

2018mm04105 AXK/MP

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBT# Number
Agency ORI Number **FLO 5 0 0 0 0 0** Agency Name **PALM BEACH COUNTY SHERIFF'S OFFICE** Agency Report Number **06 17-094650**

Charge Type: 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other
If Weapon Seized _____ Enter Type _____ Multiple Clearance Indicator **0 1**

Location of Arrest (Including Name of Business) _____ Location of Offense (Including Name of Business) **11732 Waterbend Ct Wellington FL 33414**

Date of Arrest _____ Time of Arrest _____ Booking Date _____ Booking Time _____ Jail Date _____ Jail Time _____ Location of Vehicle _____

Name (Last, First, Middle) **Shulman, Robyn, Melissa** Alias (Name, DOB, Soc. Sec. #, Etc.) _____

Race **W** Sex **F** Date of Birth **08/29/1973** Height **5'8** Weight **135** Eye Color **Blnd** Hair Color **Brn** Complexion **Med** Build **Med**

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) **Unknown** Marital Status **Divorced** Religion **Unk** Indication of: Alcohol Influence Drug Influence

Local Address (Street, Apt. Number) **11 Plaza Real S #819** City **Boca Raton** State **FL** Zip **33432** Phone _____ Residence Type: 1. City 2. County 3. Florida 4. Out of State **1**

Permanent Address (Street, Apt. Number) **11 Plaza Real S #819** City **Boca Raton** State **FL** Zip **33432** Phone _____ Address Source **FL DL**

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

D/L Number, State **S455733738090/ FL** Social Security Number _____ INS Number _____ Place of Birth **Unk** Citizenship **US**

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

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 defendant and/or 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 Yes, by (Name) _____ No (Reason) _____ School Attended _____ Grade _____

Property Crime? Yes No Description of Property _____ Value of Property _____

Drug Activity: N. N/A, P. Possess, S. Sell, B. Buy, T. Traffic, R. Smuggle, D. Deliver, E. Use, K. Dispense/Distribute, M. Manufacture/Produce/Cultivate, Z. Other, Drug Type: N. N/A, A. Amphetamine, B. Barbiturate, C. Cocaine, E. Heroin, H. Hallucinogen, M. Marijuana, Paraphernalia/Equipment, U. Unknown, Z. Other

Charge Description **Battery** Counts **1** Domestic Violence Y N Statute Violation Number **784.03(1)(a)(1)** Violation or ORD. # _____

Drug Activity **N** Drug Type **N** Amount/Unit **N/A** Offense # **17-094650** Warrant/Capias Number _____ Bond _____

Charge Description _____ Counts _____ Domestic Violence Y N Statute Violation Number _____ Violation or ORD. # _____

Drug Activity _____ Drug Type _____ Amount/Unit _____ Offense # _____ Warrant/Capias Number _____ Bond _____

Charge Description _____ Counts _____ Domestic Violence Y N Statute Violation Number _____ Violation or ORD. # _____

Drug Activity _____ Drug Type _____ Amount/Unit _____ Offense # _____ Warrant/Capias Number _____ Bond _____

Charge Description _____ Counts _____ Domestic Violence Y N Statute Violation Number _____ Violation or ORD. # _____

Drug Activity _____ Drug Type _____ Amount/Unit _____ Offense # _____ Warrant/Capias Number _____ Bond _____

Location (Court, Address, Room Number) _____

Court Date and Time Month _____ Day _____ Year _____ Time _____ AM PM

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 _____

HOLD for Other Agency Name _____ Signature of Arresting Officer **D/S H. Paulson** ID # **7713** Name Verification (Printed by Arrestee) _____ (PRINT)

Intake Deputy ID # _____ Pouch # _____ Transporting Officer ID # _____ Agency _____ Page **1** of **1**

Witness here if subject signed with an "X"

OBTs Number		PROBABLE CAUSE AFFIDAVIT				1. Arrest 2. N.T.A.	3. Request For Warrant 4. Request For Capias	3	Juvenile	N
Agency ORI Number FLO 5 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 06		17-094650			
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) Shulman, Robyn, Melissa				Race W	Sex F	Date of Birth 08/29/1973				
Charge Battery				Charge						
Charge				Charge						
Victim Name (Last, First, Middle) Zarcadoolas, Martin, Jeffrey				Race W	Sex M	Date of Birth 05/15/1966				
Local Address (Street, Apt. Number) 11732 Waterbend Ct		City Wellington	State FL	Zip 33414	Phone 561-248-9301		Address Source FL DL			
Business Address (Street, Apt. Number)		City	State	Zip	Phone		Occupation			
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 25th day of June 20 17 at 12:30 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM										

On the above date and time, I was dispatched to a Domestic Dispute Call at 11732 Waterbend Ct Wellington FL 33414. Upon my arrival, I made contact with the victim, Martin Zarcadoolas.

Zarcadoolas stated the following information about the incident. His ex-wife, Robyn Shulman, came over to take custody of their daughter, Ella Zarcadoolas. They live at separate residences and per the court orders, it Shulman's time to have their daughter. When Shulman arrived on scene, she saw that he had a cleaning lady that she disapproved of at Zarcadoolas's residence. This started a verbal altercation. He provided Shulman with their daughter, but she would not let the situation go. Shulman started striking and pushing Zarcadoolas, while still carrying their daughter. She finally stopped and left the scene.

Shulman did not realize that Zarcadoolas's cleaning lady, Gina Pepper, had been video recording the incident from the upstairs bedroom. She emailed me a copy of the video after she showed it to me. The video corroborates with the verbal statement that Zarcadoolas provided.

It must be noted that Zarcadoolas had no visible injuries. He also stated that he did not want to press charges. Both Zarcadoolas and Pepper would not provide Sworn Statements. I explained to both parties that the video was enough evidence and the State of Florida would be pursuing charges under the Domestic Violence Laws.

Based on my investigation, I am filing for a warrant for the arrest of Robyn Shulman. Shulman is being charged with Domestic Battery per Florida State Statue 784.03(1)(a)(1). This case will be turned over to the State Attorney's Office to process the warrant for her arrest.

The foregoing instrument was sworn to and affirmed before me this <u>25th</u> day of <u>June</u> 20 <u>17</u> , by:	
<u>S. Poritz</u> Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	<u>D/S H. Paulson</u> 7713 Name of Arresting/Investigating Officer
<u>[Signature]</u> 8309 Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	<u>[Signature]</u> Signature of Arresting/Investigating Officer
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