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17CF7263

1680

OBTS Number

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

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

3

Juvenile

Agency ORI Number <b>FLO 5 0 0 0 0 0</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number <b>06</b>		17-105197			
Charge Type: Check as many as apply <input checked="" type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor		5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type		Multiple Clearance Indicator <b>0 2</b>			
Location of Arrest (Including Name of Business) <b>3228 GUN CLUB ROAD</b> <b>WPB FL33406</b> Location of Offense (Including Name of Business) <b>2368 SEMINOLE BLVD</b> <b>WPB FL 33406</b>									
Date of Arrest <b>Jul 21, 2017</b>	Time of Arrest <b>1530</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle			
Name (Last, First, Middle) <b>SADIQ BABUR</b>				Alias (Name, DOB, Soc. Sec. #, Etc.)					
Race W- White   I- American Indian B- Black   O- Oriental/Asian		Sex <b>M</b>	Date of Birth <b>03/03/1986</b>	Height <b>6'1"</b>	Weight <b>160</b>	Eye Color <b>BROWN</b>	Hair Color <b>BLACK</b>	Complexion <b>DARK</b>	Build <b>MED</b>
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status <b>single</b>		Religion <b>none</b>		Indication of Alcohol Influence Drug Influence	
Local Address (Street, Apt. Number) <b>2368 SEMINOLE BLVD</b>		City <b>WEST PALM BEACH</b>		State <b>FL</b>	Zip <b>33409</b>	Phone <b>561-541-4988</b>	Residence Type 1. City    3. Florida 2. County    4. Out of State		<b>2</b>
Permanent Address (Street, Apt. Number) <b>2368 SEMINOLE BLVD</b>		City <b>WEST PALM BEACH</b>		State <b>FL</b>	Zip <b>33409</b>	Phone	Address Source		
Business Address (Street, Apt. Number) <b>100 U.S. 441,</b>		City <b>ROYAL PALM BEACH</b>		State <b>FL</b>	Zip <b>33414</b>	Phone <b>(561) 791-2240</b>	Occupation <b>MANAGER OF RESTAURANT</b>		
D/L Number, State <b>S-320-060-86-083-0</b>		Social Security Number		INS Number		Place of Birth <b>HAYWARD, CA</b>	Citizenship <b>USA</b>		
Co-Defendant Name (Last, First, Middle) <b>N/A</b>		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) <b>N/A</b>		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		
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other		Name (Last, First, Middle) <b>N/A</b>					Phone		
Address (Street, Apt. No.) <b>City</b>						State	Zip	Business Phone	
Notified By (Name)		Date		Time		Juvenile Detention: 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 <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 561 355 2526) informed of any address change <input type="checkbox"/> Yes, by (Name) <input type="checkbox"/> No (Reason)									
School Attended						Grade			
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property				Value of Property			
Drug Activity N/A P. Possess		S. Sell R. Smuggle B. Buy D. Deliver T. Traffic E. Use		K. Disposal/ Distribution M. Manufacture/ Produce, Cultivate		Z. Other N. Hallucinogen A. Amphetamine C. Cocaine E. Heroin		P. Hallucinogen M. Marijuana U. Unknown Z. Other	
Charge Description <b>TAMPERING WITH A VICTIM</b>				Counts <b>1</b>	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number <b>914.22(2)(a)</b>	Violation or ORD. #		
Drug Activity <b>N</b>	Drug Type <b>N</b>	Amount/Unit	Offense # <b>17-105197</b>				Warrant/Capias Number		
Charge Description <b>BATTERY: DOMESTIC RELATED</b>				Counts <b>1</b>	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number <b>784.03(1)(a)(2)</b>	Violation or ORD. #		
Drug Activity <b>N</b>	Drug Type <b>N</b>	Amount/Unit	Offense # <b>17-105197</b>				Warrant/Capias Number		
Charge Description				Counts <b>1</b>	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	Violation or ORD. #		
Drug Activity	Drug Type	Amount/Unit	Offense #				Warrant/Capias Number		
Charge Description				Counts <b>1</b>	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	Violation or ORD. #		
Drug Activity	Drug Type	Amount/Unit	Offense #				Warrant/Capias Number		
Location (Court, Address, Room Number)		<b>TO BE SET</b>							
Court Date and Time									
Month	Day	Year	Time	AM <input type="checkbox"/>		PM <input type="checkbox"/>			
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 BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.									
<b>Jul 21, 2017</b>									
Signature of Defendant (or Juvenile and Parent/Custodian)				Date Signed					
HOLD for Other Agency			Signature of Arresting Officer			Name Verification (Printed by Arrestee)			
Name									
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal			<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other			Name of Arresting Officer <b>D/S J. WEHRLE 19481</b>		ID # <b>19481</b>	
Intake/Arrest			Transporting Officer ID # <b>D/S J. WEHRLE</b>			Agency <b>19481</b>			
<b>SCANNED</b>									
Witness here if subject signed with an "X"									

JUL 22 2017

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OBTS Number

## PROBABLE CAUSE AFFIDAVIT

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

3

Juvenile

Agency ORI Number <b>FLO 5 0 0 0 0 0</b>	Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>	Agency Report Number <b>06</b>	17-105197			
Charge Type Check as many as apply	1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor 5. Ordinance 6. Other _____	Special Notes				
Defendant Name (Last, First, Middle) <b>SADIQ</b>	BABUR	Race <b>O</b>	Sex <b>M</b>	Date of Birth <b>03/03/1986</b>		
Charge <b>TAMPERING WITH A VICTIM</b>	Charge <b>BATTERY: DOMESTIC RELATED</b>					
Charge	Charge					
Victim Name (Last, First, Middle) <b>KOSEK</b>	ASHLEY	MARIE	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>07/14/1985</b>	
Local Address (Street, Apt. Number) <b>2368 SEMINOLE BLVD</b>	City <b>WEST PALM BEACH</b>	State <b>FL</b>	Zip <b>33409</b>	Phone <b>561-729-6675</b>	Address Source <b>VICTIM</b>	
Business Address (Street, Apt. Number) <b>N/A</b>	City	State	Zip	Phone	Occupation	
The undersigned 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...						
<input type="checkbox"/> committed the below acts in my presence.			<input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.			
<input type="checkbox"/> confessed to admitting to the below facts.			<input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.			
On the <b>21</b> day of <b>JULY</b> 20 <b>17</b> at <b>3:30</b>	<input type="checkbox"/> AM		<input checked="" type="checkbox"/> PM			

On July 21, 2017 at approximately 11:57 A.M. I was dispatched to the residence of 2368 Seminole Blvd. West Palm Beach FL 33409 in reference to a delayed domestic dispute. Upon my arrival I made contact with a white female who identified herself with a Florida Driver's License as Ashley Marie Kosek, date of birth 07/14/1985. Kosek was accompanied by her two children by the names of Ariana Devalle (W/F 04/21/2009) and Liam A. Sadiq (W/M 06/06/2014). Kosek was crying and told me in a sworn taped statement that her boyfriend by the name of Babur "Bobby" Sadiq woke up this morning at approximately 11:00 A.M. and confronted her about Kosek taking the children to see her family last week. Kosek stated that Sadiq threatened to have cameras all around the house to monitor her leaving the house with the children. Kosek stated that Sadiq then grabbed her by the arms and pushed her to the ground. When Kosek attempted to call police, Sadiq grabbed the cell phone out of her hand, proceeded to grab other cell phones and an I-pad in an attempt to stop Kosek from calling police. Kosek stated that Sadiq gave Kosek the phone after at least 30 minutes had passed and when Sadiq left the house to go to work. Kosek told me that Sadiq begged her not to call police. Kosek told me that she was very scared of Sadiq's anger towards her and was afraid of Sadiq returning to the residence. Kosek had no marks, cuts, bruising or swelling on any areas of her exposed body and did not appear to be under the influence of drugs or alcohol.

I made contact with Ariana Devalle (W/F 04/21/2009). Devalle stated in a taped sworn statement that she observed Sadiq push Kosek to the ground and only heard Sadiq take the cell phone away from Kosek. Devalle stated that she heard her mother (Kosek) tell Sadiq that she was calling police because she was scared. Devalle stated that she observed Sadiq with all of the household's electronic devices in his hand

I made contact with Babur Sadiq. Sadiq stated in a post-Miranda taped statement that he denied placing his hands on Sadiq in any way whatsoever. Sadiq stated that he only took possession of the cell phones because he was leaving the house and he owned the phones. Sadiq had no marks, cuts, bruising or swelling on any areas of his exposed body and did not appear to be under the influence of drugs or alcohol.

The foregoing instrument was sworn to and affirmed before me this <b>21ST</b> day of <b>JULY</b> 20 <b>17</b> , by:  Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	<b>D/S J. WEHRLE 19481</b>  Name of Arresting/Investigating Officer
 Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	 Signature of Arresting/Investigating Officer

**SCANNED**  
JUL 22 2017

CBTS Number

## PROBABLE CAUSE AFFIDAVIT

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Juvenile

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Defendant Name (Last, First, Middle) <b>SADIQ BABUR</b>			Race <b>O</b>	Sex <b>M</b>	Date of Birth <b>03/03/1986</b>
Charge <b>TAMPERING WITH A VICTIM</b>		Charge <b>BATTERY: DOMESTIC RELATED</b>			
Charge		Charge			
Victim Name (Last, First, Middle) <b>KOSEK ASHLEY MARIE</b>			Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>07/14/1985</b>
Local Address (Street, Apt. Number) <b>2368 SEMINOLE BLVD</b>		City <b>WEST PALM BEACH</b>	State <b>FL</b>	Zip <b>33409</b>	Phone <b>561-729-6675</b>
Business Address (Street, Apt. Number) <b>N/A</b>		City	State	Zip	Phone Occupation
The undersigned 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...					
<input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to admitting to the below facts.  <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.					
On the <u>21</u> day of <u>JULY</u> 20 <u>17</u> at <u>3:30</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM					

Based on the above facts, statements, my training, experience and observations, I find that there is probable cause that Babur Sadiq willfully and unlawfully tampered with a victim (Ashley Marie Kosek) by interfering with her communication to law enforcement after battering her contrary to Florida Statutes 914.22(2)(a) and 784.043(1)(a)(2).

The foregoing instrument was sworn to and affirmed before me this 21ST day of JULY 20 17, by:

**D/S J. WEHRLE 19481** **SCANNED**

Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00) \_\_\_\_\_ Name of Arresting/Investigating Officer \_\_\_\_\_

**JWM** **JUL 22 2017**

Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00) \_\_\_\_\_ Signature of Arresting/Investigating Officer \_\_\_\_\_

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