

ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Copies	1	Juvenile N
Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number (N.T.A.'s only) <b>06-17-110626</b>	
Charge Type: Check as many as apply: <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 1. Yes 2. No		Multiple Clearance Indicator <b>02</b>	
Location of Arrest (Including Name of Facility) <b>1040 S ST RD 7 WELLINGTON FL 33414</b>		Location of Offense (Business Name, Address) <b>1040 S ST RD 7, WELLINGTON FL 33414</b>			
Date of Arrest <b>08/04/2017</b>	Time of Arrest <b>0920</b>	Booking Date	Booking Time	Jail Date	Jail Time
Name (Last, First, Middle) <b>Samson, Taylor, Nicole</b>		Address (Name, DOB, Soc. Sec. #, Etc.) <b>1040 S ST RD 7 WELLINGTON FL 33414</b>			
Race W - White I - American Indian B - Black O - Oriental/Asian <b>W</b>	Sex <b>F</b>	Date of Birth <b>07/17/1992</b>	Height <b>5'02</b>	Weight <b>140</b>	Eye Color <b>GRN</b>
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>SPINE, R RIBS, L WRIST, R WRIST</b>		Marked Status <b>Single</b>	Religion <b>CHRISTIAN</b>	Indication of Alcohol Influence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Indication of Drug Influence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Local Address (Street, Apt. Number) <b>5623 Pebble Brook Ln, Boynton Beach, FL 33472</b>		Phone <b>(561) 452-1953</b>	Residence Type: 1. City 2. County 3. Florida 4. Out of State <b>1</b>		
Permanent Address (Street, Apt. Number)		Phone	Address Source <b>VER</b>		
Business Address (Name, Street)		Phone	Occupation <b>MEDICAL OFFICE</b>		
D.M. Number, State <b>8525814927570, FL</b>		INS Number	Place of Birth (City, State) <b>FT LAUDY FL</b>		Citizenship <b>Y</b>
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
Parent Legal Custodian Other:		Residence Phone			
Address (Street, Apt. Number)		(City)		(State)	(Zip)
Notified by: (Name)		Date	Time	Inmate Disposition 1. Handed/Incarcerated within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated	
Released To: (Name)		Relationship		Date	Time
The above address provided by [ ] defendant and / or [ ] defendant's parents (The child and / or parent was told to keep the juvenile court clerk (Phone 355-2626) informed of any change of address. <input type="checkbox"/> Yes, by (Name) <input type="checkbox"/> No (Reason)					
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property	
Drug Activity N/A R. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Dispense/ Distribute M. Manufacture/ Produce/ Cultivate Z. Other					
Charge Description <b>OCCUPIED BURGLARY WITH BATTERY</b>		Counts <b>1</b>	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number <b>810.02 2A</b>	Violation of ORD #
Drug Activity <b>N</b>		Drug Type <b>N</b>	Amount / Unit	Offense # <b>17-110626</b>	Warrant / Copies Number
Charge Description <b>CRIMINAL MISCHIEF</b>		Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number <b>806.13 1/2</b>	Violation of ORD #
Drug Activity <b>N</b>		Drug Type <b>N</b>	Amount / Unit	Offense # <b>17-110626</b>	Warrant / Copies Number
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation of ORD #
Drug Activity		Drug Type	Amount / Unit	Offense #	Warrant / Copies Number
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation of ORD #
Drug Activity		Drug Type	Amount / Unit	Offense #	Warrant / Copies Number
Location (Court, Room Number, Address)					
Court Date and Time Month Day Year Time AM PM					
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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED 08/04/2017					
Signature of Defendant (or Juvenile and Parent / Custodian)					
HOLD for other Agency Name:		Signature of Arresting Officer		Date Signed	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Subdued Initiator Deputy		Name of Arresting Officer (Print) <b>MICHAEL FONGEMIE</b>		Name Verification (Printed by Arrestee) <b>SCANNED</b>	
ID #		ID # <b>6277</b>		Agency <b>PBSO</b>	
Pouch #		ID # <b>6277</b>		Witness here if subject signed with an "X"	
DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)					

ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	Juvenile
Agency ORI Number <b>FLO 500000</b>	Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>	Agency Report Number (N.T.A.'s only) <b>06-17-110626</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	Weapon Seized / Type <input type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No	Multiple Clearance Indicator <b>01</b>		
Location of Arrest (Industrious Name of Residence) <b>1040 S ST RD 7 WELLINGTON FL 33414</b>		Location of Offense (Business Name, Address) <b>1040 S ST RD 7, WELLINGTON FL 33414</b>		
Date of Arrest <b>08/04/2017</b>	Time of Arrest <b>0920</b>	Booking Date	Booking Time	
Name (Last, First, Middle) <b>Samson, Taylor, Nicole</b>		Alias (Name, DOB, Soc Sec #, Etc.)		
Race <b>W - White ( - American Indian B - Black ( - Oriental/Asian</b>	Sex <b>W</b>	Date of Birth <b>07/17/1992</b>	Height <b>5'02</b>	
Weight <b>140</b>	Eye Color <b>GRN</b>	Hair Color <b>BRN</b>	Complexion <b>MED</b>	
Build <b>MED</b>	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>SPINE, R RIBS, L WRIST, R WRIST</b>			
Local Address (Street, Apt. Number) <b>5623 Pebble Brook Ln, Boynton Beach, FL 33472</b>	Marital Status <b>Single</b>	Religion <b>CHRISTIAN</b>	Initiation of Alcohol/Influence Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> U	
Permanent Address (Street, Apt. Number)	Phone <b>(561) 452-1953</b>	Residence Type: 1. City 2. County 3. Florida 4. Out of State	Address Source <b>VER</b>	
Business Address (Name, Street)	Phone	Occupation <b>MEDICAL OFFICE</b>		
Off. Number, State <b>8525814927570, FL</b>	INS Number	Place of Birth (City, State) <b>FT LAUDY FL</b>	Citizenship <b>Y</b>	
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	
Parent Legal Custodian Other	Residence Phone			
Address (Street, Apt. Number)	(City)	(State)	(Zip)	
Notified by: (Name)	Date	Time	Juvenile Disposition 1. Handled / processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated	
Released To: (Name)	Relationship	Date	Time	
The above address 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 (Phone 366-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No, (Reason)				
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No	Description of Property	School Attended	Grade	
Value of Property				
Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Dispose/ Chloride	
M. Manufacture/ Production/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine	B. Barbiturate C. Cocaine E. Heroin	
H. Hallucinogen M. Marijuana O. Opium/Opium	P. Phosphorus/ Equipment S. Synthetic	U. Unknown Z. Other		
Charge Description <b>BATTERY</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 <b>N</b>	Drug Type <b>N</b>	Amount / Unit	Offense # <b>17-110626</b>	
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	
Drug Activity	Drug Type	Amount / Unit	Offense #	
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	
Drug Activity	Drug Type	Amount / Unit	Offense #	
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	
Drug Activity	Drug Type	Amount / Unit	Offense #	
Location (Court, Room Number, Address)				
Court Date and Time Month _____ Day _____ Year _____ Time _____ AM _____ PM				
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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED				
Signature of Defendant (or Juvenile and Parent / Custodian) <b>08/04/2017</b>				
HOLD for other Agency Name:	Signature of Arresting Officer <b>X</b>	Date Signed		
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Related Arrest <input type="checkbox"/> Other	Name Verification (Printed by Arrestee) <b>SCANNED</b>		
Intake Deputy I.D. # _____ Patch # _____	Name of Arresting Officer (Print) <b>MICHAEL FONGEMIE</b>	I.D. # <b>6277</b>	(PRINT) <b>AUG 05 2017</b>	
Transporting Officer <b>MICHAEL FONGEMIE</b>	I.D. # <b>6277</b>	Agency <b>PRSO</b>	PAGE <b>1</b>	
Witness here if subject signed with an 'X'				

CHARGES		VICTIM	
<b>PROBABLE CAUSE AFFIDAVIT</b>			
1. Arrest 2. N.T.A.		3. Request for Warrant 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>06-17-110626</b>		Special Notes:	
Charge Type: Check as many as apply: <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Name (Last, First, Middle) <b>Samson, Taylor, Nicole</b>	
Charge Description <b>OCCUPIED BURGLARY WITH BATTERY</b>		Charge Description <b>CRIMINAL MISCHIEF</b>	
Charge Description <b>810.02 2A</b>		Charge Description <b>806.13 1A2</b>	
Name (Last, First, Middle) [REDACTED]		Race W	
Sex F		Date of Birth 07/17/1992	
Address (State, Zip) [REDACTED]		Phone [REDACTED]	
Business Address (Name, Street) [REDACTED]		Occupation [REDACTED]	
The undersigned certifies and 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. <input type="checkbox"/> committed the below acts in my presence. <input checked="" type="checkbox"/> confessed to <b>D/S FONGEMIE</b> admitting to the below facts. <input checked="" type="checkbox"/> was observed by [REDACTED] who told <b>D/S FONGEMIE</b> 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 my (described) investigation. On the <b>4TH</b> day of <b>AUGUST</b> 20 <b>17</b> at <b>08:40</b> <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)			
<p>On 8/4/2017 at approximately 0841 hours, I arrived at 1040 S St Rd 7, Wellington FL, to investigate a battery complaint. I spoke with [REDACTED] and [REDACTED] who both gave sworn statements to being battered by Taylor Simpson, [REDACTED].</p> <p>[REDACTED] went on to explain that during a prearranged [REDACTED] in the parking lot, Simpson became irate because [REDACTED] started crying and begging to go back with him. He said it was at this point Simpson got up in his face yelling at him accusing him of brainwashing [REDACTED]. He then said she stuck her finger in his face and ultimately punched him in an upper cut style on his lower jaw.</p> <p>At this point [REDACTED] cars passenger side front and rolled the window down to begin filming the altercation with her cell phone. According to both [REDACTED] Simpson stormed over to the open window and reached in trying to grab the phone from [REDACTED] hand. During the scuffle [REDACTED] claimed to have been punched and scratched while sitting in her sunglasses ripped off her face falling to the ground just outside the door. Samson then intentionally stepped on the sunglasses bending and shattering them. According to [REDACTED] they were valued at approximately two hundred dollars. This entire incident took place while [REDACTED] was holding the young child in her arms. I did not see any visible injuries on [REDACTED] however [REDACTED] did have minor scratches and redness in the areas described consistent with the described events.</p> <p>At the time of my initial investigation Ms. Samson was already gone but did return a short time later and was cooperative. She did admit post Miranda to pointing her finger at [REDACTED] and kind of pushing his face but only because he got close to her. She then told me she did go over to the window of the car where [REDACTED] was sitting after she saw her video taping the incident and said she reached in to try and take the phone away from [REDACTED], not to steal or break it but because she was told by her attorney that she couldn't secretly record and she thought that's what [REDACTED] was doing. She also confirmed there was a minor struggle inside the vehicle and the sun glasses did fall to the ground outside the vehicle where she did intentionally step on them but she denied intentionally punching or scratching [REDACTED].</p> <p>Based on the physical evidence and statements from all parties involved it was clear the primary aggressor in this altercation was Taylor Samson and her actions did involve the unwanted touching of others causing injuries and damage to private property while reaching into a private conveyance.</p> <p>Taylor Samson was arrested and charged with Battery (domestic), Occupied burglary with a battery and criminal mischief in violation of FSS's 784.03 1a1, 810.02 2A, and 806.13 1A2.</p>			
STATE OF FLORIDA COUNTY OF PALM BEACH <b>MICHAEL FONGEMIE</b> (Signature of Arresting/Investigative Officer)			
The foregoing instrument was sworn to or affirmed and subscribed before me this <b>4</b> day of <b>AUGUST</b> 20 <b>17</b> by <b>D/S FONGEMIE</b> (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced _____			
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)			

OBT Number		<b>PROBABLE CAUSE AFFIDAVIT</b>		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		Juvenile <input type="checkbox"/> <b>N</b>	
Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number <b>06-17-110626</b>					
Charge Type: Check as many as apply.		1. Felony 2. Traffic Felony		3. Misdemeanor 4. Traffic Misdemeanor		5. Ordinance 6. Other		Special Notes:	
Name (Last, First, Middle) <b>Samson, Taylor, Nicole</b>		Alias		Race <b>W</b>		Sex <b>F</b>		Date of Birth <b>07/17/1992</b>	
Charge Description <b>BATTERY</b>		784.03 1A1		Charge Description		Charge Description		Charge Description	
Victim's Name (Last, First, Middle)		[REDACTED]		Race <b>W</b>		Sex <b>M</b>		Date of Birth <b>07/26/1990</b>	
Business Address (Name, Street)		(City)		(State) (Zip)		Phone		Address Source	
								Occupation	

The undersigned certifies and 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.

☐ committed the below acts in my presence.

☒ confessed to **D/S FONGEMIE** admitting to the below facts.

☒ was observed by [REDACTED] who told **D/S FONGEMIE** that he/she saw the arrested person commit the below acts.

☒ was found to have committed the below acts, resulting from my (described) investigation.

On the **4TH** day of **AUGUST** 20**17** at **08:40** ☒ A.M. ☐ P.M. (Specifically include facts constituting cause for arrest.)

On 8/4/2017 at approximately 0841 hours, I arrived at 1040 S St Rd 7, Wellington FL, to investigate a battery complaint. I spoke with [REDACTED] who both gave sworn statements to being battered by Taylor Simpson. [REDACTED] went on to explain that during a prearranged [REDACTED] in the parking lot, Simpson became irate because [REDACTED] started crying and begging to go back with him. He said it was at this point Simpson got up in his face yelling at him accusing him of brainwashing [REDACTED]. He then said she stuck her finger in his face and ultimately punched him in an upper cut style on his lower jaw. At this point [REDACTED] was sitting in [REDACTED] cars passenger side front and rolled the window down to begin filming the altercation with her cell phone. According to both [REDACTED] and [REDACTED], Simpson stormed over to the open window and reached in trying to grab the phone from [REDACTED] hand. During the scuffle [REDACTED] claimed to have been punched and scratched while sitting and her sunglasses ripped off her face falling to the ground just outside the door. Samson then intentionally stepped on the sunglasses bending and shattering them. According to [REDACTED] they were valued at approximately two hundred dollars. This entire incident took place while Samson was holding the young child in her arms. I did not see any visible injuries on [REDACTED] however [REDACTED] did have minor scratches and redness in the areas described consistent with the described events.

At the time of my initial investigation Ms. Samson was already gone but did return a short time later and was cooperative. She did admit post Miranda to pointing her finger at [REDACTED] and kind of pushing his face but only because he got close to her. She then told me she did go over to the window of the car where [REDACTED] was sitting after she saw her video taping the incident and said she reached in to try and take the phone away from [REDACTED], not to steal or break it but because she was told by her attorney that she couldn't secretly record and she thought that's what [REDACTED] was doing. She also confirmed there was a minor struggle inside the vehicle and the sun glasses did fall to the ground outside the vehicle where she did intentionally step on them but she denied intentionally punching or scratching [REDACTED]. Samson did not have any visible injuries.

Based on the physical evidence and statements from all parties involved it was clear the primary aggressor in this altercation was Taylor Samson and her actions did involve the unwanted touching of others causing injuries and damage to private property while reaching into a private conveyance. Taylor Samson was arrested and charged with Battery (domestic), Occupied burglary with a battery and criminal mischief in violation of FSS's 784.03 1a1, 810.02 2A, and 806.13 1A2.

STATE OF FLORIDA  
COUNTY OF PALM BEACH  
[Signature]  
(Signature of Arresting/Investigative Officer)

**MICHAEL FONGEMIE**

The foregoing instrument was sworn to or affirmed and subscribed before me this 4 day of August 2017 by D/S Fongemie  
(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced \_\_\_\_\_

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

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

Suspect: Samson, Taylor, Nicole DOB: 07/17/1992 Case #: 17-110626

Victim: [REDACTED] DOB: 07/26/1990 Race: W Sex: M

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

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

911 Call: ☒ Yes ☐ No Caller: [REDACTED]

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

Witness: ☒ Yes ☐ No Name: [REDACTED]

Victim Pregnant: ☐ Yes ☒ No If yes, \_\_\_\_\_ weeks \_\_\_\_\_ months

Injuries: ☐ Yes ☒ No Description: \_\_\_\_\_

Medical Treatment: ☐ Yes ☒ No

At Scene: ☐ Yes ☒ No Paramedics: \_\_\_\_\_

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

Are Children Living in Home? ☒ Yes ☐ No DCF Notified? ☒ Yes ☐ No

Name: [REDACTED] DOB: 4 / 16 / 2015

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: \_\_\_\_\_

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

First words Victim said when you responded to scene: [REDACTED] ATTACKED HIM AND [REDACTED]

Did the Victim contact anyone other than 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 SAID JAW HURT A BIT BUT NO VISIBLE INJURIES

Victim Contact Information:

Local Address: [REDACTED]

Phone: Home ( ) - Work ( ) - Cell ( ) -

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

Name of Relative: \_\_\_\_\_ Phone ( )

Address: \_\_\_\_\_

# VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been committed:

- 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

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

1. Incident Report #: 17-110626 Agency: PBSO  
Offense: BATTERY  
Suspect/Offender: Samson, Taylor, Nicole  
D.O.B. 07/17/1992 Race: W Sex: F

2. Warrant # (s): \_\_\_\_\_

3.a. Victim [REDACTED] D.O.B. 07/26/1990 Race: W Sex: M  
Address: [REDACTED]  
City: [REDACTED]  
Home: [REDACTED] Other: \_\_\_\_\_

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

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY BE 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: [REDACTED]

Deputy's Name: FONGEMIE

I.D.# 6277

Date: 08/04/2017

White/Corrections or State Attorney (Warrant Application)

Yellow/Warrants Section

Pink/Central Records

SUSPECT/OFFENDER: **Samson, Taylor, Nicole**

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT#

SCANNED

AUG 05 2017