

ARREST / NOTICE TO APPEAR Juvenile Referral Report

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

3

Juvenile

1

OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06 17086571	
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		If Weapon Seized None		Enter Type		Multiple Clearance Indicator 0 1	
Location of Arrest (Including Name of Business) 205 N. DIXIE HWY MAIN COURTHOUSE WEST PALM BEACH FL. 334				Location of Offense (Including Name of Business) 205 N. DIXIE HWY MAIN COURTHOUSE WEST PALM BEACH FL. 334			
Date of Arrest Jun 5, 2017		Time of Arrest 1730		Booking Date		Booking Time	
Jail Date		Jail Time		Location of Vehicle NA			
Alias (Name, DOB, Soc. Sec. #, Etc.)							
Name (Last, First, Middle) PAUL A.							
Race W - White B - Black O - Oriental/Asian		Sex M		Date of Birth 10/07/57		Height 6-02	
Weight 225		Eye Color BROWN		Hair Color BROWN		Complexion LIGHT	
Build MED		Marital Status MARRIED		Religion UNK		Indication of Alcohol Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk <input type="checkbox"/>	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Residence Type: 1. City 2. County 3. Florida 4. Out of State		2	
Local Address (Street, Apt. Number) 10530 BEXLEY BLVD.		City BOCA RATON		State FL		Zip 33428	
Permanent Address (Street, Apt. Number) SAME AS ABOVE		City		State		Zip	
Business Address (Street, Apt. Number)		City		State		Zip	
Phone 7722148396		Address Source SELF		Occupation ELECTRICIAN		Citizenship US	
DIL Number, State S351-681-57-367-0		Social Security Number [REDACTED]		INS Number		Place of Birth CUBA	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
Parent Legal Guardian Other		Name (Last, First, Middle)		City		State	
Address (Street, Apt. No.)		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	
School Attended		Grade		Value of Property			
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 561 355-2525) informed of any address change. <input type="checkbox"/> Yes, by (Name) <input type="checkbox"/> No (Reason)							
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property					
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Dispose/Distribute	
M. Manufacture/Produce Cultivate		Z. Other		Drug Type N. N/A A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin	
H. Hallucinogen M. Marijuana		P. Paraphernalia U. Unknown Z. Other		Statute Violation Number 741.31 (4)		Warrant/Capias Number	
Charge Description VIOLATION OF ORDER OF PROTECTION		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Bond	
Drug Activity NA		Drug Type NA		Amount/Unit NA		Offense # 17086571	
Charge Description WITNESS TAMPERING		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 914.22 (2)	
Drug Activity		Drug Type		Amount/Unit		Offense # 17086571	
Charge Description		Counts		Domestic Violence		Statute Violation Number	
Drug Activity		Drug Type		Amount/Unit		Offense #	
Charge Description		Counts		Domestic Violence		Statute Violation Number	
Drug Activity		Drug Type		Amount/Unit		Offense #	
Charge Description		Counts		Domestic Violence		Statute Violation Number	
Drug Activity		Drug Type		Amount/Unit		Offense #	
Location (Court, Address, Room Number)							
Court Date and Time Month _____ Day _____ Year _____ Time _____ AM <input type="checkbox"/> PM <input type="checkbox"/>							
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)				Signature of Arresting Officer D/S W. WILLIAMS ID # 6757			
Name Verification (Printed by Arrestee)				Name Verification (Printed by Arrestee)			
Name <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other				Name D/S W. WILLIAMS ID # 6757			
Intake Deputy ID # _____ Pouch # _____				Transporting Officer ID # _____ Agency PBSO			
Witness here if subject signed with an "X"				Page 1 of 1			

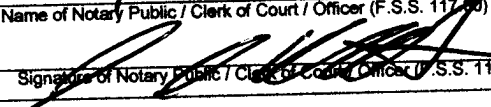
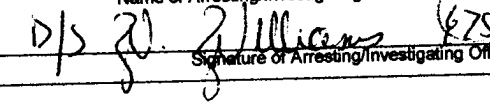
7/8/17

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 3. Request For Warrant 2. N.T.A. 4. Request For Capias		3	Juvenile	/
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06		17086571		
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		Special Notes						
Defendant Name (Last, First, Middle) STAMP PAUL A.				Race W	Sex M	Date of Birth 10/07/57		
Charge VIOLATION OF ORDER OF PROTECTION		Charge WITNESS TAMPERING						
Victim Name		Date of Birth 10/06/1960						
Local Address		FL/DL						
Business Address								
The undersign 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 05 day of JUNE 20 17 at 1730 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM								

On 06/05/17 at 1700 hours I was in the lobby of the courthouse located at 205 North Dixie Highway in the City of West Palm Beach Florida monitoring the people coming in and leaving the courthouse. I was approached by a w/f who identified herself as [REDACTED] proceeded to tell me that she had a court appointment this morning in courtroom 2-C in front of Judge Stevens in reference to a domestic violence incident. Once [REDACTED] cleared security she and a friend started walking towards the escalator leading to the second floor.

At that time her husband identified as Paul Stamp walked from behind one of the columns that are on the first floor and stood in front of her. [REDACTED] told me that she was scared because he has been known to be violent towards her physically. I asked [REDACTED] what did he say to her. [REDACTED] told me that Paul asked her to tell the State Attorney that she didn't want to press charges because he didn't want to go to jail for ten years. Paul told her that he loved her and wanted her back. [REDACTED] walked around Paul and entered courtroom 2-C. I asked [REDACTED] did she report the incident to her lawyer or the courtroom Deputy prior to her hearing starting. She replied yes! to her lawyer but nothing was done.

[REDACTED] proceeded to show me a temporary no contact order that was issued in the beginning of the domestic violence case that was in effect before today's court date. She also showed me several other incidents with case numbers that have all been filed with the State Attorneys Office because her husband keeps violating the no contact order between them. [REDACTED] also introduced me to a friend of hers who accompanied her to court. (see name list). I had dispatch check all parties involved and found that there was in fact a temporary no contact order in place before today's court date.. I talked to [REDACTED] witness who told me that he could not hear what [REDACTED] husband said to her because he turned away as the husband walked up to [REDACTED]. I asked [REDACTED] would she and her witness provide me with a sworn written statement. They agreed and proceeded to write them. All attempts to contact the suspect Paul Stamp met with negative results. [REDACTED] was given a case information form with a case number assigned. I informed [REDACTED] that I would file this case with the State Attorneys Office for further review.

The foregoing instrument was sworn to and affirmed before me this <u>05</u> day of <u>JUN</u> 20 <u>17</u> , by:		6757
D/S BETHEL # 8389 Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)		D/S W. WILLIAMS 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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