0529985 22MM1922MB pouch# 8141

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Juvenile: N

ADMINISTRATION

OBTS Number:

Agency ORI Number: FL0500300

Agency Name: BOYNTON BEACH POLICE DEPT.

Agency Report Number: 34-22-002644

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:

Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): SAME

Location of Offense (Business Name, Address): 4756 N CONGRESS AVE BOYNTON BEACH FL 33426

Date of Arrest: 07/08/2022 | Time of Arrest: 0840 | Booking Date: | Booking Time: | Jail Date: | Jail Time: | Location of Vehicle:

DEFENDANT

Name (Last, First, Middle): KOGAN, IVY

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

W - White I – American Indian B - Black O – Oriental / Asian

Race	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	04-03-1979	504	160	BLK	BLK	FAIR	MED

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

Marital Status: MARRIED | Religion: UNK

Indication of: Y N Unk.
- Alcohol Influence ☐ ■ ☐
- Drug Influence ☐ ■ ☐

Local Address (Street, Apt. Number) (City) (State) (Zip): 193 GULFSTREAM CIR WEST PALM BEACH FL 33411

Phone: (561)900-8177

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

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

Phone: ( ) -

Address Source: VICTIM

Business Address (Street, Apt. Number) (City) (State) (Zip): 4756 N CONGRESS AVE BOYNTON BEACH FL 33426

Phone: ( ) -

Occupation: OWNER

D/L Number, State: [redacted]

INS Number:

Place of Birth: PHILLIPIENS

Citizenship: USA

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 ☐ Legal Custodian ☐ Other — Name (Last) (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 ☐ defendant and/or ☐ defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 561-355-2526) informed of any change of address: ☐ Yes, By: (Name) ☐ No: (Reason)

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. Dispense/Distribute, M. Manufacture Produce/Cultivate, Z. Other

Drug Type: N. N/A, A. Amphetamine, B. Barbituate, C. Cocaine, E. Heroin, H. Hallucinogen, M. Marijuana, O. Opium/Deriv., P. Paraphernalia/Equipment, S. Synthetic, U. Unknown, Z. Other

CHARGE

Charge Description: BATTERY D/V | Counts: 1 | Domestic Violence: ■ Yes ☐ No | Statute Violation Number: 784.03.1A1 | Violation of ORD#:

Drug Activity: N | Drug Type: N | Amount/Unit: N/A | Offense #: 22-002644 | Warrant/Capias Number: | Bond:

CHARGE

Charge Description: | Counts: | Domestic Violence: ☐ Yes ☐ No | Statute Violation Number: | Violation of ORD#:

Drug Activity: | Drug Type: | Amount/Unit: | Offense #: | Warrant/Capias Number: | Bond:

CHARGE

Charge Description: | Counts: | Domestic Violence: ☐ Yes ☐ No | Statute Violation Number: | Violation of ORD#:

Drug Activity: | Drug Type: | Amount/Unit: | Offense #: | Warrant/Capias Number: | Bond:

CHARGE

Charge Description: | Counts: | Domestic Violence: ☐ Yes ☐ No | 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

☐ Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side.

Location (Court, Room Number, Address): South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444

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

ADMIN.

HOLD for other Agency Name: NO Hold

Signature of Arresting Officer:

Name Verification (Printed by Arrestee) (PRINT):

☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other:

Name of Arresting Officer (Print): OFC P.S. MONTEITH | I.D. #: 778

BU# MAR 8 AM 9:44

Intake Deputy: | I.D. #: | Pouch #: | Transporting Officer: | I.D. #: 696 | Agency: BBPD

Witness here is subject Signed with an "X".

Page 1 OF 1

MORENO

DOMESTIC VIOLENCE PROBABLE CAUSE AFFIDAVIT
PALM BEACH COUNTY

On the 4TH day of MARCH 2022 at 1030 HRRS

Subject: KOGAN, IVY DOB: 04-03-1979 Case #: 22-002644

Charge Description: BATTERY D/V Statute #: 784.03.1A1

Victim: HERRERO, LESLIE DOB: 11-25-1988 Race: W Sex: F

Local Address: 193 GULFSTREAM CIR , WPB ,FL, 33411

Personal Contact: [redacted]

Narrative:

On 03-07-2022 at approx. 2000 hours I responded to the Boynton Beach Police Department reference delayed domestic battery. Upon arrival I met with Victim w/f Leslie Herrero. Herrero stated that on Friday 03-04-2022 she was contacted via phone by her sister/boss w/f Ivy Kogan. Kogan informed Herrero that she wanted her to move out of the house and that she intended to fire her as well. The following day 03-05-2022 Kogan confronted Herrero at work, Anytime Fitness, 4756 N Congress Ave. Kogan is owner of the business. Kogan and Herrero went into the supply closet to "talk" out of sight of the gym members. Herrero stated that once behind closed doors Kogan began questioning Herrero as to why she did want to be apart of the family anymore and why she (Herrero) was avoiding her. Herrero stated that since she was being kicked out of the house and to be fired she had nothing to lose in telling Kogan exactly how she felt. She informed Kogan that she is a horrible person and wants nothing to do with her. Kogan became enraged by this and kicked Herrero on the left upper thigh several times. She then punched (closed fist) Herrero on the left side of her face making contact with her left eye twice and then the back of her head once. Herrero stated that she did not back away but rather taunted Kogan while this was happening. Herrero also stated that she never hit back or defended herself during the assault. Herrero had a visible black eye that at one point prior to coming in to report the incident had swollen shut completely (left eye) (did not seek medical attention for the injury).

Based on the above there is probable cause for domestic battery pursuant to FSS 784.03.1A1, against Kogan.

Defendant's Statement: None Victim's Statement: Taped

Observation Of Victim (Physical and Emotional):

BLACK EYE

Relationship Between Victim and Suspect:

SISTERS

Photographs: Scene: ☐ Yes ☒ No
Victim: ☒ Yes ☐ No
911 Call: ☐ Yes ☒ No Caller: _____
Tape Requested: ☐ Yes ☒ No
Weapon Used: ☐ Yes ☒ No Type: _____
Witnesses: ☐ Yes ☒ No
Injuries: ☒ Yes ☐ No
Medical Treatment: ☐ Yes ☒ No
At Scene ☐ Yes ☐ No Paramedics: _____
At Hospital ☐ Yes ☐ No Physician(s): _____
Hospital: _____

Act Committed In Presence Of Minor(s): ☐ Yes ☒ No

Name: _____ Age: _____

Name: _____ Age: _____

F.D.C.F. Notified: ☐ Yes ☒ No Victim Pregnant: ☐ Yes ☒ No

Violation Of Restraining Order: ☐ Yes ☒ No Case #: _____

Prior History Of Domestic Violence: ☐ Yes ☒ No

Alcohol Or Drugs Involved: ☐ Yes ☒ No ☐ Unknown

Victim Contact Information:

Phone Home: 408-612-7592 Work: _____

Employer: _____

Relative Name: _____ Phone: _____

Address: 193 GULFSTREAM CIR

City/State: WPB ,FL ,33411

State Of Florida
County Of Palm Beach
Appeared before me, OFC P.S. MONTEITH (print name) personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.

Signature Of Arresting Officer

Sworn to and subscribed to me before this 7TH day of MARCH , 2022

Notary/Clerk Of Court/Officer (F.S.S. 117 10)

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**
- **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 #: 22-002644 Agency: Boynton Bch P.D
   Offense: Battery (Domestic)
   Suspect/Offender: KOGAN, IVY
   D.O.B. 04/03/79 Race: W Sex: F

2. Warrant #(s): _____

3.a. Victim's name: HERRERO, Leslie D.O.B. 11/25/88 Race: W Sex: F
   Address: 193 Gulfstream Cir
   City: W.P.B State: FL Zip: 33411
   Home #: 408-612-7592 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:** **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~~ Officer's Name: A. Moreno I.D. # 696 Date: 03/08/22

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

PBSO #0029A REV. 05/11

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

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: 2022006174	**Date:** 3/9/2022
	Specialist Name/ID: Pinkneya/7796