

50-2021 CF-003237-AMB

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-	21-053280	
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 2 1. Yes 2. No		Multiple Clearance Indicator 5	
Location of Arrest (Including Name of Business) 3228 Gun Club Road				Location of Offense (Business Name, Address) [REDACTED]			
Date of Arrest 4/17/2021	Time of Arrest 7:00 PM	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle Not Applicable	

Name (Last, First, Middle) [REDACTED]								Alias (Name, DOB, Soc. Sec. #, Etc.) [REDACTED]										
Race W - White I - American Indian B - Black O - Oriental/Asian	B	Sex M	Date of Birth [REDACTED]	Height 6'0"	Weight 180	Eye Color Brown	Hair Color Black	Complexion Dark	Build Thin	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) None observed				Marital Status Single	Religion CHRISTIAN	Indication of: Alcohol Influence Drug Influence Y N Unk. <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>		
Local Address (Street, Apt. Number) [REDACTED]				(City) [REDACTED]	(State) [REDACTED]	(Zip) [REDACTED]	Phone [REDACTED]		Residence Type: 1. City 3. Florida 2. County 4. Out of State 1		Permanent Address (Street, Apt. Number) [REDACTED]		(City) [REDACTED]	(State) [REDACTED]	(Zip) [REDACTED]	Address Source D.A.V.I.D.		
Business Address (Name, Street) [REDACTED]				(City) [REDACTED]	(State) [REDACTED]	(Zip) [REDACTED]	Phone [REDACTED]		Occupation Teacher		D/L Number, State A425-944-93-164-0, Florida		Soc. Sec. Number [REDACTED]		INS Number [REDACTED]		Place of Birth (City, State) Augusta, Georgia	Citizenship USA

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
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 Custodian <input type="checkbox"/> Other:	Name (Last) (First) (Middle)	Residence Phone () () ()
Address (Street, Apt. Number) (City) (State) (Zip)		Business Phone () () ()

Notified by: (Name)	Date 4/17/2021	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 <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 (Phone 355-2526) informed of any change of address. <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	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. Opioid/Deriv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other
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Charge Description Lewd or Lascivious Molestation	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 800.04(5e)	Violation of ORD # None	
Drug Activity N	Drug Type N	Amount / Unit	Offense # 21-053280	Warrant / Capias Number	Bond

Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

Location (Court, Room Number, Address)	
Court Date and Time Month Day Year Time AM	
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 X [Signature]	Name Verification (Printed by Arrestee) (PRINT)
<input checked="" type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:	Name of Arresting Officer (Print) ID # Detective Christopher Wilson 9055
Intake Dept #	Pouch #	Transporting Officer ID # Agency [Signature] ID # Agency
Witness here if subject signed with an -X"		PAGE 1 OF 1

JOHN ADAMSON
P.A. CLERK
PALM BEACH COUNTY FL
GUN CLUB
APR 18 AM 6:30

OBTS Number		PROBABLE CAUSE AFFIDAVIT				1	Juvenile	N
Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 06 - 21-053280			
Charge Type: <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance Check as many <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other as apply.					Special Notes:			
Defendant's Name (Last, First, Middle)					Race Black	Sex Male	Date of Birth	
Charge Description Lewd or Lascivious Molestation FSS 800.04(5a)			Charge Description					
Charge Description			Charge Description					
Victim's Name (Last, First, Middle)					Race White	Sex Male	Date of Birth	
Victim's Local Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone	Address Source Victim Mother		
Victim's 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...								
<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 my (described) investigation.					
On the 17 th day of April, 2021 at 7:00 <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest).								

NARRATIVE:

On Tuesday, April 6th 2021, at approximately 1600 hours, I initiated this case as a result of a separate investigation involving [REDACTED]. After [REDACTED] arrest for the other case (PBSO case # 21-049077), sixteen-year-old [REDACTED] reported he had been sexually battered by [REDACTED] who he identified as twenty-seven-year-old [REDACTED]. Victim Advocate Maura Smith was assigned to this case and advised she would schedule a forensic interview for [REDACTED].

On Wednesday, April 14th 2021, at approximately 0800 hours, I went to the Child Protection Team (CPT) Office to attend multiple previously scheduled forensic interviews, to include [REDACTED].

The summary of the paraphrased information learned from the forensic interview with Case Coordinator (CC) Tracy Piendle interview was documented as follows: Sixteen-year-old [REDACTED] told Senior Case Coordinator Tracy Piendle he was inappropriately touched by his babysitter, identified as [REDACTED] whom he referred to by his first name of [REDACTED] throughout the interview.

Once [REDACTED] acknowledged his understanding between the truth and a lie, he agreed to tell the truth during this interview. She then advised him of the video and audio recording activated equipment.

[REDACTED] acknowledged he was present today to talk about experiences with his caretaker whom he identified as [REDACTED]. [REDACTED] stated [REDACTED] violated him sexually when he was a "little boy" assuring no recent incidents had occurred.

[REDACTED] said he was scared of [REDACTED] because he had observed [REDACTED] hit [REDACTED] and yelled at him, in what he described as "really loud." He described when he and or

NARRATIVE CONTINUATION

his brother [REDACTED] were "roudy" or misbehaved, [REDACTED] would spank them on their buttocks after pulling their pants down, leaving red marks. These punishments occurred when [REDACTED] was tasked with a parental or custodial position while [REDACTED] parents were occupied because they both had demanding careers. [REDACTED] also advised bruising wasn't a result of the spankings, only red marks.

[REDACTED] then described when it was time to go to bed at night, [REDACTED] would put "calming music" on before putting them to bed. [REDACTED] then recalled one specific time [REDACTED] inappropriately touched him. [REDACTED] began describing an unwanted sexual related incident when [REDACTED] put him to bed. He said [REDACTED] placed his hand on his stomach and began rubbing his stomach. [REDACTED] continued rubbing his stomach and moved his hand towards his genitalia which he described as his "private part." [REDACTED] then continued to maneuver his hand down towards [REDACTED] penis, going underneath his pajamas and underwear. [REDACTED] then began rubbing his penis with his hand "skin to skin" at which time, Antonio used his hand to imitate [REDACTED] hand movement when he touched him, for CC Piendle.

[REDACTED] recalled [REDACTED] was looking for a caretaker when he was around eight years of age when she met [REDACTED]. [REDACTED] was six years old, according to [REDACTED]. At a later time during the interview, [REDACTED] said [REDACTED] would also spend the night at their house when [REDACTED] had to go out of town. [REDACTED] said he shared a bedroom with [REDACTED] and hadn't ever observed [REDACTED] inappropriately touch his brother. [REDACTED] then advised he would pretend to be sleeping to because [REDACTED] had touched him which left him feeling uncomfortable and nervous.

[REDACTED] expressed his uncomfortableness when [REDACTED] would remain in the room and watch him when he was changing clothes. [REDACTED] would justify his presence telling him it was okay because he had seen his penis before. [REDACTED] would also joke about his penis getting bigger and advise it was because he was getting taller.

[REDACTED] also told CC Piendle [REDACTED] would get really close to him and place his arm around him in addition to putting his hand on his thigh while watching television, which also made him feel uncomfortable. [REDACTED] also said [REDACTED] would also make him uncomfortable while doing his homework touching in a similar uncomfortable manner. [REDACTED] recalled hearing [REDACTED] yell "stop, stop" while he was downstairs seated on the living room couch while his brother was upstairs in their bedroom with [REDACTED] doing homework.

Additionally, [REDACTED] would buy him expensive gifts for his birthdays. [REDACTED] described the expensive gifts as expensive books, a bow and arrow set, and a really expensive figurine. [REDACTED] continued explaining he and [REDACTED] communicate through text message and a social media platform identified as Face Time. He described observing [REDACTED] shirtless while they were talking to one another on Face Time, which he described as "weird." However, he added [REDACTED] would never request him to remove his clothing or do anything weird other than when [REDACTED] was shirtless during a Face Time conversation. [REDACTED] also clarified neither inappropriate text messages

NARRATIVE CONTINUATION

nor anything provocative was sent to him by [REDACTED]. The majority of communication between them was on Face Time and rarely on Instagram.

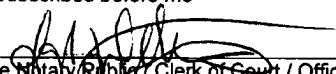
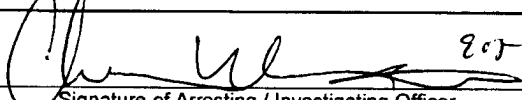
[REDACTED] said [REDACTED] spent a lot of time with he and [REDACTED] and talked about how [REDACTED] would give them "Wedgies" which was described as pulling their underwear from behind above their pants belt line. In addition to the Wedgies, [REDACTED] would give them "raspberries" which was described as raising their shirts above their stomachs and leaving red marks on their belly's. [REDACTED] used his hands and arms to imitate a wedgie for CC Piendle, by raising his arms up. [REDACTED] also said the raspberries and wedgies would be frequented when [REDACTED] would play "the giant" with he and his [REDACTED]

Furthermore, [REDACTED] would bring him to his house, and because he was afraid of [REDACTED] dogs he would remain in the car outside. Although he described [REDACTED] mother as nice and stated [REDACTED] told him [REDACTED] wasn't there for him. On an unknown "younger" age, date, or time, [REDACTED] permitted [REDACTED] to drive his car in a parking lot advising him he could never tell [REDACTED] he let him drive his car.

[REDACTED] also recalled a time when [REDACTED] called in the evening to talk to both he and [REDACTED] because [REDACTED] remains integrally in their lives even though his parents are divorced. However, [REDACTED] said on that evening he remembered [REDACTED] lying to [REDACTED] telling him they were sleeping when they were awake hindering his ability to talk to [REDACTED]

Until recently [REDACTED] said he hadn't told anyone about [REDACTED] touching him inappropriately because he was afraid. After [REDACTED] arrest appeared on the television, [REDACTED] also told him he was inappropriately touched by [REDACTED]. [REDACTED] also recalled [REDACTED] instructing him on multiple occasions to tell [REDACTED] [REDACTED] to unblock him so he could talk to him.

Probable cause was also established to charge [REDACTED] who did intentionally touch the genitals, genital area, or buttocks, or the clothing covering them of [REDACTED], a victim 12 years old or older but less than 16, in a lewd and lascivious manner {or} did force or entice [REDACTED] to so touch [REDACTED], in that [REDACTED] did touch and masturbate [REDACTED] penis and [REDACTED], was 18 years of age or older, Pursuant to Florida Statute 800.04(5)(a)and(b)..

Sworn and Subscribed before me	
	
Signature Notary Public / Clerk of Court / Officer (F.S.S 117.10) Sergeant Juliana Martinez # 8231	Signature of Arresting / Investigating Officer Detective Christopher Wilson # 9055
Name of Notary Public / Clerk of Court / Officer (F.S.S 117.10) 4/17/2021	Name of Officer (Please Print) 4/17/2021
Date	Date

VICTIM NOTIFICATION FORM

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

- 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.**

1. Incident Report #: 21-053280 Agency: PBSO
Offense: Lewd or Lascivious Molestation
Suspect/Offender: [REDACTED]
D.O.B. [REDACTED] Race: B Sex: M

2. Warrant # (s): _____

3.a. Victim's name: [REDACTED] D.O.B. [REDACTED] Race: W Sex: M
Address: [REDACTED]
City: [REDACTED] State: [REDACTED] Zip: [REDACTED]
Home #: _____ Work #: _____ Other: [REDACTED]

b. Victim's next of kin, friend or neighbor: [REDACTED]
Address: [REDACTED]
City: [REDACTED] State: [REDACTED] Zip: [REDACTED]
Home #: _____ Work #: _____ Other: [REDACTED]

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).

Signature of person waiving notification: _____

Printed name of person waiving notification: _____

Deputy's Name: Detective Christopher Wilson I.D.# 9055 Date: 04/17/21

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



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	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), 2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input checked="" type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	1-6
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2021009346	Date: 04/18/2021
	Specialist Name/ID: C. Denzel/8691