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☐ Marsey's Law CVI FL. Const. Art.1 § 16(b)☐ Check if Supplement is Attached1. Arrest
2. N.T.A.3. Request for Warrant
4. Request for Capias

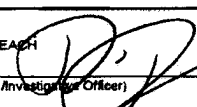
1

Juvenile

N

OBTS Number		Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 0 6 1- 2276393	
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	
Location of Arrest (including Name of Business) I THINK 601 SANSBURY WAY WEST PALM BEACH 33411		Location of Offense (Business Name, Address) 601 Sansbury Way					
Date of Arrest 06/10/2022	Time of Arrest 2150HRS	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle	
Name (Last, First, Middle) ROHLFING, ALEXANDER, RICHARD		Alias (Name, DOB, Soc. Sec. #, Etc.)					
Race W - White B - Black	1 - American Indian O - Oriental/Asian	Sex W M	Date of Birth 2/3/1965	Height 5'9"	Weight 208	Eye Color BLUE	Hair Color BRO
Complexion Light		Build Med					
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATTOOS ARMS, CHEST, BACK		Marital Status Married		Religion LUTHERAN		Indication of: Alcohol Influence Drug Influence Y N Unk ☐ ☐ ☐	
Local Address (Street, Apt. Number) 2490 SE SIDONIA STREET, PORT ST LUCIE/FL/34952		(City) (State) (Zip)		Phone (772) 3806905		Residence Type: 1. City 2. County 3. Florida 4. Out of State 3	
Permanent Address (Street, Apt. Number)		(City) (State) (Zip)		Phone ()		Address Source DEF	
Business Address (Name, Street) CAMP LANDING STARC FLORIDA		(City) (State) (Zip)		Phone (904) 682-2474		Occupation SUPERVISOR	
D/L Number, State R415016650430		Soc. Sec. Number		INS Number		Place of Birth (City, State) OCALA, FL	
Citizenship US							
Co-Defendant (Last, First, Middle)		Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile		
Co-Defendant (Last, First, Middle)		Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile		
☐ Parent ☐ Legal Custodian ☐ Other:		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 Dept. and Released. 2. TOT HRS/DYS 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 (561) 355-6511) informed of any change of address. ☐ Yes, by: (Name) ☐ No (Reason)				School Attended		Grade	
Property Crime? ☐ Yes ☐ No		Description of Property		Value of Property			
Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver 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 O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetic		U. Unknown Z. Other			
Charge Description SIMPLE BATTERY		Counts 1M	Domestic Violence ☐ Y ☐ N	Statute Violation Number 784.03(1A1)		Violation of ORD #	
Drug Activity NA	Drug Type NA	Amount / Unit NA	Offense # 2276393	Warrant / Capias Number		Bond	
Charge Description R/A WITH VIOLENCE		Counts 1F	Domestic Violence ☐ Y ☐ N	Statute Violation Number 843.01		Violation of ORD #	
Drug Activity NA	Drug Type NA	Amount / Unit NA	Offense # 2276393	Warrant / Capias Number		Bond	
Charge Description		Counts	Domestic Violence ☐ Y ☐ N	Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond	
Charge Description		Counts	Domestic Violence ☐ Y ☐ N	Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond	
Location (Court, Room Number, Address) Criminal Justice Complex							
Court Date and Time Month Day Year Time A.M. P.M. 06/10/2022							
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 FULLY 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			
HOLD for other agency		Signature of Arresting Officer		Name Verification (Printed by Arrestee)			
☐ Dangerous ☐ Suicidal		☐ Resisted Arrest ☐ Other		(PRINT) SCANNED			
Intake Deputy Bancie 18342		I.D. # Pouch #		Witness here if subject signed with an "X"			
Transporting Officer 2-1111		I.D. #		PAGE			

HALL 29819

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 NTA		3 Request for Warrant 4 Request for Capias		1		Juvenile N			
ADMIN	Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 2276393							
	Charge Type Check as many as apply ☐ 1 Felony ☐ 2 Traffic Felony		☐ 3 Misdemeanor ☐ 4 Traffic Misdemeanor		☐ 5 Ordinance ☐ 6 Other		Special Notes						
DEF	Name (Last, First, Middle) ROHLFING, ALEXANDER, RICHARD					Alias		Race W		Sex M		Date of Birth 2/3/1965	
	Charge Description SIMPLE BATTERY 784.03(1A1)					Charge Description R/A WITH VIOLENCE 843.01							
CHARGES	Charge Description					Charge Description							
VICTIM	Victim's Name (Last, First, Middle) GOMEZ, JUAN, J					Race W		Sex M		Date of Birth 08/03/1984			
	Local Address (Street, Apt Number) (City) (State) (Zip) 5378 ASHLEY RIVER ROAD, WEST PALM BEACH/FL/33417					Phone (561) 255-8835		Address Source VERBAL					
	Business Address (Name, Street) (City) (State) (Zip)					Phone		Occupation					
The undersigned certifies and swears that I have just and reasonable grounds to believe, and do believe that the above named Defendant committed the listed violation(s) of law. The Person taken into custody: ☐ committed the below acts in my presence. ☒ was observed by <u>WITNESS</u> who told <u>D/S O'CONNER</u> that he/she saw the arrested person commit the below acts. ☐ confessed to admitting to the below facts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the <u>10TH</u> day of <u>JUNE</u>, 20 <u>22</u> at <u>2145</u> ☐ A.M ☒ P.M (Specifically include facts constituting cause for arrest.) ☐ May's Law CV: FL Const. Art. 1 § 18(b) Victim #2 State Of Florida On June 10th 2022 at approximately. 2145hrs I was working a detail at I Think (601 Sansbury Way West Palm Beach) and was made aware of an unwanted guest that possibly also committed a battery on a security member. Upon my arrival the defendant w/m Alexander Rohlfing 2/3/65 was already handcuffed. Deputy O'Conner spoke to the victim w/m Juan Gomez 8/3/84 who stated that he requested Rohlfing ticket and he refused to provide and attempted to make entry into the area. Gomez then stood in front to stop him from entering and Rohlfing then pushed Gomez in the hip area causing him to lose balance. That is when Gomez requested PBSO to respond to the area. Sgt. [REDACTED] who responded to the incident said he was trying to detain Rohlfing who was resisting and began to tense up and pull away and then jumped over a few rows of seats and would not allow the handcuffs to be put on until other deputies arrived and were then able to assist and secure Rohlfing with handcuffs in the rear. Rohlfing was escorted to the south entrance and put in the rear of my marked patrol vehicle, I checked Rohlfing cuffs and adjusted and double locked after proper spacing. Due to the battery and resisting Rohlfing was arrest and charged accordingly. Rohlfing was processed on scene and tot Deputy Hall for transport.													
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH  (Signature of Arresting/Investigative Officer)												
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>10th</u> day of <u>June</u> , 20 <u>22</u> by <u>Hall</u> (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced _____												
	Notary Public, Clerk of Court, Officer (F.S.S.) 11 7.1 0) _____												
	SCANNED JUN 11 2022												



**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.	3
	☐	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:	

REVIEW COMPLETED BY

Booking Number: 2022015006	Date: 6/11/2022
	Specialist Name/ID: Chantel Daniels/30347

SCANNED

JUN 11 2022