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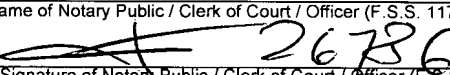
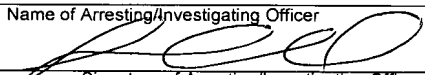
OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 3. Request For Warrant 2. N.T.A. 4. Request For Capias		1 [ ] Juvenile [ ] N [ ]	
Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number <b>06 17-100155</b>			
Charge Type: 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		# Weapon Seized Enter Type		Multiple Clearance Indicator			
Location of Arrest (Including Name of Business) <b>624 N FEDERAL HWY #N LAKE WORTH, FL 33460</b>		Location of Offense (Including Name of Business) <b>624 N FEDERAL HWY #N LAKE WORTH, FL 33460</b>					
Date of Arrest <b>JUL 8, 2017</b>	Time of Arrest <b>1759</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle	
Name (Last, First, Middle) <b>UNCK, SHANNON N</b>		Alias (Name, DOB, Soc. Sec. #, Etc.)					
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex <b>F</b>	Date of Birth <b>11/13/1988</b>	Height <b>5-09</b>	Weight <b>130</b>	Eye Color <b>BLUE</b>	Hair Color <b>BROWN</b>	Complexion <b>MED</b>
Build <b>MED</b>		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>UPPER BACK 2 GUNS, ANKLE "KEAUMGANG", "I CARRY YOU IN MY SMILE"</b>		Marital Status <b>SINGLE</b>		Religion <b>NONE</b>	
Local Address (Street, Apt. Number) <b>624 N FEDERAL HWY #N LAKE WORTH FL 33460</b>		State <b>FL</b>		Zip <b>33460</b>		Phone <b>561-929-1196</b>	
Permanent Address (Street, Apt. Number) <b>SAME AS ABOVE</b>		City <b>SAME AS ABOVE</b>		State <b>SAME AS ABOVE</b>		Zip <b>SAME AS ABOVE</b>	
Business Address (Street, Apt. Number)		City		State		Zip	
D/L Number, State <b>U520-794-88-913-0</b>		Social Security Number		INS Number		Place of Birth <b>ATLANTA, GEORGIA</b>	
Citizenship <b>U.S.A</b>		Co-Defendant Name (Last, First, Middle)		Race		Sex	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other		Name (Last, First, Middle)		Phone		Business Phone	
Address (Street, Apt. No.)		City		State		Zip	
Notified By (Name)		Date		Time		Relationship	
Released To (Name)		Date		Time		Relationship	
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		Grade			
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> 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		P. Paraphernalia/ Equipment		U. Unknown Z. Other			
Charge Description <b>DOMESTIC BATTERY (SIMPLE)</b>		Counts <b>1</b>		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number <b>784.03(1A1)</b>	
Drug Activity		Drug Type		Amount/Unit		Offense # <b>17-100155</b>	
Warrant/Capias Number		Bond					
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number	
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	
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	
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 <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)		Date Signed		Signature of Arresting Officer		Name Verification (Printed by Arrestee)	
Name <b>D/S B. SHATARA #7623</b>		Name of Arresting Officer <b>J DESMOND</b>		ID # <b>9714</b>		(PRINT) <b>JUL 8 2017</b>	
Intake Deputy <b>D/S B. SHATARA #7623</b>		Transporting Officer <b>J DESMOND</b>		Agency <b>PBSO</b>		Page <b>1 of 1</b>	

OBTS Number		<b>PROBABLE CAUSE AFFIDAVIT</b>		1. Arrest 3. Request For Warrant 2. N.T.A. 4. Request For Capias		1	Juvenile	N
Agency ORI Number <b>FLO 5 0 0 0 0 0</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number <b>06</b>		<b>17-100155</b>		
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) <b>UNCK, SHANNON</b>				<b>N</b>	<b>W</b>	<b>F</b>	Date of Birth <b>11/13/1988</b>	
Charge <b>DOMESTIC BATTERY (SIMPLE)</b>				Charge				
Charge				Charge				
Victim Name (Last, First, Middle) <b>ONORE, BENJAMIN</b>				<b>W</b>	<b>M</b>	Date of Birth <b>9/17/1988</b>		
Local Address (Street, Apt. Number) <b>624 N FEDERAL HWY #N</b>		City <b>LAKE WORTH</b>		State <b>FL</b>	Zip <b>33460</b>	Phone <b>NONE</b>		Address Source <b>VERBAL FROM VICTIM</b>
Business Address (Street, Apt. Number) <b>NONE</b>		City <b>NONE</b>		State	Zip	Phone <b>NONE</b>		Occupation <b>NONE</b>
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 <b>8TH</b> day of <b>JULY</b> 20 <b>17</b> at <b>1800</b> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM								

ON JULY 7, 2017 AT 1738 HOURS I RESPONDED TO 624 N FEDERAL HWY #N LAKE WORTH, PALM BEACH COUNTY, FLORIDA 33460 IN REFERENCE TO A BATTERY (DOMESTIC).

UPON MY ARRIVAL I MET WITH A VERY AGITATED WHITE FEMALE SHANNON N UNCK DOB 11/13/1988. UNCK WAS YELLING AND CURSING TOWARD'S HER BOYFRIEND WHO WAS DOWN THE STREET SEEKING MEDICAL ATTENTION FOR A INJURY TO HIS NOSE. THE VICTIM/BOYFRIEND BENJAMIN L ONORE DOB 9/17/1988 WAS WALKING NORTHBOUND ON N FEDERAL HWY TOWARDS MY DIRECTION HOLDING A BLOODY WHITE TOWEL ON HIS FACE. ONORE STATED THAT HE WAS AT HIS RESIDENCE WITH HIS LIVE IN GIRLFRIEND UNCK WHEN SHE BECAME IRATE OVER NOT BEING ABLE TO FIND A PACK OF CIGARETTES THAT SHE PURCHASED EARLIER. AT THIS TIME UNCK BECAME ENRAGED AND STARTED TO HIT AND SCRATCH THE VICTIM ONORE. ONORE FLED THE RESIDENCE TO AVOID FURTHER ALTERCATION WITH UNCK RAN TOWARDS HIM JUMPING ON HIS BACK ON THE FRONT SIDEWALK IN FRONT OF THEIR RESIDENCE.

I FIND PROBABLE CAUSE TO CHARGE SHANNON N UNCK WITH DOMESTIC BATTERY (SIMPLE) 784.03(1A1)

The foregoing instrument was sworn to and affirmed before me this <b>7TH</b> day of <b>JULY</b> 20 <b>17</b> , by:	
<b>KNOWN LEO</b>	<b>J DESMOND</b> <b>9714</b>
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Name of Arresting/Investigating Officer
 Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	 Signature of Arresting/Investigating Officer
Page 1 of 1	

**Palm Beach County Sheriff's Office**  
**DOMESTIC VIOLENCE/DATING VIOLENCE SUPPLEMENTAL PROBABLE CAUSE FORM**  
(Submit this form with the original Probable Cause Affidavit)

Defendant: UNCK, SHANNON N DOB: 11/13/1988 Case #: 17-100155  
Victim: ONORE, BENJAMIN DOB: 9/17/1988 Race: W Sex: M

Relationship between Victim and Defendant: \_\_\_\_\_

Photographs: Scene ☐ Yes ☒ No Victim ☒ Yes ☐ No Defendant ☒ Yes ☐ No

911 Call: ☒ Yes ☐ No Caller: VICTIM

Weapon Used: ☐ Yes ☒ No Type: \_\_\_\_\_

Witness: ☐ Yes ☒ No Name: \_\_\_\_\_

Victim Pregnant: ☐ Yes ☒ No If yes, \_\_\_\_\_ Weeks \_\_\_\_\_ Months

Injuries: ☒ Yes ☐ No Description: VICTIM'S NOSE BLEEDING/REDNESS ON SHOULDERS-BACK

Medical Treatment: ☐ Yes ☒ No

At Scene: ☐ Yes ☒ No Paramedics: REFUSED

At Hospital: ☐ Yes ☒ No Hospital: REFUSED Physician: \_\_\_\_\_

Are children living in the home? ☐ Yes ☒ No DCF Notified? ☐ Yes ☐ No

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Injunction: ☐ Yes ☒ No Case #: \_\_\_\_\_

No Contact Order: ☐ Yes ☒ No Case #: \_\_\_\_\_

Alcohol or Drugs: ☐ Yes ☐ No ☒ Unknown

Prior history of Domestic/Dating Violence ☐ Yes ☒ No

Defendant's statements ☐ Yes ☒ No If yes, ☐ written ☐ recorded ☐ oral

First words Defendant said when you responded to scene: "GET OVER HERE AND GET YOUR SHIT OUT OF MY HOUSE"

Victim's statements ☒ Yes ☐ No If yes, ☒ written ☐ recorded ☐ oral

First words Victim said when you responded to scene: "SHE ATTACKED ME"

Did the Victim contact anyone other than the police within an hour of the incident regarding the incident?

☐ Yes ☒ No If yes, name: \_\_\_\_\_ phone: \_\_\_\_\_

Observations of Victim (Physical & Emotional): \_\_\_\_\_

☒ Upset ☐ Crying ☐ Fearful ☐ Hysterical ☐ Afraid ☐ Calm ☐ Nervous

☒ Complained of pain ☐ Other \_\_\_\_\_

Victim contact information: \_\_\_\_\_

Local Address: LAKE WORTH 624 N FEDERAL HWY #N

FL 33460

Phone: Home: NONE Work: NONE Cell: \_\_\_\_\_

Employer: \_\_\_\_\_

Name of Relative: \_\_\_\_\_ Phone: \_\_\_\_\_