

0358178 2019mm009061AMB 710

OBTS Number		ARREST / NOTICE TO APPEAR				1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias		1	Juvenile	N											
Agency ORI Number FL 0500300			Agency Name BOYNTON BEACH POLICE DEPT.			Agency Report Number 34-19-043731															
Charge Type: Check as many as Apply. <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						If Weapon Seized Enter Type		Multiple Clearance Indicator 01													
Location of Arrest (Including Name of Business) 115 NW 1st Ave. Boynton Beach, FL 33435						Location of Offense (Business Name, Address) 115 NW 1st Ave. Boynton Beach, FL 33435															
Date of Arrest 08/04/2019		Time of Arrest 1805		Booking Date		Booking Time		Jail Date		Jail Time											
Name (Last, First, Middle) Kaufman, Dana, Liane																					
Aliases (Name, DOB, Soc. Sec. #, Etc)																					
W - White B - Black		I - American Indian O - Oriental / Asian		Race W	Sex F	Date of Birth 05/14/1969		Height 504	Weight 114	Eye Color Brown	Hair Color Blonde	Complexion Fair	Build Thin								
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)								Marital Status Sin		Religion N/A	Indication of Alcohol Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk <input type="checkbox"/>		Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk <input type="checkbox"/>								
Local Address (Street, Apt. Number) 115 NW 1st Ave.				(City) Boynton Beach,		(State) FL		(Zip) 33435		Phone (561)542-1404		Residence Type 1. City 3. Florida 2. County 4. Out of State									
Permanent Address (Street, Apt. Number)				(City)		(State)		(Zip)		Phone		Address Source DL									
Business Address (Street, Apt. Number)				(City)		(State)		(Zip)		Phone		Occupation Nurse									
DL Number, State K155172696740				Soc. Sec. Number			INS Number		Place of Birth Chicago, IL		Citizenship USA										
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile		<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor									
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile		<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor									
<input type="checkbox"/> Parent		Name (Last)		(First)		(Middle)		Residence Phone													
<input type="checkbox"/> Legal Custodian		Name (Last)		(First)		(Middle)		Business Phone													
<input type="checkbox"/> Other		Name (Last)		(First)		(Middle)		Business 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 <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 561-356-2528) informed of any change of address: <input type="checkbox"/> Yes, By: (Name) <input type="checkbox"/> No: (Reason)								School Attended		Grade											
Property Crime? <input type="checkbox"/> Yes <input 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. Dispense/ Distribute		M. Manufacture Products/ 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 Simple Battery - Domestic				Counts 1		Domestic Violence <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number 784.03.1A1		NOTE		Violation of ORD#									
Drug Activity				Drug Type		Amount/Unit		Offense # 19-043731		Warrant/Capias Number		Bond									
Charge Description				Counts		Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number		Violation of ORD#											
Drug Activity				Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond									
Charge Description				Counts		Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number		Violation of ORD#											
Drug Activity				Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond									
Charge Description				Counts		Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number		Violation of ORD#											
Drug Activity				Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond									
<input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court				Location (Court, Room Number, Address) South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444																	
<input type="checkbox"/> Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side.				Court Date and Time Month Aug Day 28 Year 2019 Time 830 <input type="checkbox"/> A.M. <input type="checkbox"/> 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				Name Verification (Printed by Arrestee) (PRINT)													
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input checked="" type="checkbox"/> Suicidal <input type="checkbox"/> Other				Name of Arresting Officer (Print) Esteves #933				I.D. # BU# 13940													
Risk #				Pouch #		Transporting Officer Esteves		I.D. # 933		Agency BBPD		Witness here is subject Signed with an "X".									
											Page 1 OF 1										

MANAGED

Aug 05 2019

**DOMESTIC VIOLENCE PROBABLE CAUSE AFFIDAVIT
PALM BEACH COUNTY**

On the 4th day of August 2019 at 1722 hours
Subject: Kaufman, Dana, Liane DOB: 05/14/1969 Case #: 19-043731
Charge Description: Simple Battery - Domestic Statute #: 784.03.1A1
Victim: Helfrich, William DOB: 03/18/1966 Race: W Sex: M
Local Address: 115 NW 1st Ave, Boynton Beach, FL, 33435
Personal Contact: 5619357635

Narrative:

On 8/4/2019 at approximately 1722 hours, I responded to 115 NW 1st Ave. in reference to a Domestic. Reporting person advised that William Helfrich had attacked her and broke her door down. Reporting person advised that Helfrich was leaving in a silver pickup truck. While responding to the location, I observed a silver pickup truck being driven by a W/M occupant. I conducted a traffic stop of the vehicle and made contact with William Helfrich who was operating the vehicle. Officer Davis responded to the residence and spoke with the reporting person W/F Dana Kaufman. It should be noted that Helfrich and Kaufman have had an intimate relationship and have resided at the residence as a family.

Helfrich stated that he was in the residence with Kaufman asleep in the bed. Helfrich stated that Kaufman woke him up accusing him of stealing her phone. Kaufman located the phone inside of the residence and began shouting at him. Helfrich grabbed Kaufman's phone and according to Helfrich, Kaufman began punching him in the face (Visible injury on the right side of his face), scratching his arms (Visible injury on his left upper arm), and biting his hands (Visible injuries on his left hand/fingers). Helfrich stated he left the residence to get away from Kaufman. I asked Helfrich about the broken door to the residence and he stated that the door had been broken during the struggle where he pulled open the door to exit the residence, but Kaufman was preventing him from doing as she was fighting with him. Helfrich stated that at no time did he harm Kaufman.

Officer Davis interviewed Kaufman who stated that Helfrich kicked open the door to the residence and grabbed her cellphone. Kaufman states that an argument ensued as well as a struggle for the phone. Kaufman claims that Helfrich threw her down on the ground and began striking her (No visible injuries). Kaufman gave conflicting statements to Officer Davis about her recollection of the incident first stating that she locked Helfrich in the home (which would coincide with Helfrich's statement that she was preventing him from leaving and that is how the door was broken during the struggle), but then she stated that she never prevented him from leaving at any time.

Officer Davis and I spoke with a renter at the residence Sara Collins. Collins stated that she has seen a male believed to be Helfrich, residing at the residence for the past month or so that she has been living there. Collins stated that she heard a female screaming from within the residence and that Kaufman began banging on her room claiming that Helfrich had broken the door down to the house. Collins remained in her room and called Communications to report the incident.

There are no independent witnesses to confirm either Kaufman or Helfrich depiction of the damage to the side door. Helfrich had several visible injuries as documented earlier in this report. Based on the evidence of Helfrich's injuries, I arrested Kaufman for Simple Battery - Domestic Violence (FSS 784.03.1A1). Both parties were offered medical assistance, which was declined. Master Recording requested for this incident. Kaufman was transported to Palm Beach County Jail for her crime.

Victim was provided with the appropriate case number along with a BBPD Victims Rights Brochure. A Victim's Right to Confidentiality Form, in accordance with Marsy's Law (effective January 8, 2019), FL Constitution, Article 1, sub-section 16(b) was signed by Victim and will be submitted with this report. Victim was also provided with a Marsy's Card; letting them know that they are entitled to the outlined rights within, beginning at the time of their victimization. Exemption from Public Records Form was signed and Domestic Violence pamphlet was provided.

Photographs: Scene: Yes No
 Victim: Yes No
 911 Call: Yes No Caller: Dana Kaufman and Sara Collins
 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:

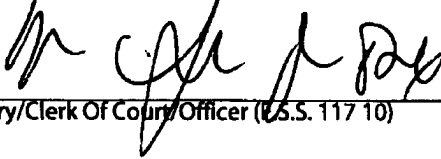
Phone Home: 5619357635 Work: _____
 Employer: Self employed
 Relative Name: _____ Phone: _____
 Address: _____
 City/State: _____

State Of Florida
 County Of Palm Beach
 Appeared before me, Esteves #933, (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 4th day of August, 2019



 Notary/Clerk Of Court/Officer (U.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)**
- **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)
- **Sexual Offense (Ch. 794)**
- **Attempted Sexual Offense**

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

1. Incident Report #: 19-043731 Agency: Boynton Beach Police Department
Offense: Simple Battery - Domestic
Suspect/Offender: Kaufman, Dana, Liane
DOB: 05/14/1969 Race: W Sex: F

2. Warrant # (s): _____

3. Complete one (1) of the following:
 - A. Victim's Name: Helfrich, William
Address: 115 NW 1st Ave
City: Boynton Beach State: FL Zip: 33435
Home #: 5619357635 Work #: _____ Other: _____

 - B. Victim's Next of Kin: _____
Address: _____
City: _____ State: _____ Zip: _____
Home #: _____ Work #: _____ Other: _____

 - C. Victim's designated contact other than next of kin (for example: a friend or neighbor):
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Home #: _____ Work #: _____ 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: Helfrich, William

Officer's Name: Esteves #933 I.D.# _____ Date: 08/04/2019

SUSPECT/OFFENDER:

Kaufman, Dana, Liane

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



Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	<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"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<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"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2019025474	Date: 08/05/2019
	Specialist Name/ID: AM/31562