0536472 22mm9925mB 2604

☒ 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

OBTS Number | 1 | Juvenile: N

ADMINISTRATIVE

Agency ORI Number: FLO 500000
Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE
Agency Report Number: ~~06~~ 22-136234

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

Weapon Seized / Type: 1. Yes 2. No
Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): [redacted]

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
12/05/22	1415					

DEFENDANT

Name (Last)	(First)	(Middle)	Alias (Name, DOB, Soc. Sec. #, Etc.)
Tabish	,Mildred	, F	10/14/1965 , 415061169

Race (W - White I - American Indian B - Black 0- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	1014/1965	5'6	130 lbs	hazel	Brown	Fair	~~fair~~ Med

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description): None
Marital Status: married
Religion: Judaism
Indication of: Alcohol Influence ☐ Y ☒ N ☐ Unk. Drug Influence ☐ Y ☒ N ☐ Unk.

Local Address (Street, Apt. Number, City, State, Zip): [redacted]
Residence Type: 1. City 2. County 3. Florida 4. Out of State | 2

Permanent Address: [redacted] (City) (State) (Zip) Phone
Address Source: FL DL

Business Address (Name, Street) (City) (State) (Zip) Phone
Occupation: Sales and Design

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
T120606658740	[redacted]		Rochester NY	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

VICTIM

Notified by: (Name)	Date	Time	Juvenile Disposition
			1. Handed/ 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	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Simple Battery	1	☒ Y ☐ N	784.03(1A1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N/A	N/a		22-136234		NO BOND

CHARGE

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

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

CHARGE

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

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

CHARGE

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

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) 12/05/22 Date Signed

ADMIN

HOLD for other Agency Name: NO DETAINER
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Signature of Arresting Officer: X [signature] 35677
Arresting Officer (Print): O/S OROZ I.D. # 35677
Transporting Officer: ID # 35677 Agency PBSO

Name Verification (Printed by Arrestee)
(PRINT)
Witness here if subject signed with an -X"

Intake Deputy: DTS HACK 3680 Cell / Pouch #

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

OROZ 35677

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PROBABLE CAUSE AFFIDAVIT

OBTS Number | 1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias | 1 | Juvenile: N

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 22-136234

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
Tabish Mildred F	10/14/1965 , 415061169	W	F	1014/1965

CHARGES

Simple Battery 784.03(1A1)	

VICTIM

Victim's Name (Last, First, Middle) [redacted] | Race [redacted] | Sex [redacted] | Date of Birth

[redacted] | Address Source: OTHER

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 D/S OROZ admitting to the below facts.
☒ was observed by D/S OROZ 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 5th day of Decemeber 2022 at 1415 ☐ 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 12/5/2022 at approximately 1400 hours I was dispatched to [redacted] in unincorporated [redacted] in reference to a domestic dispute/battery (simple). Upon my arrival I made contact with complainant/victim [redacted] who advised the following.

[redacted] stated that he had been in a verbal dispute with his wife Mildred who would not allow him inside the residence due to his "drinking" problem. [redacted] stated that he had gotten home from an outing to which he stated that his wife would not let him inside the residence [redacted] also stated while she was advising him to stay outside in doing so [redacted] stated that his wife Mildred began punching him in the face twice and striking [redacted] on his lower lip. I was able to observe [redacted] lip swollen and blue. I asked [redacted] on scene if he needed medical attention or paramedics to which he declined. On scene I attempted to take photographs of [redacted] lip to which he also declined. [redacted] completed a sworn PBSO written statement and was provide a Victims Domestic Violence Notification form to which he advised he understood and waved Marcy's law.

[redacted] stated several times that he did not want his wife to be in trouble or get arrested to which I advised [redacted] in the State of Florida Domestic battery was not tolerated. While on scene I made contact with Mildred who advised, "Yes I did punch". Mildred advised that she has been having a falling out with [redacted] due to his addiction to alcohol and stated that she had enough as well as not being able to work from home due to his repeated behavior pattern. Mildred advised that [redacted] has been bothering her so that she can complete her job until 1630 hours. Mildred stated that out of anger and frustration is when she reacted and struck him twice in the face with a closed fist.

Mildred was handcuffed double locked and checked for proper spacing. Mildred was then placed in my marked green and white patrol vehicle to which she was transported to the Palm Beach County Jail without incident.

Due to the above affirmative facts I do find probable cause to arrest Mildred Tabish in reference Florida State Statue 784.03(1a1). On scene Stephanie advised she had nothing to say.

This case is cleared by arrest.

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ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH
D/S OROZ (ID #) 35677
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 5th day of Decemeber 20 2022 by D/S OROZ 35677

(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced

9140
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

VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been commited:

- **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 #: **22-136234** Agency: **PBSO**
   Offense: **Simple Battery**
   Suspect/Offender: Name (Last) **Tabish** (First) **Mildred** (Middle) **F**
   D.O.B. **1014/1965** Race: **W** Sex: **F**

2. Warrant # (s): _____

3.a. Victim's name: Name (Last, First) [redacted] D.O.B [redacted] Race: [redacted] Sex: [redacted]
   Address: [redacted]
   City: [redacted]
   Home #: [redacted]

   b. Victim's next of kin, friend or neighbor: (Last) _____ (First) _____
   Address: _____
   City: _____
   Home #: _____

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) [redacted]

Deputy's Name: **D/S OROZ** I.D.# **35677** Date: 12-5-27

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

PBSO 00029A REV. 4199

SUSPECT/OFFENDER: **Tabish** **Mildred** **F** COURT CASE/WARRANT#. _____ **(FOR WARRANTS USE ONLY)**

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PALM BEACH COUNTY SHERIFF'S OFFICE
DOMESTIC VIOLENCE PROBABLE CAUSE SUPPLEMENTAL FORM
(SUBMIT WITH STATE ATTORNEY'S COPY OF PROBABLE CAUSE AFFIDAVIT)

CASE NUMBER: 22-136234

DEFENDANT'S NAME: Mildred Tabish

DEFENDANT'S STATEMENT: ☐ YES ☒ NO (IF YES: ☐ WRITTEN ☐ TAPED ☐ ORAL)

SYNOPSIS: _____

VICTIM'S NAME: [redacted]

VICTIM'S STATEMENTS: ☒ YES ☐ NO (IF YES: ☒ WRITTEN ☐ TAPED ☐ ORAL)

OBSERVATIONS OF VICTIM: (PHYSICAL & EMOTIONAL) upset, shaking

RELATIONSHIP BETWEEN VICTIM AND SUSPECT: husband + wife.

PHOTOGRAPHS: SCENE: ☐ YES ☒ NO VICTIM (S): ☐ YES ☐ NO

911 CALL: ☒ YES ☐ NO WHO CALLED: [redacted]

WEAPON USED: ☒ YES ☐ NO TYPE: hands

MEDICAL TREATMENT: ☐ YES ☒ NO

AT SCENE: ☐ YES ☒ NO PARAMEDICS: _____

AT HOSPITAL: ☐ YES ☒ NO HOSPITAL: _____ PHYSICIAN: _____

ARE CHILDREN LIVING IN HOME: ☐ YES ☒ NO

NAME: _____ DOB: _____

NAME: _____ DOB: _____

NAME: _____ DOB: _____

WAS ACT(S) COMMITED IN PRESENCE OF MINOR(S): ☐ YES ☒ NO (IF YES ☐ SAME AS ABOVE OR SPECIFY)

NAME: _____ DOB: _____

NAME: _____ DOB: _____

NAME: _____ DOB: _____

DCF NOTIFIED: (IF CHILD ABUSE) ☐ YES ☒ NO **VICTIM PREGNANT:** ☐ YES ☒ NO

PRIOR HISTORY OF DOMESTIC VIOLENCE: ☐ YES ☒ NO **ALCOHOL OR DRUGS INVOLVED:** ☐ YES ☒ NO

VIOLATION OF RESTRAINING ORDER: ☐ YES ☒ NO **CASE #:** _____

ALTERNATE VICTIM CONTACT INFORMATION: (IF VICTIM DECIDES TO LEAVE RESIDENCE)

RELATIVE/FRIEND NAME: _____ PHONE: _____

RELATIVE/FRIEND ADDRESS: _____

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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	☒	119.071 (2)(J)	Other: MARSY'S LAW PROTECTED INFORMATION REGARDING VICTIM(S)	1-6
	☒	119.071 (2)(J)	Other: The Victim's address in a Domestic Violence action on petitioner's request.	1-5

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REVIEW COMPLETED BY

Booking Number: 2022031435	**Date:** 12/6/2022
	Specialist Name/ID: M. Tooks #8557