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OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 3. Request For Warrant 2. N.T.A. 4. Request For Capias		01		Juvenile		N			
Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number 06		17-092666					
Charge Type: Check as many as apply		1. Felony <input type="checkbox"/>		2. Traffic Felony <input type="checkbox"/>		3. Misdemeanor <input checked="" type="checkbox"/>		4. Traffic Misdemeanor <input type="checkbox"/>		5. Ordinance <input type="checkbox"/>		6. Other <input type="checkbox"/>	
Location of Arrest (Including Name of Business) 11498 Okeechobee Blvd		Royal Palm Beach, FL 33411		Location of Offense (Including Name of Business) 11498 Okeechobee Blvd		Royal Palm Beach, FL 33411							
Date of Arrest Jun 20, 2017		Time of Arrest 1857		Booking Date		Booking Time		Jail Date		Jail Time			
Name (Last, First, Middle) Elias		Ivette		Alias (Name, DOB, Soc. Sec. #, Etc.)									
Race W - White B - Black O - Other/Asian		Sex W F		Date of Birth 12/12/1973		Height 5'3"		Weight 120		Eye Color Brown		Hair Color Blonde	
Complexion Medium		Build Small		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) Tattoo: Chinese symbol R & L wrists		Marital Status M		Religion None		Indication of Alcohol Intoxication Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/> U <input type="checkbox"/>			
Local Address (Street, Apt. Number) 1422 Parkway Ct		City Greenacres		State FL		Zip 33415		Phone 561-460-5266		Residence Type: 1. City 2. County 3. Florida 4. Out of State 01			
Permanent Address (Street, Apt. Number) 1422 Parkway Ct		City Greenacres		State FL		Zip 33415		Phone 561-460-5266		Address Source Verbal			
Business Address (Street, Apt. Number)		City		State		Zip		Phone		Occupation Retail Sales			
DIL Number, State E-420-400-73-952-0		Social Security Number		INS Number		Place of Birth Arecibo, Puerto Rico		Citizenship US					
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)		Address (Street, Apt. No.)		City		State		Zip			
Notified By (Name)		Date		Time		Juvenile Disposition: 1. Noted/Processed within Dept and Released		2. TOT HRSD/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 561-355-2326) 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 type="checkbox"/> No		Description of Property		Value of Property									
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traff		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. Hashish/Cocaine M. Marijuana		P. Pharmaceutical/ Equipment		U. Unknown Z. Other					
Charge Description Simple Battery (Domestic)		Counts 1		Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 784.03 (1) A 1		Violation or ORD. #					
Drug Activity N		Drug Type N		Amount/Unit N/A		Offense # 17-092666		Warrant/Capias Number		Bond			
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number		Violation or ORD. #					
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond			
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number		Violation or ORD. #					
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond			
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number		Violation or ORD. #					
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 <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.													
Signature of Defendant (or Juvenile and Parent/Custodian)						Date Signed							
HOLD for Other Agency						Signature of Arresting Officer							
Name						Name Verification (Printed by Arrestee)							
<input checked="" type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Substantial <input type="checkbox"/> Other						Name of Arresting Officer D/S R. Smith							
ID # Pouch #						ID # 15526							
Inmate Copy						Transporting Officer D/S R. Smith 15526							
						Agency PBSO							
						Witness here if subject signed with an "X"							
						Page 1 of 1							

OBTS Number		<b>PROBABLE CAUSE AFFIDAVIT</b>		1. Arrest 2. N.T.A.		3. Request For Warrant 4. Request For Copies		01	Juvenile	N
Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number <b>06</b>		17-092666				
Charge Type: Check as many as apply <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes								
Defendant Name (Last, First, Middle) <b>Elias Ivette</b>				Race <b>W</b>		Sex <b>F</b>		Date of Birth <b>12/12/1973</b>		
Charge <b>Simple Battery (Domestic)</b>				Charge						
Charge				Charge						
Victim Name (Last, First, Middle)				Race <b>W</b>		Sex <b>M</b>		Date of Birth <b>09/30/1980</b>		
Local Address (Street, Apt. Number, City, State, Zip, Phone)				Address Source						
Business Address										
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...										
<input type="checkbox"/> committed the below acts in my presence.  <input type="checkbox"/> confessed to admitting to the below facts.				<input checked="" type="checkbox"/> was observed by <b>Danielle Mendella</b> who told <b>Myself</b> 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 <b>20</b> day of <b>June</b> 20 <b>17</b> at <b>1857</b> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM										

On 06/20/2017 at approximately 1736 hours I responded to [REDACTED] in reference to a domestic battery. Upon arrival I met with [REDACTED] who stated [REDACTED] Ivette Elias hit him.

[REDACTED] told me that he does not live with Ivette and today she came to his home at [REDACTED] knocked on the door and pushed her way in to the home and began yelling at [REDACTED] Danielle Mendella who was sitting on the couch. Ivette then began hitting [REDACTED] in the face and grabbed his cell phone. [REDACTED] then got his phone back and the physical altercation continued to in the kitchen area where Ivette began striking him again in the face. At one point Ivette missed him and struck the refrigerator. Danielle took [REDACTED] and went outside in to her car in an attempt to leave. Danielle was unable to leave until Ivette moved her vehicle. [REDACTED] provided a sworn written statement.

I then spoke with Danielle who told me she was at [REDACTED] house when Ivette showed up, walked inside and called her a "bitch" then began yelling in Spanish. [REDACTED] and Ivette then began yelling at each other in Spanish and Ivette started to hit [REDACTED] in the face. [REDACTED] then went in to the kitchen and Ivette followed continuing to strike him. Danielle the got [REDACTED] and attempted to leave but was blocked in by Ivette's vehicle. Ivette then moved her vehicle and Danielle left. Danielle provided a sworn written statement.

I then spoke with [REDACTED] and Ivette's [REDACTED] who told me [REDACTED] Ivette came over to the house. When Ivette walked in she began yelling and called Danielle a "Bitch" while she was sitting on the couch. Ivette then began yelling at [REDACTED] and took his phone and began hitting him. Ivette and [REDACTED] then walked in to the kitchen where [REDACTED] were at and Ivette began striking [REDACTED] in the face again. Ivette hit her arm on the refrigerator when she missed [REDACTED] told me that [REDACTED] then went outside to leave and shortly after Ivette went outside to move her vehicle.

I then contacted Ivette who agreed to meet with me at PBSO District 9. I asked Ivette what happened today at [REDACTED] and she told me she went to his house around 1430 hours and they got in to an argument. Ivette told me they argued about getting divorced and at one point it became physical. Ivette denied yelling at Danielle or calling her a "bitch." Ivette stated [REDACTED] pushed her causing her to hit her head on and unknown object. I asked Ivette if she hit [REDACTED] and she told me she did not know because she blacks out when she gets mad. Ivette refused to provide a sworn written statement.

Photographs of [REDACTED] were taken and uploaded to the Domestic Violence website by D/S Oragene #7759. I took photographs of Ivette and uploaded them to the Domestic Violence website. Based on my investigation I believe Ivette Elias did actually and intentionally touch or strike [REDACTED] against the will of [REDACTED] with whom [REDACTED] contrary to Florida Statute 784.03(1) and 741.283 (1 DEG MISD). Based on this I believe probable cause exists for the arrest of Ivette Elias for Simple Battery (Domestic). Ivette was placed in handcuffs which I checked for proper fit and double locked. Ivette while in the back of my marked patrol vehicle Ivette requested EMS due to her feeling dizzy. PBCFR R28 responded and she was transported to Palms West for medical clearance. I then transported

Ivette to West Detention Center where she was turned over to their staff without incident.

The foregoing instrument was sworn to and affirmed before me this <u>20</u> day of <u>June</u> 20 <u>17</u> , by:	
<u>D/S Oragene 7759</u>	<u>D/S R. Smith 15526</u>
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Name of Arresting/Investigating Officer
<u>D/S R. Smith 7759</u>	<u>[Signature]</u>
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Signature of Arresting/Investigating Officer
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NOT A CERTIFIED COPY

**PALM BEACH COUNTY SHERIFF'S OFFICE**  
**DOMESTIC VIOLENCE PROBABLE CAUSE SUPPLEMENTAL FORM**  
**(SUBMIT WITH STATE ATTORNEY'S COPY OF PROBABLE CAUSE AFFIDAVIT)**

CASE NUMBER: 17-0966CC

DEFENDANT'S NAME: Ivette Elias

DEFENDANT'S STATEMENT: ☒ YES ☐ NO (IF YES: ☐ WRITTEN ☐ TAPED ☒ ORAL)

SYNOPSIS: stated she does not remember hitting [REDACTED] and that  
she blacks out when she gets mad.

VICTIM'S NAME: [REDACTED]

VICTIM'S STATEMENTS: ☐ YES ☐ NO (IF YES: ☒ WRITTEN ☐ TAPED ☐ ORAL)

OBSERVATIONS OF VICTIM: (PHYSICAL & EMOTIONAL) No visible injuries

RELATIONSHIP BETWEEN VICTIM AND SUSPECT: [REDACTED]

PHOTOGRAPHS: SCENE: ☒ YES ☐ NO VICTIM(S): ☒ YES ☐ NO

911 CALL: ☐ YES ☒ NO WHO CALLED: \_\_\_\_\_

WEAPON USED: ☐ YES ☒ NO TYPE: \_\_\_\_\_

MEDICAL TREATMENT: ☐ YES ☒ NO

AT SCENE: ☐ YES ☒ NO PARAMEDICS: \_\_\_\_\_

AT HOSPITAL: ☐ YES ☒ NO HOSPITAL: \_\_\_\_\_ PHYSICIAN: \_\_\_\_\_

ARE CHILDREN LIVING IN HOME: ☒ YES ☐ NO

NAME: [REDACTED]

DOB: 06/30/07

NAME: \_\_\_\_\_

DOB: \_\_\_\_\_

NAME: \_\_\_\_\_

DOB: \_\_\_\_\_

WAS ACT(S) COMMITTED IN PRESENCE OF MINOR(S): ☒ YES ☐ NO (IF YES ☒ SAME AS ABOVE OR SPECIFY)

NAME: [REDACTED]

DOB: 01/08/08

NAME: \_\_\_\_\_

DOB: \_\_\_\_\_

NAME: \_\_\_\_\_

DOB: \_\_\_\_\_

DCF NOTIFIED: (IF CHILD ABUSE) ☒ YES ☐ NO

VICTIM PREGNANT: ☐ YES ☒ NO

PRIOR HISTORY OF DOMESTIC VIOLENCE: ☒ YES ☐ NO

ALCOHOL OR DRUGS INVOLVED: ☐ YES ☒ NO

VIOLATION OF RESTRAINING ORDER: ☐ YES ☒ NO CASE #: \_\_\_\_\_

ALTERNATE VICTIM CONTACT INFORMATION: (IF VICTIM DECIDES TO LEAVE RESIDENCE)

RELATIVE/FRIEND NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

RELATIVE/FRIEND ADDRESS: \_\_\_\_\_

# VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been committed:

- Homicide (Ch. 782)
- Sexual Offense (Ch. 794)
- Attempted Murder
- Attempted Sexual Offense
- Stalking (F.S. 784.048)
- Domestic Violence - (This includes any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated 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 single dwelling.)

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

1. Incident Report #: 17-092666 Agency: PBSO  
Offense: Domestic Battery  
Suspect/Offender: Ivette E. 12.25  
D.O.B. 12/12/73 Race: W Sex: F

2. Warrant #(s): \_\_\_\_\_

3.a. Victim's name: \_\_\_\_\_ D.O.B. 9/30/80 Race: W Sex: M  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Home #: \_\_\_\_\_

b. Victim's next of kin, friend or neighbor: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Other: \_\_\_\_\_

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY BE SUBJECT TO CONFIDENTIALITY.

## Victim/Relation Notification Waiver and Confidential Information Request.

(check applicable boxes)

- ☐ **Waiver:** I choose not to be notified when the arrestee is released from custody.
- ☐ **Confidential:** I request the information on this form be kept confidential (applicable only to sexual battery, stalking, child abuse, harassment or domestic violence cases).

Signature of person waiving notification: \_\_\_\_\_

Printed name of person waiving notification: \_\_\_\_\_

Deputy's Name: V. Smith I.D.# 15576 Date: 6/20/17

White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records

SUSPECT/OFFENDER: \_\_\_\_\_

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT#: \_\_\_\_\_