

0795206

N/R

1378

OBTS Number		<b>ARREST / NOTICE TO APPEAR</b> Juvenile Referral Report				1. Arrest 3. Request For Warrant 2. N.T.A. 4. Request For Capias		1	Juvenile	N											
Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>				Agency Report Number <b>06</b>		<b>18030739</b>													
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		If Weapon Seized		Multiple Clearance Indicator		0 1											
Location of Arrest (Including Name of Business) <b>4885 WINDWARD PASSAGE Boynton Beach, FL, 33437</b>					Location of Offense (Including Name of Business)																
Date of Arrest <b>Jan 25, 2018</b>		Time of Arrest <b>1606</b>		Booking Date		Booking Time		Jail Date		Jail Time	Location of Vehicle										
Name (Last, First, Middle) <b>ASSEO YLENNA BETZABETH</b>			Alias (Name, DOB, Soc. Sec. #, Etc.)																		
Race W - White 1 - American Indian B - Black 0 - Orient/Asian		Sex <b>F</b>		Date of Birth <b>12/15/1986</b>		Height <b>5'04"</b>		Weight <b>140</b>		Eye Color <b>BROWN</b>		Hair Color <b>BROWN</b>	Complexion <b>OLIVE</b>		Build <b>MED</b>						
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>NONE</b>					Marital Status <b>SINGLE</b>		Religion <b>NONE</b>		Indication of Alcohol Influence Drug Influence		Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Unk <input type="checkbox"/>										
Local Address (Street, Apt. Number) <b>9856 WATERMILL CIRCLE UNIT H</b>			City <b>BOYNTON BEACH</b>		State <b>FL</b>		Zip <b>33437</b>		Phone <b>561-614-9759</b>		Residence Type: 1. City 3. Florida 2. County 4. Out of State		2								
Permanent Address (Street, Apt. Number)			City		State		Zip		Phone		Address Source <b>DAVID</b>										
Business Address (Street, Apt. Number)			City		State		Zip		Phone		Occupation <b>DAY CARE</b>										
D/L Number, State <b>A200-962-86-955-0</b>			Social Security Number			INS Number			Place of Birth <b>MIAMI, FL</b>			Citizenship <b>US</b>									
Co-Defendant Name (Last, First, Middle)		Race <b>B</b>		Sex <b>M</b>		Date of Birth <b>06/03/1975</b>		<input checked="" type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input checked="" type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile											
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile											
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other		Name (Last, First, Middle) <b>1. <del>ASSEO</del> NONE</b>								Phone											
Address (Street, Apt. No.)		State								Zip		Business Phone									
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 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 561-355-2626) informed of any address change <input type="checkbox"/> Yes, by (Name) <input type="checkbox"/> No: (Reason)						School Attended		Grade													
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property						Value of Property													
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		X. 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		P. Paraphernalia/ Equipment		U. Unknown Z. Other	
Charge Description <b>CHILD NEGLECT</b>			Counts <b>1</b>		Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number <b>827.03 (2D)</b>			Violation or ORD. #											
Drug Activity <b>N</b>		Drug Type <b>N</b>		Amount/Unit		Offense # <b>18030739</b>		Warrant/Capias Number		Bond		208 JAN 25 AM 55									
Charge Description			Counts		Domestic Violence		Statute Violation Number			Violation or ORD. #											
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond		208 JAN 25 AM 55									
Charge Description			Counts		Domestic Violence		Statute Violation Number			Violation or ORD. #											
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond		208 JAN 25 AM 55									
Charge Description			Counts		Domestic Violence		Statute Violation Number			Violation or ORD. #											
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond		208 JAN 25 AM 55									
Location (Court, Address, Room Number)											Bond										
Court Date and Time											Bond										
Month		Day		Year		Time		AM <input type="checkbox"/>		PM <input type="checkbox"/>		Bond									
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 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			Signature of Arresting Officer				Name Verification (Printed by Arresting Officer)														
Name <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal			Name of Arresting Officer <b>D/S J LOPEZ</b>				(PRINT) <b>SCANNED</b>														
<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other			ID # <b>9560</b>				<b>JAN 26 2018</b>														
Inmate Deputy <b>D/S J LOPEZ 8003</b>			Transporting Officer <b>J. Lopez 9560</b>				Agency <b>PBSO</b>														
Witness here if subject signed with an "X"											Page <b>1 of 1</b>										

OBTS Number		<b>PROBABLE CAUSE AFFIDAVIT</b>			1 Arrest 2 NTA	3 Request for Warrant 4 Request for Copies	1	Juvenile	
ADMIN	Agency ORI Number FLO 5 0 0 0 0 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 18030739						
	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	Special Notes					
DEF	Name (Last, First, Middle) ASSEO, YLENNA B		Alias		Race W	Sex F	Date of Birth 12/15/1986		
	Charge Description CHILD NEGLECT		Charge Description						
VICTIM	Charge Description		Charge Description						
	Name (Last, First, Middle)		Race W		Sex M		Date of Birth 6/12/2010		
	Business Address (Name, Street) (City) (State) (Zip)		Phone ( ) NONE		Address Source VERBAL			Occupation	
<p>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</p> <p><input type="checkbox"/> committed the below acts in my presence.      <input type="checkbox"/> was observed by _____ who told _____</p> <p><input type="checkbox"/> confessed to _____      <input checked="" type="checkbox"/> that he/she saw the arrested person commit the below acts.</p> <p>admitting to the below facts.      was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>25TH</u> day of <u>JANUARY</u> 20<u>18</u> at <u>1500</u> <input type="checkbox"/> A.M <input checked="" type="checkbox"/> P.M (Specifically include facts constituting cause for arrest.)</p> <p>On 1-25-18 at approximately 0914 hours I responded to _____ in reference to a child abuse call.</p> <p>Upon arrival I met with permit deputy D/S F. Abrams #7030 who stated that he was advised by the school principal that _____ had bruising on both his left and right legs and complained about the pain and was unable to sit down at his desk.</p> <p>I then made contact with _____ who stated that on 1-24-17 his was hit by _____ with a wood "cutting board" that is used to "cut meat". _____ stated that _____ was upset because he was "fighting with _____ over a "Lego set". _____ stated that _____ was sleeping and was mad because he was yelling and grabbed the cutting board and told him to "go in the room" and hit him "about 20 times" in the legs and then grabbed a sandal and hit him in the legs with that also. _____ then stated that he told _____ what happened when she got home from work and was told to go to bed. _____ also stated that _____ has hit him and _____ in the past but thinks he gets hit harder than _____ also stated that _____ told him "not to tell anyone" what happened. I observed significant bruises to the rear of both _____ left and right legs and back.</p> <p>We then made contact with _____ in the unincorporated city of _____ confirmed that he and _____ were arguing on 1-24-18 and stated that _____ was not listening to him so _____ came out of the bedroom and yelled at _____ for being "disrespectful". _____ then stated "I went into my bedroom and don't know what happened". I asked _____ if _____ has disciplined him in the past and _____ stated that he hasn't been hit lately because he is staying on _____ "good side". _____ eyes got watery and he then took a deep breath and stated _____ has a bad temper because he was in the Marines". _____ stated that when _____ had _____ go into the bedroom he grabbed the "cutting board" that was on the kitchen counter and did not know "what else happened". _____ stated that _____</p>									
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH		<b>SCANNED</b>						
	(Signature of Arresting / Investigative Officer)		JAN 26 2018						
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>25th</u> day of <u>JANUARY</u> 20 <u>18</u> by _____		J. LOPEZ 9560						
(Print name of Arresting / Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced		PERSONALLY KNOWN							
Notary Public, Clerk of Court, Officer (F.S.S.) 11 7 1 0)		PAGE 1 OF 3							

PROBABLE CAUSE AFFIDAVIT

1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capias

1 Juvenile

Agency ORI Number FLO, 5, 0, 0, 0, 0, 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 18030739
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

Name (Last, First, Middle) ASSEO, YLENNA B	Alias	Race W	Sex F	Date of Birth 12/15/1986
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Charge Description CHILD NEGLECT	Charge Description
Charge Description	Charge Description

Name (Last, First, Middle)	Race W	Sex M	Date of Birth 6/12/2010
Phone ( ) NONE	Address Source VERBAL		
Business Address (Name, Street) (City) (State) (Zip)	Phone ( )	Occupation	

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 \_\_\_\_\_

confessed to \_\_\_\_\_  that he/she saw the arrested person commit the below acts.

admitting to the below facts. \_\_\_\_\_ was found to have committed the below acts, resulting from my (described) investigation.

On the 25TH day of JANUARY 20 18 at 1500  A.M  P.M (Specifically include facts constituting cause for arrest.)

\_\_\_\_\_ got home from work shortly after and heard her say that she was "disappointed in \_\_\_\_\_ for not listening". \_\_\_\_\_ told me that he was not sure if \_\_\_\_\_ had any injuries after he went into the bedroom with \_\_\_\_\_. I confirmed that \_\_\_\_\_ did not have any visible bruising on him and did not complain of any physical pain.

We also made contact with \_\_\_\_\_. \_\_\_\_\_ stated that she gets along with everyone \_\_\_\_\_ and did not have any issues with anyone \_\_\_\_\_. I asked \_\_\_\_\_ how she is disciplined when she misbehaves and she stated that she has been spanked before but hasn't been spanked in a while because she "hasn't been bad". \_\_\_\_\_ stated that \_\_\_\_\_ gets in trouble often because \_\_\_\_\_ yells and "doesn't listen" on 1-24-18 \_\_\_\_\_ was being "bad" and was yelling at her and \_\_\_\_\_ came out of the bedroom and called \_\_\_\_\_ into the bedroom. \_\_\_\_\_ stated that she saw \_\_\_\_\_ grab a "cutting board" before going back into the bedroom. \_\_\_\_\_ stated that she doesn't like to be around when \_\_\_\_\_ disciplines \_\_\_\_\_ and goes into her bedroom. \_\_\_\_\_ also stated that she knows when \_\_\_\_\_ is mad and just tries to "stay out of his way" and started to cry. I confirmed that \_\_\_\_\_ did not have any visible bruising on her and did not complain of any physical pain.

We then made contact with \_\_\_\_\_. \_\_\_\_\_ stated that he did discipline \_\_\_\_\_ last night but did not recall leaving any bruises. \_\_\_\_\_ stated that he hit \_\_\_\_\_ with a "metal spoon" and then stated I have hit him with a cutting board also. \_\_\_\_\_ then stated "he probably got hurt at school, I don't know". \_\_\_\_\_ also stated that he has used the cutting board to discipline \_\_\_\_\_ before and they never had any bruises.

I later made contact with Ylenna Asseo at La Petite Academy, 4885 Windward Passage Drive in the unincorporated city of Boynton Beach, FL. Ylenna stated that she did not know what occurred and had no "clue" what happened at home. I asked Ylenna if she had allowed \_\_\_\_\_ to discipline \_\_\_\_\_ in the past and she stated "yes". I advised Ylenna that \_\_\_\_\_ had bruising on him due to \_\_\_\_\_ hitting him and Ylenna stated I didn't

STATE OF FLORIDA  
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer) 

The foregoing instrument was sworn to or affirmed and subscribed before me this 25th day of JANUARY 20 18 by J. LOPEZ 9560

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

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

SCANNED  
JAN 26 2018

PAGE 2 OF 3

PROBABLE CAUSE AFFIDAVIT

1 Arrest  
2 NTA

3 Request for Warrant  
4 Request for Copies

1

Juvenile

ADMIN	OBTS Number	Agency ORI Number FLO 5, 0, 0, 0, 0, 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 18030739
	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	Special Notes

DEF	Name (Last, First, Middle) ASSEO, YLENNA B	Alias	Race W	Sex F	Date of Birth 12/15/1986
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CHARGES	Charge Description CHILD NEGLECT	Charge Description
	Charge Description	Charge Description

VICTIM	Victim's Name (Last, First, Middle)	Race W	Sex M	Date of Birth 6/12/2010
	Business Address (Name, Street) (City) (State) (Zip)	Phone ( ) NONE	Address Source VERBAL	Occupation
		Phone ( )		

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 \_\_\_\_\_

confessed to \_\_\_\_\_  that he/she saw the arrested person commit the below acts.

admitting to the below facts. \_\_\_\_\_ was found to have committed the below acts, resulting from my (described) investigation.

On the 25TH day of JANUARY 2018 at 1500  A.M  P.M. (Specifically include facts constituting cause for arrest.)

know that "he had bruising" while pointing at the rear of her leg at no time did I advise Ylenna where \_\_\_\_\_ injuries were.

Based on the above facts I find probable cause that Ylenna Asseo failed to make a reasonable effort to protect \_\_\_\_\_ a child, from abuse by another person, and Ylenna Asseo was \_\_\_\_\_ contrary to Florida Statute 827.03.

PROBABLE CAUSE STATEMENT

NOT A CERTIFIED COPY

ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH	SCANNED JAN 26 2018
	(Signature of Arresting /Investigative Officer)	
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>25th</u> day of <u>JANUARY</u> 20 <u>18</u> by <u>J. LOPEZ 9560</u>	
	(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>PERSONALLY KNOWN</u>	
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)		PAGE 3 OF 3