

**7th. Judicial Circuit 707
Charging Affidavit - FLAGLER**

Arrest # _____

Bk # 23-2723

Pg #1 of 5

ARREST <input checked="" type="checkbox"/> NOTICE TO APPEAR <input type="checkbox"/> AFFIDAVIT <input type="checkbox"/> C.C. <input type="checkbox"/>		ADULT <input checked="" type="checkbox"/> JUVENILE <input type="checkbox"/>		Court Case Number: 2023 CF 001148	
(ORI) FL: 0 1 8 0 0 0 0		Agency Name: Flagler County Sheriff's Office		Agency Case Number: 2023-00104414	
FCIC/NCIC Check? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		OBTS# <u>1701 de 1042</u>		Date Arrested: 11/04/2023	
ADDRESS OF ARREST: 117, COLECHESTER, LN, Palm Coast, Florida, 32137		Arrested By: Nguyen Christopher		ID Number: 875	
DEFENDANT		Name (L.F.M.): CASCONE, JOHN, JOSEPH		A.K.A.:	
DOB: 08/09/1964		Age: 59		Sex: Male	
Height: 5 08		Weight: 178		Race: WHITE	
Driver's Lic. ID No.: C250470642890		State: Florida		Year Expires: 2032	
Hair: BROWN		Eyes: GREEN		S.S. #: [REDACTED]	
Scars, Marks, Tattoos:		Business & Occupation:		Statement: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Citizenship: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Probation: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Sexual Predator: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
English: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Deaf/Mute: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Address-Mailing/Permanent (STREET, APT. NUMBER) (CITY) (STATE) ZIPCODE RESIDENCE PHONE	
Address-Local (STREET, APT. NUMBER) (CITY) (STATE) ZIPCODE RESIDENCE PHONE		117 COLECHESTER LN PALM COAST Florida 32137 (229)672-0187		Address-Other(Employer/School) (STREET, APT. NUMBER) (CITY) (STATE) ZIPCODE BUS/SCHOOL PHONE	
CHARGES		DOMESTIC VIOLENCE? YES <input checked="" type="checkbox"/>		Attachments: Affidavit(s) <input type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input checked="" type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/> DUI <input type="checkbox"/> Total Charges: 3	
#1	Charge: BATTERY- PRIOR CONVICT BATT COMMIT 2ND SUB BATTERY	FEL <input checked="" type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: 784.03.2	Citation No.:	Bond: NONE
#2	Charge: AGG CHILD ABUSE	FEL <input checked="" type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: 827.03.1.A	Citation No.:	Bond: NONE
#3	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No.:	Bond:
CO-DEFENDANT		Co-Def #1. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel <input type="checkbox"/> Misd. <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>		Co-Def #2. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel. <input type="checkbox"/> Misd. <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>	
#1 NAME(L.F.M.):		Race:		Sex:	
#2 NAME(L.F.M.):		Race:		Sex:	
NARRATIVE		The undersigned certifies and swears that there is a probable cause to believe the above named defendant, on the <u>4th</u> day of <u>November</u> , 2023, at approximately <u>09:00</u> A.M. <u>X</u> P.M. at <u>117 Colechester LN</u> within <u>Flagler</u> County, violated the law and did then and there.			
** MARSY'S LAW VICTIM INFORMATION **					
On 11/4/2023 at approximately 8:24 PM, I, Deputy C. Nguyen, responded to 117 Colechester Lane, Palm Coast, regarding a complaint of domestic battery. The complainant was fifteen years-old and advised agency Communication Specialists that her step-father had struck both her and her mother. Upon arrival, I spoke to [REDACTED] who identified her					
Supervisor Approved: Horler, Arthur James 11/04/2023					
NOTICE TO APPEAR		MANDATORY APPEARANCE <input type="checkbox"/>		YOU NEED NOT APPEAR IN COURT BUT MUST COMPLY WITH INSTRUCTIONS ON THE REVERSE SIDE OF YOUR COPY <input type="checkbox"/>	
I AGREE TO APPEAR IN COURT HEREIN TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE INDICATED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED, OR PAY THE LISTED FINE, I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST WILL BE ISSUED.		FINE AND COSTS AMOUNT:			
SIGNATURE OF DEFENDANT		DATE		RELATIONSHIP TO JUVENILE	
Sworn to and subscribed before me, the undersigned		I swear affirm the above statements are correct and true.		Rt Thumb	
This <u>5</u> day of <u>NOV</u> , 2023		[Signature]		[Signature]	
Name: <u>Jerego #127</u>		OFFICER'S/COMPLAINANT'S SIGNATURE			
Notary Public <input type="checkbox"/> Law Enforcement or Corrections Officer <input type="checkbox"/>		NAME (PRINTED)		ID NUMBER	
Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>		<u>CS C. Nguyen</u>		<u>875</u>	
Type of Identification:		Inmate Number & facility:			
OFFICIAL USE ONLY					

707 - COURT COPY

Witness/Victim/Evidence Form 707-A

Arrest
 Affidavit
 Notice to Appear

 Adult
 Juvenile

Court Case Number:

Pg #2 of 5

Defendant Name: CASCONE, JOHN, JOSEPH	Agency Case Number:	2023-00104414
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Name (L,F,M):	Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:	Sex: M <input type="checkbox"/> F <input type="checkbox"/>	Age:	DOB:	SSN:
Address (#, Street, City, State):			Zip:	Home Phone:	Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Bus/School Address:				Zip:	Bus. Phone:	
Relative/Contact Name:			Relative/Contact Address:		Phone:	

EVIDENCE COLLECTED

Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Owner(Name) (Address)		(Phone)	Value
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Owner(Name) (Address)		(Phone)	Value
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount

I certify that the foregoing is a complete list of witnesses/victims & evidence known to me.

875
FCSD

Investigating Officer ID Number Agency

707-A - COURT COPY

Narrative 707-B Supplement

Arrest
 Affidavit
 Notice to Appear
 Adult
 Juvenile

Court Case Number:

Page # 3 of 5

Defendant Name: <u>John J. Cascone</u>		Agency Case Number: <u>23-10A414</u>	
CHARGES	DOMESTIC VIOLENCE? YES <input checked="" type="checkbox"/>	Attachments: Affidavit(s) <input type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input checked="" type="checkbox"/> Report <input checked="" type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/>	Total Charges: <u>3</u>
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: Citation No: Bond:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: Citation No: Bond:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: Citation No: Bond:

daughter, [REDACTED], as the caller. [REDACTED] initially refused to provide any information regarding the incident and advised me to speak to her daughter who called. [REDACTED] advised that she had been married to John for approximately 3 years and reside with him and her daughter as a family at this residence.

I then spoke to [REDACTED] who stated that she was in her room when she heard banging and yelling within the residence. This caused [REDACTED] to leave her room to check on matters, at which point she witnessed her step-father, John J. Cascone, pushing her mother around. [REDACTED] witnessed her mother bleeding at this point. [REDACTED] told her mother to stay away from John, at which point [REDACTED] witnessed [REDACTED] approach John and state "You've hit me three nights in a row". John then head butted [REDACTED] on her head "really hard" in front of [REDACTED] which prompted [REDACTED] to tell John to stop. At this point, John ran over to [REDACTED] and began to yell at her and push her around the front foyer of the residence. John continued to push and strike [REDACTED] and [REDACTED] eventually knocking [REDACTED] on the ground. This caused [REDACTED] to run to her room and retrieve her pepper spray in an effort to defend her mother against further battery by John. [REDACTED] attempted to deploy the pepper spray, but was unsuccessful before John grabbed the pepper spray out of [REDACTED] hands. John then pushed [REDACTED] down to the ground and pinned her to the ground by her arm as he deployed the pepper spray on [REDACTED] stated that her mother was able to help her escape, at which point [REDACTED] ran away and called for law enforcement. It should be noted that [REDACTED] was heard telling [REDACTED] to hang up during the 911 call, which [REDACTED] also stated and called her siblings after she hung up. I subsequently arrived on scene as [REDACTED] was still flushing her eyes.

I observed agitated red, watery eyes that were consistent with the deployment of pepper spray. I also observed the odor and aftereffects of aerosolized oleoresin capsicum (OC), which I am familiar with from law enforcement exposure. [REDACTED] declined medical attention on scene. With permission from [REDACTED] [REDACTED] completed a Domestic Violence written statement and assessment form and was provided with the appropriate Domestic Violence

Sworn to and subscribed before me, the undersigned this: <u>5</u> day of <u>November</u> , 20 <u>23</u>	I swear/affirm the above statements are correct and true.	Right thumb
Name: <u>Creo #128</u>	<u>[Signature]</u> 825	
Notary Public <input type="checkbox"/> Law Enforcement Officer <input type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>	OFFICER'S/COMPLAINANT'S SIGNATURE	
Type of Identification:	NAME (PRINTED): <u>US Cascone</u>	ID NUMBER: <u>825</u>

707-B - COURT COPY

Narrative 707-B Supplement

Arrest
 Affidavit
 Notice to Appear
 Adult
 Juvenile

Court Case Number:

Page # 4 of 5

Defendant Name: <u>John J. Caspene</u>		Agency Case Number: <u>23-104414</u>	
CHARGES	DOMESTIC VIOLENCE? YES <input checked="" type="checkbox"/>	Attachments: Affidavit(s) <input type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input checked="" type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/>	Total Charges: <u>3</u>
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: Citation No: Bond:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: Citation No: Bond:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: Citation No: Bond:

paperwork. I also obtained photographs of [REDACTED] and her injuries.

I then spoke to John in his bedroom and observed him with a bloody pinky finger which was later determined to have resulted from a defensive bite from [REDACTED]. John advised that there was an argument between his wife and her daughter and he attempted to separate them. John advised that he sustained the injury on his finger when he had struck it against a table in the residence. John advised that he had no further recollection of the event and declined medical attention on scene. John's injury was later photographed.

I then spoke to [REDACTED] again, who was still refusing to provide a statement or further information. I continued to interview [REDACTED] who eventually disclosed that John was diagnosed with a Borderline Personality Disorder and that the injury on John's finger was the result of [REDACTED] biting John to get him to release [REDACTED]. I observed a laceration to the front of [REDACTED] face that was consistent with her glasses being pushed against her face during an altercation. [REDACTED] declined medical attention on scene, and continued to be resistive with further information. It should be noted that during my interview, [REDACTED] stated that she did not deny what her daughter had witnessed. [REDACTED] refused to have her injury photographed.

I observed the front foyer of the residence and noticed several blood splatters within the location of where the altercation was said to have occurred. I also located a pink canister of OC spray on the ground next to the sliding glass doors opposite of the front entry and foyer. The scene was photographed and the OC spray canister initially collected for evidence, but was later disposed of as it is an aerosol product and could not be submitted to evidence.

Due to the statements made and evidence before me, I placed John under arrest for Domestic Battery against his wife and step-daughter. John will also be charged with Aggravated Child

Sworn to and subscribed before me, the undersigned this <u>5</u> day of <u>November</u> , 20 <u>23</u>	I swear/affirm the above statements are correct and true.	Right thumb
Name: <u>J. Caspene #1234</u>	<u>[Signature]</u> 895	
Notary Public <input type="checkbox"/> Law Enforcement Officer <input type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>	OFFICER'S/COMPLAINANT'S SIGNATURE	
Type of Identification:	NAME (PRINTED) <u>PIS C. Caspene</u>	ID NUMBER <u>895</u>

707-B - COURT COPY

Narrative 707-B Supplement

Arrest
 Affidavit
 Notice to Appear
 Adult
 Juvenile

Court Case Number:

Page #5 of 5

Defendant Name: John J. Gascone Agency Case Number: 23-104414

CHARGES DOMESTIC VIOLENCE? YES Attachments: Affidavit(s) Statement(s) NTA Schedule Report Traffic Infraction(s) Total Charges: 3

#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No:	Bond:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No:	Bond:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No:	Bond:

Abuse against his step-daughter, as he maliciously utilized the OC spray against his daughter who he had pinned to the ground and would not allow her to escape as she was sprayed across the eyes. John was transported to the Flagler County Inmate Facility without issue.

Later research into John's criminal history shows Flagler County Sheriff's Office case 19-72270, where John was arrested for Domestic Aggravated Battery and Domestic Battery by Strangulation against his wife at the time. As such, my charges of Domestic Battery will be upgraded to Domestic Felony Battery with Second Subsequent Conviction.

An electronic report of Child Abuse will be submitted to the Florida Department of Children and Families by their online portal.

All photographs taken on scene will be submitted to Aegis. I obtained all required Domestic Violence forms from [redacted] and [redacted] with [redacted] advising that she may provide a statement at a later date. Both mother and daughter were provided with a Domestic Violence pamphlet.

My Axon camera system was utilized for this investigation and the video file will be uploaded to evidence.com in a timely manner.

Sworn to and subscribed before me, the undersigned, this <u>5</u> day of <u>November</u> , 20 <u>23</u>	I swear/affirm the above statements are correct and true.	Right thumb
Name: <u>Gregory #1722</u>	<u>Dis Chris 875</u>	
Notary Public <input type="checkbox"/> Law Enforcement Officer <input type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>	OFFICER'S/COMPLAINANT'S SIGNATURE	
Type of Identification:	NAME(PRINTED) <u>Dis C. Nguyen</u>	ID NUMBER <u>875</u>

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