2020MM005236AMB 0517229 ~~0246 561~~ DEO / 1407

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500800

Agency Name: West Palm Beach Police Department

Agency Report Number (N.T.A.'s only): 9 4 2020-0010185

Charge Type: Check as many as apply. 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other

If Weapon Seized — Enter Type: Hands/feet/teeth

Multiple Clearance Indicator

Location of Arrest (Including Name of Business): 333 FERN ST

Location of Offense (Business Name, Address): 333 FERN ST 2002, WEST PALM BEACH, FL 33401

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
06/29/2020	23:28	06/29/2020	23:38	06/29/2020	23:30	

DEFENDANT

Name (Last, First, Middle): DICKINSON, RYAN JOHN

Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:

Race (W - White, B - Black, I - American Indian, O - Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	10/23/1976	5'11	180	BROWN	BLACK	MEDIUM	Muscular

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description)

Marital Status: M — Religion

Indication of: Alcohol Influence Yes ☐ No ☒ Unk. ☐ Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 333 FERN ST 2002, WEST PALM BEACH, FL 33401

Home Phone: (972) 523-9675

Residence Type: 1. City 3. Florida 2. County 4. Out of State — 1

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 333 FERN ST 2002, WEST PALM BEACH, FL 33401

Mobile Phone

Address Source: VERBAL

Business Address (Name, Street) (City) (State) (Zip)

Work Phone

Occupation

D/L Number, State: D252730763830 / FL

Soc. Sec. Number: [redacted]

INS Number

Place of Birth (City, State): TUSLA, OK, United States

Citizenship: U.S.

CO-DEF

Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Other: ☐ Legal Custodian — Name (Last, First, Middle) — Residence Phone

Address (Street, Apt. Number) (City) (State) (Zip) — Business Phone

Notified by: (Name) — Date — Time — JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated

Released To: (Name) — Relationship — Date — Time

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.
☐ Yes, by: ☐ No

School Attended — Grade

Property Crime? ☐ Yes ☒ No — Description of Property — Value of Property

CODE

Drug Activity: N. N/A P. Possess — S. Sell B. Buy T. Traffic — R. Smuggle D. Deliver E. Use — K. Disperses/ 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

Charge Description	Statute Violation Number	Violation of ORD #
BATTERY- BATTERY (SIMPLE)	784.03(1A1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By | Released By | Released To

Transported By | Date Transported / / | Time Transported : : | Other

JUN 30 AM 1:32

NOTICE TO APPEAR

☐ 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)

Court Date and Time

JUN 30 AM 8:57

No Photo Available

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

I CONSENT TO RECEIVE REMINDERS OF COURT DATE(S) AND TIMES FOR THIS CASE BY TEXT MESSAGE TO THE NUMBER IDENTIFIED HERE. (972) 523-9675 — INITIAL

I UNDERSTAND THAT STANDARD TEXT MESSAGE RATES MAY APPLY
AND THAT I MAY REVOKE THIS CONSENT VIA THE TEXT MESSAGE SYSTEM IF I CHOOSE.

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Intake Deputy — I.D. # — Pouch #

Signature of Arresting Officer — 2075

Name of Arresting Officer (Print) — I.D. #: LOPEZ, NIKOL V — 02075

Transporting Officer — I.D. # — Agency: N LOPEZ — 2075 — WPBPD

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed

SCANNED JUN 30 2020

PAGE 1 OF 1

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DOMESTIC VIOLENCE PROBABLE CAUSE
AFFIDAVIT
Palm Beach County

ADMIN

Date / Time	Agency ORI Number	Agency Name	Agency Report Number
06/30/2020 00:02	FL 0500800	WEST PALM BEACH POLICE DEPARTMENT	9 | 4 | 2020-0010185

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
DICKINSON, RYAN JOHN		W	M	10/23/1976

CHRG

Charge Description: 784.03(1A1) BATTERY- BATTERY (SIMPLE)

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
RODRIGUEZ, RACHEL JOY	W	F	05/22/1986

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
333 FERN ST 2002, WEST PALM BEACH, FL 33401	(561) 702-5493	VERBAL
Business Address (Name, Street) (City) (State) (Zip)	**Phone**	**Occupation**

ADDITIONAL INFORMATION

	Written	Taped	Oral
DEFENDANT'S STATEMENTS:	☐	☒	☐
VICTIM'S STATEMENTS:	☐	☒	☐

OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): **INJURIED**

RELATIONSHIP BETWEEN VICTIM & SUSPECT: **ENGAGED**

		YES	NO	
PHOTOGRAPHS:	Scene:	☒	☐	
	Victim:	☒	☐	
911 CALL:		☒	☐	CALLER: **VICTIM**
WEAPON USED:		☐	☒	TYPE:
WITNESSES:		☐	☒	(If YES, attach witness list)
INJURIES:		☒	☐	
MEDICAL TREATMENT:		☐	☒	
AT:	Scene:	☐	☒	PARAMEDICS:
	Hospital:	☐	☒	PHYSICIAN(S) / HOSPITAL:
ACT COMMITTED IN PRESENCE OF MINOR(S):		☐	☒	NAMES/AGES:
H. R. S. NOTIFIED:		☐	☒	
VICTIM PREGNANT:		☐	☒	
VIOLATION OF RESTRAINING ORDER:		☐	☒	CASE #:
PRIOR HISTORY OF DOMESTIC VIOLENCE:		☐	☒	
ALCOHOL OR DRUGS INVOLVED:		☒	☐	

NARR

On Monday, June 29, 2020, at approximately 2225 hours, I was dispatched to 333 Fern St Apt 2002, in reference to a call where the female half was bleeding from the face and arm. On arrival, I made contact with the victim identified as Rachel Rodriguez (WF DOB 05/22/1986) who advised of the following:

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.

2075
SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 30 day of June, 2020.

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

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COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

DOMESTIC VIOLENCE PROBABLE CAUSE
AFFIDAVIT
Palm Beach County
Narrative Continuation

ADMIN	Date / Time		
	06/30/2020 00:02		
	Agency ORI Number	Agency Name	Agency Report Number
	FL 0500800	WEST PALM BEACH POLICE DEPARTMENT	9 | 4 | 2020-0010185

NARRATIVE

Rodriguez and her fiancé identified as Ryan Dickinson (WM DOB 10/23/1976) have been dating and living together for 1.5 years. Rodriguez and Dickinson were in laying down in bed when they began to argue about not having sex. Rodriguez left the bedroom and laid on the couch. Rodriguez stated Dickinson came after her and started pulling the blankets off her. Dickinson then returned to the bedroom. Rodriguez followed Dickinson to the bedroom and Dickinson attacked her. Rodriguez stated she can not recall exactly how the injuries occurred, however, remembers Dickinson grabbing her. Rodriguez stated Dickinson punched and slapped her with his hand. As a result, Rodriguez sustained a minor laceration to her left eye, which was bleeding. Rodriguez also had a hematoma (approximately 2 inches wide by 1 in width) to her right forearm and scatches to her left arm. Rodriguez stated they have been in physical altercations in the past and the police were never called.

Dickinson stated while laying down in bed, Rodriguez became upset because they were not having sex. Dickinson stated Rodriguez began attacking him and he only pushed her off of him. Dickinson stated he attempted to walk to the spare bedroom to get away and Rodriguez continued to attack him. Dickinson said he was attacked by Rodriguez at least 3 times prior to police arriving. Dickinson advised he did not hit Rodriguez and only pushed her away so he can walk away. Dickinson did not sustain any injuries nor complained of any.

Based on the above statements and injuries on the victim, there is probable cause to charge Ryan Dickinson (DOB 10/23/1976) with domestic simple battery pursuant to F.S.S. 784.03(1A1).

I took photos of both parties which were later uploaded. Both parties received Victim Rights Brochures. A victim notification form was completed. Dickinson was driven to the Palm Beach County Jail without further incident.

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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.

_____ 2021
SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 30 day of JUNE, 2020.

_____
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

VICTIM NOTIFICATION FORM

This form must be filled out in a case involving one of the following crimes.

- **Homicide** (Ch. 782)
- **Sexual Offense** (Ch. 794)
- **Attempted Murder**
- **Attempted Sexual Offense**
- **Stalking** (S. 784.048)
- **Domestic Violence** - (This includes any assault, agg. assault, battery, agg. battery, sexual assault, sexual battery, stalking, agg. 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.

SUSPECT / OFFENDER: _____

COURT CASE / WARRANT # _____
(FOR WARRANTS USE ONLY)

1. Incident Report #: 20 [illegible] Agency: WPBPD
   Offense: [illegible]
   Suspect/Offender: [illegible]
   D.O.B. [illegible] Race: W Sex: M

2. Warrant #(s) _____

3. Complete one (1) of the following:

   a. Victim's name: [illegible]
      Address: [illegible]
      City: WPB State: FL Zip: 33411
      Home #: 561 792 5913 Work #: _____ Other: _____

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

   c. Victim's designated contact other than next of kin (for example: a friend or neighbor):
      Name: _____
      Address: _____
      City: _____ State: _____ Zip: _____
      Home #: _____ Work #: _____ Other: _____

4. Relevant identification or case numbers assigned to the case (please specify).
   _____

WAIVER: I CHOOSE NOT TO COMPLETE THIS VICTIM NOTIFICATION FORM, AND UNDERSTAND THAT I AM WAIVING MY RIGHT TO BE NOTIFIED OF THE RELEASE OF THE SUSPECT / OFFENDER.

Signature of person waiving notification: _____

Printed name of person waiving notification: _____

Officer's Name: _____ I.D.: _____ Date: _____

WHITE - Rough Arrest and or Warrant YELLOW - C.I.D. PINK - Records

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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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2020015896	**Date:** 06/30/2020
	Specialist Name/ID: T Howard/7185