

0521856 50-2021-MM-001772-AMB

ADMTNSTRATION		OBTS Number		ARREST / NOTICE TO APPEAR				1. Arrest (No Warrant) 3. Request for Warrant 6. Arrest (Warrant) 4. Request for Capias 2. N.T.A. 5. Juvenile Referral		1	JUVENILE
Agency ORI Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N.T.A.'s only) 3, 2 2021-002792							
Charge Type: Check as many as apply.		<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type: Hands, Feet, Fist, Teeth		Multiple Clearance Indicator	
Location of Arrest (Including Name of Business)						Location of Offense (Business Name, Address)					
333 E PALMETTO PARK RD APT 836, BOCA RAT, 333 E						333 E PALMETTO PARK RD 836, BOCA RATON, FL 33432					
Date of Arrest 03/06/2021		Time of Arrest 22:56		Booking Date 03/07/2021		Booking Time 00:04		Jail Date 03/07/2021		Jail Time 00:57	
Location of Vehicle N/A											
Name (Last, First, Middle) DAVIS, JENNIFER ANN											
Alias:											
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex W		Date of Birth F 11/06/1988		Height 5'06		Weight 120		Eye Color HAZEL	
Hair Color BLONDE		Complexion LIGHT		Build Small		Marital Status S		Religion CATHOLIC		Indication of Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Local Address (Street, Apt. Number) 333 E PALMETTO PARK RD 836, BOCA RATON, FL 33432		Phone (781) 775-5443		Residence Type: 1. City 2. County 3. Florida 4. Out of State 1 1		Permanent Address (Street, Apt. Number) 333 E PALMETTO PARK RD 836, BOCA RATON, FL 33432		Address Source Defendant	
Business Address (Name, Street) LAW FIRM,		Phone (781) 775-5443		Occupation		DVL Number, State D120421889060 / FL		Sec. Sec. Number		INS Number	
Place of Birth (City, State) BOSTON, MA, United		Citizenship US		Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile				<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor					
		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile				<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor					
JUVENILE		<input type="checkbox"/> Parent <input type="checkbox"/> Other		Name (Last, First, Middle)		Residence Phone		<input type="checkbox"/> Legal Custodian		Business Phone	
Address (Street, Apt. Number)		1 - NONE		(City) (State) (Zip)							
Notified by: (Name)		Date		Time		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT IAC 3. Incarcerated					
Released To: (Name)		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 355-2526) informed of any change of address.		School Attended		Grade		Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property	
C O D E		Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Disperse/ 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. Opium/deriv.		P. Paraphernalia/ Equipment S. Synthetic	
		U. Unknown Z. Other		Charge Description BATTERY		Statute Violation Number 784.03(1A1)		Violation of ORD #			
C H A R G E		Drug Activity		Drug Type N		Amount / Unit		Offense #		Counts 1	
		Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond					
C H A R G E		Charge Description RESIST OR OBSTRUCT OFFICER WITHOUT VIOLENCE		Statute Violation Number 843.02		Violation of ORD #					
		Drug Activity		Drug Type N		Amount / Unit		Offense #		Counts 1	
		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond					
C H A R G E		Charge Description		Statute Violation Number		Violation of ORD #					
		Drug Activity		Drug Type		Amount / Unit		Offense #		Counts	
		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond					
I N T A K E		Health / Apparent Physical Condition of Defendant GOOD		Any knowledge of the following: <input checked="" type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input checked="" type="checkbox"/> Injuries		Explain:					
		Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health		<input checked="" type="checkbox"/> T.O.T. County jail		PROPERTY - Received By HARRISON		Released By HARRISON		Released To PBCJ	
		Transported By HARRISON		Date Transported 03/07/2021		Time Transported 00:56		Other			
N O T I C E		<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.		Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444		Court Date and Time					
T O A P P E A R		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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.		Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed					
A D M I N		HOLD for Other Agency		Signature of Arresting Officer [Signature]		Name Verification (Printed by Arresting Officer) HARRISON, D. M.		I.D. # 856		PAGE 1 of 1	
		<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) HARRISON, D. M.		I.D. # 856		Agency BRPD	
		Initials Deputy [Signature]		I.D. # 6980		Pouch #		Transporting Officer HARRISON		I.D. # 856	
								Agency BRPD		Witness here if subject signed with an "X".	

JH 0521856 PH 2912

VICTIM NOTIFICATION REQUIRED

No Photo Available

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County
Narrative Continuation

A D M I N	Date / Time 03/06/2021 22:56	Agency ORI Number FL 0500200	Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2021-002792
	N A R R A T I V E			

On 03/06/2021 at approximately 2225 hours, I responded lights and sirens to 333 E Palmetto Park Rd, Apt 836 in reference to a woman screaming for help.

Upon arrival, Officers Van Camp, Baron, Jalil, and myself knocked on the door to apartment 836 and announced we were Boca Raton police officers. A security guard for the apartment complex was standing nearby and advised the screaming was coming from this apartment. A white female, later self-identified as Jennifer Davis, answered the door but refused to step outside to speak with us. Due to exigent circumstances of multiple callers advising of a female screaming for help inside this apartment, officers attempted to enter the apartment. After giving Davis multiple commands to step outside, Davis blocked the doorway entrance with her body and refused to step outside. As a result, I then held onto Davis's left wrist while another officer held onto Davis's right wrist and we escorted her outside of the apartment. We kept giving Davis multiple commands to stop resisting, but Davis continued to brace and tense her body and then flail her arms. Due to her flailing her arms, I secured Davis in handcuffs. Once calm, I removed her from handcuffs and seated her nearby.

I then asked Davis what happened. Davis advised that she has a drinking problem and gets angry when she drinks. She advised she had some drinks today in Delray Beach, and when she came home to her apartment, she started screaming at her boyfriend of four years, white male Adam Liucci. Liucci was inside the apartment. Davis stated that she hit Liucci because she is a mean person. Upon asking Davis where she hit Liucci or why she hit him, she would not answer me. I observed a small laceration to her left clavical. I captured photos of this injury of my MVR body camera.

I then went inside to speak with Liucci. I observed lacerations to the left side of his neck, which appeared to be from nails scratching him. I asked Liucci what happened, and Liucci advised that nothing physical took place between him and Davis. Upon asking Liucci about how he obtained the scratch marks on his neck, Liucci stated he did not know. Liucci was vague with his responses. Ofc Super was standing by with Davis while I was asking Liucci what happened. Ofc Super advised me that while I was asking Liucci how he obtained the scratch marks, Davis had spontaneously uttered to Ofc Super that the scratch marks were from her. Ofc Baron captured photos of Liucci's injuries on his MVR body camera.

Sgt Caruso responded to the scene and initiated a use of force investigation. While Sgt Caruso was conducting his investigation, Davis spontaneously uttered to Sgt Caruso that she had "attacked" Liucci.

Due to the admittance from Davis for scratching Liucci along with Liucci's physical injuries, I then placed Davis under arrest for simple battery pursuant to F.S.S. 784.03(1a1). Due to Davis bracing, tensing, and resisting our verbal commands while attempting to make entry into the apartment, Davis is also being charged for resisting law enforcement without violence pursuant to F.S.S. 843.02.

STATE OF FLORIDA
COUNTY OF PALM BEACH

Appeared before me, personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.



SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 7 day of March , 2021 .



CARUSO, MARK RICHARD
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

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)
- 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#: 2021-002792 Agency: Boca Raton Police Dept
Offense: Simple Battery / Resisting w/o violence
Suspect/Offender: Jennifer Davis
D.O.B. 11/6/88 Race: W Sex: F

2. Warrant#(s): _____

3.a. Victim's name: Adam Liucci D.O.B. 4/11/83 Race: W Sex: M
Address: 333 E Palmetto Park Rd, Apt 836
City: Boca Raton State: FL Zip: 33432
Home#: 413-221-1936 Work#: _____ Other: _____

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

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: Pursuant to F.S.119.07 (3)(S)1, I request that the address and telephone number on this form be kept confidential (applicable only to sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery, or domestic violence cases).
Other confidentiality provisions of Florida State Statutes may also be applicable

Signature of person waiving notification: _____

Printed name of person waiving notification: _____

Officer's Name: D. HARRISON I.D.# 856 Date: 03/06/2021
White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records

SUSPECT/OFFENDER:

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT#:



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: 2021005668	Date: 3/7/21
	Specialist Name/ID: A. Pinkney/7796