

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1. Arrest 3. Request for Warrant
2. N.T.A. 4. Request for Capias

3 Juvenile N

ADMINISTRATION
Agency ORI Number: FL 0500300
Agency Name: BOYNTON BEACH POLICE DEPT.
Agency Report Number: 34-18-026639
Charge Type: 1. Felony, 2. Traffic Felony, 3. Misdemeanor, 4. Traffic Misdemeanor, 5. Ordinance, 6. Other
Location of Arrest: 400 SE 12TH AVE BOYNTON BEACH FL 33435
Date of Arrest, Time of Arrest, Booking Date, Booking Time, Jail Date, Jail Time, Location of Vehicle

DEFENDANT
Name: MOSCHETTO, MARK
Race: W, Sex: M, Date of Birth: 05/15/1970, Height: 5'10, Weight: 200, Eye Color: BROWN, Hair Color: BROWN, Complexion: OLIVE, Build: MED
Local Address: 911 S FEDERAL HWY UNIT 34 BOYNTON BEACH FL 33435
Phone: (312)909-8672
Residence Type: 1. City, 2. County, 3. Florida, 4. Out of State
Permanent Address: NONE
Business Address: NONE
D/L Number: M230-540-70-175-0
INS Number: [REDACTED]
Place of Birth: NEW YORK, NY
Citizenship: US

CO-DEF
Co-Defendant Name, Race, Sex, Date of Birth, Arrested, Felony, Misdemeanor, Juvenile
Parent/Legal Custodian Name, Address, Business Phone, Notified by, Released To, Relationship, Date, Time, Juvenile Disposition
The above address was provided by defendant and/or 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.
Property Crime? Description of Property, Value of Property

JUVENILE
CODE
CHARGE
AGGRAVATED BATTERY
Counts: 1, Domestic Violence: Yes, Statute Violation Number: 784.045.1.A.1, Warrant/Capias Number: 18-026639
Charge Description, Drug Activity, Drug Type, Amount/Unit, Offense #, Statute Violation Number, Warrant/Capias Number, Violation of ORD#

NOTICE TO APPEAR
Instruction No. 1: Mandatory Appearance in Court
Instruction No. 2: You need not appear in Court but must Comply with instruction on reverse side.
Location (Court, Room Number, Address): South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444
Court Date and Time: Month, Day, Year, Time (A.M./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 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.

ADMIN.
Signature of Defendant (or Juvenile and Parent/Custodian), Date Signed, Signature of Arresting Officer, Name Verification (Printed by Arrestee), Name of Arresting Officer (Print), I.D. #, Intake Deputy, Pouch #, Transporting Officer, I.D. #, Agency, Witness here is subject Signed with an "X".
PICCIANO H. 923 BU#

DOMESTIC VIOLENCE PROBABLE CAUSE AFFIDAVIT
PALM BEACH COUNTY

On the 18 day of MAY 2018 at 1832
Subject: MOSCHETTO, MARK DOB: 05/15/1970 Case #: 18-026639
Charge Description: AGGRAVATED BATTERY Statute #: 784.045.1.A.1
Victim: SCHAAR, AMBER DOB: 5/29/1992 Race: W Sex: F
Local Address: 911 S FEDERAL HWY , BOYNTON BCH ,FL, 33435
Personal Contact: _____

Narrative:

I rebounded to the 400 block of SE 12th Ave. in reference to an assault. Upon arrival I met with W/F Amber Schaar who was bleeding from the face, arms and legs and crying hysterically. Schaar advised she was in a verbal altercation with her boyfriend, W/M Mark Moschetto at which time he opened the car door, hit her in the face and pushed her out of the moving vehicle. Moschetto then fled the area at a high rate of speed traveling West on SE 12th Ave. The vehicle was described as a purple in color Dodge challenger bearing FI tag JNNR54. Responding units canvassed the area for the suspect vehicle which yielded negative results.

At this time BBFR responded to the scene and transported Schaar to Bethesda East where she was treated for her injuries. Once at Bethesda Schaar was able to calm down and provide me with further information. Schaar stated she and Moschetto have been living together at the Tiki hut motel (911 S. Federal Hwy. unit 34) off and on for the past year and a half. Schaar advised Moschetto is currently going through a divorce from his wife and today he found out he would have to pay a large sum of money as a result of the divorce. Schaar stated Moschetto got very upset with her out of no where and started to yell and push her while they were driving. Schaar stated Moschetto reached across her and opened the car door (while the vehicle was in motion) and was hitting her in the face consequently pushing her out of the moving vehicle.

Schaar sustained a laceration to the right eyebrow, a bruised swollen right eye and multiple abrasions/ road rash to the arms and legs. Schaar's statement was captured via body worn camera. Photo's of Schaars injuries were taken and placed into ADAMS. The 911 dispatch tape was requested, exemption from public medical records and all medical forms were completed.

Officer Jones and I attempted to make contact with Moschetto at the Tiki hut motel (room 34) and at his previous address (130 Harbors Way #30) and were met with negative results. Based on the aforementioned I have probable cause for the arrest of Mark Moschetto for Aggravated battery (Domestic related) pursuant to F.S.S. 784.045.1.A.1.

Defendant's Statement: None

Victim's Statement: Oral

Observation Of Victim (Physical and Emotional):

Bleeding and crying.

Relationship Between Victim and Suspect:

boyfriend and girlfriend whom reside together.

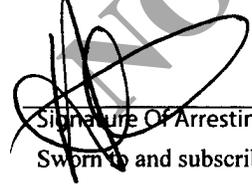
Photographs: Scene: Yes No
 Victim: Yes No
 911 Call: Yes No Caller: _____
 Tape Requested: Yes No
 Weapon Used: Yes No Type: _____
 Witnesses: Yes No
 Injuries: Yes No
 Medical Treatment: Yes No
 At Scene Yes No Paramedics: BBFR
 At Hospital Yes No Physician(s): _____
 Hospital: Bethesda

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: none Work: none
 Employer: unemployed
 Relative Name: Christopher (unknown last) Phone: 561-2230062
 Address: unknown
 City/State: _____

State Of Florida
 County Of Palm Beach
 Appeared before me, PICCIANO H., (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 18 day of May, 18


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