

19-9018

STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF PUBLIC ASSISTANCE FRAUD

AFFIDAVIT OF COMPLAINT

County of
Palm Beach

CASE NUMBER:
PB-90-49388
DCF CASE NUMBER:
1285799992

NAME(S) Ilina Hernandez
SOCIAL SECURITY NO. DOB March 18, 1974
RACE White SEX F HEIGHT 5'0 WEIGHT 100 lbs. HAIR Blonde EYES Brown
LAST KNOWN ADDRESS 11129 Lynwood Palm Way, West Palm Beach, Florida 33412
OTHER COMMENTS Florida Driver License Number: H655-400-74-598-0

Before me, personally appeared **Vincent Esposito**, Investigator, Florida Department of Financial Services, Division of Public Assistance Fraud, who first being duly sworn, deposes and says that he has reason to believe that: **Ilina Hernandez**, on various days between the **1st day of December 2015 and the 30th day of November 2017**, in **Palm Beach County**, State of Florida, did knowingly, by means of a false statement, misrepresentation, impersonation, or other fraudulent means fail to disclose a material fact used in making a determination as to her qualification to receive aid or benefits under a state or federally funded assistance program; or did knowingly fail to disclose a change in circumstances in order to obtain or continue to receive aid or benefits under such a program in an amount larger than that to which she was entitled; or did knowingly aid and abet another person in the commission of any such act, contrary to the provisions of Section 414.39(1), Florida Statutes; specifically:

Records of the Florida Department of Children and Families (Department) reflect that on or about November 2, 2015, May 13, 2016, October 31, 2016 and May 8, 2017, during her reviews of eligibility to receive public assistance, **Ilina Hernandez**:

- Reported that she was employed to clean the house of Alex Romero and that she had no other employment or earned income available to her household.
- Submitted Verification of Employment forms reflecting weekly earnings for her employment by Alex Romero.
- Acknowledged that the reported information is true to the best of her knowledge and acknowledged her responsibility to report any changes in her household.

(Witnesses 1, 3 and 4; Enclosures A through E-3)

FILED

19 SEP 23 AM 9:03

SILVIA R. BOCK, CLERK
FAMILY AND COMMUNITY
Palm Beach County, FL

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INVESTIGATION REVEALED ILINA HERNANDEZ:

- Was in fact, also employed by Niceale, LLC, working at Smart for Life, located at 4210 Northlake Blvd., Palm Beach Gardens, Florida 33410, from December 10, 2015 through at least November 30, 2017.
- Received her first relevant paycheck on December 14, 2015 and her last relevant paycheck on November 26, 2017.
- Earned total gross wages of \$48,126.79, during the period of December 2015 through November 2017.
- Failed to report her gainful employment by Niceale, LLC, to the Department, from December 10, 2015 through November 30, 2017.
- Made false statements and/or omissions during her May 13, 2016, October 31, 2016 and May 8, 2017 eligibility review processes.

(Witnesses 5 through 8; Enclosures F through H)

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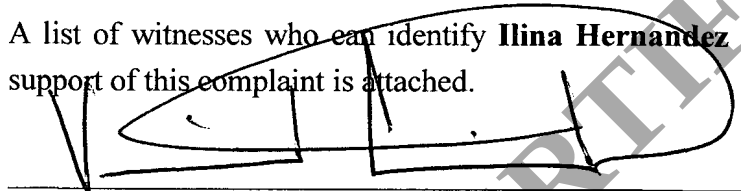
CONCLUSION:

Ilina Hernandez, by means of false statements and/or omissions, failed to report her gainful employment by Niceale, LLC, to the Florida Department of Children and Families, during the period of December 10, 2015 through November 30, 2017.

As a result of her actions, **Ilina Hernandez** received \$10,430.00 in Food Assistance Program benefits during the period of December 2015 through November 2017, to which she was not legally entitled. She also received or caused the disbursement of \$13,176.70 in Medicaid Program benefits during the periods of August 2016 through May 2017, July 2017 through August 2017 and November 2017 for an aggregate amount of \$23,606.70 to which she was not legally entitled.

(Witness 2; Enclosure I)

A list of witnesses who can identify **Ilina Hernandez** and present testimony and documents in support of this complaint is attached.



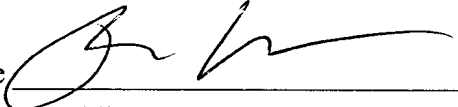
Signature Affiant/Complainant

State of Florida
County of Palm Beach

Sworn to and subscribed before me
this 7th day of May, A.D. 2019 by
Vincent Esposito

(name of person(s) acknowledged)

who is /are personally known to me and did take an oath.

Signature  Type or Print Name Jose Rodriguez Del Rio
Title Notary Public

My Commission Expires:

