	CSSYYLL 2 23Mm2	250 MB	D# 41, i'
П	OBTS Number ARREST / NOTICE TO Juvenile Referral		Juvenile W
اس	Agency ORI Number Agency Name	Lagency Report Number (N.T.A. signly)	7 5-4
TAKIN	Charge Type. (7) Legipe. 73 Michamagnay (7) 6 Communication (7)	11111/2 and County	Multiple
MINIS	Check as many 2 2 fraffic Felony 2 4. fraffic Misdemeanor 2 Corne Location of Arrest (including Name of Business)		Clearance Indicator
Ψ	13000 Porto Find Cir, 105, PBG, FL 334/8	- 13000 Portofino Cir. 105	PBG, FC 374/5
	Date of Arrest O 4 2 4 2 3 7 1 me of Arrest O 9 Booking Date Booking Time 3	il Date Jail Time Location of Vehicle	
	Name Last First. Middle) Koche, #16 KE	Alfas (Name, DOB, Soc. Sec. #, Etc.	
	Race W- White I - American Indian A Sex Date of Birth Height	Weight Eye Color Hair Color	Complexion Build
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)	Marital Status Religion Indication Alcohol Inf	fluence 🗆 🗀 🕰 📗
DANT	Local Address (Street, Apt. Number) (State (State) (Street, Apt. Number) (State)	(Zio) Mobile Phone Residence	ence Type.
EFEND.	Permanent Address (Stuget, Apt Number) (Qity) (Size	7348 7 = 171 - 321 - Zycopnty (Zip) Phone Address S	3 Florida 4 Out of State
0	13000 Portolino Cir 105, PBG FL	3345 1712 321-2783 D	L
	Business Address (Name Street) (City) (Sta		tavant Manus
	D/L Number. State R 2 0 0 0 1 1 86 70 0 FL Soc Sec Number	INS Number Place of Birth (City, St.	ate) Citizenship
u.	Co-Defendant (Last. First, Middle)	Race Sex Date of Birth 1 1. Arrested 2. At Large	3. Felony 4. Misdemeanor 5. Juvenile
0.00	Co-Delendant (Last, First, Middle)	Race Sex Date of Birth 1 Arrested 2. At Large	3. Felony 4. Misdemeanor
-	Parent Name (Last) (First)	(Middle)	☐ 5. Juvenile Residence Phone
	Legal Custodian Other: Address (Street: Apt. Number) (City)	(State) (Zip)	Business Phone
	en a la francia de la companya de l		()
NIE	Notified by: (Name)		T HRS/DYS arcerated
JVK.	Relation	Iship	Date Time
	The above address was provided bydefendant and / ordefendant's parents. The child and / to keep the Juvenile Court Clerk's Office (Phone (561) 355-6511) informed of any change of address.	or parent was told School Attended	Grade
	☐ Yes. by: (Name) ☐ No (Reason) Property Crime? Description of Property	Value of Property	
130	☐ Yes ☐ No ☐ Drug Activity S. Sell R. Smuggle K. Dispense/ M. Manufacture/ Z. Other	Drug Type B. Barbiturate H. Hallucinogen N. N/A Ç. Cocaine M. Marijuana	P. Paraphernalia/ U. Unknown
CODE	Drug Activity N XA B. Buy Deliver Distribute Produce/ Cultivate Charge Description Charge Description Charge Description Drug Activity S. Sell Deliver Distribute Distribute Distribute Distribute Distribute Counts Domestic	A. Amphetamine E. Heroin O. Opium/Deriv.	Equipment Z. Other S. Synthetic
ABGE	Simple Battery (Domestic) Wellence	N7841103 111XA)(1	(₁)
CHAB	Drug Activity Drug Type Amount / Unit Offense # 23 00 2254	Warrant / Capias Number	Band
i i	Charge Description 1 Counts Domestic	Statute Violation Number	Violation of ORD #
CHARGE	Drug Activity Drug Type Amount / Unit Offense #	Warrant / Capias Number	Bond
<u>_</u>	Charge Description Counts Domestic Violence	Statute Violation Number	Violation of ORD #
CHARGE	Unit Violence Violence	Warrant / Capias Number	Bond
-	Charge Description Counts Domestic	Statute Violation Number	Violation of ORD #
ABGE	Violence Drug Activity Drug Type Amount / Unit Offense #	N Warrant / Capias Number) Bond
3			
	Location (Court, Room Number, Address)	ΦF	TLED PBC - GUN (

A	OBTS Number	PROBABLE CAUS	SE AFFIDAVIT	1. Arrest 2. N.T.A.	3. Reques 4. Reques			JUVENILE V	
D M		ency Name		cy Report Number					
ĭ	FL FL0502600 P								
2	Charge Type: Check as many as apply. 1. Felony 2. Traffic Felony	3. Misdemeanor 5. Ordinance 4. Traffic Misdemeanor 6. Other		Special No	tes:				
DEF	Name (Last, First, Middle) ROCHE, ALI KAI	Alias			Race	Sex F	Date of Birth 06/01/	1986	
¢	Charge Description		Charge Description	·	1 -55-	1 -			
Ä	784.03(1)(A)(1) BATTERY-SIMPLE (TOUCH OR STRIKE)								
GES	Charge Description Charge Description								
S Victim's Name (Last, First, Middle) Race Sex Date of Birth									
V	SULLIVAN, JASEN KENDALI Local Address (Street, Apt. Number)	LJR (City) (State)	(Zip)	Phone	W	M	08/12/:	1984	
C T		5, PALM BEACH GARDENS, FL 33	* **	(772) 321	L-425	- 1	udress Source		
і М	Business Address (Name, Street)	(City) (State)	(Zip)	Phone		_	ccupation		
Ц				<u> </u>	4)	/		
	The undersigned certifies and swears that he The Person taken into custody	ne/she has just and resonable grounds to believe, and d	oes believe that the above	named Defendant co	mmitted t	he follo	wing violation of	law.	
	committed the below acts in my p	presence.	bserved by					who told	
	confessed to							itt the below acts.	
	admitting to the below facts. On the 24 day of Ar	pril,2023 at23:25	ound to have committed		-	-	(described) ii	ivestigation.	
	On the 24 day of At	2023 at 23.23	(Specifically include fai	cts constituting car	use ioi a	irrest.)			
	On April 24, 2023, at	t approximately 2135 hour	s, I was dis	patched to	5 130	000~	105 Por	tofino	
		On April 24, 2023, at approximately 2135 hours, I was dispatched to 13000-105 Portofino Cir Palm Beach Gardens FL in reference to a disturbance. Upon arrival I activated my							
		dy worn camera and was ap							
P	and roommate of Jasen	n Sullivan. Frost stated	that Sulliva	n needed t	to be	e ba	ker act	ed.	
0	When Frost was asked	if anything physical hap	pened in the	home betw	veen	Sul	livan a	nd	
В	Sullivans wife, Ali Roche, he stated "yea you`ll see when you see his shirt".						}		
В							\		
L	l .	· ·	_					ľ	
	l .	Sullivan are married and							
С	and Frost all live together. Roche stated Sullivan was having a bipolar episode, he was yelling and throwing things inside, stating he needed to be baker acted again. Roche								
A U	advised Sullivan was inside the residence and there was a broken glass from a vase on								
S	the floor by the from	the floor by the front door.							
E									
s	I entered the residence and announced my presence. I observed the broken vase on the						I		
T	tile floor just inside the front door. Sullivan was not located in the living room or bedroom. I continued to call out to Sullivan and he advised he was in the walk-in closet. Sullivan was given commands to exit the closet and he complied. When Sullivan exited the closet, he sat on the bed, and I observed his blue long sleeve shirt was					1			
т									
E M									
E	ripped from the left side of the collar approximately four inches down towards the						i i		
T	shoulder. I also observed superficial red scratch marks on the back right side of his							1	
	neck.								
								_	
		by his Florida driver`s							
	up and exited his bedroom to get a drink of water in the kitchen. Sullivan advised upon							_	
	_	ng the room his wife, Roche was in the living room and began yelling at him for an wn reason. Sullivan stated he began walking towards the front door to go outside							
		. Sullivan stated Roche f	_				_	1	
Ą	SWORN AND SUBSCRIBED BEFOREME	M211	//		-> _		->		
2-2-0-E	1 4/1/	MC316							
N I g	NOTARY PUBLIC / CLERK OF COUR			ARRESTING / INVE		NG OFF	-ICER		
T R	NOTANT FOBLIG / GLERK OF GOOF		LUSCA\	ICH, KATLY	N (<u>513)</u>		ļ	
A T	04/24/20)23	NAME	OF OFFICER (PLEA		• 1:]		PAGE	
V E				04/24/2023 DATE	5			1 of 2	

COURT

	OBTS Number		PR	OBABLE CAUS		•		t. Arrest	3. Request			JUVEN	WE
Α				SUPPLEN	IENT			2. N.T.A.	4. Request	for Capia	is 1	30421	
D M	Agency ORI Number	Agency Name					Report N	lumber					1
1	FL FL0502600	Palm B	each Garden	s Police Dep	partment	7	8	<i>23-00</i>					
N	Charge Type:			5. Ordinance				Special No	otes:				
	as apply 2. Traffic Felony Name (Last, First, Middle)	4. Tra	affic Misdemeanor	6 Other				J	[n]	0	Date of Birth		
E				Alias					Race	Sex F		/1006	
F	ROCHE, ALI KAI										06/01		
	continued to yell a			_									
	Roche grabbed him b	_			_								
1	he was hit in the b			-				_	_			of h	is
	neck. Sullivan was												Ì
	left-handed. Sulliv												
	Roche. Sullivan sta										W		į
	threw the flower va		•	•		_					_1		
	Sullivan if he had	_		-	-								ide
	of his left elbow a							_		/		_	•
	button. Sullivan co												1
	abrasions. Sullivan			attention	. Sullivan	wa	s a	lso e	valua	ted	for a	Baker	r
	Act and did not mee	t the	criteria.										
_		_			_		. ()		_			
R	I then spoke to Roc												
0	!									ed s	shirt.	When	
B.	asked if Sullivan h	ad any	thing else	to add she	e stated n	10 S	he o	did n	ot.				l
В			: -			:	/	1	_4_4	1			
E	I then spoke to Fro												
	tell me the truth. I explained to Frost the severity of the situation and that he could												
С	be charged with obstruction, and he stated he would tell the truth. Frost stated, he would not answer any questions to incriminate his "sister" and that I was smart enough												
A				ICI IMITIA CE	1113 3130		an	u cha	C 1 W	45 .	smarc e	mougi	1
s	and could put two and two together.												
E	At this time, I find probable cause to charge Ali Roche Domestic Battery FSS												
s	784.03(1)(A)(1). Roche was transported to Palm Beach County jail without incident.												
T	Į.		•										j
A T	1			λ									
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A	SWORN AND SUBSCRIBED BEFORE	A 11.	271		1.	-						>	
M	1811	11.	5/6)		1050		l
2 - Z	NOTARY PUBLIC / CLERK OF C	PAUL'D J	R	-	SIGNATUR	RE OF A	KKEST	ING / INVE	SUGATI	UFF!	ICER		ļ
S T	NO FARY PUBLIC / CLERK OF C	JUUKT / OFFI	UEK (F.S.S. 117,10)					KATLY		<u>513)</u>			
A	04/24			_	1			ICER (PLE		T)		F	PAGE
Z-STRAT->E	DA	ATE				(04/2	4/202	3				2 of 2
Ε	1							DATE				Į.	

STATE ATTORNEY

CENTRAL RECORDS

JAIL

SUSPECT/OFFENDER:

(FOR WARRANTS USE ONLY)

VICTIM NOTIFICATION FORM

This form must be filled out in a case involving one of the following crimes:

- **Homicide** (Ch. 782)

- Sexual Offense (Ch. 794)

- Attempted Murder

- Attempted Sexual Offense

- Stalking (S. 784.048)

White-Warrants Division

- **Domestic Violence** - (This includes any assault, agg. assault, battery, agg. battery, sexual assault, sexual battery, stalking, agg. 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.

Incident Repo	ort #: <u>23-00</u> Agency	PBISTI
Offense: Do	nder: Ali Roche	
Suspect/Offe	nder: Ali Roche	
D.O.B. <u>(م)</u>	/1986 Race: W	Sex:
Warrant #(s):		
Complete on	e (1) of the following:	
a. Victim's nam	10: Jasen K Sullivar 000 Portofino Cir. #	7/05
City: PB	State: FC State:	Zip: 334/8
Home #:	72-321-42Work#:	Other:
b. Victim's nex	t of kin:	
Address:		
City:	State:	Zip:
•		
Home #: c. Victim's desi	Work #:gnated contact other than next of kin	Other:(for example: a friend or
Home #: c. Victim's desi neighbor): Name: Address:	gnated contact other than next of kin	(for example: a friend or
Home #: c. Victim's desi neighbor): Name: Address: City:	gnated contact other than next of kin	(for example: a friend or
Home #: c. Victim's desi neighbor): Name: Address: City:	gnated contact other than next of kin	(for example: a friend or
Home #: c. Victim's desi neighbor): Name: Address: City: Home #:	gnated contact other than next of kin	(for example: a friend or Zip:Other:
Home #: c. Victim's desineighbor): Name: Address: City: Home #: Relevant iden	gnated contact other than next of kin of the state: State: Work #: attification or case numbers assigned to	Zip:Other:othe case (please specify):
c. Victim's desi neighbor): Name:Address:City:Home #:Relevant iden	gnated contact other than next of kin of the state: State:Work #:stification or case numbers assigned to the state of the state of kin	Zip:Other:Othe case (please specify):
CAIVER: I CHOOS	gnated contact other than next of kin of the state: State: Work #: attification or case numbers assigned to the state of the state	Zip:Other:Other specify): TIM NOTIFICATION MY RIGHT TO BE
CAIVER: I CHOOS	gnated contact other than next of kin of the state: State:Work #:stification or case numbers assigned to the state of the state of kin	Zip:Other:Other specify): TIM NOTIFICATION MY RIGHT TO BE
C. Victim's desineighbor): Name:Address:City:Home #:Relevant identification. AIVER: I CHOOSE ORM, AND UNDER OTIFIED OF THE	gnated contact other than next of kin of the state: State:Work #: stification or case numbers assigned to the state of the suspect of the sus	Zip:Other:Other specify): TIM NOTIFICATION MY RIGHT TO BE ENDER.
c. Victim's desineighbor): Name:Address:City:Home #: Relevant ident VAIVER: I CHOOSORM, AND UNDER OTIFIED OF THE	gnated contact other than next of kin of the state: State: Work #: attification or case numbers assigned to the state of the state	Zip:Other:Other specify): TIM NOTIFICATION MY RIGHT TO BE ENDER.

Yellow-Corrections or State Attorney (Warrant Application)

Pink-Central Records



Palm Beach County Sheriff's Office - Arrests Only

	х	Florida State Statute	Description	Page Number(s)
		119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
tions		943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
L/E Exemptions		119.071(4)(c)	Undercover personnel.	
L/E E		119.071(2)(f)	Confidential informants (CIs).	
		119.071(2)(e)	Confession.	
su		985.04(1)	Juvenile offender records.	
mptio		119.071(h)(i)	Assets of a crime victim.	
fo. Exe		395.3025(7)(a), 456.057(7)(a)	Medical information.	
Public Info. Exemptions		394.4615(7)	Mental health information.	
<u>a</u>		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.	
	×	(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.	
of 23)		(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
(Rule		(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)				
I Administr				
es of Judicia				
Florida Rule				
ية		7	Other:	
Other		Y	Other:	

REVIEW COMPLETED BY

Booking Number: 2023010723	Date: 4/25/2023					
BOOKING Number: 2023010723	Specialist Name/ID: M. Tooks #8557					