

J # 0513579

2019 mmo 13885 AMB

PH# 1682

NH

OBTS Number		ARREST / NOTICE TO APPEAR				1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias		1		Juvenile NH	
Agency ORI Number FL 0500300		Agency Name BOYNTON BEACH POLICE DEPT.				Agency Report Number 34-19-071441					
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 Clearance Indicator	
Location of Arrest (Including Name of Business) 1800 N. Congress Ave, #3402, Boynton Beach, FL 33426						Location of Offense (Business Name, Address) 1800 N. Congress Ave, #3402, Boynton Beach, FL 33426					
Date of Arrest 12/25/2019		Time of Arrest 23:45		Booking Date		Booking Time		Jail Date		Jail Time	
Name (Last, First, Middle) WF Bocinsky, Kendra, Vivian		Alias (Name, DOB, Soc. Sec. #, Etc)									
W - White 1 - American Indian B - Black O - Oriental / Asian		Race W	Sex F	Date of Birth 04/12/84		Height 5'04	Weight 115	Eye Color Hazel	Hair Color Brown	Complexion Fair	Build Med
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status Single		Religion Catholic		Indication of: Alcohol Influence <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Drug Influence <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Local Address (Street, Apt. Number) 1800 N. Congress Ave, #3402, Boynton Beach,		(City) FL		(State) 33426		(Zip) (630)835-4570		Phone (630)835-4570		Residence Type 1. City 3. Florida 2. County 4. Out of State FL DL	
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		Address Source FL DL	
Business Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		Occupation Sr. Manager	
D/L Number, State B252518846320/FL		Soc. Sec. Number		INS Number		Place of Birth Evergreen Park, IL		Citizenship US			
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		Business Phone									
<input type="checkbox"/> Other		Business Phone									
Address (Street, Apt. Number)		(City)		(State)		(Zip)					
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 561-355-2526) informed of any change of address. <input type="checkbox"/> Yes, By: (Name) <input type="checkbox"/> No: (Reason)						School Attended		Grade			
Property Crime? Yes <input type="checkbox"/> No <input type="checkbox"/>		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/ Produce/ 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 Domestic Battery		Counts 1		Domestic Violence <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number 784.03(1)(a)(i)		Violation of ORD#			
Drug Activity N		Drug Type N	Amount/Unit		Offense # 19-071441		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		Day		Year		Time <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 FULLY 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 type="checkbox"/> Suicidal <input type="checkbox"/> Other		Name of Arresting Officer (Print) Ofc. Donnino				I.D. # 977		BU# 114637			
Intake Deputy SPANN 8/10/1		Pouch #		Transporting Officer Ofc. Donnino		I.D. # 977		Agency BBPD		Witness here Signed with SCANNED	

DEC 26 2019

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



On the 25th day of December 2019 at 23:45 hours
 Subject: W/F Bocinsky, Kendra, Vivian DOB: 04/12/84 Case #: 19-071441
 Charge Description: Domestic Battery Statute #: 784.03(1)(a)(i)
 Victim: W/M Brann, Jason DOB: 03/05/83 Race: W Sex: M
 Local Address: 1800 N. Congress Ave, #3402, Boynton Beach, FL, 33426
 Personal Contact: _____

Narrative:

I responded to 1800 N. Congress Ave, #3402, Boynton Beach, FL 33426 in reference to a domestic dispute.

Upon arrival I made contact with the victim W/M Jason Brann (DOB 3/5/83) who advised the following which was captured via body worn camera: He advised he was involved in a dispute with his live in girlfriend W/F Kendra Bocinsky (DOB 4/12/84). He stated he was laying down in a bedroom when Bocinsky came knocking on the door. He got up to answer the door and an argument between him and Bocinsky ensued. He stated Bocinsky grabbed him around the throat. It should be noted I observed redness on the left side of Brann's neck area. He stated he attempted to get her out of the room by escorting her out and while doing so she stumbled and fell to the ground. Bocinsky then got up and punched Brann in the face. It should be noted I observed a small cut on Brann's lower lip. Photographs were taken for documentation purposes. Brann refused medical attention. His statement was captured via body worn camera.

I then made contact with Bocinsky who stated that she came home and entered the bedroom where Brann was. She advised she grabbed him by the face and asked him to talk to her. Bocinsky stated that Brann then grabbed her and pushed her, causing her to fall to the ground. She then got up from the ground and punched him in the face. It should be noted I did observe any signs of physical injury on Bocinsky. Her statement was captured via body worn camera.

I then spoke with Brann again and ask him if he pushed Bocinsky. He denied pushing her and advised he was attempting to escort her out of the bedroom when she tripped and fell. He further advised that Bocinsky had been drinking alcohol and that may have contributed to the events that transpired.

Based on the above facts I find probable cause to charge Bocinsky with Domestic Battery pursuant to F.S. S. 784.03. Bocinsky was detained (doubled locked and checked for spacing) and transported to BBPD for processing. She was later transported to PBCJ where was turned over to PBCJ officials. The entire investigation was captured via body worn camera.

Defendant's Statement: Taped Victim's Statement: Taped

Observation Of Victim (Physical and Emotional):

Redness on neck area, cut on lower lip

Relationship Between Victim and Suspect:

Live in boyfriend and girlfriend

Photographs: Scene: Yes No
 Victim: Yes No
 911 Call: Yes No Caller: W/M Jason Brann
 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: 630-631-4616 Work: _____
 Employer: _____
 Relative Name: _____ Phone: _____
 Address: _____
 City/State: _____

State Of Florida
 County Of Palm Beach
 Appeared before me, Ofc. Donnino, (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 25th day of December 2019


 Notary/Clerk Of Court/Officer (F.S.S. 117 10)



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
	<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: 2019040957	Date: 12/26/2019
	Specialist Name/ID: Joan Dunn/34073