053170

50-2022-MM-003578-AMB/1504

ARREST / NOTICE TO APPEAR

1. Arrest (No Warrant) 3. Request for Warrant
6. Arrest (Warrant) 4. Request for Capias
2. N.T.A. 5. Juvenile Referral

1 JUVENILE

ADMINISTRATION

OBTS Number:

Agency ORI Number: 0500200

Agency Name: Boca Raton Police Department

Agency Report Number (N.T.A.'s only): 3 | 2 | 2022-005849

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: UNARMED

Multiple Clearance Indicator: N

Location of Arrest (Including Name of Business): 33 SE 8TH ST APT 124, 33 SE 8TH ST 124, BOCA RATON, FL

Location of Offense (Business Name, Address): 33 SE 8TH ST 124, BOCA RATON, FL 33432

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
05/03/2022	23:59	05/04/2022	00:09			NONE

DEFENDANT

Name (Last, First, Middle): ESTRADA, IRELIS

Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	01/08/1983	5'03	155	BROWN	BROWN	LIGHT	Medium

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description):

Marital Status: S

Religion:

Indication of: Alcohol Influence ☐ Yes ☐ No ☒ Unk. ☐ Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 50 LAKE EDEN DR, BOYNTON BEACH, FL 33435

Phone: (310) 779-9860

Residence Type: 1. City 3. Florida 2. County 4. Out of State | 4

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 50 LAKE EDEN DR, BOYNTON BEACH, FL 33435

Phone: (310) 779-9860

Address Source:

Business Address (Name, Street) (City) (State) (Zip):

Phone:

Occupation:

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
E236400835080 / FL	[redacted]		UNKNOWN, CA, United	US

CO-DEF

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

JUVENILE

☐ Parent ☐ Other: ☐ Legal Custodian

Name (Last, First, Middle): 1 - NO BOND.

Residence Phone:

Address (Street, Apt. Number) (City) (State) (Zip):

Business Phone:

Notified by: (Name) Date Time

JUVENILE DISPOSITION: 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated

VICTIM NOTIFICATION REQUIRED

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 355-2526) informed of any change of address.

☐ Yes, by: ☐ No:

School Attended: Grade:

Property Crime? ☐ Yes ☒ No Description of Property: Value of Property:

CODE

Drug Activity: N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Disperses/ 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

1.

Charge Description: BATTERY- BATTERY (SIMPLE)

Statute Violation Number: 784.03(1A1)

Violation of ORD #:

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☒ Y ☐ N		

CHARGE

Charge Description:

Statute Violation Number:

Violation of ORD #:

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

CHARGE

Charge Description:

Statute Violation Number:

Violation of ORD #:

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant: GOOD

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries

Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By: OWIRKA

Released By:

Released To:

Transported By:

Date Transported: / / Time Transported: : Other:

NOTICE TO APPEAR

☐ INSTRUCTION NO. 1 - Mandatory appearance in court
☒ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): South County 200 W Atlantic Ave Delray Beach, FL 33444

Court Date and Time:

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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian)

Date Signed: MAY 4 2022 AM 7:10

No Photo Available

ADMIN

HOLD for Other Agency:

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Intake Deputy: Burdette I.D.# 1833 Pouch #:

Signature of Arresting Officer:

Name of Arresting Officer (Print): OWIRKA, J. M. I.D. # 866

Transporting Officer: OWIRKA I.D. # 866 Agency: BRPD

Name Verification (Printed by Arrestee): (PRINT)

Witness here if subject signed with an "X".

PAGE 1 OF 1

PROBABLE CAUSE AFFIDAVIT

ADMIN

OBTS Number:

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias: **1**

JUVENILE:

Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2022-005849

Charge Type (Check as many as apply): ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
ESTRADA, IRELIS		W	F	01/08/1983

CHARGES

Charge Description	Charge Description
784.03(1A1) BATTERY- BATTERY (SIMPLE)	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
RUBIN, TODD ALLAN	W	M	12/08/1965

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
21218 ST ANDREWS BLVD, BOCA RATON, FL 33433	(786) 859-4579	

Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation
TODD`S TICKETS	(561) 910-3320	OWNER

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.
The Persor 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 committ the below acts.
☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 3 day of May, 2022 at 23:59 (Specifically include facts constituting cause for arrest.)

On 05/03/2022 at approximately 2243 hours, I was dispatched to 33 SE 8th St Apt. 124 in reference to a domestic disturbance.

On arrival, I met with the victim. The victim stated, his girlfriend, Irelis Estrada, returned to their apartment drunk and began to tell him that she does not trust him. The victim then told Estrada he does not wish to continue their relationship at which point Estrada became angrier. Estrada then used her right hand to slap the victim on the left side of his face and several minutes later used a closed fist to punch him on the left side of his face again. When the victim stated he was going to call 911, Estrada began to hit herself in an attempt to mislead the police, then immediately left in their vehicle. I observed the following injury to the victim: a large red mark on the victim`s left cheek.

At approximately 2348 hours, the victim called BRPD because Estrada had returned. I responded back to the apartment and made contact with Estrada. Estrada explained she had gone paddleboarding with friends. When she returned, she stated the victim argued with her because he was jealous. Then the victim pushed her out of the apartment and told her he was calling 911. Estrada then left. Estrada denied the argument becoming physical in any way other than the victim pushing her out of the apartment. I did not observe any injuries to Estrada.

Based on my investigation, I determined Irelis Estrada to be the primary aggressor in a physical domestic altercation. Estrada hit and punched the victim. Irelis Estrada was charged with Domestic Simple Battery (F.S.S 784.03(1A1)). Estrada was placed into handcuffs which were checked for tightness and double locked. When Estrada was advised she was being placed under arrest for domestic battery, she spontaneously uttered, "I wasn`t even here when that happened" which was indicated she knew that a battery occurred. Estrada transported to BRPD for processing, then transported to PBC Jail.

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

KINGMAN, DARRYL
NOTARY PUBL C / CLERK OF COURT / OFFICER (F.S.S. 117.10)

05/04/2022
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

OWIRKA, JONATHAN MICHAEL (866)
NAME OF OFFICER (PLEASE PRINT)

05/04/2022
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

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)
- Sexual Offense (Ch. 794)
- Attempted Sexual Offense
- 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.)

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

SUSPECT/OFFENDER: _____

(FOR WARRANTS USE ONLY) COURT CASE/WARRANT#: _____

1. Incident Report#: 2022-005849 Agency: BRPD
   Offense: Domestic Battery
   Suspect/Offender: Jesus Estrada
   D.O.B. 1/8/83 Race: White Sex: Female

2. Warrant#(s): _____

3.a. Victim's name: [redacted] D.O.B. [redacted] Race: W Sex: M
   Address: 33 SE 8th St Apt 24
   City: Boca Raton State: FL Zip: 334
   Home#: 786 859 4579 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 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: Pursuant to F.S.119.07 (3)(S)1, I request that the address and telephone number on this form be kept confidential (applicable only to sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery, or domestic violence cases).
Other confidentiality provisions of Florida State Statutes may also be applicable

Signature of person waiving notification: _____

Printed name of person waiving notification: _____

Officer's Name: T. Owens I.D.# 8000 Date: 9/4/22

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

PALM BEACH COUNTY
SHERIFF'S OFFICE
Florida State Statute Exemption Sheet

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:	

REVIEW COMPLETED BY

Booking Number: 2022011654	**Date:** 5/4/2022
	Specialist Name/ID: Pinkneya/7796