

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 FL 0500300		Agency Name BOYNTON BEACH POLICE DEPT.				Agency Report Number 34-24-004597															
Charge Type: Check as many as Apply.		☐ 1. Felony ☐ 2. Traffic Felony		☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		If Weapon Seized Enter Type		Multiple Clearance Indicator											
Location of Arrest (Including Name of Business) 605 SEALOFTS DR Apt 406 BOYNTON BEACH, FL 33426						Location of Offense (Business Name, Address) 605 SEALOFTS DR APT 406 BOYNTON BEACH, FL 33426															
Date of Arrest 3/20/2024		Time of Arrest 0228		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle									
Name (Last, First, Middle) DIPALMA, ALIYAH MARIE																					
W - White B - Black		I - American Indian O - Oriental / Asian		Race W F		Sex M F		Date of Birth 04/17/2001		Height 5'3"		Weight 100									
Eye Color brown		Hair Color brown		Complexion light		Build small															
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status single		Religion christian		Indication of: Alcohol Influence ☐ ☐ ☐ Drug Influence ☐ ☐ ☐											
Local Address (Street, Apt. Number) 605 SEALOFTS DR Apt 406				(City) BOYNTON BEACH		(State) FL		(Zip) 33426		Phone (352) 442-8011		Residence Type 1. City 3. Florida 2. County 4. Out of State									
Permanent Address (Street, Apt. Number)				(City)		(State)		(Zip)		Phone		Address Source verbal									
Business Address (Street, Apt. Number)				(City)		(State)		(Zip)		Phone		Occupation none									
D/L Number, State D145013016370, FL				Soc. Sec. Number		INS Number		Place of Birth Dunedin, Florida		Citizenship yes											
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile ☐ 2. At Large ☐ 4. Misdemeanor											
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile ☐ 2. At Large ☐ 4. Misdemeanor											
☐ Parent ☐ Legal Custodian ☐ Other				Name (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 was provided by ☐ defendant and/or ☐ defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 561-355-2526) informed of any change of address: ☐ Yes, By: (Name) ☐ No: (Reason)										School Attended			Grade								
Property Crime? Yes ☐ No ☐				Description of Property						Value of Property											
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. Barbituate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetic		U. Unknown Z. Other	
Charge Description BATTERY - TOUCH OR STRIKE 784.03(1a1)				Counts 1		Domestic Violence ☒ Yes ☐ No		Statute Violation Number 784.03(1a1)		Violation of ORD#											
Drug Activity				Drug Type		Amount/Unit		Offense # 24-004597		Warrant/Capias Number		Bond									
Charge Description				Counts		Domestic Violence ☐ Yes ☐ No		Statute Violation Number		Violation of ORD#											
Drug Activity				Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond									
Charge Description				Counts		Domestic Violence ☐ Yes ☐ No		Statute Violation Number		Violation of ORD#											
Drug Activity				Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond									
Charge Description				Counts		Domestic Violence ☐ Yes ☐ No		Statute Violation Number		Violation of ORD#											
Drug Activity				Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond									
Charge Description				Counts		Domestic Violence ☐ Yes ☐ No		Statute Violation Number		Violation of ORD#											
Drug Activity				Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond									
Instruction No. 1 Mandatory Appearance in Court				Location (Court, Room Number, Address) South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444																	
Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side.				Court Date and Time Month Day Year Time ☐ A.M. ☐ P.M.																	
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								
HOLD for other Agency Name:				Signature of Arresting Officer OFC S. Burke				Name Verification (Printed by Arrestee) (PRINT)				Page 1 OF 1									
☐ Dangerous ☐ Suicidal				☐ Resisted Arrest ☐ Other:				Name of Arresting Officer (Print) OFC M. Hernandez				I.D. # 1152									
Intake Deputy B. Burke				I.D. # 18302				Pouch #				Transporting Officer OFC M. Hernandez									
								I.D. # 1136				Agency BBPD									
Witness here is subject Signed with an "X".																					



DOMESTIC VIOLENCE PROBABLE CAUSE AFFIDAVIT
PALM BEACH COUNTY



On the 20 day of March 2024 at 0200

Subject: DIPALMA, ALIYAH MARIE DOB: 04/17/2001 Case #: 34-24-004597

Charge Description: BATTERY - TOUCH OR STRIKE | 784.03(1a1)

Charge Description: Statute #: 784.03(1a1)

Victim: AXEL DANIEL WISNIEWSKI MEN DOB: 07/25/1998 Race: W Sex: M

Local Address: [REDACTED]

Personal Contact: [REDACTED]

Defendant's Statement: Taped Victim's Statement: Taped

Observation Of Victim (Physical and Emotional):

upset

Relationship Between Victim and Suspect:

dating for 4 years and living together

Narrative:

On Wednesday, March 20th, 2024, at approximately 0204 hours, I responded to [REDACTED] in reference to a domestic dispute.

Upon arrival, I met with W/F Aliyah Marie Dipalma (DOB 04/17/2001) who stated that her live-in boyfriend of 4 years W/M Axel Mendoza (DOB 07/25/1998) came home from Mexico and went through her phone. Dipalma stated that Mendoza woke her up yelling at her. Dipalma stated that the argument was strictly verbal. I inspected Dipalma for signs of physical altercation which yielded negative results. Photos of Dipalma were taken via BWC.

Officers then spoke with Mendoza who stated that he came home and found out that Dipalma was cheating on him. Mendoza stated that an argument had occurred between the two. I then inspected Mendoza for signs of a physical altercation which yielded red scratch-like marks on the left side of his neck. I then inquired how the red marks happened and Mendoza stated that Dipalma had punched him in the neck. Photos of Mendoza were taken BWC.

Based on the aforementioned, I find probable cause to charge and arrest Aliyah Marie Dipalma with 1 count of Simple Battery (Domestic Violence) pursuant to FSS 784.03.1A1.

Once Mendoza realized that Dipalma was going to be arrested, Mendoza tried to take back that Dipalma had hit him and said that she had just scratched him. Mendoza then said that she did not touch him.

Once Dipalma was under arrest she then stated that Mendoza had thrown the phone at her. I then inspected Dipalma again for any signs of injury which yielded negative results.

BWC activated.

Photographs: Scene: ☒ Yes ☐ No
Victim: ☒ Yes ☐ No
911 Call: ☒ Yes ☐ No Caller: _____
Tape Requested: ☒ Yes ☐ No
Weapon Used: ☐ Yes ☒ No Type: _____
Witnesses: ☐ Yes ☒ No
Injuries: ☒ Yes ☐ No
Medical Treatment: ☐ Yes ☒ No
At Scene ☐ Yes ☒ No Paramedics: _____
At Hospital ☐ Yes ☒ No Physician(s): _____
Hospital: _____

Act Committed In Presence Of Minor(s): ☐ Yes ☒ No
Name: _____ Age: _____
Name: _____ Age: _____
F.D.C.F. Notified: ☐ Yes ☒ No Victim Pregnant: ☐ Yes ☒ No
Violation Of Restraining Order: ☐ Yes ☒ No Case #: _____
Prior History Of Domestic Violence: ☐ Yes ☒ No
Alcohol Or Drugs Involved: ☐ Yes ☐ No ☒ Unknown

Victim Contact Information:

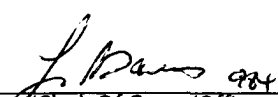
Phone Home: [REDACTED] Work: _____
Employer: _____
Relative Name: _____ Phone: _____
Address: _____
City/State: _____

State Of Florida
County Of Palm Beach

Appeared before me, OFC S. Burke, (print name) personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.


Signature Of Arresting Officer

Sworn to and subscribed to me before this 20th day of March 2024


Notary Clerk Of Court/Officer (F.S.S. 117 10)

VICTIM NOTIFICATION FORM

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

-Homicide (Ch.782)
-Attempted Murder
-Stalking (S.784.084)

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

-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 dwelling)

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

1. Incident Report# 34 - 24-004597 Agency: Boynton Beach Police Department
Offense: BATTERY - TOUCH OR STRIKE | 784.03(1a1)
Offense: _____
Suspect/Offender: DIPALMA, ALIYAH, MARIE
D.O.B.: 00/17/2001 Race: Whit Sex: Fem

2. Warrant # (s): _____

3. Complete one (1) of the following:

a. Victim's Name: AXEL DANIEL WISNIEWSKI MENDOZA
Add: _____
City: _____ State: _____ ZIP: _____
Home: _____ Work Phone #: _____ Other: _____

b. Victim's Next of kin: _____
Address: _____
City: _____ State: _____ ZIP: _____
Home phone #: _____ Work Phone #: _____ Other: _____

c. Victim's designated contact other than next of kin: (for example friend or neighbor):
Name: _____
Address: _____
City: _____ State: _____ ZIP: _____
Home phone #: _____ Work Phone #: _____ Other: _____

4. Relevant identification or case numbers assigned to the case (please specify): _____

WAIVER: I CHOOSE NOT TO COMPLETE THIS VICTIM NOTIFICATION FORM, AND UNDERSTAND THAT I AM WAIVING MY RIGHT TO BE NOTIFIED OF THE RELEASE OF THE SUSPECT/OFFENDER.

Signature of Victim: _____

Printed name of Victim: AXEL DANIEL WISNIEWSKI MENDOZA

Officers Name: OFC S. Burke I.D.#: 1136 Date: 3/20/2024

SUSPECT/OFFENDER:

COURT CASE/ WARRANT #:
(FOR WARRANTS USE ONLY)



Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☐	119.071(2)(e)	Confession	
Public Info. Exemptions	☐	FL Const. Art. I, s. 16(b)(5)	Marsy's Law – victim information shall be redacted. The term "victim" also includes the victim's lawful representative, the parent or guardian of a minor, or the next of kin of a homicide victim. The term "victim" does not include the accused (ref. page 99 of the CRTM for additional information)	
	☐	119.071(2)(j)	Home/employment telephone number, home/employment address, or personal assets of a person who has been the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence	
	☐	119.0712(2)	Personal information contained in a motor vehicle record	
	☐	316.650(11)	Driver information contained in a uniform traffic citation	
	☐	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
Florida Rules of Judicial Administration 2.420	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	☐	(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	☐			
	☐			
	☐			
	☐			

REVIEW COMPLETED BY

Booking Number: 2024007509	Date: 3/20/2024
	Specialist Name/ID#: MTooks #8557