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ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1. Arrest 3. Request For Warrant 4. Request For Capias Juvenile

OBTS Number: _____ Agency ORI Number: **FLO 5 0 0 0 0** Agency Name: **PALM BEACH COUNTY SHERIFF'S OFFICE** Agency Report Number: **06 18-034614**

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

Location of Arrest (Including Name of Business): **157 S State Rd. 7 Royal Palm Beach FL 33409** Location of Offense (Including Name of Business): **4759 S. Congress Ave. Lot 9 Lake Worth FL 33461**

Date of Arrest: **Feb 4, 2018** Time of Arrest: **1516** Booking Date: **Feb 4, 2018** Booking Time: _____ Jail Date: **Feb 4, 2018** Jail Time: _____ Location of Vehicle: **N/A**

Name (Last, First, Middle): **Rush Tavia Lyndsay** Alias (Name, DOB, Soc. Sec. # Etc.): _____

Race: **W** Sex: **F** Date of Birth: **9/29/75** Height: **5'01** Weight: **120** Eye Color: **Blue** Hair Color: **Blond** Complexion: **med** Build: **small**

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): **None** Marital Status: **Married** Religion: **Christian** Indication of Alcohol Influence Drug Influence: Y N Unk

Local Address (Street, Apt. Number): **12621 Colony Preserve Dr. Boynton Beach FL 33436** Phone: **561-856-6418** Residency Type: 1 City 2 County 3 Florida 4 Out of State

Permanent Address (Street, Apt. Number): **12621 Colony Preserve Dr. Boynton Beach FL 33436** Address Source: **Verbal**

Business Address (Street, Apt. Number): **157 S State Rd. 7 Royal Palm Beach FL 33414** Phone: **Unk** Occupation: **Hair Stylist**

D/L Number, State: **R200-812-75-849-0** Social Security Number: _____ INS Number: _____ Place of Birth: **Detroit, Michigan** Citizenship: **US**

Co-Defendant Name (Last, First, Middle): _____ Race: _____ Sex: _____ Date of Birth: _____ 1. Arrested 2. A/Large 3. Felony 4. Misdemeanor 5. Juvenile

Co-Defendant Name (Last, First, Middle): _____ Race: _____ Sex: _____ Date of Birth: _____ 1. Arrested 2. A/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/DAYS 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 561-335-2526) 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: S. Sell R. Smuggle K. Dispense M. Manufacture/Produce Z. Other N. N/A B. Buy D. Deliver A. Amphetamine P. Possess T. Traffic E. Use C. Cocaine E. Heroin H. Marijuana M. Marijuana R. Respiratory Equipment U. Unknown Z. Other

Charge Description: **Battery (domestic)** Counts: **01** Domestic Violence: Y N Statute Violation Number: **784.03(1)(A)(1)** Violation or ORD. #: _____

Drug Activity: **N** Drug Type: **N** Amount/Unit: _____ Offense #: **18-034614** 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: _____ Name Verification (Printed by Arrestee): _____

Dangerous Resisted Arrest Suicidal Other: _____ Name of Arresting Officer: **D/S LABATE** ID #: **31275** (PRINT)

Intake: _____ ID #: _____ Transporting Officer: **D/S LABATE** ID #: **31275** Agency: **31275** Page: **1 of 1**

Witness here if subject signed with an "X" _____

SCANNED
FEB 05 2018

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest	3. Request For Warrant	1	Juvenile
Agency ORI Number FLO 5 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06		18-034614	
Charge Type Check as many as apply		Special Notes					
<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							
Defendant Name (Last, First, Middle) Rush Tavia Lyndsay				Race W	Sex F	Date of Birth 9/29/75	
Charge Battery (domestic)				Charge			
Victim Name (Last, First, Middle) Robbins Christopher Eric				Race W	Sex M	Date of Birth 10/27/74	
Local Address (Street, Apt. Number) [REDACTED]				City	State	Zip	Phone 561-856-1706
Business Address (Street, Apt. Number) [REDACTED]				City	State	Zip	Phone Occupation Handyman
Address Source Verbal							
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"/> confessed to admitting to the below facts.							
<input type="checkbox"/> was observed by _____ who told that he/she saw the arrested person commit the below acts.							
<input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.							
On the 4th day of February 20 18 at 1538 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM							

On February 4, 2018 at approximately 1158hrs, I responded to 4759 S. Congress Ave. Lot 9, Lake Worth FL 33461, in reference to a Domestic Battery. Upon arrival I met with the victim Christopher Eric Robbins, W/M 10/27/74.

Christopher advised on 2/3/18 at around midnight, he started arguing with his girlfriend, Tavia Lyndsay Rush, W/F 9/29/75 about her taking xanax pills and drinking. He advised that during the argument Tavia got mad and threw a plastic spike, which is used to secure a tent, at him and struck him on the lower front neck area causing a small red mark. Christopher said her told her he was going to call the police at which time Tavia ran to the neighbors house. Christopher provided a sworn written statement reference to the incident. Digital photos were taken of the injuries.

I next spoke with Tavia. Post miranda she said they went to Walmart earlier in the evening to buy spikes for securing the tent. She advised Christopher brought up the issues about the pills but they did not argue about anything. Tavia said when they arrived home, they set up the tent. She then said she was inside looking at her IPAD when Christopher asked to see it. Tavia said Christopher saw a dating site on the IPAD and accused her of cheating on him. She advised he began yelling at her so she got in her vehicle and left for a while. Tavia said she then came back around 0045 hrs and asked him if he was done arguing with her. They began arguing again so Tavia went over to the neighbors to ask him to watch her while she gets her shoes from inside the tent. She said she told the neighbor that she was afraid Christopher would do something if she went back in for her shoes. Tavia said she retrieved her shoes and went to sleep in the car. Tavia advised while she was in the car Christopher came out with a rubber mallet and told her to give him his clothes which were in the car. Tavia gave Christopher his clothes then left the area. She advised she did not come back until around 0745 hrs. Tavia said Christopher was still sleeping so she grabbed her stuff and left for work. Tavia provided a sworn written statement reference this incident.

The foregoing instrument was sworn to and affirmed before me this <u>4th</u> day of <u>February</u> 20 <u>18</u> , by:	
<u>Cpl. R Carpenter #6857</u> Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	<u>D/S LABATE 31275</u> Name of Arresting/Investigating Officer
<u>R Carpenter</u> 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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SCANNED
FEB 05 2018

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest	3. Request For Warrant	1	Juvenile
Agency ORI Number FLO 5 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		2. N.T.A.	4. Request For Capias		
Agency Report Number 06		Agency Report Number 18-034614					
Charge Type Check as many as apply		Special Notes					
<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							
Defendant Name (Last, First, Middle) Rush Tavia Lyndsay				Race W	Sex F	Date of Birth 9/29/75	
Charge Battery (domestic)							
Charge				Charge			
Victim Name (Last, First, Middle) Robbins Christopher Eric				Race W	Sex M	Date of Birth 10/27/74	
Local Address (Street, Apt. Number)		City	State	Zip	Phone 561-856-1706	Address Source	
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 4th day of February 20 18 at 1538 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM							

Based on my above described investigation, Tavia did actually and intentionally touch or strike Christopher against the will of Christopher (or) did intentionally cause bodily harm to Christopher and Christopher was a family or household member of Tavia, contrary to Florida Statute 784.03(1) and 741.283 (1 DEG MISD)

NOT A CERTIFIED COPY

The foregoing instrument was sworn to and affirmed before me this <u>4th</u> day of <u>February</u> 20 <u>18</u> by:	
<u>Cpt. R. Carpenter 6857</u>	<u>D/S LABATE 31275</u>
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Name of Arresting/Investigating Officer
<u>R. Carpenter</u>	<u>[Signature]</u>
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Signature of Arresting/Investigating Officer

SCANNED
FEB 05 2018

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

Defendant: Rush Tavia Lyndsay DOB: 9/29/75 Case #: 18-034614
 Victim: Robbins Christopher Eric DOB: 10/27/74 Race: W Sex: M

Relationship between Victim and Defendant: _____

Photographs: Scene Yes No Victim Yes No Defendant Yes No

911 Call: Yes No Caller: Max Steward (Park Ranger Supervisor)

Weapon Used: Yes No Type: plastic tent spike

Witness: Yes No Name: _____

Victim Pregnant: Yes No If yes, _____ Weeks _____ Months

Injuries: Yes No Description: small red mark

Medical Treatment: Yes No

At Scene: Yes No Paramedics: _____

At Hospital: Yes No Hospital: _____ 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: _____

When she saw me she said " I'm Tavia, you are here for me, right"?

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

First words Victim said when you responded to scene: Him and his girlfriend were arguing about her using Xanax

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: 4759 S. Congress Ave.

Lake Worth FL 33461

Phone: Home: 561-856-1706 Work: _____ Cell: _____

Employer: Unk

Name of Relative: _____ Phone: _____



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

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

1. Incident Report #: 18-034614 Agency: Palm Beach County Sheriff's Office
Offense: Battery (domestic)
Suspect/Offender: Rush Tavia Lyndsay
DOB: 9/29/75 Race: W Sex: F

2. Warrant #(s): _____

3.a. Victim's Name: Robbins Christopher Eric DOB: 10/27/74 Race: W Sex: M
Address: _____
City: _____ State: _____ Zip: _____
Home #: 561-856-1706 Work #: _____ Other #: _____

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

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 LABATE ID #: 31275 Date: Feb 4, 2018

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

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FEB 05 2018

SUSPECT/OFFENDER
COURT CASE/WARRANT #
(FOR WARRANTS USE ONLY)