19mm6507 ARREST / NOTICE TO APPEAR 1. Arrest 3. Request for Warrant 1 Juvenile Referral Report 2. N.T.A. 4. Request for Capias Agency Name

	Ĕ.	FL0500700		RIVIERA	BEACH F	OLICE DE	PARTME	=NT	84. 19~5			
	ADMINISTRA	Charge Type: 1. Felony Check as many as apply. 2. Traffic Felony		☑ 3. Misdemeanor ☐ 5. Ordinance			Weapon Seized/Type			Multiple		
	₹	Location of Arrest /Including Name of Business				6. Other	Location of Offense (Busine		1. Yes 2. No 2			Clearance 01
	ŀ	2700 N.OCEAN DR #1105	B RIVIE			250	N OC	EAN A	is Name, Address) VERIVIERA		BEACH I	FL 33404
-	4	06/01/2019 Name (Last, First, Middle)	Time of Arrest 2022	Booking Date 06/01/20	19 Bookin	g Time 200	Jail Date	Ji	ail Time	Location o		
		BURNS		STEPHANIE	STEPHANTE .T			DOB, Soc	OB, Soc. Sec. #, Etc.)			
		Race Race W - White I - American Indian B - Black O - Oriental/Asian W	1 1	of Birth H	eight 505	Weight	Eye Co		Hair Color	Complexio	n Build	-
	f	B - Black O - Oriental/Asian Scars, Marks, Tattoos, Unique Physical Fea		Type, Description)		100	HA2	ZEL Status	BROWN	TAN		(ALL
FAR	<u> </u>	Local Address (Street, Apt. Number)						GLE	NONE		ndication of: Vicohol Influe Drug Influence	
DEFENDANT		2700 N OCEAN DR, 1	105 B	(City) RIVIERA	BEACH	(S)	ate) (Zip) 3340		hone (561)360-		Residence To	VDE
*		Permanent Address (Street, Apt. Number) 2700 N OCEAN DR, 1105	В	(City) RIVIERA B	FACH		ate) (Zip)	— 	hone	7	. Gity 3. . County 4. . Address Soun	ce
	T	Business Address (Street, Apt. Number)		(City)			ate) (Zip)		hone	٠,	DEF1	ENDENT
	r	D/L Number, State		Soc Sec Number		INS Numb	~		The of the			
-	+	B652790789010 Co-Defendant Name (Last, First, Middle)							Place of Birth SARATOGA	SPRING	S NY Cit	izenship US
900	iL					Race Sex	Date of Birth		1. Arrest		Felony Misdemeanor	5. Juvenile
8		Co-Defendant Name (Last, First, Middle)		***		Race Sex	Date of Birth		1. Arrest	ed 🔲 3. i	Felony	5. Juvenile
Γ	Ť	Parent Name (Last) Legal Custodian		(First)			(Middle)		2. At Lan	90 []4,1	Misdemeanor Residence	
	-	Other Address (Street, Apt. Number)		A (City)								
4	<u>.</u>	Notified by: (Name)	1	An h			(State)		(Zip)		Business P	hone
JUVENILE	L		[-(NOCA RI	\(\d\)	ite	Time		Juvenile Dispos 1. Handled/Proce Dept, and Rek	itton issed within	2. TOT I	HRS/CYF
=	Г	Released To: (Name)		Relatio				CIC/NCIC	Debr and Kee	Date	3. Incard	ime
	Γ	The above address was provided by defenda Juvenile Court Clerk's Office informed of any	nt and/or defen-	dant's parents. The chil	d and/or pare	nt was told to ke	ep the	Sc	hool Attended			Grade
-	L	Yes, by: (Name) Recovery Information		No: (Reason)		<u> </u>						
8	L	0. N/A 1. Voluntary 2. Located Not Ret Drug Activity S. Sell R. Smuggle		spitalized 4. HRS (Law Enforceme		6. Return	ned to Parent 7.	Deceased	8. Other	
ğ	11	N. NVA B. Buy D. Deliver P. Possess T. Traffic E. Use	K. Dispense/ Distribute	M. Manufacture Produce/ Cultivate	Z. Öther	Drug Type N. N/A A. Ampheta	C. Co	arbiturate ocaine	H. Hallucinogen M. Marijuana	Equip	phemalia/ oment	U. Unknown Z. Other
l iii		Charge Description SIMPLE BATTERY (DOMES	ጥፐር)	Guidan	Co		ic Violence	Statute V	O. Opium/Deriy, iolation Number	S. Synth		on of ORD#
CHARGE	7	Orug Activity Drug Type	Amount/Unit		Offense #		□ No		784.03 (1) Capias Number	(a)	Bond	
\vdash	_	I/A N/A Charge Description			19-50		- 26-1-	David 1- 1-				
CHARGE	Ļ	Drug Activity Drug Type				O Yes	ic Violence	_	iolation Number		Violatio	on of ORD#
-			Amount/Unit		Offense#			Warrant/C	Capias Number		Bond	
HARGE	C	tharge Description			Cox	unts Domest	c Violence	Statute Vi	olation Number		Violatio	on of ORD#
ğ	D	Orug Activity Drug Type	Vmount/Unit		Offense #			Warrant/C	apias Number		Bond	
4	C	harge Description				Statute Vi	atute Violation Number		Violetic	on of ORD#		
CHARGE	_	rug Activity Drug Type A	mount/Unit	<u></u>	Offense #	☐ Yes	□ No				[]	
ð	_				Circinse #			vvairaniro	apias Number	1,	Bond	,
8		Instruction No. 1 Mandatory Appearance in Court	Locatio	n (Court, Room Numbe	r, Address)						No. 4-rest 	
NOTICE TO APPEAR	L	Instruction No. 2 You need not appear in Court but must	ĺ	ate and Time	· · · · · ·		·					5
일	1/	Comply with instructions on reverse side. AGREE TO APPEAR AT THE TIME AND PL AIL TO APPEAR BEFORE THE COURT AS	Month ACE DESIGNA	TED TO ANSWER THE	Day E OFFENSE (Year CHARGED OR 1	O PAY THE F	INE SUBS	Time SCRIRED LUNDER	A.I	М.	P.M.
Š	is	AIL TO APPEAR BEFORE THE COURT AS SUED.	REQUIRED B	Y THIS NOTICE TO AI	PPEAR, THAT	TI MAY BE HE	D IN CONTE	MPT OF C	COURT AND A WA	RRANT FO	R.MY ARRE	ST SHALL BE
	14	Signature of OLD for other Agency	Defendant (or	Juvenile and Parent/Cu				Date Si			· · · · ·	
	N	ame:		x (\(\sigma \)	Amesting Office			I	lame Verification (P PRINT)	rinted by An		Ø
ADMIN.	☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:			Name of And C.TOPPIN	resurg Officer (Print) I.D. # ING 6427		1			<u> </u>	PAGE	
	In	take Deputy I.D. # D/S Z. Tommie #803	Pou	ch # Transporting	Officer	I.D. #	Agency		Vitness here is subje	ect		3 OF 1
	STR	D/S Z. Tommie #803		C. TOPPI	NG YELLOW - CH	6427	RBPD		igned with an "X".	A BLOTTCO	<u> </u>	SCÄN N

OBTS Number	PROBABLE CAUSE A	FFIDAVIT	1. Arrest 3.Rec 2. N.T.A. 4.Req	juest For War	rrant 4	[
Agency Ori Number FL0500700	Agency Name		Agency Rep		as	JUVENILE			
i intergrative	RIVIERA BEACH POLICE		/	-50071					
2. Traffic Felony	3.☑ Misdemeanor 4.□ Traffic Misdemeanor	5.☐ Ordini 6.☐ Other		ecial Notes					
BName (Last, First, Middle) BURNS	AHas STEPHANIE	J	Race	Sex	Date Of Birth				
Charge Description SIMPLE BATTERY (DOMES'		Charge Description	W	F	11/01	/1978			
SIMPLE BATTERY (DOMES'									
		Charge Description			-				
Victims Name (Last, First, Middle) BURNS	WILLIAM	R	Race	Sex	Date of Birth				
Cocal Address (Street, Apt. Number) (City)	(State) (Zip)	Phone	W	Address Sou	07/24	/1970			
S 2700 N OCEAN DR #1105B RIVIEI Business Address (Name, Street) (City)	RA BEACH FL 33404 (State) (Zip)	(561)281	-2878		VICTIM	ſ			
	, , , , , , , , , , , , , , , , , , ,	Phone		Occupation					
The undersigned certifies and swears that he/she has just ar The Person in custody	nd reasonable grounds to believe, and does t	elieve that the above n	amed Defendant	committed	the following vio	lation of law.			
committed the below acts in my presence.	was observed								
confessed to	that he/she sa	w the arrest person cor	who to nmit the below a	cts.					
admitting the below facts	was found to h	nave committed the bek	ow acts, resulting	from my (d	lescribed) investi	igation			
On the day of JUNE	2019 08-22								
The 6-33		.m. P.M. (Speci	fically include fac	ts constitut	ing cause for arre	est.)			
The following investigat	tion was recorded	on my body	y worn	camer	:a;				
On June 1 2010									
On June 1, 2019 at appro	Eximately 8:11 PM,	while on	patrol	in t	he 2500	כ			
block of Ocean Avenue (Citizens in reference to	cean Mail) I was	flagged do	own by	conce	rned				
Avenue (Two Drunken Goat	e) A white feet	at took p	lace at	2509	N. Oce	ean			
Avenue (Two Drunken Goat (D.O.B. 06/11/1977) advi	sed that she saw	e laentii	led as I	Darcy	Cliffe	ord			
female from the bar and	into the side door	x whice ma	M Occ	aggin	ig" a wh	nite			
female from the bar and into the side door at 2700 N. Ocean Dr. (Ritz Carlton). Another white female, who refused to provide any of her personal									
THE STATEO	information to me stated that the unknown female was "her friend" and								
provided me with her nam	e and address.				iia aiic	4			
I responded to 2700 N. O	cean Dr. Apt #110	B and ma	de cont	act	with a	white			
gremare roentified as Ste	phanie J. Burns (I	D.O.B. 11/	01/1978	an (S	d a whi	+-			
male identified as Willi	am R. Burns (D.O.I	3. 07/24/1	970). E	Both	Stephan	ie			
and William advised that years, married for 17 ye	are and have two	gether to	r appro	oxima	tely 20	}			
stated that Stephanie be	came unget with hi	children Two	In com	non.	William	ı			
possible affair and bega	n slapping and pur	.m at iwo	in the	. foa	cs over	: a			
purred her from the par	and took her home.	. Stephani	e confi	rmed	the at	OTT			
land admitted that she hi	t William in the f	ace becau	se she	heli	erred he				
being untaithful to ner.	William stated mu	ıltiple ti	mes tha	t he	"did n	ot			
want to press charges" a	nd did not want to	provide	a sworn	sta	tement.				
I observed no injuries to	O William's face.	William r	efused	medi	cs whil	e I			
was on scene. I photographs into avident	phed William's fac	e and lat	er uplo	aded	the				
photographs into evidence	e. I provided Will	lam with	a Victi	m's]	Rights	_			
Pamphlet containing an R investigation, I am char	.p.r.D. case numbe Ting Stephanie J	r. Due to	the ab	ove	describ	ed			
SWORN AND SUBSCRIBED BEFORE ME	on /	During (D.)	у.в. 11	/ U I / .	TA (R) M	ıtn			
Sof K. King	MIT .	A MARIE							
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	SIGNATUREO	FARESTING / INVESTIG	SATING OFFICER						
06/01/2019			ING #642	7					
DATE	NAME OF OFF	ICER (PLEASE PRINT)				PAGE			
		06/01	/2019			2			
		DA	TE		577A/	4 7			

	DBTS Number	PROBABLE CAUSE AF	FIDAVIT 1.	Arrest 3.Rec			JUVENILE N
ADAM	Agency Ori Number FL0500700	Agency Name		Agency Rep	ort Number	10 50071	
*	Charge Type 1. Felony Check As Many As Apply	RIVIERA BEACH POLICE 3. Misderneanor	5. Ordinance	84 -	pecial Notes	19-50071	
별	2. Traffic Felony Name (Last, First, Middle)	4. Traffic Misdemeanor Alias	6. Other	Race	Sex	Date Of Birth	
H	BURNS Charge Description	STEPHANIE	J	W	F	11/01,	/1978
CHARGE	SIMPLE BATTERY (DOMEST)	(C)	Charge Description				
3	Charge Description		Charge Description				
Γ	Victims Name (Last, First, Middle) BURNS	WILLIAM F		Race	Sex	Date of Birth	
MILDIA		(State) (Zip)	Phone	W	M Address Sou		
=	2700 N OCEAN DR #1105B RIVIERA Business Address (Name, Street) (City)		(561)281-28 Phone	378	Occupation	VICTIM	I
H	The undersigned certifies and swears that he/she has just and	reasonable grounds to believe and doubt			1 /	\bigcirc	
	The undersigned certifies and swears that he/she has just and The Person in custody		elleve that the above name	d Defendant	committed	the following vio	lation of law.
	committed the below acts in my presence.	was observed that he/she sa	w the arrest person commi	who t	ald	7	
	confessed toadmitting the below facts	577	eve committed the below a			,	
	. 1ST JIME	2019 09.22	6-3		- /		1
	on the day or	at	M. XP.M. (Specifica				
	one count of Simple Batte	ery (domestic). Si	ephanie wa	s tra	nspo	rted to	the
	Riviera Beach Police Department	artment for proces	ssing and 1	ater	trans	sported	to
1	the Palm Beach County Ja:	if for booking.					1
			X Y				
Ā		A 7	•				
TEME							
E STA1							
CAUS							
ABLE							İ
PROBABLE CAUSE STATEMENT							
l	Y						
1							,
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			\wedge	/			
	SWORN AND SUBSCRIBED BEFORE ME	00	1	5			
¥	NOTALY PUBLIC / CLERK OF COURT OFFICER (F.S.S. 117.10)		XX 94				
STRA	06/01/2019	SIGNATURE O	FARRESTING/INVESTIGAT				
NIMO	DATE	NAME OF OFF	ICER (PLEASE PRINT)	- ",			PAGE
ā			06/01/				Marie
1			DATE			SC AN	JIYI₩K}

SUSPECT/OFFENDER

(FOR WARRANTS USE ONLY) COURT CASE/WARRANT#

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, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated 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	Kebort	19-50071		
	Offense:	SIMPLE BATTE	RY (DOMESTIC)	Agency F	Riviera Beach Police Departme
	Suspect/C	offender:	BURNS		JUNE
	D. 0. B.;		11/01/1978	STEPHANIE	J
2.	Warrant	#(s):		_ Race:	Sex: F
3.	Complete	one (1) of th	ne following:		
a.	Victim's N		BURNS		Y
	Address:			WILLIAM	R
	~. —	RIVIERA BEACH	N OCEAN DR #1105BState:	FI	
	Home #: _	(561)281-28	78 Work #:_	FL Zip:	33404 Other:
b.	Victim's ne	ext of kin:			
	Address:			7	
	City:		State:		
				7: _~ .	
c.	Victim's de	signated co	Work #_	Zip:	Other:
c.		esignated co	Work #_ ntact other than ne	xt of kin (for exam)	Other: Die: a friend or neighbor):
c.	Victim's de Name: Address:	esignated co	Work #_ ntact other than neState:	xt of kin (for examp	Other:
	Victim's de Name: Address: City: Home #:		Work #_ ntact other than neState; Work #;	xt of kin (for exam)	Other:
c.	Victim's de Name: Address: City: Home #:		Work #_ ntact other than neState:	xt of kin (for exam)	Other:
VAIV	Victim's de Name: Address: City: Home #: Relevant ide	ntification or OSE NOT 7	Work #_ ntact other than ne State: Work #: case numbers assign TO COMPLETE TI WAIVING MY RI	xt of kin (for examp Zip:	Other:
VAIV	Victim's de Name: Address: City: Home #: Relevant ide ZER: I CHO RSTAND T E SUSPECT	ntification or OSE NOT THAT I AM	Work #_ ntact other than ne State: Work #: case numbers assign TO COMPLETE TI WAIVING MY RI R.	zt of kin (for examp Zip: ed to the case (please HIS VICTIM NOTI	Other: Other: Other: Other: Other: FICATION FORM, AND FIED OF THE RELEASE
VAIV NDE OF TH	Victim's de Name: Address: City: Home #: Relevant ide VER: I CHO RSTAND T E SUSPECT	OSE NOT THAT I AM	Work #_ ntact other than ne State: Work #: case numbers assign TO COMPLETE TI WAIVING MY RI	zt of kin (for examp Zip: ded to the case (please HIS VICTIM NOTE GHT TO BE NOTE	Other: Ole: a friend or neighbor): Other: FICATION FORM, AND FIED OF THE RELEASE



Palm Beach County Sheriff's Office - Arrests Only

	Γ,	C Florida State Statute		
Γ		119.071(2)(d)	Description Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	Page Number(s)
1		943.053, 943.0525	pertaining to mobilization deployment or tactical operations. NCIC/FCIC/FBI and in-state FDLE/DOC.	
/F Evernotions		119.071(4)(c)	Undercover personnel.	
1		+	Confidential informants (CIs).	
			Confession.	/
"			Juvenile offender records.	
Public Info. Exemptions			Assets of a crime victim.	
Exen	-	395.3025(7)(a),	Medical information.	
ic Info		456.057(7)(a) 394.4615(7)		
Pub		119.071(4)(d)(2)(a)	Mental health information. Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
\vdash	⊠	(iii) 119.0714(1)(i)-(j),		
		(2)(a)-(e) (viii) 394.4615(7)	Social Security, bank account, charge, debit, and credit card numbers.	2
R		(xii) 741.30(3)(b)	Clinical records under the Baker Act.	
ule of		(xiii) 119.071(2)(h),	The victim's address in a domestic violence action on petitioner's request.	
20 (R	-	119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
ration 2.4				
Florida Rules of Judicial Administration 2.420 (Rule of 23)				
les of Judic	0			
Florida Ru				
Other			Other:	
ğ			Other:	
		Y		

REVIEW COMPLETED BY

Booking Number: 2019018194	Date: 06/02/2019
	Specialist Name/ID: AM/31562