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 ☐

Agency ORI Number	Agency Name	Agency Report Number
FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	06 18-133013

Charge Type: Check as many as apply — ☐ 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)
1475 LAKE CRYSTAL DRIVE, APT H. WPB, FL 33411	1475 LAKE CRYSTAL DRIVE WPB, FL 33411

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
Oct 14, 2018	1215					

Name (Last, First, Middle)			Alias (Name, DOB, Soc. Sec. #, Etc.)
DOMINGUEZ	TATIANA	D.	

Race (W - White, I - American Indian, B - Black, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	10/25/1995	5'6"	130	BROWN	BLACK	FAIR	MED

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)

Marital Status: S — Religion: CHRSITIAN — Indication of: Alcohol Influence / Drug Influence: Y ☒ N ☐ Unk ☐

Local Address (Street, Apt. Number)	City	State	Zip	Phone	Residence Type (1. City, 2. County, 3. Florida, 4. Out of State)
403 ARABIAN ROAD	PALM SPRINGS	FL	33461	607-434-6734	2
Permanent Address (Street, Apt. Number)	**City**	**State**	**Zip**	**Phone**	**Address Source**
403 ARABIAN ROAD	PALM SPRINGS	FL	33461		DEFENDANT
Business Address (Street, Apt. Number)	**City**	**State**	**Zip**	**Phone**	**Occupation**

D/L Number, State	Social Security Number	INS Number	Place of Birth	Citizenship
D552804958850	[redacted]		WEST PALM BEACH, FL	USA

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
	N/A	
Address (Street, Apt. No.)	**City / State / Zip**	**Business Phone**

Notified By (Name)	Date	Time	Juvenile Disposition: 1. Handled/Processed/Verified 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

VICTIM NOTIFICATION REQUIRED

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	Counts	Domestic Violence	Statute Violation Number	Violation or ORD. #
BATTERY: DOMESTIC RELATED	1	☐Y ☒N	784.03(1)(a)(2)	

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
N	N	N/A	18-133013		

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

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

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

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

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

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

Location (Court, Address, Room Number): TO BE SET

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 HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian) — Date Signed: Oct 14, 2018

2018 OCT 15 PM 5:22

HOLD for Other Agency — Name

☐ Dangerous ☐ Resisted Arrest ☐ Suicide ☐ Other

Signature of Arresting Officer

Name of Arresting Officer: D/S J. WEHRLE — ID #: 19481

Intake Dep. — ID # — Pouch #

Transporting Officer: D/S J. WEHRLE 19481 — ID # — Agency: PBSO

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X"

Page 1 of 1

NOT A CERTIFIED COPY

OBTS Number

PROBABLE CAUSE AFFIDAVIT

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

1 Juvenile

Agency ORI Number	Agency Name	Agency Report Number
FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	06 18-133013

Charge Type: Check as many as apply
[ ] 1. Felony [ ] 2. Traffic Felony [x] 3. Misdemeanor [ ] 4. Traffic Misdemeanor [ ] 5. Ordinance [ ] 6. Other

Special Notes

Defendant Name (Last, First, Middle)			Race	Sex	Date of Birth
DOMINGUEZ	TATIANA	D.	W	F	10/25/1995

Charge	Charge
BATTERY: DOMESTIC RELATED	
Charge	Charge

Victim Name (Last, First, Middle)			Race	Sex	Date of Birth
CONCEPTION	GREGORY	J	W	M	10/16/1993

Local Address (Street, Apt. Number)	City	State	Zip	Phone	Address Source
1475 LAKE CRYSTAL DRIVE, h	WEST PALM BEACH	FL	33411	561-671-0221	VICTIM

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...

[ ] committed the below acts in my presence.

[ ] confessed to admitting to the below facts.

[ ] was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.

[x] was found to have committed the below acts, resulting from (described) investigation.

On the 14TH day of OCTOBER 20 18 at 12:15 [x] AM [ ] PM

On October 14, 2018 at approximately 11:41 A.M. I was dispatched to the residence of 1475 Lake Crystal Drive, Apt. H West Palm Beach FL 33411 in reference to a domestic dispute in progress. Upon my arrival I made contact in the parking lot of the residence with a white female who identified herself with a Florida Drivers License as Tatiana De La Caridad Dominguez, date of birth 10/25/1995. Dominguez had a smell of an unknown alcoholic beverage emit from her breath and told me in a sworn taped statement that she and the father of her child by the name of Gregory Conception W/M (10/16/1993) were both at a bar drinking alcohol the night prior. Dominguez stated that she realized that she lost her cell phone a few minutes prior to my arrival and believe that Conception may have stolen the cell phone. Dominguez stated that during the verbal altercation with Conception, Conception grabbed Dominguez by her throat and pulled Dominguez's hair. Domiguez stated that she kicked and punched Conception in self defense. Dominguez demonstrated Conception's actions by grabbing her own neck. Dominguez confirmed that her child was not present at the time and was in Ocala, FL. Dominguez had no apparent marks, cuts bruising or swelling and any areas of her exposed body and did appear to be under the influence of alcohol. I took photographs of Domiguez, which were later uploaded to the PBSO Domestic Violence System by D/S C. Godek 31764.

I made contact with Conception in front of the residence. Conception stated in a sworn taped statement that a few minutes prior to my arrival, Dominguez arrived at the front door of his residence demanding that he pay for a new cell phone. When Conception refused to pay for a new cell phone, Dominguez began punching, scratching and kicking Conception in his face and neck area. Conception denied being with Dominguez the night prior, but confirmed that he is the father of Dominguez's child. I observed that Conception had scratches and abrasions on his shoulder and neck areas. Conception also appeared to have a slight bump on his left eye, which Conception claimed was from Dominguez's kick to the face. Conception did not appear to be under the influence of drugs or alcohol. I took photographs of conception's injuries which were later uploaded to the PBSO Domestic Violence System by D/S C. Godek 31764.

Based on the above facts, statements, my training, experience and observations, I find that there is probable cause that Tatiana Dominguez willfully and unlawfully battered Gregory Conception, contrary to Florida Statute 784.03(1)(a)(2).

The foregoing instrument was sworn to and affirmed before me this 14th day of October 20 18, by:

Jeffrey McInnis
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)

DS
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)

D/S J. WEHRLE 19481
Name of Arresting/Investigating Officer

Signature of Arresting/Investigating Officer

Page 1 of 1

NOT A CERTIFIED COPY

VICTIM NOTIFICATION FORM

- **Homicide** (Ch.782)
- **Attempted Murder**
- **Stalking** (F.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.**
- **Sexual Offense** (Ch.794)
- **Attempted Sexual Offense**
- **Dating Violence**

SUSPECT/OFFENDER

Upon completion, this form must accompany the booking paperwork.
If applying for a warrant, attach this form to the filing packet.

1. Incident Report #: 18-133013 Agency: Palm Beach County Sheriff's Office
   Offense: BATTERY: DOMESTIC RELATED
   Suspect/Offender: DOMINGUEZ TATIANA D.
   DOB: 10/25/1995 Race: W Sex: F

2. Warrant #(s):

3.a. Victim's Name: CONCEPTION GREGORY J DOB: 10/16/1993 Race: W Sex: M
   Address: 1475 LAKE CRYSTAL DRIVE, h
   City: WEST PALM BEACH State: FL Zip: 33411
   Home #: 561-671-0221 Work #: Other #:

b. Victim's next of kin, friend or neighbor:
   Address:
   City: State: Zip:
   Home #: Work #: Other #:

(FOR WARRANTS USE ONLY) COURT CASE/WARRANT #

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY SUBJECT TO CONFIDENTIALITY.

Victim/Relation Notification Waiver and Confidential Information Request

(Check applicable boxes)

☐ **Waiver:** **I choose not to be notified when the arrestee is released from custody.**

☐ **Confidential:** **I request the information on this form be kept confidential (applicable only to sexual battery, stalking, child abuse, harassment or domestic violence cases).**

Signature of person waiving notification:
Printed name of person waiving notification:
Deputy's Name: D/S J. WEHRLE ID #: 19481 Date: Oct 14, 2018

White = Corrections or State Attorney (Warrant Application) Yellow = Warrants Section Pink = Central Records

PBSO #0029A REV. 05/11

NOT A CERTIFIED COPY

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

NOT A CERTIFIED COPY

REVIEW COMPLETED BY

Booking Number: 2018034374	**Date:** 10/15/2018
	Specialist Name/ID: AM/31562