

0514212

20MM000751MB857

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

1 [] Juvenile [N]

OBTS Number		Agency ORI Number PLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 30028572	
Charge Type Check as many as apply <input checked="" type="checkbox"/> 1. Felony <input checked="" 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		If Weapon Seized Enter Type	
Location of Arrest (Including Name of Business) 8176 BUTLER GREENWOOD DR RPB/FL/33411				Location of Offense (Including Name of Business) 8176 BUTLER GREENWOOD DR RPB/FL/33411			
Date of Arrest 01/23/2020		Time of Arrest 1300		Booking Date		Booking Time	
Name (Last, First, Middle) LOPREATO PAUL				Alias (Name, DOB, Soc. Sec. #. Etc.)			
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian		Sex M		Date of Birth 09/09/1966		Height 5'11	
Weight 180		Eye Color BROWN		Hair Color GRAY		Complexion MED	
Build MED		Marital Status SINGLE		Religion UNK		Indication of Alcohol Influence Drug Influence	
Local Address (Street, Apt. Number) 8176 BUTLER GREENWOOD DR RPB				City RPB		State FL	
Permanent Address (Street, Apt. Number)				City		State FL	
Business Address (Street, Apt. Number)				City		State FL	
DL Number, State L163684663290, FL		Social Security Number		INS Number		Place of Birth satellite beach, FL	
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"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other		Name (Last, First, Middle)		Phone			
Address (Street, Apt. No.)		City		State		Zip	
Business Phone		Notified By (Name)		Date		Time	
Released To (Name)		Relationship		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 561 355-2526) informed of any address change.		<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 D: Deliver T: Traffic		R: Smuggle O: Distribute 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		P: Paraphernalia/ Equipment		U: Unknown Z: Other			
Charge Description BATTERY (DOMESTIC)		Counts 1		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 784.03 (1a1)	
Violation or ORD. #		Drug Activity N		Drug Type N		Amount/Unit N/A	
Offense # 20028572		Warrant/Capias Number		Bond			
Charge Description		Counts		Domestic Violence		Statute Violation Number	
Violation or ORD. #		Drug Activity		Drug Type		Amount/Unit	
Offense #		Warrant/Capias Number		Bond			
Charge Description		Counts		Domestic Violence		Statute Violation Number	
Violation or ORD. #		Drug Activity		Drug Type		Amount/Unit	
Offense #		Warrant/Capias Number		Bond			
Charge Description		Counts		Domestic Violence		Statute Violation Number	
Violation or ORD. #		Drug Activity		Drug Type		Amount/Unit	
Offense #		Warrant/Capias Number		Bond			
Location (Court, Address, Room Number) Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406							
Court Date and Time Month _____ Day _____ Year _____ Time _____ AM <input type="checkbox"/> PM <input type="checkbox"/>							
I AGREE TO APPEAR AT THE ABOVE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT I SHOULD WILLINGLY 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 <input type="checkbox"/> Dangerous <input type="checkbox"/> Substantial		Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer D/S TRENTMAN, T.		ID # 22072	
Initials/County		ID #		Pouch #		Transporting Officer D/S TRENTMAN, T.	
Agency PBSO		Witness here if subject signed with an "X"		Page 1 of 1			

VICTIM NOTIFICATION
REQUIRED

DOMESTIC

FILED
JAN 24 2020
CIRCUIT & COUNTY COURTS
(CRIMINAL DIV.)

SCANNED
JAN 24 2020

OBTS Number		PROBABLE CAUSE AFFIDAVIT				1. Arrest 2. N.T.A.	3. Request For Warrant 4. Request For Captus	1	Juvenile	N
Agency ORI Number FL0500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number 06 20028572				
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		Special Notes				
Defendant Name (Last, First, Middle) LOPREATO PAUL						Race W	Sex M	Date of Birth 09/09/1966		
Charge BATTERY (DOMESTIC)										
Victim Name (Last, First, Middle) LOPREATO ELLEY						Race W	Sex F	Date of Birth 09/18/1974		
Local Address (Street, Apt. Number) 8176 BUTLER GREENWOOD DR		City RPB	State FL	Zip 33411	Phone	Address Source VERBAL				
Business Address (Street, Apt. Number)		City	State	Zip	Phone	Occupation CEO of a company				
The undersign 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 (described) investigation.										
On the 23rd day of Jan 20 20 at 1200 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM										

I was dispatched to 8176 BUTLER GREENWOOD DR ROYAL PALM BEACH FL 33411 in the city of Royal Palm Beach in response to a suspect in a Domestic Violence returning home. I was advised that deputies were out at the house on 1/23/2020 to investigate a Domestic Violence incident. I pulled up the investigating Deputy's (Jaime, D #34172) report, and the photos of the listed victim, Elley Lopreato. I could see several of Elley's nails were broken, and she had a large bruise on her forearm. The report (which had already been entered into PBSO's report system) stated "ON JANUARY 23, 2020, AT APPROXIMATELY 2005 HOURS, I WAS DISPATCHED TO 8176 BUTLER GREENWOOD DRIVE, WEST PALM BEACH, FLORIDA 33411, IN REFERENCE TO A DOMESTIC DISTURBANCE.

UPON ARRIVAL, I MADE CONTACT WITH A WHITE FEMALE WHO IDENTIFIED HERSELF AS THE VICTIM/COMPLAINANT NAMED ELLEY LOPREATO. LOPREATO EXPLAINED THAT HER HUSBAND NAMED, PAUL LOPREATO RETURNED HOME FROM WORK UPSET ABOUT COMMENTS A COWORKER HAD MADE TO HIM THEN BEGAN COMPLAINING ABOUT DINNER NOT BEING PREPARED AS WELL AS THE TEENAGERS IN THE HOME NOT HAVING RESPONSIBILITIES. ELLEY LOPREATO SAYS AN ARGUMENT ENSUED AND SHE TOLD HIM THAT HE COULD LEAVE THE HOME AND HAVE A DIFFERENT LIFE. ELLEY LOPREATO SAID THAT IT CAUSED PAUL LOPREATO TO BECOME EVEN ANGRIER AND THAT HE PROCEEDED TO PUSH HER INTO THE KITCHEN CABINETS, CAUSING HER TO FALL TO THE FLOOR. ELLEY LOPREATO SAID THAT WHILE SHE WAS ON THE GROUND, PAUL GRABBED HER BY HER ARMS WITH HIS HANDS AND BEGAN TO "THROW" HER AROUND THE KITCHEN FLOOR. ELLEY THEN STATED THAT PAUL ENTERED THE LIVING AREA OF THE RESIDENCE AND BEGAN TO THROW MISCELLANEOUS BILLS AND HOUSE PAYMENTS, SCATTERING THEM ALL OVER THE ROOM BEFORE PUSHING HER INTO THE WHITE COUCH OF THE LIVING AREA. ELLEY LOPREATO STATED THAT BOTH PARTIES PROCEEDED UPSTAIRS INTO THE BEDROOM TO GRAB SUITCASES AND THAT SHE AGAIN TOLD PAUL TO LEAVE. PAUL LOPREATO REPORTEDLY REFUSED AND PUSHED HER AGAIN INTO THE BEDROOM WALL AND DRAGGED HER BY THE HAIR ALONG THE BEDROOM FLOOR. ELLEY LOPREATO STATED THAT THE ALTERCATION CONTINUED AND MOVED DOWNSTAIRS AND THAT SHE STRUCK HER HUSBAND IN THE FACE WITH HER PHONE IN AN ATTEMPT TO DEFEND HERSELF. ONCE SEPARATED, ELLEY LOPREATO SAYS SHE WENT BACK UPSTAIRS TO CALL THE POLICE WHILE PAUL LOPREATO STAYED DOWNSTAIRS AND LEFT THE RESIDENCE PRIOR TO THE ARRIVAL OF LAW ENFORCEMENT. LOPREATO REPORTED THAT SHE HAD BRUISING ON HER LEFT ARM AS WELL AS SEVERAL BROKEN NAILS AS A RESULT OF THE STRUGGLE DURING THE INCIDENT. UPON VISUAL INSPECTION OF ELLEY LOPREATO'S BODY, I OBSERVED THAT THERE WAS BRUISING ON HER LEFT FOREARM NEAR THE ELBOW AS WELL AS SEVERAL DEEPLY BROKEN NAILS. THERE APPEARED TO BE BLOOD ON THE RING FINGER OF HER RIGHT HAND FROM WHERE THAT NAIL WAS BROKEN. I FOUND ELLEY LOPREATO'S INJURIES TO BE CONSISTENT WITH HER ACCOUNT OF THE INCIDENT. ELLEY LOPREATO SAID SHE DID NOT NEED MEDICAL TREATMENT. ELLEY LOPREATO ALSO FILLED OUT A PALM BEACH COUNTY SHERIFF'S OFFICE (PBSO) SWORN, WRITTEN STATEMENT DETAILING HER ACCOUNT OF THE INCIDENT. THE LIVING AREA AND KITCHEN OF THE RESIDENCE APPEARED TO BE IN DISARRAY AND THERE DID APPEAR TO BE SIGNS OF STRUGGLE. THERE WAS MISCELLANEOUS PAPERWORK SCATTERED ABOUT THE FLOOR OF THE LIVING AREA, THERE WAS ALSO FOOD SMEARED AROUND THE KITCHEN COUNTER.

BASED ON MY INVESTIGATION, I FIND PROBABLE CAUSE EXISTS TO ARREST PAUL LOPREATO FOR THE CRIMINAL OFFENSE OF SIMPLE BATTERY (DOMESTIC RELATED) AS HE DID INTENTIONALLY AND WILLFULLY TOUCH HIS WIFE ELLEY LOPREATO AGAINST HER WILL IN VIOLATION OF FLORIDA STATE STATUTE 784.03 (1A1).

I then confronted The suspect Paul Lopreato, who agreed that there was an incident, but did not want to talk about it as he did not want his wife to be arrested. I then advised him that there was PC for his arrest, and that his wife had spoken to Deputies telling them that he had gotten into a physical altercation. He was made aware of the photos of his wife and her injuries, and he showed me photos of his injuries. He sent me a copy of the photos he had taken of his injuries, and I realized that her injuries were more severe than his. I read him his maranda rights and confirmed with him that he wanted to provide the photos of his injuries, to which he emphatically agreed. Paul was arrested as I determined that he was the primary aggressor.

It should be noted that D/S Jaime had submitted supplements stating that Elley later claimed that she was also the victim of Domestic violence by strangulation. I could not see any evidence of strangulation in the photos, nor did I have access to her sworn statement, so I am not arresting Paul for this at this time. A Supplemental PC from Jaime will be submitted.

Due to the above I find Probable Cause to arrest Paul Lopreato for:
FSS 784.03 (1A1) Battery (Domestic)

He was transported to the PBC Jail without incident, this case is cleared by arrest.

The foregoing instrument was sworn to and affirmed before me this <u>23</u> day of <u>APRIL</u> 20 <u>19</u> by <u>[Signature]</u>		D/S TRENTMAN, T. 22072	
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)		Name of Arresting/Investigating Officer	
[Signature]		[Signature]	
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)		Signature of Arresting/Investigating Officer	

SCANNED
JAN 24 2020

Palm Beach County Sheriff's Office
DOMESTIC VIOLENCE/DATING VIOLENCE SUPPLEMENTAL PROBABLE CAUSE FORM
 (Submit this form with the original Probable Cause Affidavit)

Defendant: LOPREATO PAUL DOB: 09/09/1966 Case #: 20028572

Victim: LOPREATO ELLEY DOB: 09/18/1974 Race: W Sex: F

Relationship between Victim and Defendant: _____

Photographs: Scene Yes No Victim Yes No Defendant Yes No

911 Call: Yes No Caller: BARBER

Weapon Used: Yes No Type: KNIFE

Witness: Yes No Name: _____

Victim Pregnant: Yes No If yes, _____ Weeks _____ Months

Injuries: Yes No Description: PAUL: CUTS ON FACE; ELLE: BRUSE ON ARM, BROKEN NAILS

Medical Treatment: Yes No

At Scene: Yes No Paramedics: _____

At Hospital: Yes No Hospital: _____ Physician: _____

Are children living in the home? Yes No DCF Notified? Yes No

Name: _____ HANNAH DOB _____

Name: _____ DOB _____

Name: _____ DOB _____

Injunction: Yes No Case #: _____

No Contact Order: Yes No Case #: _____

Alcohol or Drugs: Yes No Unknown

Prior history of Domestic/Dating Violence Yes No

Defendant's statements Yes No If yes, written recorded oral

First words Defendant said when you responded to scene: AT FIRST DID NOT WANT VICTIM TO BE CHARGED, THEN ADVISED THAT VICT SPIT IN HIS FACE DURING VERBAL ARGUMENT, HIT HIM WITH HER PHONE, AND

Victim's statements Yes No If yes, written recorded oral

First words Victim said when you responded to scene: _____

Did the Victim contact anyone other than the police within an hour of the incident regarding the incident?
 Yes No If yes, name: _____ phone _____

Observations of Victim (Physical & Emotional): _____

Upset Crying Fearful Hysterical Afraid Calm Nervous

Complained of pain Other _____

Victim contact information: _____

Local Address: 8176 BUTLER GREENWOOD DR ROYAL PALM BEACH FL 33411

Phone: Home: _____ Work: _____ Cell: _____

Employer: _____ UNK

Name of Plaintiff: HANNAH HONERLAW Phone: _____

SCANNED

VICTIM NOTIFICATION FORM

- Homicide (Ch.782)
- Attempted Murder
- 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.
- Sexual Offense (Ch.794)
- Attempted Sexual Offense
- Dating Violence

Upon completion, this form must accompany the booking paperwork.
If applying for a warrant, attach this form to the filing packet.

1. Incident Report #: 20028572 Agency: Palm Beach County Sheriff's Office
 Offense: BATTERY (DOMESTIC)
 Suspect/Offender: LOPREATO PAUL
 DOB: 09/09/1966 Race: W Sex: M

2. Warrant #(s): _____

3.a. Victim's Name: LOPREATO ELLEY DOB: 09/18/1974 Race: W Sex: F
 Address: 8176 BUTLER GREENWOOD DR
 City: RPB State: FL Zip: 33411
 Home #: _____ 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 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: D/S TRENTMAN, T. ID #: 22072 Date: 4/27/2019

SCANNED

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

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: 2020002573	Date: 1/24/2020
	Specialist Name/ID: B Evans / 23649

SCANNED
JAN 24 2020