

OBTS Number			ARREST / NOTICE TO APPEAR Juvenile Referral Report						1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias		1	Juvenile N							
ADMINISTRATIVE	Agency ORI Number		Agency Name		Agency Report Number (N.T.A.'s only)														
	FLO 5 0 2 6 0 0		PALM BEACH GARDENS POLICE DEPT.		7 8 1 1 7 1 0 0 3 4 9 5 1 1 1														
Charge Type: Check as many as apply.		<input 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 _____		If Weapon Seized Enter Type _____		Multiple Clearance Indicator 1									
Date of arrest		Time of Arrest		Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle											
0 0 1 0 1 7		0 1 1 9																	
Name (Last, First, Middle)		Alias (Name, DOB, Soc. Sec. #, Etc.)																	
PRICE, WESLEY M.																			
Race W - White B - Black		Sex I - American Indian O - Oriental/Asian		Date of Birth W/M 09/10/64		Height 6'1"	Weight 180	Eye Color Green		Hair Color Brown		Complexion Fair							
Stars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		M						Religion NONE		Indication of: Alcohol Influence Drug Influence		Y N	Unk.						
DEFENDANT	Local Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone 33418 (561) 603-9228		Residence Type: 1. City 2. County		3. Florida 4. Out of State		11							
	192 Bent Tree Pr		PBGS	FL	33418	(561) 603-9228		Address Source FLORIDA DL											
Permanent Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone 33418 (561) 603-9228		Occupation Caretaker												
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone ()														
D/L Number, State PL 20893 (6) 3300		Soc. Sec. Number		INS Number		Place of Birth (City, State) Jacksonville, FL		Citizenship U.S.											
CO-DEF.	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							
JUVENILE	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other:		Name (Last) O NO		(First)	(Middle)			Residence Phone ()										
	Address (Street, Apt. Number)		(City)	(State)	(Zip)			Business Phone ()											
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 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. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)								School Attended		Grade									
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property				Value of Property													
Drug Activity S. Sell B. Buy P. Possess		R. Smuggle D. Deliver T. Traffic		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 O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetic		U. Unknown Z. Other	
Charge Description Simple Battery				Counts	Domestic Violence Y <input type="checkbox"/> N				Statute Violation Number 7 8 4 1 0 3 , 1 (1) X (1))				Violation of ORD #						
Drug Activity		Drug Type		Amount / Unit		Offense #				Warrant / Capias Number				Bond					
Charge Description				Counts	Domestic Violence Y <input type="checkbox"/> N				Statute Violation Number				Violation of ORD #						
Drug Activity		Drug Type		Amount / Unit		Offense #				Warrant / Capias Number				Bond					
Charge Description				Counts	Domestic Violence Y <input type="checkbox"/> N				Statute Violation Number				Violation of ORD #						
Drug Activity		Drug Type		Amount / Unit		Offense #				Warrant / Capias Number				Bond					
Charge Description				Counts	Domestic Violence Y <input type="checkbox"/> N				Statute Violation Number				Violation of ORD #						
Drug Activity		Drug Type		Amount / Unit		Offense #				Warrant / Capias Number				Bond					
NOTICE TO APPEAR		Instruction No. 1 Mandatory Appearance in Court		Location (Court, Room Number, Address)															
		Instruction No. 2 You need not appear in Court but must comply with instructions on Reverse Side.		Court Date and Time															
				Month	Day	Year	Time	A.M.	P.M.										
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)												Date Signed							
HOLD for other Agency				Signature of Arresting Officer				Name Verification (Printed by Arrestee)											
Name: X				Name of Arresting Officer (Print) Johnston, C				Name Verification (Printed by Arrestee) (PRINT)											
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal				<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other: _____				I.D. # 451				SCANNED							
In Case of Detention D. HAWKINS #8138 Such #				Transporting Officer Johnston 451				Agency PBGS				PAGE OF							
Witness here if subject signed with an "X"																			

CPL

DISTRIBUTION:

WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - GOLD - DEFENDANT

PBGPD FORM-023

JUN 11 2017

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

A D M I N	Date / Time 06/10/2017 22:16	Agency Name PALM BEACH GARDENS POLICE			Agency Report Number 7 8 17-003495			
D E F	Name (Last, First, Middle) PRICE, WESLEY M	Alias PRICE, WESLEY MITCHELL	Race W	Sex M	Date of Birth 09/10/1966			
C H R G	Charge Description 784.03(1)(A)(1) BATTERY-SIMPLE (TOUCH OR STRIKE)					Race 03/22/1970	Sex Address Source	
V I C T I M	Business Address (Name, Street) (City) (State) (Zip)			Phone	Occupation			
DEFENDANT'S STATEMENTS: <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> Oral VICTIM'S STATEMENTS: <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> Oral		OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): SHAKEN, CRYING						
RELATIONSHIP BETWEEN VICTIM & SUSPECT HUSBAND/WIFE								
A D D I T I O N A L I N F O R M A T I O N I N	<p>PHOTOGRAPHS: Scene: <input checked="" type="checkbox"/> <input type="checkbox"/> NO Victim: <input checked="" type="checkbox"/> <input type="checkbox"/> 911 CALL: <input checked="" type="checkbox"/> <input type="checkbox"/> CALLER: [REDACTED]</p> <p>WEAPON USED: <input type="checkbox"/> <input checked="" type="checkbox"/> TYPE: WITNESSES: <input checked="" type="checkbox"/> <input type="checkbox"/> (If YES, attach witness list)</p> <p>INJURIES: <input checked="" type="checkbox"/> <input type="checkbox"/> MEDICAL TREATMENT: <input type="checkbox"/> <input checked="" type="checkbox"/> AT: Scene: <input type="checkbox"/> <input checked="" type="checkbox"/> PARAMEDICS: Hospital: <input type="checkbox"/> <input checked="" type="checkbox"/> PHYSICIAN(S) / HOSPITAL:</p> <p>ACT COMMITTED IN PRESENCE OF MINOR(S): <input checked="" type="checkbox"/> <input type="checkbox"/> NAMES/AGES: [REDACTED]</p> <p>H. R. S. NOTIFIED: <input type="checkbox"/> <input checked="" type="checkbox"/> VICTIM PREGNANT: <input type="checkbox"/> <input checked="" type="checkbox"/> VIOLATION OF RESTRAINING ORDER: <input type="checkbox"/> <input checked="" type="checkbox"/> CASE #:</p> <p>PRIOR HISTORY OF DOMESTIC VIOLENCE: <input type="checkbox"/> <input checked="" type="checkbox"/> ALCOHOL OR DRUGS INVOLVED: <input checked="" type="checkbox"/> <input type="checkbox"/></p>							
N A R R	On June 10, 2017 at approximately 8:40 p.m. I was dispatched to [REDACTED] in reference to a domestic disturbance. My body worn camera was utilized for this investigation.							
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p>Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.</p> <p><i>[Signature]</i> <i>V51</i> _____ SIGNATURE OF ARRESTING OFFICER</p> <p>Sworn to and subscribed to before me this <u>10</u> day of <u>June</u>, <u>2017</u>.</p> <p><i>[Signature]</i> <i>B76</i> _____ NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p>								

SCANNED

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIMINAL 18057

P. I. O.

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

Narrative Continuation

A D M I N	Date / Time 06/10/2017 22:16	Agency Name PALM BEACH GARDENS POLICE	Agency Report Number 7 8 17-003495
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N Upon arrival, I made contact with Wesley Price who was sitting outside of the residence on the tailgate of his A pickup truck. While speaking with Wesley I could smell the strong odor of alcohol emanating from his breath R as we spoke. I asked Wesley what happened this evening and he advised the following: Wesley said he was upset R because his wife, [REDACTED] daughter was supposed to walk their dogs today. [REDACTED] daughter failed A to walk the dogs and they used the restroom inside of the residence. When [REDACTED] got home he said they got T into a heated verbal argument but never got physical. Wesley told me he had drank approximately 5 "Mikes hard I lemonade" throughout the course of the day while he was watching their child Gavin at home. V

E I then went inside of the residence and made contact with [REDACTED] who advised the following: [REDACTED] advised she returned home today from out of town. Immediately after walking into the residence she was confronted by Wesley who was intoxicated and extremely upset about the dogs not being walked. [REDACTED] advised they got into a verbal argument and their heads were very close together, approximately 12 inches apart. During the course of the argument he forcefully headbutted her directly in the center of her forehead. [REDACTED] stated he did not "cock back", he headbutted her from the distance in which they were arguing. Initially while speaking with [REDACTED] the redness and swelling was very minimal, but during the course of the investigation it began to swell more in the area in which she stated she was headbutted. [REDACTED] advised that she has been wanting to get a divorce but has not yet filed and that Wesley does not want to comply.

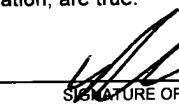
During the argument, [REDACTED] and Wesley's son, [REDACTED] was present and watched the entire altercation. I spoke with [REDACTED] who advised that "daddy hit mommy" and "take daddy away". DCF will be notified regarding this incident due to [REDACTED] presence in the household.

I then went and spoke to Wesley again in front of the residence. Wesley's recollection started to change, he began to say their heads may have touched. Then said the headbutt was mutual and they both met together in the middle.

Based on my investigation, I believe that Wesley was the primary aggressor in the altercation and I find probable cause to charge Wesley Price with one count of Simple Battery (domestic) contrary to F.S.S. 784.03(1)(A)(1). All injuries were documented on body worn camera. A victim's notification form was completed and submitted to booking at the Palm Beach County Jail.

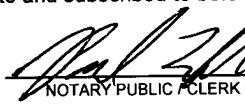
STATE OF FLORIDA
COUNTY OF PALM BEACH

Appeared before me, [REDACTED] personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.

 151

SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 10 day of June, 2017

 376

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

SCANNED

JUN 11 2017

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, agg. assault, battery, agg. battery, sexual assault, sexual battery, stalking, agg. 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 Report #: 17003495 Agency: PBG PD
Offense: Simple Battery (Domestic)
Suspect/Offender: Wesley Price
D.O.B. 9/10/66 Race: W Sex: M
2. Warrant #(s): _____
3. Complete one (1) of the following:
 - a. Victim
Address: _____
City: _____
Home: _____
 - b. Victim
Address: _____
City: _____
Home: _____
 - c. Victim's designated contact other than next of kin (for example: a friend or neighbor):
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Home #: _____ Work #: _____ Other: _____
4. Relevant identification or case numbers assigned to the case (please specify):

WAIVER: I CHOOSE NOT TO COMPLETE THIS VICTIM NOTIFICATION FORM, AND UNDERSTAND THAT I AM WAIVING MY RIGHT TO BE NOTIFIED OF THE RELEASE OF THE SUSPECT/OFFENDER.

Signature of person waiving notification: _____

Printed name of person waiving notification: _____

SCANNED

Officer's Name: Johnston

I.D.: 451

Date: JUN 11 2017
6/10/17