

24MM-1412ANB

ARREST / NOTICE TO APPEAR

1. Arrest	3. Request for Warrant	1	JUVENILE
2. N.T.A.	4. Request for Capias		

OBTs Number	Agency ORI Number <b>0501700</b>	Agency Name <b>Jupiter Police Department</b>	Agency Report Number (N.T.A.'s only) <b>514 24-000691</b>
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	If Weapon Seized Enter Type <b>UNARMED</b>		Multiple Clearance Indicator
Location of Arrest (Including Name of Business) <b>1200 TOWN CENTER DR #101 Jupiter FL 33458</b>		Location of Offense (Business Name, Address) <b>1200 TOWN CENTER DR 110, JUPITER, FL 33458</b>	
Date of Arrest <b>02/18/2024</b>	Time of Arrest <b>03:14</b>	Booking Date <b>02/18/2024</b>	Booking Time <b>03:24</b>

Name (Last, First, Middle) <b>SISTI, ASHLEIGH KAY</b>		Alias (Name, DOB, Soc. Sec. #, Etc.)	
Race W - White B - Black O - Oriental/Asian <b>W</b>	Sex <b>F</b>	Date of Birth <b>11/06/1999</b>	Height <b>5'00</b>
Weight <b>125</b>	Eye Color <b>BROWN</b>	Hair Color <b>BLONDE /</b>	Complexion <b>FAIR</b>
Build <b>SMALL</b>	Marital Status <b>S</b>	Religion <b>CATHOLIC</b>	Indication of Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>
Local Address (Street, Apt. Number) (City) (State) (Zip) <b>1351 NE 170TH AVE, WILLISTON, FL 32696</b>		Phone <b>(352) 239-5099</b>	Residence Type: 1. City 3. Florida 2. County 4. Out of State <b>3</b>
Permanent Address (Street, Apt. Number) (City) (State) (Zip) <b>1351 NE 170TH AVE, WILLISTON, FL 32696</b>		Phone <b>(352) 239-5099</b>	Address Source <b>VERBAL</b>
Business Address (Name, Street) (City) (State) (Zip)		Phone	Occupation
D/L Number, State <b>S230011999060 / FL</b>	Soc. Sec. Number	INS Number	Place of Birth (City, State) <b>PORT SAINT LUCIE, FL US</b>

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
Parent <input type="checkbox"/> Other: _____ Name (Last, First, Middle)		Residence Phone				
Legal Custodian <input type="checkbox"/> Address (Street, Apt. Number) (City) (State) (Zip)		Business Phone				
Notified by: (Name)	Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated			
Released To: (Name)	Relationship	Date	Time			
The above address was 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's Office (Phone 355-2526) informed of any change of address.			School Attended	Grade		
<input type="checkbox"/> Yes, by: _____ <input type="checkbox"/> No: _____		Property Crime? <input type="checkbox"/> Yes <input checked="" 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. Disperse/ 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. Synthetic	U. Unknown Z. Other
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Charge Description <b>BATTERY-SIMPLE (TOUCH OR STRIKE)</b>	Statute Violation Number <b>784.03(1)(A)(1)</b>	Violation of ORD #
Drug Activity	Drug Type <b>N</b>	Amount / Unit <b>/</b>
Offense #	Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Warrant / Capias Number	Bond	

Health / Apparent Physical Condition of Defendant	Any knowledge of the following: Explain: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond	<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health
Transported By	PROPERTY - Received By
Date Transported	Time Transported

<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court	Location (Court, Room) <b>North County</b>
<input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.	Court Date and Time <b>March 20th, 2024, 0830</b>
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.	FILED FBC - GUN CLUB - <b>'24 FEB 18 AM 8:05</b>
Signature of Defendant (or Juvenile and Parent/Custodian)	Date Signed

HOLD for Other Agency	Signature of Arresting Officer <b>William Maldonado</b>	Name Verification (Printed by Arrestee) <b>MALDONADO, WILLIAM</b>
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other	I.D. # <b>1263</b>
Intake Deputy <b>Bouke</b>	I.D. # <b>1542</b>	Pouch #
Transporting Officer <b>MALDONADO</b>	I.D. # <b>1263</b>	Agency <b>JPD</b>
Witness here if subject signed with an "X":		Page <b>1 OF 1</b>

COURT  STATE ATTORNEY  AGENCY  CENTRAL RECORDS  JAIL  CRIME ANALYSIS  P. I. O.  DEFENDANT

3547 75

1412

PROBABLE CAUSE AFFIDAVIT

1. Arrest  
2. N.T.A.  
3. Request for Warrant  
4. Request for Capias

**1** JUVENILE

OBTS Number	Agency ORI Number <b>FL 0501700</b>		Agency Name <b>JUPITER POLICE DEPARTMENT</b>	Agency Report Number <b>5   4   24-000691</b>
Charge Type: <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other				Special Notes:

Name (Last, First, Middle) <b>SISTI, ASHLEIGH KAY</b>	Alias	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>11/06/1999</b>
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Charge Description <b>784.03(1)(A)(1) BATTERY-SIMPLE (TOUCH OR STRIKE)</b>	Charge Description
Charge Description	Charge Description

Victim's Name (Last, First, Middle) <b>TEAGUE, HUNTER WYATT</b>	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>04/11/1999</b>
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Local Address (Street, Apt. Number) <b>8472 159TH CT N, WEST PALM BEACH, FL 33418</b>	(City)	(State)	(Zip)	Phone <b>(561) 603-9797</b>	Address Source
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Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation
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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.     was observed by \_\_\_\_\_ who told \_\_\_\_\_ that he/she saw the arrested person commit the below acts.

confessed to \_\_\_\_\_ admitting to the below facts.     was found to have committed the below acts, resulting from my (described) investigation.


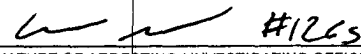
On the **18** day of **February**, **2024** at **02:24** (Specifically include facts constituting cause for arrest.)

On February 18th, 2024, at approximately 0124 hours, I responded to 1200 Town Center Drive #110 in reference to a battery.

I met with Hunter W. Teague, DOB (04/11/1999). I immediately observed bruising to Teague's left eye. Teague provided the following sworn statement: Hunter was outside of the aforementioned address standing outside of his vehicle, a Ford Truck bearing FL tag - QBMT29. Teague observed an unknown female to him, later identified as Ashleigh K. Sisti (W/F DOB: 11/06/1999) throw an alcoholic beverage at his vehicle. Teague confronted Sisti regarding the alcoholic beverage being thrown at his vehicle. Sisti subsequently punched Teague in the face with a closed fist. Teague advised she then fled the incident and was last seen near 1203 Town Center Dr #101 (Jumby Bay Island Grill). Teague denied medical attention on scene. Teague described the female as a short white female, with blonde hair, wearing a red/pink dress, and black boots. Teague desires to prosecute for the battery. Photographs of his injuries were photographed and uploaded into evidence.com.

I arrived at 1203 Town Center Dr #101 (Jumby Bay Island Grill). I observed a female matching the aforementioned description provided by Teague sitting at the bar area. The female was identified as Ashleigh K. Sisti (W/F DOB: 11/06/1999). Upon meeting with Sisti, I could smell the strong odor of alcohol emanating from her breath. Sisti provided the following statement: Sisti was involved in an argument with her boyfriend. Sisti advised she grabbed her boyfriend's alcoholic beverage and threw it. Further, Sisti admitted that although it is a "blur" to her, a physical fight did break out between her and Teague regarding the beverage hitting his vehicle. Sisti advised she did punch Teague. Sisti did not have any visible injury to her.

At 0143 hours, a show up was conducted with Teague to confirm a positive identification

SWORN AND SUBSCRIBED BEFORE ME  <b>BRANDT, NICKOLAS</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <b>02/18/2024</b> DATE	 #1263 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <b>MALDONADO, WILLIAM (1263)</b> NAME OF OFFICER (PLEASE PRINT) <b>02/18/2024</b> DATE
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PROBABLE CAUSE AFFIDAVIT  
SUPPLEMENT

1 Arrest 3 Request for Warrant  
2 N.T.A. 4 Request for Capias **1** JUVENILE

OBTS Number	Agency ORI Number <b>FL 0501700</b>		Agency Name <b>JUPITER POLICE DEPARTMENT</b>	Agency Report Number <b>5   4   24-000691</b>
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Charge Type: Check as many as apply.  
 1. Felony  3. Misdemeanor  5. Ordinance  
 2. Traffic Felony  4. Traffic Misdemeanor  6. Other

Name (Last, First, Middle) <b>SISTI, ASHLEIGH KAY</b>	Alias	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>11/06/1999</b>
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for Sisti. At 0145 hours, a positive identification was made.

Based on the aforementioned statements, events, visible injury and totality of circumstances, probable cause exists to charge Ashleigh K. Sisti with Simple Battery contrary to FSS 784.03(1) (A) (1). She was placed into handcuffs which were double locked and checked for proper spacing and transported to our agency temporary holding cell for the proper paperwork to be completed. Post Miranda, Sisti exercised her right to not speak with me further. She was then transported to the Palm Beach County Jail without incident. The above statements and events were captured on my agency issued BWC and should not be purported to be verbatim.

NOT A CERTIFIED COPY

SWORN AND SUBSCRIBED BEFORE ME  <b>BRANDT, NICKOLAS</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <b>02/18/2024</b> DATE	 #1265 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <b>MALDONADO, WILLIAM (1263)</b> NAME OF OFFICER (PLEASE PRINT) <b>02/18/2024</b> DATE	PAGE <b>2 OF 2</b>
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# Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel	
	<input type="checkbox"/>	119.071(2)(e)	Confession	
Public Info. Exemptions	<input type="checkbox"/>	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)	
	<input type="checkbox"/>	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	
	<input type="checkbox"/>	119.0712(2)	Personal information contained in a motor vehicle record	
	<input type="checkbox"/>	316.650(11)	Driver information contained in a uniform traffic citation	
	<input type="checkbox"/>	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	<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"/>	(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"/>			
Other	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			

**REVIEW COMPLETED BY**

<b>Booking Number:</b> 2024004515	<b>Date:</b> 2/18/2024
	<b>Specialist Name/ID#:</b> MTooks #8557