

22mm6073mg

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

OBTS Number	Agency ORI Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N.T.A. s only) 3, 2 2022-009507	
Charge Type Check as many as apply	☐ 1 Felony ☐ 2 Traffic Felony ☒ 3 Misdemeanor ☐ 4 Traffic Misdemeanor ☐ 5 Ordinance ☐ 6 Other		If Weapon Seized		Multiple Clearance Indicator	
Location of Arrest (Including Name of Business)			Location of Offense (Business Name, Address)			
Date of Arrest 07/25/2022	Time of Arrest 22:08	Booking Date 07/25/2022	Booking Time 22:18	Jail Date 07/25/2022	Jail Time 23:05	
Name (Last, First, Middle) MCNULTY, CIERRA			Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White 1 - American Indian B - Black Q - Oriental/Asian W			Sex F	Date of Birth 04/22/2000	Height 5'09	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT R WRIST / "G" WITH A HEART			Weight 170	Eye Color UNKNOWN	Hair Color BLONDE	
Local Address (Street, Apt. Number) 9408 CITRUS LANE, RIVER RIDGE, LA 70123			Marital Status S	Religion CATHOLIC	Complexion LIGHT	
Permanent Address (Street, Apt. Number) 9408 CITRUS LANE, RIVER RIDGE, LA 70123			Phone (504) 451-4135	Residence Type 1 City 3 Florida 2 County 4 Out of State 4	Build Medium	
Business Address (Name, Street) 9408 CITRUS LANE, RIVER RIDGE, LA 70123			Phone (504) 451-4135	Address Source DEFENDANT	Occupation	
D/L Number, State 12111514 / LA		Soc. Sec. Number	INS Number	Place of Birth (City, State) VALENCIA, CA, United	Citizenship US	
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	
☐ Parent ☐ Legal Custodian		Name (Last, First, Middle)			Residence Phone	
Address (Street, Apt. Number)		(City)	(State)	(Zip)	Business Phone	
Notified by (Name)		Date	Time	JUVENILE RELEASED		
Released To (Name)		Relationship	Date	Time	2 TOT JAC 3 Incarcerated	
The above address was provided by ☐ defendant and/or ☐ parent. 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		Property Crime? ☐ Yes ☒ No		Description of Property		
Drug Activity S Sell N N/A P Possess T Traffic		S Sell B Buy 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 Description BATTERY- BATTERY (SIMPLE)		Statute Violation Number 784.03(1A1)		Violation of ORD #		
Drug Activity	Drug Type N	Amount / Unit	Offense #	Counts 1	Domestic Violence ☒ Y ☐ N	
Charge Description		Statute Violation Number		Violation of ORD #		
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence ☐ Y ☐ N	
Charge Description		Statute Violation Number		Violation of ORD #		
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence ☐ Y ☐ N	
Health / Apparent Physical Condition of Defendant GOOD		Any knowledge of the following ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries				
Check which applies ☐ Released O.R. ☐ Posted Bond		☐ Released to Parent/Guardian ☒ TOT County Jail		PROPERTY - Received By HARRISON		
Transported By HARRISON		Date Transported 07/25/2022	Time Transported 23:05	Released By PBCJ		
☐ 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) South County 200 W Atlantic Ave Delray Beach, FL 33444		Released To OWNER,		
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE CHARGES AND TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, 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 Agencies		Signature of Arresting Officer HARRISON, D. M.		Name Verification (Printed by Arrestee)		
☐ Dangerous ☐ Suicidal		☐ Resisted Arrest ☐ Other		(PRINT)		
ID # 183412	Pouch #	ID # 856	Agency BRPD	PAGE 1 OF 1		

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

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OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
D	Agency ORI Number	Agency Name	Agency Report Number						
M	FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 2 2022-009507						
N	Charge Type: Check as many as apply.		☐ 1 Felony ☐ 2 Traffic Felony		☒ 3 Misdemeanor ☐ 4 Traffic Misdemeanor		☐ 5 Ordinance ☐ 6 Other		Special Notes
D	Name (Last, First, Middle)		Alias		Race	Sex	Date of Birth		
E	MCNULTY, CIERRA				W	F	04/22/2000		
C	Charge Description		Charge Description						
H	784.03(1)(A)(1) DOMESTIC SIMPLE BATTERY								
A	Charge Description		Charge Description						
R									
G									
E									
S									
V									
I									
C									
T									
I									
M									
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 OFC HARRISON 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 <u>25</u> day of <u>July</u>, <u>2022</u> at <u>22:08</u> (Specifically include facts constituting cause for arrest.) On 07/25/2022 at approximately 2140 hours, I responded to _____ in reference to a domestic battery. Upon arrival, I made contact with the Detox staff, who advised that two of their patients, Cierra McNulty and _____ (the victim), got into a physical fight while inside the men's bathroom. The Detox staff advised there were no witnesses to the incident and no video surveillance as the incident occurred inside the men's bathroom. I first spoke with McNulty outside the facility. Prior to me asking any specific questions, McNulty advised she had punched the victim first. I then asked McNulty what happened today. McNulty advised that she and the victim were recently admitted into this Detox facility after an overdose a few days ago. She and the victim have been _____ Today, wanting to discuss the overdose the other day, McNulty went over to the men's side of the facility to speak with the victim. McNulty brought the victim into the men's bathroom for privacy. While inside the men's bathroom, McNulty got upset that the victim did not want to leave the facility with her to get high, so she pushed him in his chest with a closed fist. McNulty advised she specifically punched him in his center chest because he has a bad injury from chest compressions from the recent overdose. After she punched him, the victim then pushed her back, causing her to bump her lip into an air dryer in the bathroom, resulting in her minor bottom-lip injury. I did observe a small cut to her bottom lip. BRFD responded and provided McNulty with an icepack (BRFD Run # 22-10654). I captured a photo of this injury on my MVR body worn camera. I then spoke with the victim separately. The victim advised the same exact account of what happened. The victim advised that _____ McNulty, had come over to the men's side and they spoke inside the men's restroom for privacy. McNulty had									
SWORN AND SUBSCRIBED BEFORE ME KINGMAN, DARRYL M JR NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <u>07/25/2022</u> DATE  SIGNATURE OF ARRESTING / INVESTIGATING OFFICER HARRISON, DANIELLE MARIE (856) NAME OF OFFICER (PLEASE PRINT) <u>07/25/2022</u> DATE									
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COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE		
A D M I N I S T R A T I V E	Agency ORI Number FL FL0500200	Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2022-009507								
Charge Type: Check as many as apply.		☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Special Notes:							
Name (Last, First, Middle) MCNULTY, CIERRA		Alias		Race W	Sex F	Date of Birth 04/22/2000					
told the victim that she wanted to leave, and after disagreeing with her, McNulty pushed the victim in his chest area where he has an injury due to chest compressions. The victim showed me his chest compression injury, which was still raw and inflamed. In response to her pushing him, the victim reacted and pushed McNulty back, causing her to bump her lip on an air dryer in the bathroom. The victim advised that McNulty always pushes him when she gets upset. Based on both parties' similar accounts of what happened along with McNulty admitting to punching the victim first as the primary aggressor, I developed probable cause to arrest Cierra McNulty for simple domestic battery pursuant to F.S.S. 784.03(1)(a)(1). Ofc Rosario handcuffed McNulty, checked for tightness and proper fit, and then I searched McNulty. I placed her into my marked patrol vehicle and transported her to Boca Raton Regional Hospital to be medically cleared. McNulty was then transported to Palm Beach County Jail without issue.											
NOT A CERTIFIED COPY MARSY'S LAW INVOKED Confidential Info Contained											
<table border="0" style="width:100%;"> <tr> <td style="width: 50%; vertical-align: top;"> SWORN AND SUBSCRIBED BEFORE ME KINGMAN, DARRYL M JR NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 07/25/2022 DATE </td> <td style="width: 50%; vertical-align: top;"> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER HARRISON, DANIELLE MARIE (856) NAME OF OFFICER (PLEASE PRINT) 07/25/2022 DATE </td> </tr> </table>										SWORN AND SUBSCRIBED BEFORE ME KINGMAN, DARRYL M JR NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 07/25/2022 DATE	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER HARRISON, DANIELLE MARIE (856) NAME OF OFFICER (PLEASE PRINT) 07/25/2022 DATE
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								PAGE 2 OF 2			

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been committed:

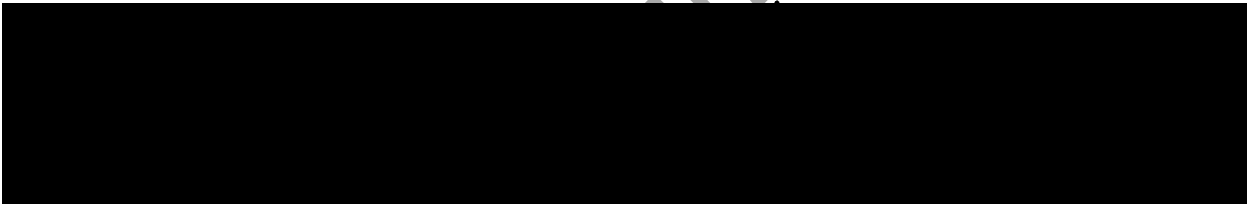
- Homicide (Ch. 782)
- Sexual Offense (Ch. 794)
- Attempted Murder
- Attempted Sexual Offense
- Stalking (F.S. 784.048)
- Domestic Violence - (This includes any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking or any criminal offense 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#: 2022 9507 Agency: Boca Raton Police Department
Offense: Simple Battery
Suspect/Offender: Cierra K. McNulty
D.O.B. 4/22/2000 Race: W Sex: M

2. Warrant#(s): _____

3.a. 

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: HARRISON I.D.# 886 Date: 7/25/22
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	☐	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:	

REVIEW COMPLETED BY

Booking Number: 2022019178	Date: 7/26/2022
	Specialist Name/ID: Pinkneya/7796