

0498042

2309

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

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

Juvenile

ADMINISTRATIVE	OBTS Number	Agency ORI Number FLO, 5, 0, 0, 2, 0, 0		Agency Name BOCA RATON POLICE SERVICES DEPT.		Agency Report Number (N.T.A.'s only) 3, 2-11, 8-16, 3, 2, 9, 10, 11		
	Charge Type: Check as many as apply.	<input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 21 2. No		Multiple Clearance Indicator		
	Location of Arrest (Including Name of Business) 1441 SW 17th St Boca Raton				Location of Offense (Business Name, Address) 1441 SW 17th Boca Raton			
DEFENDANT	Date of arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle	
	Name (Last, First, Middle) Mahn, Ryan Taylor							
	Alias (Name, DOB, Soc. Sec. #, Etc.)							
	Race	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) None							
	Local Address (Street, Apt. Number) 1441 SW 17th St Boca Raton FL 33422				Phone (561) 716-8272		Residence Type: 3. Florida 4. Out of State	
	Permanent Address (Street, Apt. Number) 1441 SW 17th St Boca Raton FL 33432				Phone (561) 716-8272		Address Source N/A	
	Business Address (Name, Street) N/A				Phone ( )		Occupation Student	
	D/L Number, State HS00738931080		INS Number		Place of Birth (City, State) Boca Raton FL		Citizenship US	
	CO-DEF. Co-Defendant Name (Last, First, Middle) N/A							
JUVENILE	Parent Legal Custodian Name (last) (First) (Middle) N/A (NONE)							
	Address (Street, Apt. Number) (City) (State) (Zip) N/A (NONE)							
	Notified by: (Name) (Date) (Time) (Juvenile Disposition) N/A (NONE)							
	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 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)							
	Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No Description of Property Value of Property							
	Drug Activity Charge Description Counts Domestic Violence Statute Violation Number Violation of ORD # Domestic Strangulation 1 7.8.4.10.4.1 (N/A)							
	Drug Activity Drug Type Amount / Unit Offense # Warrant / Capias Number Bond 2018-6329							
	Health/Apparent Physical Condition of Defendant Property - Rec'd. By Released By Released To							
	Any knowledge of the following, place an "X" and explain: <input type="checkbox"/> Mental: <input type="checkbox"/> Escape Risk: <input type="checkbox"/> Medication: <input type="checkbox"/> Deformities: <input type="checkbox"/> Injuries Explain:							
Check which applies: <input type="checkbox"/> Released O.R.: <input type="checkbox"/> Posted Bond: <input type="checkbox"/> Released to Parent/Guardian: <input type="checkbox"/> S. County Mental Health: <input type="checkbox"/> T.O.T. County Jail								
Transported By: _____ Date _____ Time _____ Other _____								
INSTRUCTION TO APPEAR: <input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court <input type="checkbox"/> Instruction No. 2 You need not appear in Court but must comply with instructions on Reverse Side.								
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.								
Signature of Defendant (or Juvenile and Parent/ Custodian) Date Signed								
HOLD for other Agency Name: _____ Signature of Arresting Officer Name Verification (Printed by Arrestee)								
Intake Deputy I.D. # Pouch # Transporting Officer I.D. # Agency								

VICTIM NOTIFICATION  
REQUIRED

MAY 6 PM 4:30  
SCANNED  
MAY 07 2018

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

A D M I N	Date / Time <b>05/06/2018 13:30</b>		Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>		Agency Report Number <b>3   2   2018-006329</b>	
	Agency ORI Number <b>FL 0500200</b>		Name (Last, First, Middle) <b>HAHN, RYAN TAYLOR</b>		Race <b>W</b>	Sex <b>M</b>
D E F	Charge Description <b>784.041(2) DOMESTIC BATTERY BY STRANGULATION</b>		Date of Birth <b>03/28/1993</b>			
	Victim's Name (Last, First, Middle) <b>MIKAZANS, NATASHA M</b>		Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>08/09/1994</b>	
C H I C G	Local Address (Street, Apt. Number) (City) (State) (Zip) <b>470 SW 6TH AVE, BOCA RATON, FL 33486</b>		Phone <b>(561) 391-1276</b>		Address Source <b>FL DL</b>	
	Business Address (Name, Street) (City) (State) (Zip) <b>ART INSTITUTE OF FT LAUDERDALE, FT LAUDERDALE</b>		Phone		Occupation <b>STUDENT</b>	
V I C T I M	DEFENDANT'S STATEMENTS: Written <input type="checkbox"/> Taped <input type="checkbox"/> Oral <input type="checkbox"/>		OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): <b>CRYING</b>			
	VICTIM'S STATEMENTS: <input type="checkbox"/> <i>(Refused)</i> <input type="checkbox"/> <input type="checkbox"/>					
A D D I T I O N A L I N F O R M A T I O N	RELATIONSHIP BETWEEN VICTIM & SUSPECT <b>BOYFRIEND</b>					
	PHOTOGRAPHS: Scene: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Victim: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
911 CALL: <input type="checkbox"/>		CALLER: <input checked="" type="checkbox"/>				
WEAPON USED: <input type="checkbox"/>		TYPE: <input checked="" type="checkbox"/>				
WITNESSES: <input type="checkbox"/>		(If YES, attach witness list) <input checked="" type="checkbox"/>				
INJURIES: <input type="checkbox"/>		<input checked="" type="checkbox"/>				
MEDICAL TREATMENT: <input type="checkbox"/>		<input checked="" type="checkbox"/>				
AT: Scene: <input type="checkbox"/>		PARAMEDICS: <input checked="" type="checkbox"/>				
Hospital: <input type="checkbox"/>		PHYSICIAN(S) / HOSPITAL: <input checked="" type="checkbox"/>				
ACT COMMITTED IN PRESENCE OF MINOR(S): <input type="checkbox"/>		NAMES/AGES: <input checked="" type="checkbox"/>				
H. R. S. NOTIFIED: <input type="checkbox"/>		<input checked="" type="checkbox"/>				
VICTIM PREGNANT: <input type="checkbox"/>		<input checked="" type="checkbox"/>				
VIOLATION OF RESTRAINING ORDER: <input type="checkbox"/>		CASE #: <input checked="" type="checkbox"/>				
PRIOR HISTORY OF DOMESTIC VIOLENCE: <input type="checkbox"/>		<input checked="" type="checkbox"/>				
ALCOHOL OR DRUGS INVOLVED: <input type="checkbox"/>		<input checked="" type="checkbox"/>				
N A R R	On 05/06/18 at 1122hrs, I responded to SW 6th Ave, in reference to domestic battery.					
	Upon arrival I met Victim Netasha Mikazans. Netasha was visibly crying and upset. Netasha explained her father called the Boca Raton Police Department because Netasha was not sure what do. After a lengthy					
STATE OF FLORIDA COUNTY OF PALM BEACH Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.  <i>[Signature]</i> SIGNATURE OF ARRESTING OFFICER  Sworn to and subscribed to before me this <u>6</u> day of <u>May</u> , 2018.  <i>[Signature]</i> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)						

CERTIFIED COPY

SCANNED  
MAY 07 2018

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County  
Narrative Continuation

A D M I N	Date / Time <b>05/06/2018 13:30</b>	Agency ORI Number <b>FL 0500200</b>	Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>	Agency Report Number <b>3   2   2018-006329</b>
	N A R R A T I V E			

investigation, Netasha stated the following. Netasha stated on 05/05/18, she went out with her boyfriend of one year, Defendant Ryan Hahn, to Roco's Tacos, then to the Brickyard Restaurant in Boca Raton. Netasha advised they had a good time. Netasha advised afterwards Ryan and Netasha left. Netasha explained on 05/06/18 at approx 0300hrs, Ryan and Netasha went to Ryan's house located at 1441 SW 17th St, Boca Raton. Netasha stated while she was in Ryan's bedroom, she received a snap chat from Ryan's cell phone. Netasha advised the snap chat was a picture of Ryan with a mustache saying I made out with two chicks with this mustache. Netasha stated Ryan believed Ryan sent the snap chat photo to his friends, but sent this snap chat to Netasha by mistake. Netasha advised Ryan became upset and pulled her cell phone from her right hand. Netasha stated Ryan continually told Netasha please dont leave my house. Netasha explained Ryan then pushed Netasha to the ground and held Netasha there by placing one of his hands (unknown) around Netasha's throat. Netasha stated she could not breathe and told Ryan to stop. Netasha advised Ryan would not let Netasha up from the floor. Netasha explained Ryan then picked Netasha up by the throat and put Netasha on Ryan's bed, still holding Netasha by the throat, but also using one of his arms around Netasha's neck too. Netasha stated Ryan continued to choke Netasha, not letting go. Netasha advised she told Ryan numerous times to stop, but could not anymore because Netasha could not breathe. Netasha explained Ryan eventually stopped and later drove Netasha home. I observed a large reddish mark behind Netasha's neck, small scratch marks on the front left and right shoulders of Netasha, a reddish mark near Netasha's neck, a reddish bruise colored mark on the left side of Netasha's stomach and reddish lines on the front of Nowadays's stomach. When asked about the marks on Netasha's body, Netasha responded by saying Ryan did not mean too (meaning touch Netasha). It should be noted Netasha is 5-04, 110lbs and per Netasha description, Ryan is 5-10, 185lbs.

Ofc Leinonen and I responded to 1441 SW 17th St. I met with Ryan. Ryan walked outside. Post miranda Ryan refused to talk.

Based on Netasha statement and the physical evidence present, Ryan knowingly and intentionally, against the will of another, impedes the normal breathing or circulation of the blood of a family or household member or of a person with whom he or she is in a dating relationship, so as to create a risk of or cause great bodily harm by applying pressure on the throat or neck of the other person or by blocking the nose or mouth of the other person.

Ryan was placed under arrest and charged with (1) count of Domestic Strangulation F.S.S. 784.041(2A). Ryan was placed in handcuffs, double locked, checked for tightness and transported to the BRPD.

Ryan was later TOTCU.

STATE OF FLORIDA  
COUNTY OF PALM BEACH

Appeared before me, \_\_\_\_\_ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.

*[Signature]*  
SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 6 day of May, 2018

MP614  
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

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.

1. Incident Report#: 2018-6329 Agency: Boca Raton  
 Offense: Domestic Violence  
 Suspect/Offender: Ryan Taylor Hahn  
 D.O.B. 3/28/93 Race: W Sex: M

2. Warrant#(s): \_\_\_\_\_

3.a. Victim's name: Netasha Mikozaus (SM) D.O.B. 8/8/74 Race: W Sex: F  
 Address: 470 SW 6th Ave  
 City: Boca Raton State: FL Zip: 33432  
 Home# (561) 512-9538 Work#: \_\_\_\_\_ Other: \_\_\_\_\_

b. Victim's next of kin, friend or neighbor: n/r  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 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: Pursuant to F.S.119.07 (3)(S)1, I request that the address and telephone number on this form be kept confidential (applicable only to sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery, or domestic violence cases).  
 Other confidentiality provisions of Florida State Statutes may also be applicable

Signature of person waiving notification: \_\_\_\_\_

Printed name of person waiving notification: \_\_\_\_\_

Officer's Name: MSErlin I.D.# 665 Date: 05/06/18  
 White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records

SUSPECT/OFFENDER: \_\_\_\_\_  
 COURT CASE/WARRANT#: \_\_\_\_\_  
 (FOR WARRANTS USE ONLY)

SCANNED  
MAY 07 2018