

0479702

2726

ARREST / NOTICE TO APPEAR

AD M I N I S T R A T I O N	OBTS Number		Agency ORI Number 0500800		Agency Name West Palm Beach Police Department		Agency Report Number (N.T.A.'s only) 9 / 4 / 2017-0003983		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		JUVENILE								
	Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Location of Arrest (Including Name of Business) 7724 77TH WAY, WPB, FL		Location of Offense (Business Name, Address) 7724 77TH WAY, WEST PALM BEACH, FL 33407		If Weapon Seized Enter Type Hands/feet/teeth		Multiple Clearance Indicator														
D E F E N D A N T	Date of Arrest 02/27/2017		Time of Arrest 01:00		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle										
	Name (Last, First, Middle) SLIMANI, MOHAMED		Alias:		Alias (Name, DOB, Soc. Sec. #, Etc.)		Race W - White B - Black O - Oriental/Asian W		Sex M		Date of Birth 07/15/1987		Height 5'11		Weight 165		Eye Color BROWN		Hair Color BROWN		Complexion DARK		Build Small
C O D E F	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status S		Religion		Indication of: Alcohol Influence Drug Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>		Residence Type 1. City 2. County 3. Out of State 1		Address Source FL ID		Occupation Manager										
	Local Address (Street, Apt. Number) 7724 77TH WAY, WEST PALM BEACH, FL 33407		(City) WEST PALM BEACH		(State) FL		(Zip) 33407		Phone (561) 494-4292														
J U V E N I L E	Permanent Address (Street, Apt. Number) 7724 77TH WAY, WEST PALM BEACH, FL 33407		(City) WEST PALM BEACH		(State) FL		(Zip) 33407		Phone (561) 494-4292														
	Business Address (Name, Street) CITGO, BELVEDERE RD		(City) WEST PALM BEACH		(State) FL		(Zip) 33407		Phone (561) 494-4292														
C O D E F	D/L Number, State S455540872550 / FL		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) Morocco		Citizenship USA														
	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor		<input type="checkbox"/> 5. Juvenile										
J U V E N I L E	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor		<input type="checkbox"/> 5. Juvenile										
	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian		Name (Last, First, Middle)		Residence Phone		Business Phone																
C O D E F	Address (Street, Apt. Number)		(City)		(State)		(Zip)																
	Notified by: (Name)		Date		Time		Relationship		Date		Time												
C O D E F	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 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 F	Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Disperse Distribute		M. Manufacture Produce/ Cultivate		Z. Other		B. Barbiturate N. N/A A. Amphetamine		C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetic		U. Unknown Z. Other		
	Charge Description BATTERY - BATTERY (SIMPLE)		Statute Violation Number 784.03(1A1)		Violation of ORD #																		
C H A R G E	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence		Warrant / Capias Number		Bond								
	N				/		2017-0003983		1		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N												
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								
C H A R G E	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence		Warrant / Capias Number		Bond								
	N				/						<input type="checkbox"/> Y <input type="checkbox"/> N												
I N T A K E	Health: Apparent Physical Condition of Defendant		Any knowledge of the following: Explain:		<input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries																		
	Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond		<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health		<input type="checkbox"/> T.O.T. County Jail		PROPERTY - Received By		Released By		Released To												
N O T I C E T O A P P E A R	Transported By		Date Transported		Time Transported		Other																
	<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 03/28/2017 13:00:00		3228 GUN CLUB ROAD																
A D M I N I S T R A T I O N	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																		
	HOLD for Other Agency		Signature of Arresting Officer FORBES, RYAN		ID # 192r		Name Verification (Printed by Arrestee) FORBES, RYAN		(PRNT)														
A D M I N I S T R A T I O N	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) FORBES, RYAN		ID # 01925		Transporting Officer FORBES		ID # 192r		Agency WPSPD		Witness here if subject signed with an "X"								
	Pouch #																						

VICTIM NOTIFICATION REQUIRED

No Photo Available

2017 FEB 27 11:53:39 AM

FEB 27 2017 2:16

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DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

A D D I T I O N A L I N F O R M A T I O N	Date / Time 02/27/2017 00:55	Agency OR# Number FL 0500800		Agency Name WEST PALM BEACH POLICE	Agency Report Number 9 4 2017-0003983			
	Name (Last, First, Middle) SLIMANI, MOHAMED				Alias	Race U	Sex M	Date of Birth 07/15/1987
C R I M I N A L	Charge Description 784.03 (1A) DOMESTIC SIMPLE BATTERY 784.041(2) BATTERY - DOMESTIC BATTERY BY STRANGULATION							
	Victim's Name (Last, First, Middle) [REDACTED]				(State)	(Zip)	Phone [REDACTED]	Address Source FL DL
V I C T I M	Business Address (Name, Street) [REDACTED]				(City)	(State)	(Zip)	Phone [REDACTED]
								Occupation [REDACTED]
D E F E N D A N T	DEFENDANT'S STATEMENTS: Written <input type="checkbox"/> Taped <input checked="" type="checkbox"/> Oral <input type="checkbox"/>				OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): UPSET			
	VICTIM'S STATEMENTS: Written <input type="checkbox"/> Taped <input checked="" type="checkbox"/> Oral <input type="checkbox"/>							
R E L A T I O N S H I P	RELATIONSHIP BETWEEN VICTIM & SUSPECT GIRLFRIEND							
	<p>PHOTOGRAPHS: Scene: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> <p>Victim: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> <p>911 CALL: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> CALLER: WITNESS</p> <p>WEAPON USED: <input type="checkbox"/> YES <input checked="" type="checkbox"/> TYPE:</p> <p>WITNESSES: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> (If YES, attach witness list)</p> <p>INJURIES: <input type="checkbox"/> YES <input checked="" type="checkbox"/></p> <p>MEDICAL TREATMENT: <input type="checkbox"/> YES <input checked="" type="checkbox"/></p> <p>AT: Scene: <input type="checkbox"/> YES <input checked="" type="checkbox"/> PARAMEDICS:</p> <p>Hospital: <input type="checkbox"/> YES <input checked="" type="checkbox"/> PHYSICIAN(S) / HOSPITAL:</p> <p>ACT COMMITTED IN PRESENCE OF MINOR(S): <input type="checkbox"/> YES <input checked="" type="checkbox"/> NAMES/AGES:</p> <p>H. R. S. NOTIFIED: <input type="checkbox"/> YES <input checked="" type="checkbox"/></p> <p>VICTIM PREGNANT: <input type="checkbox"/> YES <input checked="" type="checkbox"/></p> <p>VIOLATION OF RESTRAINING ORDER: <input type="checkbox"/> YES <input checked="" type="checkbox"/> CASE #:</p> <p>PRIOR HISTORY OF DOMESTIC VIOLENCE: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p> <p>ALCOHOL OR DRUGS INVOLVED: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p>							
N A R R	On 02/27/2017 at 0018 hours I responded to 7724 77th Way in regards to a female stating the male has a knife and repeatedly gave the address.							
	Upon arrival I observed a white male standing in front of a green Ford Focus, with a white female who was							
<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] 192r SIGNATURE OF ARRESTING OFFICER</p> <p>Sworn to and subscribed to before me this 27 day of February, 2017</p> <p>VAUTIN, BRYAN [Signature] 192r NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)</p>								

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County
Narrative Continuation

A C C E P T E D F O R M	Date / Time 02/27/2017 00:55	Agency Name WEST PALM BEACH POLICE		Agency Report Number 9 4 2017-0003983
	Agency ORI Number FL 0500800			

crying inside of the vehicle. The male, identified as the defendant, Mohamed Slimani, was taken into custody where I then conducted my investigation. The following information was obtained during my investigation;

The victim, [REDACTED], advised she and [REDACTED] (Mohamed Slimani) were drinking alcohol in the patio in front of the residence. While outside they began to have an argument, which then became physical. During the physical altercation [REDACTED] claims Mohamed would not allow her to leave the residence and in doing so, he grabbed her by her neck and began directing her to the front door of the residence. [REDACTED] explained she did not believe Mohamed was trying to choke her; however she did advise she told him she could not breathe and wanted him to let her go. [REDACTED] also explained that while she was standing on the patio with Mohamed, he struck her in the back of her head, with what she believed to be his fist. [REDACTED] explained she and Mohamed have been a couple for at least 3 years, but have been on again, off again.

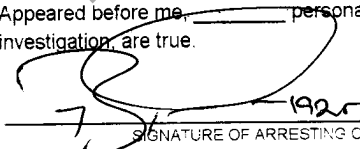
The witness, Dominique Bagnell, advised everyone was on the patio drinking when [REDACTED] and Mohamed began to argue. The argument then became physical, where Dominique claims the altercation was between the inside and the patio area of the residence. Dominique advised she was inside of the kitchen of the residence, where she could see out to the patio area through a sliding glass door, when she observed Mohamed grab [REDACTED] around her neck with his arm and began to pull her to the door. Dominique advised she then heard, what she believed to be Mohamed strike [REDACTED]; however she did not see the strike.

While speaking to Mohamed he claims everyone had been drinking and [REDACTED] wanted to leave the residence. He advised he did not want her to drive, for fear that she could cause an accident; so he advised he merely walked out into the parking lot and stood in front of her vehicle so she could not leave. Mohamed advised he never struck [REDACTED], nor did he place his hands on her.

There were several conflicting stories as to whether there was any choking committed by Mohamed; therefore, based on the above stated I find probable cause to charge Mohamed Slimani with (1) count of Domestic Simple Battery, pursuant to F.S.S. 784.03(1).

STATE OF FLORIDA
 COUNTY OF PALM BEACH

Appeared before me, [REDACTED] 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 27 day of February, 2017

VAUTIN, BRYAN
 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 7.10)

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.

1. Incident Report # 2017-0003983 Agency: WPR
Offense: Domestic Battery
Suspect/Offender: Slimani, Mohamed
D.O.B. 07/15/87 Race: U Sex: Male

2. Warrant #(s) _____

3. Complete one (1) of the following:

a. Victim
Address: _____
City: _____
Home: _____

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: FORBES I.D.: 1925 Date: 02/27/2017

SUSPECT/OFFENDER:

COURT CASE/WARRANT #
(FOR WARRANTS USE ONLY)