22MM6021AMB

J#0533242

1096

☐ Marsy's Law CVI FL Const Art.1 § 16(b)

ARREST/NOTICE TO APPEAR
Juvenile Referral Report

1 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: **06- 22-091040**

ChargeType: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3 Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Weapon Seized / Type: **2** (1. Yes 2. No)

Multiple Clearance Indicator: **1**

Location of Arrest (Including Name of Business): **10380 FOX TRAIL RD S WPB FL 33411**

Location of Offense (Business Name, Address): **10380 FOX TRAIL RD S WPB FL 33411**

Date of Arrest: 24 01 **07/25/22**

Time of Arrest: **0015**

Booking Date:
Booking Time:
Jail Date:
Jail Time:
Location of Vehicle:

DEFENDANT

Name (Last) (First) (Middle): **RENDON BEDOYA , MARIA ,**

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

Race (W - White I - American Indian B - Black 0- Oriental/Asian): **W**

Sex: **F**

Date of Birth: **03/15/1997**

Height: **5'02"**

Weight: **120**

Eye Color: **BROWN**

Hair Color: **BLACK**

Complexion: **FAIR**

Build: **SMALL**

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

Marital Status:

Religion:

Indication of	Y	N	Unk.
Alcohol Influence	☑	☐	☐
Drug Influence	☐	☑	☐

Local Address (Street, Apt. Number) (City) (State) (Zip): **10324 FOX TRAIL RD S WPB FL 33411**

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 ID**

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

Phone:

Occupation:

D/L Number, State: **R35543975950 /FL**

Soc. Sec. Number: [redacted]

INS Number:

Place of Birth (City State): COLOMBIA.

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 ☐ Other (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 ☐ defendant and / or ☐ 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. ☐ 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. Barbiturate C Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/ Equipment S. Synthetics U. Unknown Z. Other

CHARGE

Charge Description: **Battery (Domestic)**

Counts: **1**

Domestic Violence: ☑ Y ☐ N

Statute Violation Number: **784.03(1a1)**

Violation of ORD #:

Drug Activity: **N**

Drug Type: **N**

Amount / Unit:

Offense #: **22-091040**

Warrant / Capias Number:

Bond:

CHARGE

Charge Description: Counts: Domestic Violence: ☐ Y ☐ N Statute Violation Number: Violation of ORD #:

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

VICTIM NOTIFICATION REQUIRED

CHARGE

Charge Description: Counts: Domestic Violence: ☐ Y ☐ N Statute Violation Number: Violation of ORD #:

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

CHARGE

Charge Description: Counts: Domestic Violence: ☐ Y ☐ N Statute Violation Number: Violation of ORD #:

Drug Activity: Drug Type: Amount / Unit: Offense #: 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

Signature of Defendant (or Juvenile and Parent /Custodian)

Date Signed: **07/25/22**

ADMIN

HOLD for other Agency Name:

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Signature of Arresting Officer: x O. Joseph

Arresting Officer (Print): **D/S O. JOSEPH**

I.D. #: **36169**

Name Verification (Printed by Arrestee) (PRINT):

SCANNED
JUL 25 2022

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

Transporting Officer: **D/S O. JOSEPH** ID #: **3616(**

Agency: **PBSO**

Witness here if subject signed with an -X"

PAGE **1** OF **1**

DISTRIBUTION WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PBSO #0148 REV. 04/22

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- 22-091040

ChargeType: 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
RENDON BEDOYA MARIA		W	F	03/15/1997

CHARGES

Battery (Domestic) 784.03(1a1)	

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
BOCANEGRA CUERVO	W	M	10/25/1999

Local Address (Street Apt. Number) (City) (State) (zip)	Phone	Address Source
10324 FOX TRAIL RD S APT 1104 WPB FL 33411	347-968-4978	VERBAL

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.

☐ confessed to ____________ admitting to the below facts

☐ was observed by ____________ who told ____________ that he/she saw the arrested person commit the below acts.

☒ was found to have commited the below acts, resulting from my (described) investigation.

On the 25 day of JULY 2022 at 0015 ☐ A. M. ☒ P.M. (Specifically include facts constituting cause for arrest.)

PROBABLE CAUSE STATEMENT

☐ **Marsy's Law CVI**
FL Const. Art 1 § 16(b)

On Saturday July 23, 2022, at approximately 2255 hours, I responded to 10324 Fox Trail Rd S, located in unincorporated West Palm Beach, FL, 33411, in reference to an assault complaint.

Upon my arrival, I met with a Hispanic male, later identified as Nicolas Bocanegra Cuervo, identified via his Florida Driver's License. Bocanegra Cuervo informed me he was involved in a dispute with his girlfriend, later identified as Maria Rendon Bedoya. Bocanegra Cuervo further stated Rendon Bedoya scratched him in the face during the argument while intoxicated. Bocanegra Cuervo sustained multiple lacerations to his face. Bocanegra Cuervo and Rendon Bedoya had been drinking together before the dispute.

After my encounter with Bocanegra Cuervo, I met with his girlfriend, Rendon Bedoya. Rendon Bedoya appeared highly intoxicated and had slur speech. Rendon Bedoya admitted to striking Bocanegra Cuervo in the face.

Based on the findings of this investigation, I found probable cause to charge Rendon Bedoya with Battery Domestic per F.S.S 784.03(1) (a) (1)-Battery-The offense of battery occurs when a person-Actually and intentionally touches or strikes another person against the will of the other.

Per Bocanegra Cuervo, Rendon Bedoya has a past alcohol abuse and has been treated in a rehab facility.

This case is cleared by arrest.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH
D/S O. JOSEPH O. Joseph (ID #) 36169
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 25 day of JULY 20__ by D/S O. JOSEPH 36169
(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced PRODUCED FL ID : LEO

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

PAGE 1 OF 1

PBSO #0004 REV. 04/22 DISTRIBUTION WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY

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

Suspect: Name (Last, First, Middle) RENDON BEDOYA MARIA **DOB:** 03/15/1997 **Case #:** 22-091040

Victim: Name (Last, First) BOCANEGRA CUERVO **DOB:** 10/25/1999 **Race:** W **Sex:** M

Relationship between Victim and Defendant:

Photographs: Scene × Yes No Victim Yes No Defendant Yes No

911 Call: Yes × No **Caller:**

Weapon Used: Yes × No **Type:**

Witness: Yes × No **Name:** (Last) (First) (Middle)

Victim Pregnant: Yes × No If yes, weeks months

Injuries: × Yes No **Description:** LACERATIONS TO FACE

Medical Treatment: Yes × No

At Scene: Yes × No **Paramedics:**

At Hospital: Yes × No **Hospital:** **Doctor:**

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:

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

First words Victim said when you responded to scene: SHE'S DRUNK SHE SCRACTH ME IN THE 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: (Last) BOCANEGRA CUERVO (first)

Local Address: ,

Phone: 347-968-4978

Employer: (Name) (Employer Address)

Name of Relative: (Last) (First) **Phone:**

Address:

PBSO #0004A REV 05/11

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**
- **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 #: 22-091040 Agency: PBSO
Offense: Battery (Domestic)
Suspect/Offender: Name (Last) RENDON BEDOYA (First) MARIA (Middle)
D.O.B. 03/15/1997 Race: W Sex: F

2. Warrant #(s):

3.a. Victim's name: Name (Last, First) BOCANEGRA CUERVO D.O.B. 10/25/1999 Race: W Sex: M
Address: 10324 FOX TRAIL RD S APT 1104 WPB FL 33411
City: WPB State: FL Zip: 33411
Home #: 347-968-4978 Work #: Other:

b. Victim's next of kin, friend or neighbor: (Last) (First)
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: Name (Last, First) BOCANEGRA CUERVO
Deputy's Name: D/S O. JOSEPH I.D. # 36169 Date: 07/25/22

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

PBSO #0029A REV. 05/11

SUSPECT/OFFENDER RENDON BEDOYA MARIA
(FOR WARRANTS USE ONLY)
COURT CASE/WARRANT #:

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/FB 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: 2022019024	**Date:** 07/24/2022
	Specialist Name/ID: T.Howard/7185