

7th. Judicial Circuit 707
Charging Affidavit - FLAGLER

Arrest # _____

Bk # 17-2757

Pg #1 of 3

ARREST <input checked="" type="checkbox"/> NOTICE TO APPEAR <input type="checkbox"/> AFFIDAVIT <input type="checkbox"/> C.C. <input type="checkbox"/>		ADULT <input checked="" type="checkbox"/> JUVENILE <input type="checkbox"/>		Court Case Number: 2017 MM 001453	
(ORD) FL: 0 1 8 0 0 0 0		Agency Name: Flagler County Sheriff's Office		Agency Case Number: 2017-00110176	
FCIC/NCIC Check? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		OBTS# 1801050595		UCR: _____	Date Arrested: 12/17/2017
ADDRESS OF ARREST: 11, SHADY, LN, Palm Coast, Florida, 32137				Arrested By: Barnett Joseph	ID Number: 407
DEFENDANT Name (L.F.M.): Virgin, Fox, Christopher		AKA: _____		Sex: Male	Race: White
DOB: 1/5/1996	Age: 21	Driver's Lic. ID No.: V625-243-96-006-0	State: Florida	Year Expires: _____	S.S. #: _____
Height: 5 11	Weight: 150	Hair: Blond or Strawberry	Eyes: Blue	POB (City, St. Country): _____	Statement: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Scars, Marks, Tattoos: _____		Business & Occupation: _____		Citizenship: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Probation: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Sexual Predator: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		English: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Address-Home/Permanent (STREET, APT. NUMBER) _____		(CITY) _____ (STATE) _____		ZIP CODE _____	RESIDENCE PHONE _____
Address-Local (STREET, APT. NUMBER) 11 SHADY LN		(CITY) Palm Coast (STATE) Florida		ZIP CODE 32137	RESIDENCE PHONE (386)617-4777
Address-Other(Employer/School) _____		(STREET, APT. NUMBER) _____ (CITY) _____ (STATE) _____		ZIP CODE _____	BUS SCHOOL PHONE _____
CHARGES		DOMESTIC VIOLENCE? YES <input checked="" type="checkbox"/>		Attachments: Affidavit(s) <input type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input checked="" type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/> DUT <input type="checkbox"/> Total Charges: 01	
#1	Charge: Battery Domestic Violence	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS ORD: 784.03dv	Citation No.: _____	Bond: None
#2	Charge: _____	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS ORD: _____	Citation No.: _____	Bond: _____
#3	Charge: _____	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS ORD: _____	Citation No.: _____	Bond: _____
CO-DEFENDANT		Co-Def #1. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel <input type="checkbox"/> Misd <input type="checkbox"/> Traf <input type="checkbox"/> Ord <input type="checkbox"/> NTA <input type="checkbox"/>		Co-Def #2. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel <input type="checkbox"/> Misd <input type="checkbox"/> Traf <input type="checkbox"/> Ord <input type="checkbox"/> NTA <input type="checkbox"/>	
#1 NAME(L.F.M.): _____		Race: _____ Sex: _____		DOB: _____	Age: _____
#2 NAME(L.F.M.): _____		Race: _____ Sex: _____		DOB: _____	Age: _____
NARRATIVE The undersigned certifies and swears that there is a probable cause to believe the above names defendant, on the <u>17th</u> day of <u>December</u> , <u>2017</u> , at approximately <u>03:18</u> <u>X</u> A.M. <u>_____</u> P.M. at <u>11 SHADY LN</u> within <u>Flagler</u> County, violated the law and did then and there.					
On December 17, 2017, while on patrol I responded to 11 N. Shady Lane, Palm Coast, FL in reference to a 911 Call. Contact was made with Fox Virgin who was standing in the driveway of the residence. Fox was complaining about his right eye. I asked Fox what happened and he would not tell me at first and then stated "if I talked I would not have a place to live". Rescue unit responded and checked on Fox's right eye and he refused medical attention.					
Contact was made with Fox's father, George Virgin and George's girlfriend, Laura Hutchinson who also lives					
Supervisor Approved: Dailey, Joseph 12/17/2017					
NOTICE TO APPEAR		MANDATORY APPEARANCE <input type="checkbox"/>		YOU NEED NOT APPEAR IN COURT BUT MUST COMPLY WITH INSTRUCTIONS ON THE REVERSE SIDE OF YOUR COPY <input type="checkbox"/>	
I AGREE TO APPEAR IN COURT HEREIN TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE INDICATED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED, OR PAY THE LISTED FINE, I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST WILL BE ISSUED.		FINE AND COSTS AMOUNT: _____			
SIGNATURE OF DEFENDANT _____		DATE _____		RELATIONSHIP TO JUVENILE _____	
Sworn to and subscribed before me, the undersigned This <u>17</u> day of <u>Dec</u> , <u>2017</u>		I swear affirm the above statements are correct and true.		Juve Disp. CITATION No. _____	
Name: <u>Christopher Fox</u> #721		OFFICER'S COMPLAINTANT'S SIGNATURE <u>Joseph Dailey</u>		Kt Thumb _____	
Notary Public <input type="checkbox"/> Law Enforcement or Correctional Officer <input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/> Type of Identification _____		NAME (PRINTED) _____		ID NUMBER <u>407</u>	
OFFICIAL USE ONLY		Inmate Number & Facility: _____			

707 - COURT COPY

Narrative 707-B Supplement

☒ Arrest
☐ Affidavit
☐ Notice to Appear

☐ Adult
☐ Juvenile

Court Case
Number:

Page # 3 of 3

Defendant Name: Virgin, Fox, Christopher Agency Case Number: 2017-00110176

CHARGES		DOMESTIC VIOLENCE?	YES <input type="checkbox"/>	Attachments: Affidavit(s) <input type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/>	Total Charges:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No:	Bond:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No:	Bond:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No:	Bond:

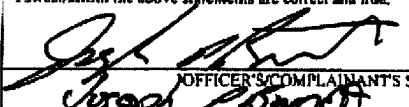
at the residence. Laura stated that she got into a verbal argument with Fox. When she was arguing with Fox, George was in the bedroom sleeping. George heard the argument in the living room and responded to try and de-escalate the situation between his girlfriend and son. Fox would not stop arguing with Laura. It appeared to George that Fox was trying to get past him to get to Laura. George tried to push Fox back into his room and when he did his hand where up around Fox's face. George's fingers were around Fox's eyes and as Fox advanced, George's fingers went by Fox's right eye. George pushed Fox back and then Fox pushed George back. George then pushed Fox down to the floor and his right eye hit the corner of a dresser in Fox's room. George struggle with Fox on the loveseat and when Fox started to complained about his eye, George let Fox go and went to his room. Fox walked outside.

Fox appeared to be the aggressor in this incident and was arrested. This is not the first time Fox and Laura got into a verbal argument and now it appears their situation is escalating.

Photos were taken of the living room. Photo were also taken of George, Laura and Fox. Axon camera was on and the video will be downloaded into evidence.com

George was given a domestic pamphlet. Statements were obtained from George, Laura and Fox.

Fox was transported to FHF and he refused medical treatment. Fox was then transported to the county jail without any incident.

Sworn to and subscribed before me, the undersigned this <u>17</u> day of <u>Dec</u> <u>2017</u>	I swear/affirm the above statements are correct and true.	Right thumb
Name: <u>JP #711</u>		
Notary Public <input type="checkbox"/> Law Enforcement Officer <input checked="" type="checkbox"/>	OFFICER'S/COMPLAINANT'S SIGNATURE	
Personality Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>	NAME (PRINTED)	ID NUMBER
Type of Identification:		<u>907</u>

707-B - COURT COPY

Witness/Victim/Evidence Form 707-A

☒ Arrest
☐ Affidavit
☐ Notice to Appear

☐ Adult
☐ Juvenile

Court Case
Number:

Pg #2 of 3

Defendant Name: Virgin, Fox, Christopher		Agency Case Number: 2017-00110176	
Name (L,F,M): Hutchingson, Laura, Jean	Vic <input type="checkbox"/> Wit <input checked="" type="checkbox"/>	Race: White	Sex: M <input type="checkbox"/> F <input checked="" type="checkbox"/>
Address: 11 SHADY LN Palm Coast, Florida (# Street, City, State):	Age: 46	DOB: 08/13/1971	SSN: [REDACTED]
Bus/School Address:	Zip: 32137	Home Phone: (800)432-7377	Statement: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Relative/ Contact Name:	Relative/Contact Address:	Zip:	Bus Phone:
Name (L,F,M): Kaspro, Trent	Vic <input type="checkbox"/> Wit <input checked="" type="checkbox"/>	Race: White	Sex: M <input checked="" type="checkbox"/> F <input type="checkbox"/>
Address: 11 N SHADY LN Palm Coast, Florida (# Street, City, State):	Age: 24	DOB: 02/16/1993	SSN: [REDACTED]
Bus/School Address:	Zip: 32137-	Home Phone:	Statement: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Relative/ Contact Name:	Relative/Contact Address:	Zip:	Bus Phone:
Name (L,F,M): VIRGIN, GEORGE, CHRISTOPHER	Vic <input type="checkbox"/> Wit <input checked="" type="checkbox"/>	Race: White	Sex: M <input checked="" type="checkbox"/> F <input type="checkbox"/>
Address: 11 N SHADY LN PALM COAST, Florida (# Street, City, State):	Age: 64	DOB: 02/08/1953	SSN: [REDACTED]
Bus/School Address:	Zip: 32137	Home Phone: (388)627-1014	Statement: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Relative/ Contact Name:	Relative/Contact Address:	Zip:	Bus Phone:
Name (L,F,M):	Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:	Sex: M <input type="checkbox"/> F <input type="checkbox"/>
Address (# Street, City, State):	Age:	DOB:	SSN:
Bus/School Address:	Zip:	Home Phone:	Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>
Relative/ Contact Name:	Relative/Contact Address:	Zip:	Bus Phone:
Name (L,F,M):	Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:	Sex: M <input type="checkbox"/> F <input type="checkbox"/>
Address (# Street, City, State):	Age:	DOB:	SSN:
Bus/School Address:	Zip:	Home Phone:	Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>
Relative/ Contact Name:	Relative/Contact Address:	Zip:	Bus Phone:
Name (L,F,M):	Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:	Sex: M <input type="checkbox"/> F <input type="checkbox"/>
Address (# Street, City, State):	Age:	DOB:	SSN:
Bus/School Address:	Zip:	Home Phone:	Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>
Relative/ Contact Name:	Relative/Contact Address:	Zip:	Bus Phone:

EVIDENCE COLLECTED

Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Owner (Name)	(Address)	(Phone)	Value
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Owner (Name)	(Address)	(Phone)	Value
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount

I certify that the foregoing is a complete list of
witnesses/victims & evidence known to me

D/S [Signature] ID Number 107 Agency ECSD

707-A - COURT COPY