# 50.2027-MM-000021- AMB

	OBTS Number	Juvenile	OTICE TO A		1. Arrest 3. Reques 2. N.T.A. 4. Reques	t for Capias	Juvenile			
No.	Agency ORI Number Agency FL0500600	PALM BEACH PO	OLICE DEPAR	RTMENT	Agency Report Number 76. 23-00002					
ADMINISTRATION	Obesites	Misdemeanor     Traffic Misdemeanor	5. Ordinand		Weapon Seized/Type ☐ Yes ☐ No Multiple Clearance					
ADMIN	Location of Arrest (Including Name of Business)	Palm Beach	<u> </u>	of Offense (Bus	Type: iness Name, Address) h (ake U	Jan Palm	Beech			
	Date of Arrest Date of Arrest 7 Time of	Booking Date Booki	ing Time Jail	Date	Jail Time	Location of Vehicle				
	Name (Vast, First, Middle) Tgenti, Ketevan		Alia	as (Name, DOB,	Soc. Sec. #, Etc.)	NI	·			
	Race W - White I - American Indian B - Black O - Oriental/Asian	th /87 Height	Weight	Eye C	olor Hair Cold	or Complexion	Build			
DEFENDANT	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, I	Description)	7 1 110	Marital Statu	s Religion	Indication	of: Y N Unk.			
	Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Drug Influ	ence 🔲 🗹 🗍			
	Permanent Address (Street, Apt. Number)	gim Beach (City)	Florida	(Zip)	Si 6 ) 4/8 /	1. City 3. Flo 2. County 4. Address S	Out of State			
	Business Address (Street, Apt. Number)	(City)	Florida (State)	(Zip)	( ) Phone	Vei	VC/ba   Occupation			
		Sec. Number	INS Number	(2.6)						
	Co-Defendant Name (Last, First, Middle)	Gec. Number			Place of Birth	1 ad C	Citizenship			
CO-DEF				ate of Birth	☐ 1. Arre		5. Juvenile			
ŏ	Co-Defendant Name (Last, First, Middle)		Race Sex D	ate of Birth	1. Arre	=	5. Juvenile			
	Parent Name (Last) Legal Custodian Other	(First)	(Mi	ddle)	***	Reside	ence Phone			
ii.	Address (Street, Apt. Number)	(City)		(State)	(Zip)	Busine	ess Phone			
JUVENILE	Notified by: (Name)		Date	Time	Juvenile Dispo	osition essed within 2. TOT h	) HRS/CVF			
5	Released To: (Name)		Relationship	FCIC/I	Dept. and Rele	eased 3. Incard				
	The above address was provided by defendant and/or defendant's parents. The of Office informed of any change of address:	child and/or parent was told to ke	ep the Juvenile Court Cler	k's	School Attended		Grade			
	Yes, by: (Name) No: (Re	eason)	<b>Y</b>		Value of Property	<del></del>				
	Yes No Recovery information				value of Property					
CODE	0. N/A 1. Voluntary 2. Located Not Returned 3. Hospitalia	zed 4. HRS Custody Manufacture Z. Other	5. Law Enforcement			7. Deceased 8. O				
ŏ	N. N/A B. Buy D. Deliver Distribute P. Possess T. Traffic E. Use	Produce/ Cultivate	Drug Type N. N/A A. Amphetamine	Barbituat     C. Cocaine     E. Heroin	e H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphemalia/ Equipment S. Synthetic	U. Unknown Z. Other			
CHARGE	Charge Description Deme Stic Battery		Counts Domestic	[] No	te Violation Number	(1A1) V	iolation of ORD#			
충	Drug Activity Drug Type Armount/Unit	Offense	2 - 0000 Counts Domestic	A Wan	rant/Capias Number	В	ond			
E E	Charge Description			Violence State	ute Violation Number	V	iolation of ORD #			
CHARGE	Drug Activity Drug Type Amount/Unit N/A N/A	Offense			ant/Capias Number	8-	Bond			
щ	Charge Description		Counts Domestic		ite Violation Number	11.00	iolation of ORD#			
CHARGE	Drug Activity Drug Type Amount/Unit N/A N/A	Offense		No Warr	ant/Capias Number	Be				
$\dashv$	Charge Description		Counts Domestic \	Violence Statu	ute Violation Number		iolation of ORD #			
CHARGE	Drug Activity Drug Type Amount/Unit	Offense		No Warr	ant/Capias Number	В	prop (			
-	N/A N/A Location (Cou	ırt, Room Number, Address				Ľ8il.				
TO APPEAR	Mandatory Appearance in Court Instruction No. 2 Court Date an	·								
10	You need not appear in Court but must Comply with instructions on reverse side.  Month	Day	Year		Time		\ <u>\</u>			
NOTICE	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 an	nd Parent/Custodian)				Dat	e Signed			
z [	HOLD for other Agency Name:	Signature of Aresting C			Name Verification (PRINT)	(Printed by Arrestee)				
ADMIN	Dangerous Resisted Arrest Suicidal 1 Other:	Name of Arresting Office	er (Print) しょっ	9,53			PAGE			
	Intake Deputy   I.D.# Pouch#	Transporting Officer	9153	POPD	Witness here if subject	t signed with an "X".	OF (			

### DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

.	Agency ORI Number
9	01/01/2022 07:48 Agency ORI Number
A	Date / Time

N

Palm Beach County Narrative Continuation

FL 0500600

PALM BEACH POLICE DEPARTMENT

Agency Name

7 | 6 | 22-000002

On 01/01/2022, at approximately 0634 hours, I responded to 1460 North Lake Way in reference to a waterway incident. Upon my arrival, I made contact with David Deslauriers (W/M DOB 01/24/1984), who stated that, his brother, Michael Deslauriers (W/M DOB 01/24/1984), and one other individual were stuck/lost in the intercostal water. David Deslauriers stated that Michael and the other individual were on a large yellow duck paddleboat and that Michael did not know how to swim. David stated that he received a text message from the individual requesting help and a "pin" of the location of their phone. The location of the phone was located on the dock just to the west of Kenlyn Road and the Bike Trail.

Sgt. Reyes and Officer Jon Rothenburg arrived on scene to help canvass for Michael and the other individual. As Sgt. Reyes was walking southbound on the Bike Trail, she located Michael sitting on the dock of 1181 North Lake Way. Sgt. Reyes advised she observed a white female in a white dress, later identified as Jgenti, hastily walking towards Michael. As Michael stood up, Jgenti reared her left arm before swinging her arm forward, and with an open hand striking Michael Desleuries on the right side of his face. Sgt. Reyes told them to stop and both Michael and Jgenti walked towards Sgt. Reyes from the dock.

Sgt. Reyes had both Michael and Jgenti separated so she could speak with Michael and Officer John Rothenburg could speak with Jgenti. Sgt. Reyes advised that Michael did not wish to speak regarding the incident nor did he want to acknowledge that anything occurred between him and Jgenti.

Jgenti stated to Officer Rothenburg that she and her fiancé resided at 1460 North Lake Way, and had been in a relationship for the past 4 years. Officer John Rothenburg read Jgenti her Miranda Warnings from a Town of Palm Beach Police Department pre-printed Miranda Warnings card. Jgenti requested council and did not want to speak with Officer Rothenburg.

Due to the above facts, Jgenti was arrested and charged with Domestic Battery pursuant to F.S.S. 784.03(1).

### DOMESTIC VIOLENCE PROBABLE CAUSE

### AFFIDAVIT

A	Date / Time			AFFIDAV	/11							
O M	01/01/2022 07:48			Palm Beach	County							
i	Agency ORI Number								20002			
	Name (Last, First, Middle)	PALM BEA	CH P	Alias	EN /	<b>7</b>   (	9   4	<u>22-0000</u>	-	ex	Date of Birth	
F	JGENTI, KETEVAN								- 1	F	09/05/1987	
CIRG	Charge Description 784.03(1) DOMESTIC VI	OLENCE/SIM	1PLE						•			
v	Victim's Name (Last, First, Middle)  DESLAURIERS, MICHAEL									ex	Date of Birth	-
c	Local Address (Street, Apt. Number)	(City)		(State)	(Zip)	,	Phone		N   I	M Ad	01/24/1984 dress Source	
Ţ	1460 NORTH LAKE WAY,		H, FL	·							4	
М	Business Address (Name, Street)	(City)		(State)	(Zip)		Phone			00	cupation	
	W DEFENDANT'S STATEMENTS:		Oral	OBSERVATIONS OF VI	CTIM (PHYSICA	L & EMO	TIONA	<b>A</b> L):				
											•	
-	RELATIONSHIP BETWEEN VICTIM & SUSPECT		#	<del></del>	<del></del>				7	_		
	DATING											
	PHOTOGRAPHS: So	YES cene:	NO X									
1	-	ictim:	X									
A	911 0	_		CALLER: DAVID DES	SI FIIDTEDC	T,	7					
οl	WEAPON US			TYPE: HANDS	LLURIERS							
+	WITNES	_										
0	INJUF		X	, -, -, -, -, -, -, -, -, -, -, -, -, -,								
N A	MEDICAL TREATM											
Ĺ	AT: Şo											
	Hos	lospital: PHYSICIAN(S)/HOSPITAL:										
N F	ACT COMMITTED IN PRESEN	10E										
O R	OF MINOR	•	<b>X</b>	NAMES/AGES:								
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Ą	H. R. S. NOTIF		X									
	VICTIM PREGNA VIOLATION OF RESTRAINI	_	LAL .	1								
N		DER:		CASE #:								
	PRIOR HISTORY OF DOMES		-									
	VIOLE		X									
	ALCOHOL OR DRUGS INVOLV	VED:										
N	The victim did not invol	ke Marsy`s L	aw.								· · · · · · · · · · · · · · · · · · ·	
A R	On 01/01/2022, at 0748 1	hours, Ketev	an Jose	enti (W/F DOB 09/	05/1987) <b>=</b> =	is arro	sted	iand ch	<b></b>	-	th Domosti-	
R	Battery pursuant to F.S	.S. 784.03 (	1). Tì	ne information is	as follows	3:	U	- waste Cillo	-ryeu	. #1	. C. DOMESTIC	
STATE OF FLORIDA COUNTY OF PALM BEACH Appeared before me,												
	Signature of arresting officer  Sworn to and subscribed to before me this 1 day of 1 day of 2022  REYES, KENDALL F  NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 11).10)  Signature of arresting officer  A day of 1 day of 2022  Social State of Court / OFFICER (F.S.S. 11).10)											
	-											

# SUSPECT/OFFENDER

## **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) - Dating Violence - 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. Incident Report #: Suspect/Offender: (FOR WARRANTS USE ONLY) 2. Warrant #(s): 3.a. Victim's name: Michael D.O.B. 1460 Address: State: Home #: Work #: COURT CASE/WARRANT# b. Victim's next of kin, friend or neighbor: Address: 131 City: Toronto Home #: 416 897 4998 Work #: Other: NOTE: PURSUANT TO ES. 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: I.D. # White = Corrections or State Attorney (Warrant Application) Yellow = Warrants Section Pink = Central Records

PBSO #0029A REV, 05/11