

J# 0517331 20 MM5362 702

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		
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number (N.T.A.'s only) 06-20084899						
Charge Type: Check as many as apply.		1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/>		3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/>		5. Ordinance <input type="checkbox"/> 6. Other <input type="checkbox"/>		Weapon Seized / Type 2 1. Yes 2. No			
Multiple Clearance Indicator		01									
Location of Arrest (Including Name of Business) 6135 Seven Springs Blvd, Greenacres, FL 33463					Location of Offense (Business Name, Address) 6135 Seven Springs Blvd, Greenacres, FL 33463						
Date of Arrest 07/06/2020	Time of Arrest 03:01	Booking Date 07/06/2020	Booking Time 0430	Jail Date	Jail Time	Location of Vehicle 6135 Seven Springs Blvd, Greenacres FL 33463					
Name (Last, First, Middle) Avelar, Lirios, Gizella					Alias (Name, DOB, Soc. Sec. #, Etc.)						
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex F	Date of Birth 07/06/1999	Height 5'08"	Weight 120	Eye Color Brown	Hair Color Brown	Complexion Light	Build Slender			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) Flowers on right ribs / coy fish right hip					Marital Status Single	Religion NONE	Indication of: Alcohol Influence <input type="checkbox"/> Drug Influence <input type="checkbox"/>				
Local Address (Street, Apt. Number) (City) (State) (Zip) 1131 N Rosemary Ave, West Palm Beach, FL 33401					Phone (305) 873-0785		Residence Type: 1. City 2. County 3. Florida 4. Out of State				
Permanent Address (Street, Apt. Number) (City) (State) (Zip)					Phone		Address Source Defendant Verbal				
Business Address (Name, Street) (City) (State) (Zip)					Phone		Occupation Paralegal				
D/L Number, State A-146-527-99-746-0		Soc. Sec. Number		INS Number		Place of Birth (City, State) Miami, FL		Citizenship US			
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. Felory <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. Felory <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile			
Parent Legal Custodian Other:					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 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 Battery (Domestic)		Counts 01	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 784.92(1A1)		Violation of ORD #		784.03(1A1)			
Drug Activity N		Drug Type N	Amount / Unit N/A	Offense # 20084899	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #		VICTIM NOTIFICATION REQUIRED			
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 #		Bond			
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 #		Bond			
Drug Activity		Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
Location (Court, Room Number, Address) To Be Set					JUL 6 AM 4:47						
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											
Signature of Defendant (or Juvenile and Parent /Custodian)					Date Signed 07/06/2020						
HOLD for other Agency Name:		Signature of Arresting Officer D/S B. Lembo			Name Verification (Printed by Arrestee)						
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) D/S B. Lembo			I.D. # 25004		PAGE		
Intake Deputy JANN 8101		I.D. #		Pouch #		Transporting Officer D/S B. Lembo		ID # 25004			
						Agency PBSO		Witness here if subject signed with an "X"			
								1 OF 1			

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT
J# 0517331

SCANNED
JUL 06 2020

PROBABLE CAUSE AFFIDAVIT

1. Arrest 3. Request for Warrant
2. N.T.A. 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 06-20084899
Charge Type: Check as many as apply	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 <input type="checkbox"/>	Special Notes:	

Name (Last, First, Middle) Avelar, Lirios, Gizella	Alias	Race W	Sex M	Date of Birth 07/06/1999
Charge Description Battery (Domestic)	784.93(1A1)	Charge Description		
Charge Description		Charge Description		

Victim's Name (Last, First, Middle) Mejia, Francisco,	Race W	Sex M	Date of Birth 07/06/1991
Local Address (Street, Apt. Number) 6135 Seven Springs Blvd, GREENACRES, FL 33463	(City)	(State)	(zip)
Phone (305) 680-2934	Address Source		
Business Address (Name, Street)	(City)	(State)	(zip)
Phone	Occupation		

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.
 The Person taken into custody
 committed the below acts in my presence. was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
 confessed to _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.
 On the **6th** day of **July** 20**20** at **02:25** A.M. P.M. (Specifically include facts constituting cause for arrest.)

On Monday July 6, 2020 at approximately 0235 hours I responded to 6135 Seven Springs Blvd, Greenacres FL 33463 in reference to the report of a domestic disturbance in progress between boyfriend and girlfriend. Upon arrival I made contact with W/F Lirios Gizella Avelar DOB; 07/06/1999 who was standing in the parking lot. Avelar stated that she and her boyfriend were in a verbal argument and he was refusing to allow to get her belongings and leave the house. I asked Avelar if there was any physical altercation between them. She hesitated before saying "I defended myself" but then stated that there was not other than some minor shoving.

I then made contact with W/M Francisco Mejia DOB: 07/06/1991 at the front door of the residence. Mejia was visibly scratched and bleeding on his chest and shoulder. He immediately stated "She attacked me!, You have to come up stairs and see what she did!" I then followed Mejia up the stairs into his bedroom. While going up the stairs I observed both mens and womens clothing thrown from the bedroom onto the landing of the stairs. Mejia they took me into the bedroom showed me that the 65 inch television had been thrown to the floor causing the screen to break. additionally he pointed out the glass mirror of the closet door had been shattered. Mejia stated that Avelar was attacking him and throwing things at him after he confronted her about her text messaging another man. Mejia stated that he felt Avelar wet crazy and then pointed to his right arm. I then observed a large bite mark on his bicep near his armpit. Mejia stated that Avelar bit him. I then asked him if the scratches on his chest and shoulder were from Avelar as well he stated that they were. Mejia then stated that he wanted to press charges for the property damage to his house. I then took photographs of Mejia injuries. I then explained to Mejia that based on his story and the visible injuries to his body that Avelar would be placed under arrest for domestic battery. Mejia then immediately became confrontational stating that he refused to prosecute and wanted us to leave the house. Mejia was explained several times over that the police can not ignore an obvious incident of domestic violence and that the primary aggressor will be placed under arrest. Mejia then stated he understood and was informed I was going to place Avelar under arrest and would return to gather a statement once she was secured in the back of my vehicle.

Avelar was then placed under arrest. She was then secured in handcuffs that were double locked and checked for proper fit. She was then waked to the rear passenger side of my marked PBSO patrol vehicle and secured in the back seat. Mejia continued to be confrontation and refused to make a sworn statement both written or recorded. He then demanded that I release Avelar and asked for a supervisor to respond. While Mejia was speaking to the supervisor Avelar was transported to the PBSO District 16 substation for the completion of arrest paperwork before being taken to the Palm Beach County Jail without incident.

STATE OF FLORIDA
 COUNTY OF PALM BEACH

 (Signature of Arresting/Investigative Officer) **D/S B. Lembo**

The foregoing instrument was sworn to or affirmed and subscribed before me this **6th** day of **July** 20**20** by **D/S B. Lembo**
 (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced **personally known**
D/S A. Sentmanat #24967
 Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

SCANNED PAGE
 JUL 06 2020

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

Suspect: Avelar, Lirios, Gizella DOB: 07/06/1999 Case #: 20084899

Victim: Mejia, Francisco, DOB: 07/06/1991 Race: W Sex: M

Relationship between Victim and Defendant: Boyfriend and Girlfriend

Photographs: Scene Yes No Victim Yes No Defendant Yes No

911 Call: Yes No Caller: Francisco Mejia / Lirios Avelar

Weapon Used: Yes No Type: _____

Witness: Yes No Name: Juan Avelar

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

Injuries: Yes No Description: bite mark, several scratches

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: / /

Name: _____ DOB: / /

Name: _____ DOB: / /

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 just want to get my stuff and leave

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

First words Victim said when you responded to scene: She attacked me!, Come see what she did to my room!

(Victim refused to fill out a sworn written or recorded statement)

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): Distraught / Intoxicated

Upset Crying Fearful Hysterical Afraid Calm Nervous

Complained of pain Other _____

Victim Contact Information:

Local Address: 6135 Seven Springs Blvd, GREENACRES, FL 33463

Phone: Home (305) 680-2934 Work () _____ - _____ Cell () _____ - _____

Employer: _____

Name of Relative: _____ Phone () _____ - _____

Address: _____

VICTIM NOTIFICATION FORM

SUSPECT/OFFENDER:

Avelar, Lirios, Gizella

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT#:

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

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

1. Incident Report #: 20084899 Agency: PBSO
Offense: Battery (Domestic)
Suspect/Offender: Avelar, Lirios, Gizella
D.O.B. 07/06/1999 Race: W Sex: M

2. Warrant # (s): _____

3.a. Victim's name: Mejia, Francisco, D.O.B. 07/06/1991 Race: W Sex: M
Address: 6135 Seven Springs Blvd
City: GREENACRES, FL 33463
Home #- ((305)) 680-2934 Work #: 0 Other: _____

b. Victim's next of kin, friend or neighbor: _____
Address: _____
City: _____
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: Mejia, Francisco,

Deputy's Name: D/S B. Lembo I.D.# 25004 Date: 07/06/2020
White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records



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)(f)	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 type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<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: 2020016278	Date: 7/6/2020
	Specialist Name/ID: B Evans / 23649

SCANNED
JUL 06 2020