0497969 (NH) 2967

OBTS Number

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Juvenile

Agency ORI Number	Agency Name	Agency Report Number
FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERRIF'S OFFICE	06 18070194

Charge Type: Check as many as apply — [ ] 1. Felony [ ] 2. Traffic Felony [X] 3. Misdemeanor [ ] 4. Traffic Misdemeanor [ ] 5. Ordinance [ ] 6. Other

If Weapon Seized — Enter Type: None

Multiple Clearance Indicator: 0 1

Location of Arrest (Including Name of Business)		Location of Offense (Including Name of Business)	
5067 MADISON RD	Delray Beach,FL,33484	5067 MADISON RD	Delray Beach,FL,33484

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
May 3, 2018	1901					

Name (Last, First, Middle)			Alias (Name, DOB, Soc. Sec. #, Etc.)
SCHLISSEL	Alexis	Nicole	

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	06/04/1992	5'1	141	Brown	Brown	white	small

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)	Marital Status	Religion	Indication of:	Y	N	Unk
Neck of female symbol on neck	single	Jewish	Alcohol Influence		X	
			Drug Influence		X	

Local Address (Street, Apt. Number)	City	State	Zip	Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State
5067 MADISON RD	Delray Beach	FL	33484	(561) 507-6014	2

Permanent Address (Street, Apt. Number)	City	State	Zip	Phone	Address Source
5067 MADISON RD	Delray Beach	FL	33484	(561) 507-6014	DL

Business Address (Street, Apt. Number)	City	State	Zip	Phone	Occupation
					Big Lots sales person

D/L Number, State	Social Security Number	INS Number	Place of Birth	Citizenship
S-424-621-92-704-0	[redacted]		Nassua County, New Yo[illegible]	USA

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

Parent / Legal Guardian / Other — Name (Last, First, Middle)	Phone

Address (Street, Apt. No.)	City	State	Zip	Business Phone

1-NO Bond

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 address change
[ ] Yes, by: (Name) [ ] No: (Reason)

School Attended	Grade

Property Crime?	Description of Property	Value of Property
[ ] Yes [X] No		

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, P. Paraphernalia/ Equipment, U. Unknown, Z. Other

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation or ORD. #
Simple Domestic Battery	1	[X] Y [ ] N	784.03(1)(a)(1)	

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
n	n		18070194		

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation or ORD. #
	1	[ ] Y [X] N		

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

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation or ORD. #
		[ ] Y [ ] N		

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

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation or ORD. #
		[ ] Y [ ] N		

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

Location (Court, Address, Room Number)

Court Date and Time

Month Day Year Time AM [ ] PM [ ]

I AGREE TO APPEAR AT THE ABOVE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT I SHOULD WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS **NOTICE TO APPEAR**, THAT I MAY HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian) Date Signed

2018 MAY -4 PM 5:24

HOLD for Other Agency — Name

[ ] Dangerous [ ] Resisted Arrest [ ] Suicidal [ ] Other

Signature of Arresting Officer

Name of Arresting Officer: DS A.Carseni — ID #: 25545

Name Verification (Printed by Arrestee) (PRINT)

Maker Deputy: DS Donnie 8033 — ID # — Pouch #

Transporting Officer: DS John Orozco 8057 — ID # — Agency: PBSO

Witness here if subject signed with an "X"

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OBTS Number

PROBABLE CAUSE AFFIDAVIT

1. Arrest 3. Request For Warrant
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Juvenile

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FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERRIF'S OFFICE	06 18070194

Charge Type: Check as many as apply
- [ ] 1. Felony
- [ ] 2. Traffic Felony
- [x] 3. Misdemeanor
- [ ] 4. Traffic Misdemeanor
- [ ] 5. Ordinance
- [ ] 6. Other

Special Notes

Defendant Name (Last, First, Middle)			Race	Sex	Date of Birth
SCHLISSEL	Alexis	Nicole	W	F	06/04/1992

Charge	Charge
Simple Domestic Battery	
Charge	Charge

Victim Name (Last, First, Middle)			Race	Sex	Date of Birth
SANNINO	Thomas	V	W	M	11/22/1989

Local Address (Street, Apt. Number)	City	State	Zip	Phone	Address Source
5067 MADISON RD	Delray Beach	FL	33484	(561)809-5263	DL

Business Address (Street, Apt. Number)	City	State	Zip	Phone	Occupation
					Server

The undersign 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.
- [x] confessed to admitting to the below facts.
- [x] was found to have committed the below acts, resulting from (described) investigation.

On the 3 day of May 20 18 at 1901 [ ] AM [x] PM

On 5-3-2018 at approximately 1829 hours I was dispatched to 5067 MADISON RD , unincorporated Palm Beach County, in reference to a medical call involving a domestic battery. Dispatched advised me caller Nicole Schlissel said she bit her boyfriend, Thomas Sannino, and he was now having a seizure. Upon my arrival Schlissel ran up to me hysterically crying and made the spontaneous utterance "I bit my boyfriend 4 times, then he had a seizure I don't want to go to jail, I just wanted to get him medical attention."

I made contact with victim Thomas Sannino. Sannino was crying, but refused to talk to Deputies and refused medical attention. Sannino had what appeared to be bite marks and fresh scratches underneath his chin, on his neck. The marks were consistent with Schlissel's statement. I asked Sannino how he got the injuries. Sannino began crying hysterically and stated "I'm done talking for the day, I'm not letting her go to jail." Sannino refused to cooperate any further.

After I placed Schlissel in the back of my marked patrol unit, she again stated "Why am I going to jail because I bit him four times?"

Based on the above facts, I find probable cause to place Nicole Schlissel under arrest for Domestic Battery per F.S.S 784.03(1)(a)(1)

The foregoing instrument was sworn to and affirmed before me this 3 day of May 20 18 , by:

Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Name of Arresting/Investigating Officer
DS Ritacco #26732	DS A.Carseni 25545
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Signature of Arresting/Investigating Officer