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172

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report			1. Arrest <input type="checkbox"/> 3. Request For Warrant <input type="checkbox"/> 2. N.T.A. <input type="checkbox"/> 4. Request For Copies <input type="checkbox"/>		Juvenile <input type="checkbox"/>				
Agency ORI Number FLO 8 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 08		Report Number 19-113796				
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		If Weapon Seized Enter Type		Multiple Offense Indicator 0		1					
Location of Arrest (Including Name of Business) 34 Colonial Club Drive Boynton Beach, FL				Location of Offense (Including Name of Business) 5628 ARBOR CLUB WAY BOCA RATON, FL 33433							
Date of Arrest Sep 11, 2019		Time of Arrest 0814		Booking Date		Booking Time		Jail Date			
Jail Time		Location of Vehicle		Name (Last, First, Middle) GIOVINCO JONATHAN P		Alias (Name, DOB, Soc. Sec. #, Etc.)					
Race W - White 1 - American Indian B - Black 0 - Other/Asian W		Sex M		Date of Birth 12/22/1980		Height 6-00		Weight 175			
Eye Color HZL		Hair Color BRN		Complexion LT		Build MED					
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE				Marital Status S		Religion CATH		Indication of Alcohol/Influence/Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unit <input type="checkbox"/> 100 <input type="checkbox"/> 25 <input type="checkbox"/>			
Local Address (Street, Apt. Number) 13527 BARCELONA LAKE CIR				City DELRAY BEACH		State FL		Zip 33446			
Phone 561-715-1513				Residence Type 1. City 2. County 3. Florida 4. Out of State 2		Address Source FL DL					
Permanent Address (Street, Apt. Number)				City		State		Zip			
Business Address (Street, Apt. Number)				City		State		Zip			
Phone				Occupation BODY SHOP							
DL Number G152435804620/FL		Social Security Number		INS Number		Place of Birth NEW YORK, NY		Citizenship US			
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth			
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth			
Parent Legal Guardian Other <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				Name (Last, First, Middle)				Phone			
Address (Street, Apt. No.)				City		State		Zip			
Business Phone				Notified By (Name)		Date		Time			
Released To (Name)				Relationship		Date		Time			
The above address was provided by <input type="checkbox"/> defendant's mother <input type="checkbox"/> defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 561-355-2528) 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 H. N/A P. Possess		E. Sell S. Buy T. Traffic		K. Stronghold D. Dealer E. Use		L. Manufacture/ Produce Cultivate		2. Other			
Drug Type A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin		R. Hallucinogen M. Marijuana		F. Pharmaceutical Equipment		L. Unknown 2. Other			
Charge Description DOMESTIC BATTERY				Counts 1		Domestic Violence <input checked="" type="checkbox"/> <input type="checkbox"/>		Statute Violation Number 784.03(1) A 1			
Violation or ORD. #				Warrant/Copies Number		Bond NO BOND					
Charge Description				Counts		Domestic Violence		Statute Violation Number			
Violation or ORD. #				Warrant/Copies Number		Bond					
Charge Description				Counts		Domestic Violence		Statute Violation Number			
Violation or ORD. #				Warrant/Copies Number		Bond					
Charge Description				Counts		Domestic Violence		Statute Violation Number			
Violation or ORD. #				Warrant/Copies Number		Bond					
Location (Court, Address, Room Number) TO BE SET											
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 Name <input type="checkbox"/> Dangerous <input type="checkbox"/> Substantial <input type="checkbox"/> Related Arrest <input type="checkbox"/> Other				Signature of Arresting Officer D/S Diana Lopez			Name Verification (Printed by Arrestee) 0918 9018			Page 1	
Intake Deputy [Signature]				Transporting Officer ID# D/S DIANA LOPEZ			Agency PBSO			Page 1	

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OBTs Number		PROBABLE CAUSE AFFIDAVIT			1. Arrest <input type="checkbox"/>	3. Request For Warrant <input type="checkbox"/>	Juvenile <input type="checkbox"/>
Agency ORI Number FLO 600000	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06		19-113796			
Charge Type: Check as many as apply		Special Notes					
<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					
Defendant Name (Last, First, Middle) GIOVINCO JONATHAN		P	Race W	Sex M	Date of Birth 12/22/1980		
Charge DOMESTIC BATTERY		Charge					
Victim Name (Last, First, Middle) PEREZ-SAMON DEISY		Race W	Sex F	Date of Birth 08/04/1993			
Local Address (Street, Apt. Number) 5628 ARBOR CLUB WAY		City BOCA RATON	State FL	Zip 33433	Phone 561-901-5560	Address Source FL DL	
Business Address (Street, Apt. Number)		City	State	Zip	Phone	Occupation	
<p>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...</p> <p><input type="checkbox"/> committed the below acts in my presence.</p> <p><input type="checkbox"/> was observed by _____ who told that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> confessed to admitting to the below facts.</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.</p> <p>On the <u>11</u> day of <u>SEPTEMBER</u> 20 <u>19</u> at <u>0800</u> <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM</p>							

On Wednesday, 9/11/2019, at approximately 0647 hours I responded to 34 Colonial Club Drive, #101, Boynton Beach, Florida 33435 in unincorporated Palm Beach County in reference to a report of domestic battery that occurred at 5628 Arbor Club Way, Boca Raton, Florida 33433 in unincorporated Palm Beach County.

Upon arrival, I met with the victim (Deisy Perez Samon) who stated that she was in a verbal argument with the defendant (Jonathan Giovinco) inside her apartment that turned physical. The victim stated she and the defendant were in a domestic relationship and he had moved into her home 3 days prior. The victim stated the argument started over the defendant taking her cell phone, got angry and started punching the walls in her apartment and smashing items on the floor. The victim stated she became fearful and wanted to get her cell phone to call 911 and the defendant refused to give her the cell phone. She said she was so fearful she sprayed the defendant with pepper spray and he took the pepper spray from her and sprayed it in her face, grabbed her forcefully by her arms which left bruises. She said the altercation continued outside her apartment where she says the defendant grabbed her by her head and slammed her face on the concrete. The victim has a bruised on the right side of her mouth. There are visible bruises on the victim's face and wrists and her eyes are red. The victim then left her residence in her vehicle and came to a friend's home in Boynton Beach where the defendant then followed her in his vehicle to her friends house. The defendant returned her keys and cell phone to the victim.

Based on my investigation there is probable cause to believe the defendant did intentionally and unlawfully strike the victim against her will and did intentionally cause bodily harm to the victim in violation of Florida State Statute 784.03(1).

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The foregoing instrument was sworn to and affirmed before me this <u>11</u> day of <u>SEPTEMBER</u> 20 <u>19</u> , by:	
D/S J. REID	D/S Diana Lopez 9018 9018
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Name of Arresting/Investigating Officer
<i>[Signature]</i> 7710	<i>[Signature]</i>
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Signature of Arresting/Investigating Officer
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PALM BEACH CNTY SHERIFF'S OFFICE

Date: 09/11/2019
Time: 11:16 AM
Page: 1 of 1

VICTIM NOTIFICATION ENTRY

Defendant Name: GIOVINCO, JONATHAN P

SSN: [REDACTED] Book #: 2019029583

Victim First Name: DEISY

Victim Middle Name:

Victim Last Name: PEREZ-SAMON

Victim Full Name: PEREZ-SAMON, DEISY

Victim Minors Name:

Victim Address 1: 5628 ARBOR CLUB WAY

Victim Address 2:

Victim City: BOCA RATON

Victim State/Zip: FL 33433

Minor Relationship:

Day Phone: (561) 901-5560

Night Phone:

Last 4 SSN:

Victim Type: DOMESTIC VIOLENCE

Victim Id: 167568

Book #: 2019029583

Entry By: 7066 Modified By: 7066

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PALM BEACH COUNTY SHERIFF'S OFFICE

Florida State Statute Exemption Sheet

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.	2,4
	<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: 2019029583	Date: 9/11/2019
	Specialist Name/ID: J. Beck/9007

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SEP 12 2019