


0377301 22mm624AMB 3518

ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile		N	
OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-22028546					
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 2 1. Yes 2. No		Multiple Clearance Indicator 02	
Location of Arrest (Including Name of Business) 12911 Mapleton Court, Boca Raton, Florida						Location of Offense (Business Name, Address) [REDACTED]					
Date of Arrest 01/24/2022		Time of Arrest 0337		Booking Date		Booking Time		Jail Date		Jail Time	
Name (Last, First, Middle) Hartman, Laura, L						Alias (Name, DOB, Soc. Sec. #, Etc.)					
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian		Sex		Date of Birth		Height		Weight		Eye Color	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) Butterfly lowerback		Marital Status Single		Religion NONE		Indication of: Alcohol Influence Drug Influence		Y		N	
Local Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		Residence Type: 1. City 2. County 3. Florida 4. Out of State	
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		Address Source FL DL	
Business Address (Name, Street)		(City)		(State)		(Zip)		Phone		Occupation Physician Assistant	
D/L Number, State		Soc. Sec. Number		INS Number		Place of Birth (City, State)		Citizenship USA			
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	
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> 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 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 355-2528) 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 checked="" type="checkbox"/> No		Description of Property		Value of Property							
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. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetics		U. Unknown Z. Other			
Charge Description Simple Battery - Domestic		Counts 02		Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 784.03(1)(a)(1)		Violation of ORD #			
Drug Activity N		Drug Type N		Amount / Unit		Offense # 22028546		Warrant / Capias Number		Bond	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> 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 <input type="checkbox"/> 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 <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond	
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 01/24/2022											
Signature of Defendant (or Juvenile and Parent /Custodian)										Date Signed	
HOLD for other Agency Name		Signature of Arresting Officer [Signature]				Name Verification (Printed Name) SCANNED					
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) E. ALVES #32404				I.D. # 32404		(PRINT) JAN 24 2022	
Intake Deputy		I.D. #		Pouch #		Transporting Officer E. ALVES #32404		ID # 32404		Agency PBSO	
Witness here if subject signed with an "X"										1 OF 1	

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile	N
ADMIN	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06-22028546			
	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		Special Notes:					
DEF	Name (Last, First, Middle) Hartman, Laura, L				Alias		Race	Sex
	Charge Description Simple Battery - Domestic				784.03(1)(a)(1)		Date of Birth 12/09/2002	
CHARGES	Charge Description				Charge Description			
	Charge Description				Charge Description			
VICTIM	Victim's Name (Last, First, Middle)				Race	Sex	Date of Birth	
	Local Address (Street, Apt. Number)				(City)	(State)	(Zip)	Phone
	Business Address (Name, Street)				(City)	(State)	(Zip)	Phone
						Address Source FL DL		Occupation PA
<p>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.</p> <p>The Person taken into custody</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to _____ admitting to the below facts. </div> <div> <input checked="" type="checkbox"/> was observed by Victims who told Law Enforcement 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. </div> </div> <p>On the 24th day of January 2022 at 0251 <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p>								
<p>On 01/24/2022, at approximately 0251 hours, I responded to [REDACTED] in unincorporated Boca Raton / Palm Beach County, Florida 33433, in reference to a domestic disturbance in progress between family members, later identified as Rebecca Hartman (Sister), Laura Hartman (Sister), and Karen Hartman (Murder). While en-route, PBSO dispatch advised the complainant, Rebecca stated Laura's boyfriend was refused to leave the residence. Rebecca claimed Laura threw a can of soda at her face.</p> <p>Upon arrival, I made contact with Rebecca outside the residence, who appeared to be upset about Laura's boyfriend, later identified as Benjamin Dillian, being inside the residence. Rebecca advised Laura and Benjamin were having sex inside the room in which they were making a lot of noise inside the house resulting in a physical altercation between them. Rebecca advised Laura got mad at her because she pointed the finger at Laura's face. Rebecca stated Laura got extremely upset, threw a soda can at her face and started hitting Rebecca's shoulder. Rebecca advised the soda can struck her left face area and claimed soreness in her shoulder. Rebecca was extremely upset and stated Laura was out of control.</p> <p>As I spoke with Rebecca outside the residence, Laura's boyfriend, Benjamin, stepped out of the house. I told him to wait for me by his vehicle in order to obtain additional information about this incident. After speaking with Rebecca, I made contact with Benjamin, who at first claimed he did not witness the whole thing. I asked him if he saw Laura hitting someone inside the residence. He said no, but later changed his story where Benjamin claimed he saw Karen pushing Laura inside the bedroom. I then asked if he saw Laura throwing a soda can at Rebecca. Benjamin gave me an inconsistent statement and insinuated that a soda can might be involved in the altercation. Rebecca completed a sworn written statement about the physical attack.</p> <p>While I spoke with Benjamin, I could hear Laura yelling and screaming inside the residence. Subsequently, Laura stormed out of the residence, yelling and screaming at Rebecca. At that moment, I detained Laura and placed her inside my assigned patrol vehicle because Laura was acting belligerent and would stop screaming. I then continued to speak with Benjamin, who changed his statement about the incident.</p> <p>After speaking with Benjamin, he left the scene in his vehicle and proceeded to make contact with Karen inside the residence, who appeared to be upset and shaken about this incident. Karen stated she heard Laura screaming at Rebecca and Karen's husband. Karen advised she went to Laura's bedroom and opened the door to ask what was going on between them. At that time, Karen stated Laura pushed her out of the room where she lost balance and almost fell to the ground. Karen advised Laura continued to yell profanity words at her and act violently towards her. Karen advised she saw when Laura battered and threw the soda can at Rebecca.</p>								
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p style="text-align: right;"> E. ALVES #32404</p> <p>(Signature of Arresting/Investigative Officer)</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this 24th day of January 2022 by E. ALVES</p> <p>(Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification. Type of identification produced LEO)</p> <p>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>								
PAGE 1 OF 2								

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ADMIN	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06- 22028546					
	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		Special Notes:					
CHARGES	Name (Last, First, Middle) Hartman, Laura, L		Alias		Race		Sex		Date of Birth	
	Charge Description Simple Battery - Domestic		784.03(1)(a)(1)		Charge Description					
VICTIM	Victim's Name (Last, First, Middle) Hartman, Rebecca, Noell		Race W		Sex F		Date of Birth 12/09/2002			
	Local Address (Street, Apt. Number) [REDACTED]		(City) (State) (zip)		Phone [REDACTED]		Address Source FL DL			
PROBABLE CAUSE STATEMENT	Business Address (Name, Street) [REDACTED]		(City) (State) (zip)		Phone ()		Occupation PA			
	<p>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.</p> <p>The Person taken into custody</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to admitting to the below facts. </div> <div> <input checked="" type="checkbox"/> was observed by Victims who told Law Enforcement 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. </div> </div> <p>On the 24th day of January 20 22 at 0251 <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p>As I continued my investigation, I made contact with Laura. Before I asked Laura any question about this case, I read Laura her Miranda rights from PBSO pre-printed card, which Laura indicated she understood. I proceeded my investigation.</p> <p>Post Miranda, Laura denied pushing Karen and Rebecca, but Laura confessed throwing a soda can. Laura stated she did not remember if she threw or knocked the soda off the counter. Karen advised she did not intent on hitting or hurting Rebecca or anybody else inside the room. Laura appeared to be under the influence of unknown alcoholic beverage.</p> <p>During my interaction with Rebecca, I observed redness around her facial area. I did not observe any injuries on Laura or Karen.</p> <p>Based on my investigation, Karen, Rebecca's written sworn statement, Rebecca's injury, Laura's incosistent statement, Rebecca's lack of injuries. I conclude that Laura was the primary aggressor who violated Florida State Statute 784.03(1)(a) (1) Simple/ Intentional harm battery domestic against Rebecca and Karen. Laura was placed under arrest at 0312Hours. Laura was handcuffed with her hands behind her back; the handcuffs were checked for proper fit and double locked</p> <p>Laura was transported to District 7 for paperwork. subsequently to the Palm Beach County Jail for booking.</p> <p>Deputy Brandao utilized a PBSO issued camera to take the photographs of the victim's face, neck, arms, and case information board. Later to be uploaded into the domestic violence website, located on the PBSO Portal page. The photographs were entered into the website along with the victims information as well, and the suspects information.</p> <p>A Domestic Violence Probable Cause Supplement, Victim Notification Form, and a Case Information Sheet were all completed. Rebecca and Karen were provided a copy of the Victim's Rights Brochure that was explained to him and he signed for.</p> <p>I contacted the PBSO hot line Level II domestic violence via the portal page in regards of the incident. and I also requested a copy of the 911 recording to be uploaded into STAC.</p> <p>This case is clear by an arrest.</p>									
ADMINISTRATIVE	<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p style="text-align: right;">E. ALVES #32404</p> <p>(Signature of Arresting/Investigative Officer)</p>									
	<p>The foregoing instrument was sworn to or affirmed and subscribed before me this 24T day of January 20 22 by E. ALVES #32404</p> <p>(Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification. Type of identification produced LEO)</p> <p>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>									

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

Suspect: HARTMAN, LAURA DOB: [REDACTED] Case #: 22028546

Victim: HARTMAN, KAREN DOB: [REDACTED] Race: [REDACTED] Sex: [REDACTED]

Relationship between Victim and Defendant: _____

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

911 Call: ☒ Yes ☐ No Caller: HARTMAN, REBECCA

Weapon Used: ☒ Yes ☐ No Type: _____

Witness: ☒ Yes ☐ No Name: _____

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

Injuries: ☒ Yes ☐ No Description: REDNESS AROUND REBECCA'S FACE

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: _____ DOB: 1/1

Name: _____ DOB: 1/1

Name: _____ DOB: 1/1

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: I DID NOT HIT MY SISTER

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

First words Victim said when you responded to scene: MY DAUGHTER PUSHED ME

AND THREW A SODA CAN AT MY FACE.

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 _____

Victim Contact Information: _____

Local Address: [REDACTED]

Phone: Home () - _____ Work () - _____ Cell [REDACTED]

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)
- Sexual Offense (Ch. 794)
- Attempted Murder
- Attempted Sexual Offense
- Stalking (F.S. 784.048)
- Dating Violence
- 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.

1. Incident Report #: 22028546 Agency: PBSO
Offense: DOMESTIC SIMPLE BATTERY
Suspect/Offender: HARTMAN, LAURA
D.O.B. [REDACTED] Race: [REDACTED] Sex: [REDACTED]

2. Warrant #(s): _____

3.a. Victim's name: HARTMAN, KAREN D.O.B. [REDACTED] Race: [REDACTED] Sex: [REDACTED]
Address: [REDACTED]
City: [REDACTED] State: [REDACTED] Zip: [REDACTED]
Home #: _____ Work #: _____ Other: [REDACTED]

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's Name: ALVES, E I.D. # 32404 Date: 01/24/22

White = Corrections or State Attorney (Warrant Application)

Yellow = Warrants Section

Pink = Central Records

SUSPECT/OFFENDER

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT #:

VICTIM / WITNESS INFORMATION

☒ VICTIM **Hartman** **Rebecca** **Noell** [REDACTED]
Name (Last) (First) (Middle) (Race) (Sex) (Date of Birth)
☐ WITNESS [REDACTED]
Home Address (Street, Apt. Number) (City) (State) (zip) (Phone)
☐ OWNER [REDACTED] 0
Synopsis of Testimony Business (Name & Address) (City) (State) (zip) (Phone)
ADDRESS SOURCE
☐ Verbal
☒ Driver's License
☐ Voter's ID
☐ Other FL DL

☒ VICTIM **Hartman** **Karen** **Marie** [REDACTED]
Name (Last) (First) (Middle) (Race) (Sex) (Date of Birth)
☐ WITNESS [REDACTED]
Home Address (Street, Apt. Number) (City) (State) (zip) (Phone)
☐ OWNER [REDACTED] 0
Synopsis of Testimony Business (Name & Address) (City) (State) (zip) (Phone)
ADDRESS SOURCE
☐ Verbal
☒ Driver's License
☐ Voter's ID
☐ Other

☐ VICTIM
Name (Last) (First) (Middle) (Race) (Sex) (Date of Birth)
☐ WITNESS
Home Address (Street, Apt. Number) (City) (State) (zip) (Phone)
☐ OWNER
Synopsis of Testimony Business (Name & Address) (City) (State) (zip) (Phone)
ADDRESS SOURCE
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☐ Other

☐ VICTIM
Name (Last) (First) (Middle) (Race) (Sex) (Date of Birth)
☐ WITNESS
Home Address (street, Apt. Number) (City) (State) (Zip) (phone)
☐ OWNER [REDACTED] 0
Synopsis of Testimony Business (Name & Address) (City) (State) (zip) (Phone)
ADDRESS SOURCE
☐ Verbal
☐ Driver's License
☐ Voter's ID
☐ Other

synopsis of Testimony



**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	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input checked="" type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	1 - 7
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2022002146	Date: 1/24/2022
	Specialist Name/ID: S.Evans/23872