

17M008079AXX4MB

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

3 Juvenile /

OBTS Number	Agency ORI Number FLO 5 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06	17086571				
Change Type: <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance Check as many as apply <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		H Weapon Seized None		Multiple Clearance Indicator 0 / 1					
Location of Arrest (Including Name of Business) 205 N. DIXIE HWY MAIN COURTHOUSE WEST PALM BEACH FL 33401		Location of Offense (Including Name of Business) 205 N. DIXIE HWY MAIN COURTHOUSE WEST PALM BEACH FL 33401		Jail Date Jail Time Location of Vehicle NA					
Date of Arrest Jun 5, 2017	Time of Arrest 1730	Booking Date	Booking Time						
Name (Last, First, Middle) PAUL A. Alias (Name, DOB, Soc. Sec. #, Etc.)									
STAMP		Sex W	Date of Birth 10/07/57	Height 6-02	Weight 225	Eye Color BROWN	Hair Color BROWN	Complexion LIGHT	Build MED
Race W-White I-American Indian B-Black O-Oriental/Asian						Marital Status MARRIED	Religion UNK	Indication of: Y N Alcohol Influence <input type="checkbox"/> Drug Influence <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	Phone 7722148396	Address Source SELF			
Permanent Address (Street, Apt. Number) SAME AS ABOVE		City	State	Zip	Phone	Occupation ELECTRICIAN			
Business Address (Street, Apt. Number)		City	State	Zip	Phone	Citizenship US			
DL Number, State S351-681-57-367-0		Social Security Number		INS Number	Place of Birth CUBA				
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth	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"/>		
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth	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 Legal Guardian Other		Name (Last, First, Middle)				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 561 355-2528) informed of any address change <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No. (Reason)				School Attended		Grade			
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property				Value of Property			
Drug Activity N/A P. Possess		S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Disposed Distribute	M. Manufactured Produce Cultivate	Z. Other	Drug Type B. Barbiturate H. Hallucinogen N. N/A C. Cocaine M. Marijuana A. Amphetamine E. Heroin	P.徘徊物/ Equipment U. Unknown Z. Other	
Charge Description VIOLATION OF ORDER OF PROTECTION				Counts 1	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 741.31 (4)		Violation or ORD. #	
Drug Activity NA		Drug Type NA	Amount/Unit NA	Offense # 17086571		Warrant/Capias Number		Bond 62	
Charge Description WITNESS TAMPERING				Counts 1	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 914.22 (2)		Violation or ORD. #	
Drug Activity		Drug Type	Amount/Unit	Offense # 17086571		Warrant/Capias Number		Bond 2	
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation or 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 or ORD. #	
Drug Activity		Drug Type	Amount/Unit	Offense #		Warrant/Capias Number		Bond	
Location (Court, Address, Room Number)				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation or ORD. #	
Court Date and Time				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 6757		Date Signed		Name Verification (Printed by Arrestee)			
HOLD for Other Agency		Name of Arresting Officer D/S W. WILLIAMS ID # 6757				(PRINT)			
Name <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		Resisted Arrest <input type="checkbox"/> Other _____							
Intake Deputy		ID # Pouch #	Transporting Officer ID # PBSO			Page 1 of 1			
Witness here if subject signed with an 'X'									

OBTS Number

PROBABLE CAUSE AFFIDAVIT

1. Arrest 3. Request For Warrant
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3

Juvenile

1

Agency ORI Number FLO 5 0 0 0 0 0	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 checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 2. Traffic Felony <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				
Charge	Charge				
Victim Name [REDACTED]	ID# [REDACTED] Sex [REDACTED] Date of Birth 10/06/1960				
Local Address [REDACTED]	FL/DL				
Business Address [REDACTED]					
<p>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.</p> <p>The person taken into custody...</p> <p><input type="checkbox"/> committed the below acts in my presence.</p> <p><input type="checkbox"/> confessed to admitting to the below facts.</p> <p><input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.</p>					
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] [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 todays 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 todays 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 15 day of JUN 20 17 , by: D/S BETHEL # 8359 Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Name of Arresting/Investigating Officer D/S W. WILLIAMS 6757 Signature of Arresting/Investigating Officer D/S W. WILLIAMS 6757
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Signature of Arresting/Investigating Officer