2018MM004428AXX

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
0500400	Delray Beach Police Department	40 17-016223

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: Hands/fist/feet/teeth

Multiple Clearance Indicator: 1

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
	3001 W LINTON BLVD, DELRAY BEACH, FL 33445

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
10/17/2017	17:15					

DEFENDANT

Name (Last, First, Middle): ROPERO, AMBER NICOLE

Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:

Race (W - White, I - American Indian, B - Black, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	11/28/1995	5'04	125		SANDY	LIGHT	

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description)

Marital Status: M

Religion

Indication of: Alcohol Influence Yes ☐ No ☐ Unk. ☒ Drug Influence ☒

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State
3001 W LINTON BLVD C104, DELRAY BEACH, FL 33445				(954) 204-7144	

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
3001 W LINTON BLVD C104, DELRAY BEACH, FL 33445				(954) 204-7144	

Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation

DL Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
R160014959280 / FL	[redacted]			

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 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 Department and Released 2. TOT JAC 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 355-2526) informed of any change of address.
☐ Yes, by: ☐ No:

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. Disperses/ 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

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
SIMPLE BATTERY(TOUCH OR STRIKE)	784.03(1)(A1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/	17-016223	2	☒ Y ☐ N		

CHARGE

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		/			☐ Y ☐ N		

CHARGE

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		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By	Released By	Released To

Transported By	Date Transported	Time Transported	Other

NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court
☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): South County 200 W Atlantic Ave Delray Beach, FL 33444

Court Date and Time

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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

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

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Intake Deputy I.D. # Pouch #

Signature of Arresting Officer I.D.

Name of Arresting Officer (Print): FERREIRO, DANIEL C. I.D. # 1100

Transporting Officer: Warrant Request I.D. # Agency

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X".

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

DOMESTIC VIOLENCE PROBABLE CAUSE AFFIDAVIT

Palm Beach County

ADMIN

Date / Time	Agency ORI Number	Agency Name	Agency Report Number
10/17/2017 17:31	FL 0500400	DELRAY BEACH POLICE DEPARTMENT	4 0 17-016223

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
ROPERO, AMBER NICOLE		W	F	11/28/1995

CHRG

Charge Description: 784.03(1A1) SIMPLE BATTERY(TOUCH OR STRIKE)

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
ROPERO HERRERA, SEBASTIAN	W	M	01/05/1993

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
3001 W LINTON BLVD C104, DELRAY BEACH, FL 33445	(561) 502-6781	
Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation

ADDITIONAL INFORMATION

	Written	Taped	Oral
DEFENDANT'S STATEMENTS:	☐	☐	☐
VICTIM'S STATEMENTS:	☒	☐	☐

OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): **FRUSTRATED. UPSET.**

RELATIONSHIP BETWEEN VICTIM & SUSPECT: **EX-SPOUSE**

	YES	NO	
PHOTOGRAPHS: Scene:	☐	☒	
Victim:	☒	☐	
911 CALL:	☒	☐	CALLER: **ROPERO, SEBASTIAN.**
WEAPON USED:	☐	☒	TYPE:
WITNESSES:	☒	☐	(If YES, attach witness list)
INJURIES:	☒	☐	
MEDICAL TREATMENT:	☐	☒	
AT: Scene:	☐	☒	PARAMEDICS:
Hospital:	☐	☒	PHYSICIAN(S) / HOSPITAL:
ACT COMMITTED IN PRESENCE OF MINOR(S):	☒	☐	NAMES/AGES: **ROPERO, LUNA, AGE 5**
H. R. S. NOTIFIED:	☐	☒	
VICTIM PREGNANT:	☐	☒	
VIOLATION OF RESTRAINING ORDER:	☐	☒	CASE #: **17007237**
PRIOR HISTORY OF DOMESTIC VIOLENCE:	☒	☐	
ALCOHOL OR DRUGS INVOLVED:	☐	☒	

NARR

This incident occurred in the City of Delray Beach, Palm Beach County FL.

STATE OF FLORIDA
COUNTY OF PALM BEACH

Appeared before me, _____ 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 before me this 17 day of October, 2017.

PACHECO, ADAN
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

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

DOMESTIC VIOLENCE PROBABLE CAUSE
AFFIDAVIT
Palm Beach County
Narrative Continuation

ADMIN

Date / Time		
10/17/2017 17:31		
Agency ORI Number	Agency Name	Agency Report Number
FL 0500400	DELRAY BEACH POLICE DEPARTMENT	4 | 0 | 17-016223

NARRATIVE

On 10/17/17 at 6:15 PM I was dispatched to 3001 W Linton Blvd #104 in reference to an assault. I made contact with the complainant, Sebastian Ropero, who stated that he was walking outside to meet his grandmother, Ivonne Guzman Morales, and his daughter, Luna Ropero, when he was assaulted by his Ex-Girlfriend, Amber Ropero. Sebastian stated that Amber ran out from the bushes in the parking lot and attempted to pick up her daughter. Sebastian stated that he picked up Luna before Amber could get to her. Sebastian stated that Amber began to punch and scratch him. Sebastian stated that Amber bit him on his right shoulder and also scratched him on his left wrist. Sebastian stated that while Amber was assaulting him, she also grabbed onto Luna`s right arm causing some redness. Sebastian stated that he then ran into his residence to drop off Luna so she would not get hurt. Sebastian stated that before he could lock the door to his residence, Amber began punching him in the face. Sebastian stated that he told Amber he was going to call the police. Amber then left the area.
I made contact with Ivonne regarding this incident. Due to a strong language barrier Ivonne`s daughter, Ivonne Herrera Guzman, assisted with translation. Ivonne informed me the following: Ivonne was in the parking lot with Luna waiting for Sebastian. Ivonne observed Amber running towards her and attempted to grab Luna from her. Ivonne began to scream for Sebastian until he came outside and took Luna. Amber struck Sebastian in the head, ripped his shirt, bit him in the back, and also scratched his face. Sebastian ran back into the residence to get away from Amber but she followed and continued to hit him. Amber left the area once Sebastian got into his residence.
Photographs were taken of Sebastian`s injuries as well as the redness on Luna`s arm.
I attempted to contact Amber with negative results.

Based on the above facts probable cause exists to charge W/F Amber Ropero with two counts of Domestic Battery per F.S.S. 784.03(1A1).

STATE OF FLORIDA
COUNTY OF PALM BEACH

Appeared before me, _____ 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 before me this 17 day of October, 2017.

PACHECO, ADAN
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

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