C1945556

18MM100359400

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1. Arrest 2. N.T.A. 3. 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- 18-116234

Charge Type: Check as many as apply: [ ] 1. Felony [ ] 2. Traffic Felony [x] 3. Misdemeanor [ ] 4. Traffic Misdemeanor [ ] 5. Ordinance [ ] 6. Other

Weapon Seized / Type: 2 (1. Yes 2. No)

Multiple Clearance Indicator: 01

Location of Arrest (Including Name of Business): 15490 LOX RD : @LOXAHATCHEE EVERGLADES TOURS #/, BOCA RATON, FL 33428

Location of Offense (Business Name, Address): 15490 LOX RD : @LOXAHATCHEE EVERGLADES TOURS #/, BOCA RATON, FL 33428

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
09/03/2018	0056					

DEFENDANT

Name (Last, First, Middle): Sauickie, Petra, Paula

Alias (Name, DOB, Soc. Sec. #, Etc.)

Race (W - White I - American Indian B - Black 0- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	9/18/1973	5'04	150	GREEN	BROWN	Light	Medium

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description): tiger to right thigh, roses to left thigh

Marital Status: Single

Religion: CATHOLIC

Indication of: Alcohol Influence [ ] Y [ ] N [x] Unk. / Drug Influence [ ] Y [ ] N [x] Unk.

Local Address (Street, Apt. Number) (City) (State) (Zip): 153 Sandpiper Ave, Royal Palm Beach, FL 33411

Phone: (561) 797-2232

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip): /, /

Phone: ( )

Address Source: FL DL

Business Address (Name, Street) (City) (State) (Zip): /

Phone: (/) /

Occupation: Bookkeeper

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
S200675738380, FL	[redacted]		West Palm Beach, FL	USA

CO-DEF

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

JUVENILE

[ ] Parent [ ] Legal Custodian [ ] Other: Name (Last) (First) (Middle) | Residence Phone ( )

Address (Street, Apt. Number) (City) (State) (Zip) | Business Phone ( )

VICTIM NOTIFICATION REQUIRED

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 provided by [ ] defendant and / or [ ] defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. [ ] Yes, by: (Name) [ ] No: (Reason)

School Attended | Grade

Property Crime? [ ] Yes [ ] No | Description of Property | Value of Property

CODE

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. Barbiturate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/ Equipment S. Synthetics U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DOMESTIC BATTERY (SIMPLE)	1	[x] Y [ ] N	784.03(1)(a)(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant I Capias Number	Bond
N	N	/	18-116234		NO Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		[ ] Y [ ] N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		[ ] Y [ ] N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		[ ] Y [ ] N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

NOTICE TO APPEAR

Location (Court, Room Number, Address): South County Courthouse, Courtroom #1, 200 W. Atlantic Ave., Delray Beach, FL 33444 - Ph: (561) 355-2996

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

09/03/2018

Signature of Defendant (or Juvenile and Parent /Custodian) | Date Signed

SCANNED

ADMIN

HOLD for other Agency Name:

[ ] Dangerous [ ] Resisted Arrest [ ] Suicidal [ ] Other:

Signature of Arresting Officer: 30553

Name of Arresting Officer (Print): D/S J. CARMENATE | I.D. #: 30553

Name Verification (Printed by Arrestee) (PRINT): SEP 4 - 2018

Intake Deputy: DS Tolle 2677 | I.D. # | Pouch #

Transporting Officer: D/S J.Carmenate | ID #: 30553 | Agency: PBSO

Witness here if subject signed with an -X"

PAGE 1 OF 1

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PBSO #148 REV. 8/97

CARMENATE 30553

SEP 3 AM 3:41

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2018 SEP 5 PM 3:41 PALM BEACH COUNTY FL CLERK & COMPTROLLER BOCA RATON COURT RECORDS BRANCH

PROBABLE CAUSE AFFIDAVIT

OBTS Number:

1. Arrest 2. N.T.A. 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- 18-116234

Charge Type: Check as many as apply. 1. Felony 2. Traffic Felony [X] 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
Sauickie, Petra, Paula		W	F	9/18/1973

CHARGES

Charge Description		Charge Description	
DOMESTIC BATTERY (SIMPLE)	784.03(1)(a)(1)		
Charge Description		Charge Description	

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
Barreca, Jerome,	W	M	12/14/1980

Local Address (Street, Apt. Number) (City) (State) (zip)	Phone	Address Source
1677 D Rd, Loxahatchee, FL 33470	(561) 222-7301	FL DL
Business Address (Name, Street) (City) (State) (zip)	**Phone**	**Occupation**
/	(/) /	Book Keeper

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.
- [ ] confessed to _____ admitting to the below facts.
- [ ] was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
- [X] was found to have commited the below acts, resulting from my (described) investigation.

On the 03 day of September 2018 at 0056 [X] A. M. [ ] P.M. (Specifically include facts constituting cause for arrest.)

PROBABLE CAUSE STATEMENT

On Monday September 03, 2018 at approximately 0015 hours, I was dispatched to 15490 LOX RD : @LOXAHATCHEE EVERGLADES TOURS, located in unincorporated Boca Raton within Palm Beach County FL, 33428 in reference to a Domestic Battery.

Upon my arrival, I met with a Broward County Sheriff's Office (BSO) Deputy who was on scene prior to my arrival, D/S G. Michalosky ID# 13549. Upon speaking to D/S Michalosky, he stated that he responded to a call reference a battery. D/S Michalosky stated upon speaking to victim, later identified as Jerome Barreca, he stated he and his girlfriend of one year were at the above location to go air-boat riding. Jerome then told D/S Michalosky that Suspect, later identified as Petra Sauickie, thought Jerome was going to leave her in the parking lot, as he already had loaded up the boat and was ready to leave; and thats when a verbal argument took place. D/S Michalosky went on to tell me Jerome continued to say, as they began to argue Petra then took Jerome's wallet, at which point Petra and Jerome then began to tussle, as he attempted to get his wallet back. Jerome stated as he retrieved his wallet from Petra as she threw it, she then punched him with a closed fist with her right hand to the left side of his head and mouth. Jerome stated he then got away from her and called 9-1-1.

I then spoke Jerome Barreca and he confirmed the above stated by D/S Michalosky. Jerome completed and signed sworn written statement confirming the above mentioned. I observed Jerome to have a bruise and swelling to his left temple area. Jerome refused to be medically checked by emergency medical services (EMS). Photos were taken of Jerome.

After speaking with the above mentioned, I spoke with Petra Sauickie. Petra stated she and her boyfriend of about one year were at the above location to go air-boat riding. Petra said as he was getting ready to leave, she believed her boyfriend Jerome was going to leave her there, and they began to argue. Petra then stated she took his wallet so he would not leave her in the parking lot. Petra said as she took his wallet they then began to tussle for his wallet at which point she stated she just handed it to him. Petra denies ever throwing his property and denies ever hitting Jerome. Petra then stated Jerome struck in the face by unknown means. I observed no injuries to petra face and I observed Petra to have a scratch to her right pinky finger with dry blood. Petra stated the scratch occurred during the incident. Petra refused EMS and refused to have pictures taken.

Based on my investigation, and injuries present at time of investigation I found Petra Sauickie to be in violation of Florida state statue 784.03 (1)(a)(1), Domestic Battery.

Petra Sauickie was then placed into handcuffs, double locked, and checked for proper fit. Petra Sauickie was then taken back to my marked Palm Beach County Sheriff's Office green and white patrol car, and transported to District 7 substation for completion of paperwork.

This case is cleared by arrest.

D/S J. Carmenate #30553

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ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

30553

D/S J. CARMENATE
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 03 day of September 2018 by D/S J. CARMENATE

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Known

2290
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

SCANNED
SEP 4 - 2018

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY

PBSO #0004 REV. 04/01

PALM BEACH COUNTY SHERIFF'S OFFICE – **SWORN STATEMENT**

Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.

☐ WITNESS ☒ VICTIM ☐ OTHER

CASE #: 18-116234	ZONE: #63	SUSPECT: Rolea Sawckie	DATE & TIME OF ORIGINAL EVENT/OFFENSE: 9/3/18 1300 3/D
EVENT TYPE: Domestic Battery		DEPUTY: GARCIA	ID#: 2128

COMPLETE EVERYTHING BELOW – PRINT LEGIBLY

LAST NAME:	FIRST NAME:	MIDDLE INITIAL:	RACE:	SEX:
Barreca II	Jerome		W	M

DATE OF BIRTH: (MM/DD/YYYY)	YOUR HEIGHT:	YOUR WEIGHT:	YOUR HAIR COLOR:	YOUR EYE COLOR:
12-14-80	5'6	150	Brown	Blue

YOUR HOME ADDRESS: ☐ CHECK IF HOMELESS	CITY:	STATE:	ZIP:
1677 "D" Road	Loxahatchee	FL	33470
YOUR WORK NAME & ADDRESS: ☐ CHECK IF UNEMPLOYED OR RETIRED	**CITY:**	**STATE:**	**ZIP:**

WORK PHONE: ☐ CHECK IF NONE	CELL PHONE: ☐ CHECK IF NONE	HOME PHONE: ☐ CHECK IF NONE	EMAIL: ☐ CHECK IF NONE
( )	561 222-7301	( )	

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL – PRINT LEGIBLY

I YOUR NAME: Jerome Barreca

DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...

Came back to the boat ramp, loaded boat up on trailer, shut boat off, she got down, grabed her stuff and mine, wallet only. She threw my wallet and then punched me in the left side of my head and mouth with a closed fist, right after that, I called the police

SCANNED
SEP 4 - 2018

PAGE 1 OF 1

READ AND SIGN

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:

YOUR SIGNATURE: X Jerome Barreca II

☐ DEPUTY SHERIFF ☐ NOTARY PUBLIC FSS: 117.10

SWORN TO AND SUBSCRIBED BEFORE ME TODAY:

DATE: 9/3/11 TIME: 0100

SIGNATURE: _____ ID: 2128

IF YOU DO NOT WISH TO PROSECUTE, COMPLETE THE ABOVE STATEMENT, READ THIS DISCLAIMER AND INITIAL BELOW: I AM OF LEGAL AGE AND I AM THE REPORTED VICTIM OF A CRIME UNDER FLORIDA LAW. I HEREBY STATE THAT I **WILL NOT** COOPERATE ANY FURTHER WITH THE INVESTIGATION OF THE ALLEGED CRIME. I FURTHER RELEASE THE PALM BEACH COUNTY SHERIFF'S OFFICE OF ANY PRESENT OR FUTURE RESPONSIBILITY AS TO MY CASE. I ACKNOWLEDGE THAT I UNDERSTAND MY RIGHTS AS A CRIME VICTIM, **PARTICULARLY REGARDING VICTIM COMPENSATION ELIGIBILITY**, WHICH INCLUDES SUCH BENEFITS AS REIMBURSEMENT FOR: DISABILITY; LOST WAGES; LOSS OF SUPPORT; MEDICAL, DENTAL, MENTAL HEALTH COUNSELING AND FUNERAL EXPENSES. I AM AWARE I MAY BE GIVING UP THESE RIGHTS FOR MY FAMILY AND MYSELF BY INITIALLING BELOW. I AM TAKING THIS POSITION OF MY OWN FREE WILL KNOWING THAT THE CASE CAN ONLY BE FURTHER INVESTIGATED AND PROSECUTED WITH MY COOPERATION.

☐ DO NOT WISH TO PROSECUTE (INITIAL _____)

(PROSECUTION WAIVER NOT TO BE USED FOR CASES INVOLVING DOMESTIC OR DATING VIOLENCE PER G.O. 508.00)

WHITE - RECORDS COPY *CANARY* - STATE ATTORNEY COPY *PINK* - OFFICER'S COPY *GOLD* - WITNESS / VICTIM COPY

PBSO #0134 REV. 12/11

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VICTIM NOTIFICATION FORM

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

- **Homicide** (Ch. 782)
- **Attempted Murder**
- **Stalking** (F.S. 784.048)
- **Sexual Offense** (Ch. 794)
- **Attempted Sexual Offense**
- **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: **Sauickie, Petra, Paula** (FOR WARRANTS USE ONLY) COURT CASE/WARRANT#: _____

1. Incident Report #: **18-116234** Agency: **PBSO**
   Offense: **DOMESTIC BATTERY (SIMPLE)**
   Suspect/Offender: **Sauickie, Petra, Paula**
   D.O.B. **9/18/1973** Race: **W** Sex: **F**

2. Warrant # (s): _____

3.a. Victim's name: **Barreca, Jerome,** D.O.B. **12/14/1980** Race: **W** Sex: **M**
   Address: **1677 D Rd**
   City: **Loxahatchee, FL 33470**
   Home #- **(561) 222-7301** Work #: **(/) /** Other: _____

b. Victim's next of kin, friend or neighbor: _____
   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).

RECEIVED SEP 4 - 2018

Signature of person waiving notification: _____

Printed name of person waiving notification: **Barreca, Jerome,**

Deputy's Name: **D/S J. CARMENATE** I.D.# **30553** Date: **09/03/2018**

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

PBSO 00029A REV. 4199

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Palm Beach County Sheriff's Office

DOMESTIC VIOLENCE/DATING VIOLENCESUPPLEMENTAL PROBABLE CAUSE FORM

(Submit this form with the original Probable Cause affidavit)

Suspect: Sauickie, Petra, Paula **DOB:** 9/18/1973 **Case #:** 18-116234

Victim: Barreca, Jerome, **DOB:** 12/14/1980 **Race:** W **Sex:** M

Relationship between Victim and Defendant: _____

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

911 Call: ☒ Yes ☐ No **Caller:** Barreca, Jerome,

Weapon Used: ☐ Yes ☒ No **Type:** _____

Witness: ☐ Yes ☒ No **Name:** _____

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

Injuries: ☒ Yes ☐ No **Description:** Bruise and swelling to left temple area.

Medical Treatment: ☐ Yes ☒ No

At Scene: ☐ Yes ☒ No **Paramedics:** Refused

At Hospital: ☐ Yes ☒ No **Hospital:** _____ **Physician:** _____

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

Name: _____ **DOB:** __/__/____

Name: _____ **DOB:** __/__/____

Name: _____ **DOB:** __/__/____

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: _____

_____

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

First words Victim said when you responded to scene: _____

_____

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 complained of pain but refused Medical treatment.

Victim Contact Information:

Local Address: 1677 D Rd, Loxahatchee, FL 33470

_____

Phone: Home (561) 222-7301 Work (___)___ -_____ Cell (___)___ -_____

Employer: /

Name of Relative: _____ **Phone** (___)_____-_____

Address: _____

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SCANNED SEP 4 - 2018

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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2018029532	**Date:** 9/3/2018
	Specialist Name/ID: J. Beck/9007

SCANNED
SEP 4 - 2018