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19/09/2019

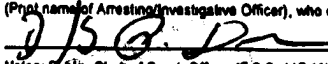
ARREST / NOTICE TO APPEAR
Juvenile Referral Report1 Arrest
2 NTA3 Request for Warrant
4 Request for Capias

1

Juvenile

N

ADMINISTRATIVE	OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-19091410		
	Charge Type Check as many as apply ☒ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Weapon Seized / Type ☒ 1 Yes ☐ 2 No Metal Spoon		Multiple Clearance Indicator				
	Location of Arrest (Including Name of Business) 722 N G St #A, Lake Worth, FL, 33460				Location of Offense (Business Name, Address) 722 N G St #A, Lake Worth, FL, 33460				
	Date of Arrest 07/09/2019	Time of Arrest 1950	Booking Date 07/09/2019	Booking Time	Jail Date	Jail Time	Location of Vehicle N/A		
DEFENDANT	Name (Last, First, Middle) Marcos, Maria,								
	Aliases (Name, DOB, Soc Sec #, Etc.)								
	Race W - White / - American Indian B - Black / - Oriental/Asian	Sex W	Date of Birth 05/01/1985	Height 408	Weight 110	Eye Color Brown	Hair Color Brown	Complexion Light	Build Slim
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) N/A				Marital Status Married	Religion	Indication of Alcohol Influence Drug Influence ☐ Y ☐ N ☐ Unk		
CO-DEF	Local Address (Street, Apt Number) 722 N G St Apt A, Lake Worth, FL, 33460		(City)	(State)	(Zip)	Phone (561) 574-0429	Residence Type 1 City 2 County 3 Florida 4 Out of State 5 Juvenile		
	Permanent Address (Street, Apt Number)		(City)	(State)	(Zip)	Phone	Address Source Verbal		
	Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation Hospitality		
	D/L Number, State		Soc Sec Number		INS Number		Place of Birth (City, State) Guatemala	Citizenship Guatemala	
JUVENILE	Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	☐ 1 Arrested ☐ 3 Felony ☐ 2 At Large ☐ 4 Misdemeanor ☐ 5 Juvenile			
	Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	☐ 1 Arrested ☐ 3 Felony ☐ 2 At Large ☐ 4 Misdemeanor ☐ 5 Juvenile			
	Parent Legal Custodian Other		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	
CHARGE	Released To (Name)		Date		Time				
	The above address provided by defendant and / or defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2528) informed of any change of address ☐ Yes, by (Name) ☐ No (Reason)						School Attended	Grade	
	Property Crime? ☐ Yes ☐ No		Description of Property			Value of Property			
	Drug Activity N N/A P Possess	S Sell B Buy T Traffic	R Smuggle C 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 Hallucinogen M Marijuana O Opium/Deriv
CHARGE	Charge Description Simple Battery		Counts 1	Domestic Violence ☐ Y ☐ N	Statute Violation Number 784.03(2)		Violation of ORD #		
	Drug Activity N/A	Drug Type N/A	Amount / Unit	Offense # 19091410	Warrant / Capias Number		Bond		
	Charge Description		Counts	Domestic Violence ☐ Y ☐ N	Statute Violation Number		Violation of ORD #		
	Drug Activity N/A	Drug Type N/A	Amount / Unit	Offense #	Warrant / Capias Number		Bond		
CHARGE	Charge Description		Counts	Domestic Violence ☐ Y ☐ N	Statute Violation Number		Violation of ORD #		
	Drug Activity N/A	Drug Type N/A	Amount / Unit	Offense #	Warrant / Capias Number		Bond		
	Charge Description		Counts	Domestic Violence ☐ Y ☐ N	Statute Violation Number		Violation of ORD #		
	Drug Activity N/A	Drug Type N/A	Amount / Unit	Offense #	Warrant / Capias Number		Bond		
NOTICE TO APPEAR	Location (Court, Room Number, Address)								
	Court Date and Time Month Day Year Time AM PM								
	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 07/09/2019								
	Signature of Defendant (or Juvenile and Parent / Custodian) Date Signed								
ADMIN	HOLD for other Agency Name		Signature of Arresting Officer D/S C. Weasyel		Name Verification (Printed by Arrestee)				
	☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other		Name of Arresting Officer (Print) D/S C. Weasyel		ID # 33665		(PRINT)		
	Intake Agency 06/10/2019		Pouch #		Transporting Officer D/S C. Weasyel		ID # 33665		
	Agency PBSO		ID # 33665		Agency PBSO		PAGE 1 OF 1		

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 NTA	3 Request for Warrant 4 Request for Capias	1	Juvenile	N
ADMIN	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06- 19091410			
	Charge Type Check as many as apply ☐ 1 Felony ☒ 3 Misdemeanor ☐ 5 Ordinance ☐ 2 Traffic Felony ☐ 4 Traffic Misdemeanor ☐ 6 Other		Special Notes					
CHARGES DEF	Name (Last, First, Middle) Marcos, Maria,		Alias		Race W	Sex F	Date of Birth 05/01/1985	
	Charge Description Simple Battery		784.03(2B)		Charge Description			
	Charge Description		Charge Description					
VICTIM	Victim's Name (Last, First, Middle) Geronimo, Jaime, Jose				Race W	Sex M	Date of Birth 10/10/1985	
	Local Address (Street, Apt. Number) 722 N G St Apt A, Lake Worth, FL, 33460		(City)	(State)	(zip)	Phone (561) 215-3089		Address Source
	Business Address (Name, Street)		(City)	(State)	(zip)	Phone ()		Occupation
PROBABLE CAUSE STATEMENT	The undersigned certifies and 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 ☐ committed the below acts in my presence. ☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts ☒ confessed to D/S L Morales ID#: 26699 admitting to the below facts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the 9th day of July 20 19 at 7:00 ☐ A.M. ☒ P.M. (Specifically include facts constituting cause for arrest) On 07/09/2019, at approx. 1900hrs, I was dispatched to 722 N G ST, Apt A, Lake Worth, FL in reference to a domestic disturbance. Upon my arrival, I made contact with the complainant, identified as Jaime Geronimo, who advised his wife, Maria, hit him in the head with a metal spoon. Deputy I. Morales (ID#: 26699) responded on scene for Spanish translation. It should be noted, prior to interviewing both subjects, Maria uttered to Deputy Morales in Spanish that she was mad and hit him in the head. Geronimo advised the following through translation: He and his wife were in a verbal argument over personal issues they have been going through for quite some time. During the argument, she got mad at him and took a metal spoon from the kitchen and hit him in the head using her right hand. He attempted to duck his head causing her to hit him in the right side of the temple. He did not touch or strike Maria at any time during this altercation. I observed a small laceration on the top of his head and mild bleeding. PBC Fire Rescue responded (run#: 19-073439) but Geronimo refused to go to the hospital. Geronimo provided a sworn tapped statement of the incident. I made contact with his wife, who identified herself as Maria Marcos, who advised the following through Spanish translation: Her and her husband have been going through personal issues and he came home drunk. She took his phone from him because he was drunk and he got mad at her. He kept asking her for his phone and she told him no. They sat down for dinner and continued to verbally argue. He then tapped the side of her face to make her mad. She told him to stop playing around and thats when he grabbed onto both of her hands. At this time she was holding a spoon in her hand and when he grabbed onto her she pushed him and the spoon hit him in the head. Maria provided me a sworn tapped statement of the incident. I did not observe any marks or swelling consistent with being hit in the face. Based on the statements given by each party and the injury on Geronimo, there was evidence that a physical altercation occurred. Maria was placed under arrest for one counts of Simple Battery, Domestic per FSS 784.03 (2B). Maria was placed in handcuffs that were double locked and checked for tightness. Maria was further processed and transported to the Palm Beach County Jail for booking.							
	STATE OF FLORIDA COUNTY OF PALM BEACH  (Signature of Arresting/Investigative Officer) D/S C. Wensyel The foregoing instrument was sworn to or affirmed and subscribed before me this 9th day of July 20 19 by D/S C. Wensyel (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification Type of identification produced LEO  Notary Public, Clerk of Court, Officer (F.S.S. 117.10) D/S P. DWAN #33744							
	PAGE 1 OF 1							

Palm Beach County Sheriff's Office
DOMESTIC VIOLENCE/DATING VIOLENCE SUPPLEMENTAL PROBABLE CAUSE FORM
(Submit this form with the original Probable Cause affidavit)

Suspect: Marcos, Maria, DOB: 05/01/1985 Case #: 19091410

Victim: Geronimo, Jaime, Jose DOB: 10/10/1985 Race: W Sex: M

Relationship between Victim and Defendant: Spouse

Photographs: Scene Yes ☐ No ☒ Victim ☒ Yes ☐ No ☐ Defendant ☒ Yes ☐ No ☐

911 Call: Yes ☐ No ☒ Caller:

Weapon Used: ☒ Yes ☐ No ☐ Type: Metal Spoon

Witness: Yes ☐ No ☒ Name:

Victim Pregnant: Yes ☐ No ☒ If yes, weeks months

Injuries: ☒ Yes ☐ No Description: Laceration

Medical Treatment: ☒ Yes ☐ No

At Scene: ☒ Yes ☐ No Paramedics: PBCFR

At Hospital: Yes ☐ No ☒ Hospital: Physician:

Are Children Living in Home? ☒ Yes ☐ No DCF Notified? ☒ Yes ☐ No

Name: Moises Geronimo DOB: 11/15/2008

Name: Josue Geronimo DOB: 06/22/2011

Name: Daisy Geronimo DOB: 02/15/2015

Injunction Yes ☐ No ☒

Case #:

No Contact Order Yes ☐ No ☒

Case #:

Alcohol or Drugs Yes ☐ No ☒ Unknown ☐

Prior History of Domestic/Dating Violence Yes ☐ No ☒

Defendant's Statements ☒ Yes ☐ No If yes, written ☒ recorded ☐ oral

First words Defendant said when you responded to scene: "I was mad and hit him in the head"

Victim's Statements ☒ Yes ☐ No If yes, written ☒ recorded ☐ oral

First words Victim said when you responded to scene: Crying/Hysterical

Did the Victim contact anyone other than police within an hour of the incident regarding the incident?

☐ Yes ☒ No If yes, name: phone () -

Observations of Victim (Physical & Emotional):

Upset ☒ Crying ☐ Fearful ☒ Hysterical ☐ Afraid ☐ Calm ☐ Nervous

☒ Complained of pain Other

Victim Contact Information:

Local Address: 722 N G St Apt A, Lake Worth, FL, 33460

Phone: Home (561) 215-3089 Work () - Cell () -

Employer:

Name of Relative: Phone () -

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.

SUSPECT/OFFENDER: **Marcos , Maria ,**

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT#.

1. Incident Report #: 19091410 Agency: PBSO
Offense: Aggregated Battery
Suspect/Offender: Marcos , Maria ,
D.O.B. 05/01/1985 Race: W Sex: F
2. Warrant # (s): _____
- 3.a. Victim's name: Geronimo, Jaime, Jose D.O.B. 10/10/1985 Race: W Sex: M
Address: 722 N G St Apt A
City: Lake Worth, FL, 33460
Home #- (561) 215-3089 Work #: 0 Other: _____
- b. Victim's next of kin, friend or neighbor: N/A
Address: _____
City: _____
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: Geronimo, Jaime, Jose

Deputy's Name: D/S C. Wensyel

I.D.# 33665

Date: 07/09/2019

White/Corrections or State Attorney (Warrant Application)

Yellow/Warrants Section

Pink/Central Records