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ARREST / NOTICE TO APPEAR

1 Arrest 3 Request for Warrant 1 JUVENILE
2 N.T.A. 4 Request for Capas

OBTS Number: _____ Agency ORI Number: **0500700** Agency Name: **Riviera Beach Police Department** Agency Report Number (N.T.A.'s only): **8, 4 20-05946**

Charge Type: 1 Felony 2 Traffic Felony 3 Misdemeanor 4 Traffic Misdemeanor 5 Ordinance 6 Other

Location of Arrest (Including Name of Business): **2010 AVENUE B, RB, FL 33404** Location of Offense (Business Name, Address): **2010 AVENUE B, RIVIERA BEACH, FL 33404**

Date of Arrest: **08/07/2020** Time of Arrest: **20:34** Booking Date: **08/07/2020** Booking Time: **20:44** Jail Date: **//** Jail Time: _____ Location of Vehicle: _____

Name (Last, First, Middle): **ELLSON, BLAKE JUSTIN** Alias: _____ Alias (Name, DOB, Soc. Sec. #, Etc): _____

Race: White American Indian Black Oriental/Asian Other: **W** Sex: **M** Date of Birth: **11/03/2000** Height: **5'10** Weight: **200** Eye Color: **BROWN** Hair Color: **BLACK** Complexion: **LIGHT** Build: **MEDIUM**

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): _____

Local Address (Street, Apt. Number): **4101 N FLAGLER DR, WEST PALM BEACH, FL 33407** (City): _____ (State): _____ (Zip): _____ Phone: **(754) 304-9243**

Permanent Address (Street, Apt. Number): **4101 N FLAGLER DR, WEST PALM BEACH, FL 33407** (City): _____ (State): _____ (Zip): _____ Phone: **(754) 304-9243**

Business Address (Name, Street): _____ (City): _____ (State): _____ (Zip): _____ Phone: _____

D/L Number, State: **E425070004030 / FL** Soc. Sec. #: _____ DHS Number: _____ Place of Birth (City, State): **West Palm Beach, FL** US Citizenship: **US**

Co-Defendant Name (Last, First, Middle): _____ Race: _____ Sex: _____ Date of Birth: _____

Co-Defendant Home (Last, First, Middle): _____ Race: _____ Sex: _____ Date of Birth: _____

Relationship: _____

Notified by (Name): **L. OR** Date: _____ Time: _____

Released To (Name): **2- OR** Date: _____ Time: _____

Relationship: **3- OR**

JUVENILE DISPOSITION: 1 Arrested 2 At Large 3 Felony 4 Misdemeanor 5 Juvenile

The above address was provided by defendant and/or defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.

Property Crime? Yes No Description of Property: _____ Value of Property: _____

Charge Description: **FRAUD - GIVE FALSE ID TO LAW ENFORCEMENT** Statute Violation Number: **901.36(1) GW**

Charge Description: **DISORDERLY CONDUCT - DISORDERLY INTOXICATION** Statute Violation Number: **856.011**

Charge Description: **RESIST/OBSTRUCT/OPPOSE OFFICER WITHOUT VIOLENCE** Statute Violation Number: **843.02**

Health / Apparent Physical Condition of Defendant: _____

Check which applies: Released C.F. Released to Parent/Guardian TOT County Jail Posted Bond South County Mental Health

Transported By: _____ Date Transported: _____ Time Transported: _____ Other: _____

INSTRUCTION NO. 1 - Mandatory appearance in court
 INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): **North County PALM BEACH GARD**
Court Date and Time: **09/10/2020 08:30:00**

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: _____

Name Verification (Printed by Arrestee): _____ (PRINT) **AUG 8 AM 2:03**

Name of Arresting Officer (Print): **WEDDERBURN, G. C.** ID #: **6792**

Transferring Officer: **WEDDERBURN** ID #: **6792** Agency: **RBPD**

PROBABLE CAUSE AFFIDAVIT

1 Arrest 2 N.T.A. 3 Request for Warrant 4 Request for Capture **1** JUVENILE

OBTS Number _____
 Agency ORI Number **FL FLO500700** Agency Name **Riviera Beach Police Department** Agency Report Number **8:4 20-05946**

Charge Type: 1 Felony 3 Misdemeanor 5 Ordinance
 2 Traffic Felony 4 Traffic Misdemeanor 6 Other

Name (Last, First, Middle) **ELLSON, BLAKE JUSTIN** Race **W** Sex **M** Date of Birth **11/03/2000**

Charge Description **901.36 FRAUD - GIVE FALSE ID TO LAW ENFORCEMENT**
843.02 RESIST/OBSTRUCT/OPOSE OFFICER WITHOUT VIOL

Victim's Name (Last, First, Middle) **STATE OF FLORIDA,** Race _____ Sex _____ Date of Birth _____

Local Address (Street, Apt. Number) **600 W BLUE HERON BLVD, RIVIERA BEACH, FL 33404** (City) _____ (State) _____ (Zip) _____
 Phone **(561) 845-4123** Address Source _____
 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.
 confessed to _____ admitting to the below facts.
 was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
 was found to have committed the below acts, resulting from my (described) investigation.

On the **7** day of **August**, **2020** at **20:34** (Specifically include facts constituting cause for arrest.)

In the city of Riviera Beach, Florida 33404 the following incident occurred. This investigation was recorded on Officer Wedderburn's #6792 department issued body worn camera (BWC).

On Friday, August 7, 2020, at approximately 8:36 PM, I was dispatched to 2010 Avenue B (Rybovich Marina) in reference to a disturbance. Upon my arrival, Officer J. Bennett #6797 and Officer A. Hardrick #6544 already had suspect Blake Justin Ellson (W/M, 11/03/2000) detained. Officer Hardrick stated that the Bartender said she cut him off because he had too much to drink and she was being threatened by Ellson and he was being belligerent at the bar. While officers were gathering information from Ellson he gave Officer Bennett the incorrect information stating "his date of birth was in 1995", after being detained it was discovered on his Florida Identification Card that he was born in 2000. While Officers escorting Ellson to my patrol vehicle PD1522 he resisted officers by pulling away and falling to the ground causing an Officer to sustain injuries.

Based on the above investigation, Blake Justin Ellson (W/M, 11/03/2000) was arrested and charged with one (1) count of disorderly intoxication, one (1) count of Resisting officer. Ellson was then transported to Saint Mary's Medical Center (901 45th Street, West Palm Beach, Florida 33407), to be medically cleared for the County Jail. Ellson was later taken Palm Beach County Jail.

SWORN AND SUBSCRIBED BEFORE ME
NUBIN, JENNIFER R
 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 111.10)

WEDDERBURN, GRAEME CHRISTOPHER
 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
 NAME OF OFFICER (PLEASE PRINT)

08/07/2020 DATE
08/07/2020 DATE



**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 type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2020018815	Date: 08/08/2020
	Specialist Name/ID: T Howard/7185