05370088 23CF-15 597

ARREST / NOTICE TO APPEAR

1 Arrest 3 Request for Warrant
2 NTA 4 Request for Capias

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500400
Agency Name: Delray Beach Police Department
Agency Report Number (NTA's only): 4 | 0 | 22-016631

Charge Type: Check as many as apply — [X] 1 Felony [ ] 2 Traffic Felony [ ] 3 Misdemeanor [ ] 4 Traffic Misdemeanor [ ] 5 Ordinance [ ] 6 Other
If Weapon Seized — Enter Type: UNARMED
Multiple Clearance Indicator: 1

Location of Arrest (Including Name of Business): 4801 W. LINTON BLVD
Location of Offense (Business Name, Address): 4801 W LINTON BLVD, DELRAY BEACH, FL 33445

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
12/31/2022	20:32	12/31/2022	20:42	/ / : :		4801 W LINTON BLVD

DEFENDANT

Name (Last, First, Middle): GIACCONE, MICHAEL IGNATIUS
Alias (Name, DOB, Soc Sec #, Etc.): Alias:

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	12/01/1951	5'08	175	BLUE	BALD	FAIR	MED

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description):
Marital Status: M
Religion:
Indication of Alcohol Influence / Drug Influence: Yes [ ] No [X] Unk [ ]

Local Address (Street, Apt. Number) (City) (State) (Zip): 17082 BOCA CLUB BLVD 3, BOCA RATON, FL 33487
Phone:
Residence Type: 1 City 2 County 3 Florida 4 Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 17082 BOCA CLUB BLVD 3, BOCA RATON, FL 33487
Phone:
Address Source: VERBAL

Business Address (Name, Street) (City) (State) (Zip):
Phone: (718) 813-5828
Occupation: Pi

D/L Number, State	Soc Sec Number	INS Number	Place of Birth (City, State)	Citizenship
G250549514410 / FL	[redacted]		NEW YORK CITY, FL,	US

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 [X] 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. 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

Charge Description	Statute Violation Number	Violation of ORD #
IMPERSONATE OFFICER ~~BY COMMISSION OF FELONY CAUSE DEATH INJ~~	843.08	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/	22016631	1	[ ] Y [X] 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 [X] 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:

NOTICE TO APPEAR

[ ] INSTRUCTION NO. 1 - Mandatory appearance in court
[X] 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:

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

SCANNED JAN 01 2023

2023 JAN 1 PM 6:

No Photo Available

ADMIN

HOLD for Other Agency
[ ] Dangerous [ ] Resisted Arrest [ ] Suicidal [ ] Other

Signature of Arresting Officer
Name of Arresting Officer (Print): STEED, DAVID
I.D. #: 0944

Name Verification (Printed by Arrestee) (PRINT):

Intake Deputy I.D. # Pouch #

Transporting Officer: STEED, DAVID I.D. #: 944 Agency: DBPD

Witness here if subject signed with an "X"

PAGE 1 OF 1

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

NOT A CERTIFIED COPY

PROBABLE CAUSE AFFIDAVIT

ADMIN

OBTS Number:

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

JUVENILE:

Agency ORI Number	Agency Name	Agency Report Number
FL 0500400	DELRAY BEACH POLICE DEPARTMENT	40 22-016631

Charge Type (Check as many as apply): [X] 1. Felony [ ] 2. Traffic Felony [ ] 3. Misdemeanor [ ] 4. Traffic Misdemeanor [ ] 5. Ordinance [ ] 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
GIACCONE, MICHAEL IGNATIUS		W	M	12/01/1951

CHARGES

Charge Description	Charge Description
843.08 IMPERSONATE OFFICER ~~OR ACCOMPLICE~~ OTS	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
State Of Florida			

Local Address (Street, Apt Number)	(City)	(State)	(Zip)	Phone	Address Source

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

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable 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* _____ admitting to the below facts.

[ ] was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.

[X] was found to have committed the below acts, resulting from my (described) investigation.

On the 31 day of December, 2022 at 20:26 (Specifically include facts constituting cause for arrest.)

The following incident occurred in the City of Delray Beach, Palm Beach County Florida.

On the above date and time, I was dispatched to an assault call at 4801 W. Linton Blvd. (Aldi`s Grocery Store) Sgt. Leon arrived at the scene and interviewed the two men involved in the incident. Post Miranda, Steve Potak (complainant) was being interviewed and stated the following: He was properly parked in the space at the Aldi`s parking lot located at 4801 W Linton Blvd. As Potak was reversing out of the parking space, a young woman passed by the rear of his vehicle. Potak quickly hit on his brakes and stopped his vehicle. After the woman passed his vehicle, a white male later identified as Michael Giaccone, walked past the rear of his vehicle with a shopping cart. Potak slammed on his brakes but quickly reversed his vehicle and Giaccone quickly moved out of the path of the vehicle. Potak then looked at Giaccone and yelled, "You Jerk-off." This angered Giaccone and he ran over to the driver`s side window and yelled, "Who you calling a Jerk-off." As Giaccone approached Potak`s driver side window, Potak lifted his shirt which displayed his firearm that was tucked in the front waistband of Potak`s pants. This is when, Giaccone yelled, "Hey man, I am a police officer. "Giaccone then immediately backed way and called 911. Potak then circled the parking lot and parked his vehicle in a parking space and waited for the police.

At the scene, Sgt. Leon read both men their Miranda Warnings to which they stated that they understood them. Sgt. Leon then read both men from his Sworn Statement Card issued from our department.

Both men gave their stories. They were the same from both men. Potak stated that he was in fear of his life when Giaccone ran to his driver`s side window but he did not pull his gun which he had in his possession for personal protection. Sgt. Leon asked, Giaccone if he identified himself as a law enforcement officer to Potak. Giaccone replied, "Yes." Sgt Leon then asked to see his law enforcement credentials. Giaccone

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

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

12/31/2022
DATE

SCANNED JAN 01 2023

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

STEED, DAVID (0944)
NAME OF OFFICER (PLEASE PRINT)

12/31/2022
DATE

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

NOT A CERTIFIED COPY

ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capias

1

JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL 0500400	DELRAY BEACH POLICE DEPARTMENT	40 22-016631

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

Special Notes

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
GIACCONE, MICHAEL IGNATIUS		W	M	12/01/1951

PROBABLE CAUSE STATEMENT

stated that he was a police officer in New York. After Sgt. Leon repeatedly asked for Giaccone to prove that he was a law enforcement officer. Giaccone finally told Sgt. Leon that he was not a law enforcement officer and never held that position.

Based on the above facts, I find Probable Cause exists to charge, Michael Giaccone with FSS.
843.08 Impersonating a Law Enforcement Officer.

NOT A CERTIFIED COPY

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

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

12/31/2022
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

STEED, DAVID (0944)
NAME OF OFFICER (PLEASE PRINT)

12/31/2022
DATE

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

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:	

NOT A CERTIFIED COPY

REVIEW COMPLETED BY

Booking Number: 2022033639	**Date:** 1/1/2023
	Specialist Name/ID: M. Tooks #8557