

0491227

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report1. Arrest 3. Request For Warrant  
2. N.T.A. 4. Request For Capias

1 Juvenile N

|   |                               |   |  |  |  |  |   |  |  |                               |  |  |
|---|-------------------------------|---|--|--|--|--|---|--|--|-------------------------------|--|--|
| OBTS Number   |                               | PALM BEACH COUNTY SHERIFF'S OFFICE  |  |  |  |  |   | Agency Report Number   | 06   | 17124852                      |  |  |
| Agency ORI Number<br><b>FLO 5 0 0 0 0 0</b>   |                               | Agency Name   |  |  |  |  |   | Enter Type   |  | Multiple Clearance Indicator  |  |  |
| Charge Type:<br>Check as many as apply  |                               | <input type="checkbox"/> 1. Felony<br><input checked="" type="checkbox"/> 3. Misdemeanor<br><input type="checkbox"/> 2. Traffic Felony<br><input type="checkbox"/> 4. Traffic Misdemeanor |  |  | <input type="checkbox"/> 5. Ordinance<br><input type="checkbox"/> 6. Other |  |   | Weapon Seized  |  | None                          |  |  |
| Location of Arrest (Including Name of Business)<br><b>3536 WILLIAM ST. LAKE PARK FL 33403</b>   |                               |   |  |  |  |  |   |  |  |                               |  |  |
| Date of Arrest<br><b>Sep 9, 2017</b>  | Time of Arrest<br><b>0130</b> | Booking Date<br><b>Sep 9, 2017</b>  | Booking Time   | Jail Date  | Jail Time  | Location of Offense (Including Name of Business)<br><b>3536 WILLIAM ST. LAKE PARK FL 33403</b> |   |  |  |                               |  |  |
| Name (Last, First, Middle)<br><b>KARCZEWSKI</b>   |                               |   |  |  |  |  |   |  |  |                               |  |  |
| Race<br>W - White<br>B - Black<br>O - Oriental/Asian  |                               | Sex<br><b>W F</b>   | Date of Birth<br><b>9/8/94</b>                                       | Height<br><b>510</b>                                 | Weight<br><b>150</b>   | Eye Color<br><b>BRWN</b>   | Hair Color<br><b>BLND</b>   | Complexion<br><b>MEDIUM</b>  | Build<br><b>MEDIUM</b>                     |                               |  |  |
| Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)   |                               |   |  |  |  |  |   |  |  |                               |  |  |
| Local Address (Street, Apt. Number)<br><b>3205 ATLANTIC RD.</b>   |                               | City  | State  | Zip  | Phone  | Marital Status<br><b>S</b>   | Religion<br><b>UK</b>   | Indication of:<br>Alcohol Influence<br>Drug Influence                      |  |                               |  |  |
| Permanent Address (Street, Apt. Number)<br><b>SAME AS ABOVE</b>   |                               | City  | State  | Zip  | Phone  | Residence Type:<br>1. City<br>2. County  |   |  |  | 3. Florida<br>4. Out of State |  |  |
| Business Address (Street, Apt. Number)  |                               | City  | State  | Zip  | Phone  | Address Source   |   |  |  | <b>VERBAL</b>                 |  |  |
| DL Number, State<br><b>K622-812-94-828-0 FL</b>   |                               | Social Security Number  |  |  | INS Number   | Place of Birth<br><b>STUART MARTIN COUNTY FL</b>   |   | Citizenship<br><b>U.S.</b>   |  |                               |  |  |
| Co-Defendant Name (Last, First, Middle)   |                               |   |  |  |  | Race   | Sex   | Date of Birth  | 1. Arrested<br>2. At Large                 |                               |  |  |
| Co-Defendant Name (Last, First, Middle)   |                               |   |  |  |  | Race   | Sex   | Date of Birth  | 3. Felony<br>4. Misdemeanor<br>5. Juvenile |                               |  |  |
| <input type="checkbox"/> Parent<br><input type="checkbox"/> Legal Guardian<br><input type="checkbox"/> Other  | Name (Last, First, Middle)    |   |  |  |  | Phone  |   |  |  |                               |  |  |
| Address (Street, Apt. No.)<br><b>None</b>   |                               |   |  |  |  | City   | State   | Zip  | Business Phone                             |                               |  |  |
| Notified By (Name)  |                               |   |  |  |  | Date   | Time  | Juvenile Disposition:<br>1. Handled/Processed within<br>Dept. and Released |  | 2. TOT HRS/DYS<br>3. Detained |  |  |
| Released To (Name)  |                               |   |  |  |  | Relationship   | Date  | Time   |  |                               |  |  |
| The above address was provided by <input type="checkbox"/> defendant and/or <input type="checkbox"/> defendant's parent. The child and/or parent was told<br><input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)   |                               |   |  |  |  | School Attended  | Grade   |  |  |                               |  |  |
| Property Crime?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |                               | Description of Property   |  |  |  | Value of Property  |   |  |  |                               |  |  |
| Drug Activity<br>N. N/A<br>B. Buy<br>P. Possess<br>T. Traffic   |                               | S. Sell<br>R. Smuggle<br>D. Deliver<br>E. Use   | K. Dispose/<br>Distribute<br>M. Manufacture/<br>Produce<br>Cultivate | Z. Other   | Drug type<br>N. N/A<br>A. Amphetamine                                      | B. Barbiturates<br>C. Cocaine<br>E. Heroin   | H. Hallucinogen<br>M. Marijuana   | P. Psychotropic/<br>Equipment  | U. Unknown<br>Z. Other                     |                               |  |  |
| Charge Description<br><b>BATTERY (DOMESTIC)</b>   |                               |   |  |  |  | Counts<br><b>1</b>   | Domestic Violence<br><input checked="" type="checkbox"/> Y <input type="checkbox"/> N | Statute Violation Number<br><b>784.03(1A1)</b>                             |  | Violation or ORD. #           |  |  |
| Drug Activity<br><b>N</b>   | Drug Type<br><b>N</b>         | Amount/Unit<br><b>NA</b>  | Offense #<br><b>17124852</b>   | Warrant/Capias Number                                |  |  |   |  |  |                               |  |  |
| Charge Description  |                               |   |  |  |  | Counts   | Domestic Violence<br><input type="checkbox"/> Y <input checked="" type="checkbox"/> N | Statute Violation Number   |  | Violation or ORD. #           |  |  |
| Drug Activity   | Drug Type                     | Amount/Unit   | Offense #  | Warrant/Capias Number                                |  |  |   |  |  |                               |  |  |
| Charge Description  |                               |   |  |  |  | Counts   | Domestic Violence<br><input type="checkbox"/> Y <input checked="" type="checkbox"/> N | Statute Violation Number   |  | Violation or ORD. #           |  |  |
| Drug Activity   | Drug Type                     | Amount/Unit   | Offense #  | Warrant/Capias Number                                |  |  |   |  |  |                               |  |  |
| Charge Description  |                               |   |  |  |  | Counts   | Domestic Violence<br><input type="checkbox"/> Y <input checked="" type="checkbox"/> N | Statute Violation Number   |  | Violation or ORD. #           |  |  |
| Drug Activity   | Drug Type                     | Amount/Unit   | Offense #  | Warrant/Capias Number                                |  |  |   |  |  |                               |  |  |
| Location (Court, Address, Room Number)  |                               |   |  |  |  | Bond<br><b>2017 SEP 9 AM 3:04</b>  |   |  |  |                               |  |  |
| Court Date and Time<br>Month<br><b>Day</b>  |                               |   |  |  |  | Year   | Time  | AM <input type="checkbox"/>  | PM <input type="checkbox"/>                |                               |  |  |
| I AGREE TO APPEAR AT THE ABOVE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT I SHOULD 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)   |                               |   |  |  |  |  |   |  |  |                               |  |  |
| HOLD for Other Agency<br>Name   |                               |   |  | Signature of Arresting Officer<br><i>[Signature]</i> |  |  |   | Date Signed<br><b>15</b>   |  |                               |  |  |
| <input type="checkbox"/> Dangerous<br><input type="checkbox"/> Suicidal   |                               |   |  | Name of Arresting Officer<br><b>D/S D. BOORAS</b>    |  |  |   | Name Verification (Printed by Arrestee)<br><b>27529</b>                    |  |                               |  |  |
| Intake Deputy   |                               |   |  | ID #   | Pouch #  | Transporting Officer   | ID #  | Agency   | Page                                       |                               |  |  |
|   |                               |   |  |  |  | <b>D/S GUZMAN 25654</b>  |   | <b>PBSO</b>  | Witness here if subject signed with an "X" |                               |  |  |

SCANNED  
SEP 13 2017

OBTS Number

## PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

N

|   |  |                                   |   |                              |                                  |
|---|--|-----------------------------------|---|------------------------------|----------------------------------|
| Agency ORI Number<br><b>FLO 5 0 0 0 0 0</b>   | Agency Name<br><b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>           | Agency Report Number<br><b>06</b> | <b>17124852</b>   |                              |                                  |
| Charge Type:<br>Check as many as apply<br><input type="checkbox"/> 1. Felony<br><input checked="" type="checkbox"/> 2. Traffic Felony<br><input type="checkbox"/> 3. Misdemeanor<br><input type="checkbox"/> 4. Traffic Misdemeanor<br><input type="checkbox"/> 5. Ordinance<br><input type="checkbox"/> 6. Other _____ | Special Notes  |                                   |   |                              |                                  |
| Defendant Name (Last, First, Middle)<br><b>KARCZEWSKI</b>   | TIFFINI  | LOUISE-MARIE                      | Race<br><b>W</b>  | Sex<br><b>F</b>              | Date of Birth<br><b>9/8/94</b>   |
| Charge<br><b>BATTERY (DOMESTIC)</b>   | Charge   |                                   |   |                              |                                  |
| Charge  | Charge   |                                   |   |                              |                                  |
| Victim Name (Last, First, Middle)<br><b>POWELL</b>  | <b>JAKE</b>  | <b>THOMAS</b>                     | Race<br><b>W</b>  | Sex<br><b>M</b>              | Date of Birth<br><b>12/24/92</b> |
| Local Address (Street, Apt. Number)<br><b>3536 WILLIAM ST.</b>  | City<br><b>LAKE PARK</b>   | State<br><b>FL</b>                | Zip<br><b>33403</b>   | Phone<br><b>561-762-2465</b> | Address Source<br><b>VERBAL</b>  |
| Business Address (Street, Apt. Number)  | City   | State                             | Zip   | Phone                        | Occupation                       |
| The undersigned 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...   |  |                                   |   |                              |                                  |
| <input type="checkbox"/> committed the below acts in my presence.   |  |                                   | <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.  |                              |                                  |
| <input type="checkbox"/> confessed to admitting to the below facts.   |  |                                   | <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation. |                              |                                  |
| On the <u>9TH</u> day of <u>SEPTEMBER</u> 20 <u>17</u> at <u>0100</u>   | <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM |                                   |   |                              |                                  |

On the above date and time I was dispatched to 3536 William St. in unincorporated Lake Park in reference to a Domestic Battery.

Upon my arrival I met with the suspect in this case out front of the above listed address. The suspect in this case was later identified by her Florida Driver's License as, Tiffini Karczewski, W/F 9/8/94. Karczewski informed me that she got into a fight with her boyfriend, whom she has been in a romantic relationship with over the last three years, and live together on occasion. Karczewski's boyfriend was later identified by his Florida Driver's License as, Jake Powell, W/M 12/24/92, and was found to be the victim in this case.

Karczewski informed me that she was out with Jake for her birthday, and they had been at a local bar. She stated they were not getting along, and Jake drove home, to the above listed residence. Karczewski stated that she followed him home to see what was wrong, and they got into a verbal argument. Karczewski stated that she was afraid of Jake, so she called for law enforcement assistance.

I met with Jake out front of the residence, away from Karczewski. He informed me the same as Karczewski, that they were arguing at a local bar, and the two of them ended up back at the above listed residence. Jake informed me that Karczewski continued to argue with him, and while he was lying on the bed, she came up and smacked him in the face with her purse, and then scratched him across the face. I inspected Jake's face, and noticed two scratch marks on the right side of his face, under his eye, appearing to go from right to left, in a downward direction.

I went back and spoke with Karczewski about Jake's claims, and she then stated that they did get physical and she merely pushed him away from her. At this time, I found reason to believe Jakes verbal statements, due to his calm demeanor, his cooperation with my investigation, and the physical evidence left on his face. I found reason to discredit Karczewski's statements, as her story changed multiple times as I spoke with her. At this time in my investigation, I found probable cause to believe that Domestic Battery to have occurred, and Karczewski to be the primary aggressor. Due to Jake's verbal statements, I found reason to believe that Karczewski did make contact with Jake, without his permission, by scratching his face.

|   |   |              |
|---|---|--------------|
| The foregoing instrument was sworn to and affirmed before me this <u>9th</u> day of <u>September</u> 20 <u>17</u> , by: |   |              |
| <u>D/S Huie 18370</u>   | <u>D/S D. BOORAS</u>  | <u>27529</u> |
| Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)  | Name of Arresting/Investigating Officer                       |              |
| <u>_____<br/>Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)</u>                                  | <u>_____<br/>Signature of Arresting/Investigating Officer</u> |              |
| <u>SCANNED</u>  |   |              |
| Page <u>1</u> of <u>2</u>   |   |              |

|  |   |
|--|---|
| Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)                       | Name of Arresting/Investigating Officer                       |
| <u>_____<br/>Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)</u> | <u>_____<br/>Signature of Arresting/Investigating Officer</u> |
| <u>SCANNED</u>   |   |
| Page <u>2</u> of <u>2</u>  |   |

SEP 13 2017

SEP 13 2017