

0529276

ARREST / NOTICE TO APPEAR
Juvenile Referral Report1. Arrest
2. N.T.A.3. Request for Warrant
4. Request for Capias

1

Juvenile

N

ADMINISTRATIVE	OBTs Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06- 22033274	
	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 <input checked="" type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No		Multiple Clearance Indicator 01			
	Location of Arrest (Including Name of Business) 10374 CANOE BROOK CIRCLE, BOCA RATON, FL 33498				Location of Offense (Business Name, Address) 10374 CANOE BROOK CIRCLE, BOCA RATON, FL 33498			
	Date of Arrest 02/06/2022	Time of Arrest 1432	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle	
DEFENDANT	Name (Last, First, Middle) Vasilev, Venelin, Z							
	Alias (Name, DOB, Soc. Sec. #, Etc.)							
	Race W - White I - American Indian B - Black O - Oriental/Asian	Sex M	Date of Birth 8/4/1966	Height 5'06	Weight 170	Eye Color BROWN	Hair Color BROWN	Complexion MED
	Build MED							
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) LEFT HAND TAT				Mental Status Married		Religion NONE	
	Local Address (Street, Apt. Number) 10374 Canoe Brook Cir, Boca Raton, FL 33498				Phone (786) 367-0859		Residence Type: 1. City 2. County 3. Florida 4. Out of State 2	
	Permanent Address (Street, Apt. Number) SAME,				Phone ()		Address Source VERBAL / VICTIM	
	Business Address (Name, Street) ()				Phone ()		Occupation AGENT	
	DL Number, State V241879662840, FL		Soc. Sec. Number ()		INS Number ()		Place of Birth (City, State) BULGARIA	
	Citizenship US							
CO-DEF	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
JUVENILE	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other Name (Last, First, Middle) ()							
	Address (Street, Apt. Number) ()				City ()		State ()	
	Notified by (Name) ()				Date ()		Residence Phone ()	
	Released To (Name) ()				Relationship ()		Date ()	
CHARGE	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 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by (Name) <input type="checkbox"/> No (Reason)							
	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 DOMESTIC BATTERY				Counts 1	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 784.03 (1A1)	
	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	
	Drug Activity				Drug Type	Amount / Unit N/A	Offense # 22033274	Warrant / Capias Number
	Bond							
NOTICE TO APPEAR	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 02/06/2022							
	Signature of Defendant (or Juvenile and Parent / Custodian)				Date Signed			
	HOLD for other Agency Name: <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other				Signature of Arresting Officer D/S K. MOSS Name of Arresting Officer (Print) D/S K. MOSS I.D. # 9195			
	Transporting Officer D/S K. MOSS I.D. # 9195				Agency PBSO			
	Name Verification (Printed by Arrestee) ()				PAGE 1			
	Witness here if subject signs with an							
	DISTRIBUTION: WHITE - COURT COPY				GREEN - STATE ATTORNEY			
	YELLOW - AGENCY				PINK - AGENCY			

FEB 07 2022

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- 22033274						
	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) Vasilev, Venelin, Z				Alias		Race W	Sex M	Date of Birth 8/4/1966		
	Charge Description DOMESTIC BATTERY				784.03 (1A1)		Charge Description				
CHARGES	Charge Description						Charge Description				
	Charge Description						Charge Description				
VICTIM	Victim's Name (Last, First, Middle) Vasileva, Kalina, I				Race W		Sex F	Date of Birth 10/09/1965			
	Local Address (Street, Apt. Number) 10374 Canoe Brook Cir, Boca Raton, FL 33498				(City)	(State)	(zip)	Phone (561) 414-7344		Address Source FL DL	
	Business Address (Name, Street)				(City)	(State)	(zip)	Phone ()		Occupation HAIR	
<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. 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 type="checkbox"/> was observed by _____ who told _____ 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 6TH day of FEBRUARY 20 22 at 1432 <input type="checkbox"/> A. M. <input checked="" type="checkbox"/> P. M. (Specifically include facts constituting cause for arrest.)</p> <p>On 02/06/2022 at approximately 1406 hours, I was dispatched to 10374 Canoe Brook Circle, the Boca Greens development, unincorporated Boca Raton, Palm Beach County Florida, 33498 in response to a Domestic Battery call. Upon my arrival I met with Kalina Vasileva, the complainant/victim, at a neighbors house located at 10386 Canoe Brook Circle, who stated the following.</p> <p>Kalina stated that she arrived home at 1315 hours this date and her husband, Venelin Vasileva, was drunk and he was arguing with her. Kalina stated that Venelin started to hit and slap her on her left ear, lower back, and left arm. I observed visible redness on Kalina's left arm. Kalina stated she was recording this on her cell phone and she showed me her recording. The cell phone recording showed Venelin at 1344 hours telling Kalina to "Get the fuck out of my house" and swing at her with his left hand and I could hear contact being made.</p> <p>Other responding Deputies made contact with Venelin at his residence where he was placed into handcuffs behind his back and then secured in D/S D. Duttonhoeffer's (#6387) marked patrol vehicle. I attempted to read Venelin his Miranda Rights but he was uncooperative, kept interrupting me, and would not answer any of the Miranda questions.</p> <p>D/S Duttonhoeffer took DART photographs of Venelin and uploaded them to the PBSO Domestic Violence System web-site. Kalina signed a sworn written statement and was given her copy. Kalina was given a copy of the green victims rights brochure and also the Victims Rights and Case Information Form. The PBSO Domestic Violence unit, level 2 response, on-line form was later completed.</p> <p>Based on my investigation, the sworn written statement, and the visible redness on Kalina's arm, Venelin did actually and intentionally, against the will of Kalina touch and strike Kalina contrary to Florida Statute 784.03(1a1). D/S Duttonhoeffer then transported Venelin without incident to the District 7 substation where I completed the proper arrest forms. This case is cleared by arrest.</p>											
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH <div style="display: flex; justify-content: space-between;"> <div> (Signature of Arresting/Investigative Officer) </div> <div>D/S K. MOSS</div> </div>										
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>6th</u> day of <u>February</u> 20 <u>22</u> by <u>D/S K. Moss</u> (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>Known LEO</u>										
	 Notary Public, Clerk of Court, Officer (F.S.S. 117.10)										
	<div style="border: 2px solid black; padding: 5px; display: inline-block;"> SCANNED FEB 07 2022 1 OF 1 </div>										

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

Suspect: Vasilev, Venelin, Z DOB: 8/4/1966 Case #: 22033274

Victim: Vasileva, Kalina, I DOB: 10/09/1965 Race: W Sex: F

Relationship between Victim and Defendant: SPOUSE

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

911 Call: ☒ Yes ☐ No Caller: MARIE BRAMLETT

Weapon Used: ☐ Yes ☒ No Type: _____

Witness: ☐ Yes ☒ No Name: _____

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

Injuries: ☐ Yes ☒ No Description: _____

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: UNK

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

First words Victim said when you responded to scene: UNK

Did the Victim contact anyone other than police within an hour of the incident regarding the incident?

☒ Yes ☐ No If yes, name: MARIE BRAMLETT phone (574) 250-8065

Observations of Victim (Physical & Emotional): 8065

☒ Upset ☒ Crying ☒ Fearful ☐ Hysterical ☒ Afraid ☐ Calm ☒ Nervous

☐ Complained of pain ☐ Other _____

Victim Contact Information:

Local Address: 10374 Canoe Brook Cir, Boca Raton, FL 33498

Phone: Home (561) 414-7344 Work () - - Cell () - -

Employer: _____

Name of Relative: MARIE BRAMLETT Phone () - -

Address: 10386 CANOE BROOK CIRCLE, BOCA RATON

VICTIM NOTIFICATION FORM

SUSPECT/OFFENDER:

Vasilev, Venelin, Z

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

- 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.)

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

1. Incident Report #: 22033274 Agency: PBSO
Offense: DOMESTIC BATTERY
Suspect/Offender: Vasilev, Venelin, Z
D.O.B. 8/4/1966 Race: W Sex: M

2. Warrant # (s): _____

3.a. Victim's name: Vasileva, Kalina, I D.O.B. 10/09/1965 Race: W Sex: F
Address: 10374 Canoe Brook Cir
City: Boca Raton, FL 33498
Home #- (561) 414-7344 Work #: 0 Other: _____

b. Victim's next of kin, friend or neighbor: MARIE BRAMLETT
Address: 10386 CANOE BROOK CIRCLE
City: BOCA RATON
Home #: _____ Work #: _____ Other: 574-250-8065

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: Vasileva, Kalina, I

Deputy's Name: D/S K. Moss

I.D.# 9195

Date: 02/06/2022 **SCANNED**



**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 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: 2022003427	Date: 2/7/2022
	Specialist Name/ID: S.Evans/23872

SCANNED
FEB 07 2022