCARTOZZI	ID # 21289	Agency 21289	Witness here if subject signed with an "X"			

SCANNED

JAN 13 2017

OBTS Number

PROBABLE CAUSE AFFIDAVIT

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

1 Juvenile

N

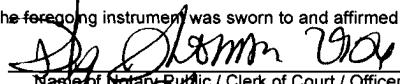
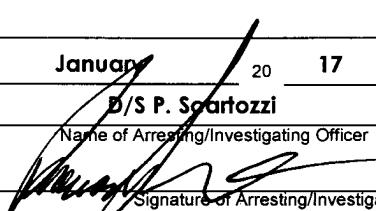
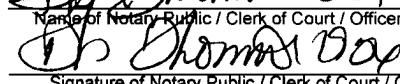
Agency ORI Number FLO 5 0 0 0 0 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06	17-025942								
Charge Type: Check as many as apply <table border="0"> <tr> <td><input type="checkbox"/> 1. Felony</td> <td><input checked="" type="checkbox"/> 3. Misdemeanor</td> <td><input type="checkbox"/> 5. Ordinance</td> </tr> <tr> <td><input type="checkbox"/> 2. Traffic Felony</td> <td><input type="checkbox"/> 4. Traffic Misdemeanor</td> <td><input type="checkbox"/> 6. Other _____</td> </tr> </table>			<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 _____	Special Notes		
<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 _____									
Defendant Name (Last, First, Middle) WAMSLEY MICHAEL			EUGENE	Race W	Sex M						
Charge DOMESTIC BATTERY			Charge								
Charge			Charge								
Victim Name (Last, First, Middle) WAMSLEY HUNTER			W	Race W	Sex F						
Local Address (Street, Apt. Number) 215 N FOUR SEASONS RD		City PALM BEACH GARDENS	State FL	Zip 33410	Phone 5612156154						
Business Address (Street, Apt. Number)		City	State	Zip	Address Source VERBAL						
					Occupation STUDENT						
The undersigned 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 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.								
<input type="checkbox"/> confessed to admitting to the below facts.			<input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.								
On the 12TH day of JANUARY 20 17 at 10:29 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM											

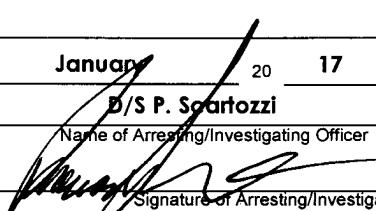
On 1/12/2017 at approximately 2229 hours I was dispatched to investigate a possible armed domestic dispute in the area of 215 North Four Seasons road, Palm Beach Gardens, FL, 33410 in unincorporated Palm Beach County. I was driving my marked patrol vehicle asset number 68559 and wearing my Palm Beach County Sheriff's office issued class B uniform.

Prior to my arrival I was provided with the following information. A person by the name of Michael Wamsley called 911 to report his wife was running around the house with a piece of metal rebar in her hand. A disturbance could be heard in the background and not much information was provided. Michael left the residence on foot and met with us at the main entrance of the community. He advised that he is going through a divorce with his wife and goes to mediation the following day. Michael advised he was sleeping when his wife woke his up yelling at his and almost hitting him with the rebar in her hand. Michael advised he was never actually hit with the rebar and he didn't show any signs of injury on his person.

D/S Swanson responded to the residence to speak with the other persons involved. I was later told over the radio that probable cause exists for the arrest of Michael. At this time he was placed under arrest, he was placed in PBSO issued handcuffs which were checked for proper fit and double locked. I then drove over to the residence to gather more details on the incident. I was handed a witness statement written by the alleged victim which advised me of the following. Hunter Wamsley, Michael's Wamsley's daughter wrote in her statement that her mother and he father were arguing and at some point Hunter's mother, Yvonne was walking toward the kitchen sink to dump out the tea she made for Michael. Michael allegedly went to grab for Yvonne's hand to prevent her from dumping out the tea and that's when Hunter got in-between them. Michael then pushed Hunter, Hunter grabbed the refrigerator to prevent her from falling to the ground and that's when Michael pushed her. The refrigerator moved away from the wall approximately 1 foot when Michael pushed her. She suffered a minor scratch on her person due to being pushed. D/S Swanson took photos.

Michael was transported to Main detention center without incident

The foregoing instrument was sworn to and affirmed before me this		12th	day of	January	20	17	, by:
 Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)		D/S P. Scartozzi  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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 Name of Arresting/Investigating Officer	
 Signature of Arresting/Investigating Officer	

SCANNED
JAN 13 2017