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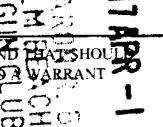
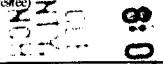
1068

ARREST NOTICE TO APPEAR

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

1

JUVENILE

| | | | | | | | | | | |
|---|-----------|---|------------------------------------|---|--|--|---|---|--|--|
| OBTS Number | | Agency ORI Number | | Agency Name | | Agency Report Number (N.T.A.'s only) | | | | |
| 0500400 | | Delray Beach Police Department | | | | 4 0 17-005209 | | | | |
| Charge Type: | | <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 | | II Weapon Seized Enter Type Hands/fist/feet/teeth | | Multiple Clearance Indicator 1 | | |
| Location of Arrest (Including Name of Business) | | Location of Offense (Business Name, Address) 450 W ATLANTIC AVE, DELRAY BEACH, FL 33444 | | | | | | | | |
| Date of Arrest | | Time of Arrest | Booking Date | Booking Time | Jail Date | Jail Time | Location of Vehicle | | | |
| 03/31/2017 | | 16:17 | 03/31/2017 | 16:27 | // : : | | | | | |
| Name (Last, First, Middle) EPSTEIN, TARA | | | | | | | | | | |
| Race W - White B - Black | | Sex W - American Indian F - Original/Asian | Date of Birth 07/25/1979 | Height 5'04 | Weight 150 | Eye Color BROWN | Hair Color BROWN | Complexion FAIR | Build MEDIUM | |
| Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT RIGH FINGER / BUTTERFLY; TATT UPPR ARM / 6 HEARTS | | | | | | | | | | |
| Local Address (Street, Apt. Number) | | (City) | (State) | (Zip) | Phone (561) 929-9683 | | Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> unk. <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> unk. <input type="checkbox"/> | | | |
| 43 SW 12TH AVE, DELRAY BEACH, FL 33444 | | | | | | | Residence Type: 1. City 3. Florida 2. County 4. Out of State | | | |
| Permanent Address (Street, Apt. Number) | | (City) | (State) | (Zip) | Phone (561) 929-9683 | | Address Source VERBAL | | | |
| 43 SW 12TH AVE, DELRAY BEACH, FL 33444 | | | | | | | | | | |
| Business Address (Name, Street) | | (City) | (State) | (Zip) | Phone | | Occupation Unemployed | | | |
| NONE | | | | | | | | | | |
| DL Number, State EI23800797650 / FL | | Soc. Sec. Number | INS Number | | Place of Birth (City, State) FORT LAUDERDALE, | | Citizenship US | | | |
| Co-Defendant Name (Last, First, Middle) | | | | Race | Sex | Date of Birth | | | | |
| | | | | | | | | | | |
| Co-Defendant Name (Last, First, Middle) | | | | Race | Sex | Date of Birth | | | | |
| | | | | | | | | | | |
| Name (Last, First, Middle) <input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ | | | | | | | | | | |
| Name (Last, First, Middle) <input type="checkbox"/> Legal Custodian | | | | | | | | | | |
| Address (Street, Apt. Number) | | (City) | (State) | (Zip) | Business Phone | | | | | |
| | | | | | | | | | | |
| Notified by: (Name) | | | | Date | Time | JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 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 355-2526) informed of any change of address. | | | | | | School Attended | | Grade | | |
| <input type="checkbox"/> Yes by: <input type="checkbox"/> No: | | | | | | Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Description of Property | | |
| | | | | | | | | Value of Property | | |
| Drug Activity N. N/A D. Possess | | S. Sell B. Buy T. Traffic | R. Smuggle D. Deliver E. Use | K. Dispenses/ Distribute | M. Manufacture/ Produce/ Cultivate | Z. Other | B. Barbiturate N. N/A A. Amphetamine | H. Hallucinogen C. Cocaine E. Heroin | P. Paraphernalia/ Equipment S. Synthetic | U. Unknown Z. Other |
| Charge Description SIMPLE BATTERY(TOUCH OR STRIKE) | | | | | | | | | | |
| Drug Activity | Drug Type | Amount / Unit | Offense # | Counts | Domestic Violence | Warrant / Capias Number | Statute Violation Number 784.03(1A1) | | | Violation of ORD # <i>OR</i> |
| N | / | 17-005209 | 1 | <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | | | | | | |
| Charge Description | | | | | | | | | | Statute Violation Number |
| Drug Activity | Drug Type | Amount / Unit | Offense # | Counts | Domestic Violence | Warrant / Capias Number | Violation of ORD # | | | |
| / | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N | | | | | |
| Charge Description | | | | | | | | | | Statute Violation Number |
| Drug Activity | Drug Type | Amount / Unit | Offense # | Counts | Domestic Violence | Warrant / Capias Number | Violation of ORD # | | | |
| / | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N | | | | | |
| Health / Apparent Physical Condition of Defendant | | | | | | | | | | Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries Explain: |
| Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health | | | | | | PROPERTY - Received By | | Released By | | Released To |
| Transported By | | | | | | Date Transported // : : | Time Transported | Other | | |
| <input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2. | | | | | | Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444 | | | | |
| | | | | | | Court Date and Time | | | | |
| | | | | | |  | | | | |
| I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN COMTEMPT 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 | | | | Signature of Arresting Officer  | | | | Name Verification (Printed by Arrestee) | | |
| | | | | | | | | (PRINT) | | |
| <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal | | | | <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other | | | |  | | |
| Initials Deposit | | | | Pouch # | Name of Arresting Officer (Print) SCHWARTZ, MICHAEL A. | I.D. # 1047 | Transporting Officer SCHWARTZ | I.D. # 1047 | Agency DBPD | PAGE 1 OF 1 |
| Witness here if subject signed with an "X". | | | | | | | | | | |

APR 05 2017

OBTS Number

PROBABLE CAUSE AFFIDAVIT

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

JUVENILE

| | | | |
|---|---|--|---------------|
| Agency ORI Number FL 0500400 | Agency Name DELRAY BEACH POLICE DEPARTMENT | Agency Report Number 4 0 17-005209 | |
| Charge Type: Check as many as apply: 1. Felony 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: | |
| Name (Last, First, Middle) EPSTEIN, TARA | Alias | | |
| Charge Description 784.03(1A1) SIMPLE BATTERY(TOUCH OR STRIKE) | Charge Description | | |
| Charge Description | Charge Description | | |
| Victim's Name (Last, First, Middle) | Race | Sex | Date of Birth |
| | | | |
| Business Address (Name, Street) | (City) | (Zip) | Phone |
| | | | Occupation |

The undersigned certifies and swears that he/she has just and resonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.

The Person taken into custody . . .

committed the below acts in my presence. was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.

confessed to _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.

On the 31 day of March, 2017 at 16:15 (Specifically include facts constituting cause for arrest.)

The following incident occurred in the City of Delray Beach, Palm Beach County, Florida.

On March 31 2017, I was dispatched to 450 W Atlantic Ave regarding a fight in progress. I arrived and asked a w/f if she was involved in an altercation as she matched the description of a suspect. She told me her name was Tara Epstein which I confirmed through RMS. Epstein advised she was in a fight with a w/m that was around the corner. She claims that he took \$600 from her the other day and she wanted her money back however she stated she never saw him take the money. Epstein advised she thought it was him because he was in the area earlier in the day.

I then made contact with the victim, _____ advised that Epstein and two males asked him for money and he stated he did not have any. The two males and Epstein then began running after him and striking him multiple times in the face and head area. He then fell and Epstein continued striking _____ screaming "he took all my money". No money was located on _____ as he consented to a search.

The incident was caught on video by a _____ who did not want to leave her information. The video collaberates with _____ story.

Based on my investigation, Probable Cause exists to charge Tara Epstein with Simple Battery per F.S.S. 784.03(1A1)

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

MOSCHETTE, FRANCIS

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

03/31/2017

DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

SCHWARTZ, MICHAEL A (1047)

NAME OF OFFICER (PLEASE PRINT)

03/31/2017

DATE

PAGE
1 OF 1

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

SCANNED

APR 05 2017