26mm9180 AMB

JH#0572178 0572178

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500700

Agency Name: Riviera Beach Police Department

Agency Report Number (N.T.A.'s only): 8 | 4 | 26-06390

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: UNARMED

Multiple Clearance Indicator: 1

Location of Arrest (Including Name of Business): 190-116 WOODBINE WAY, RIVIERA BEACH, FL

Location of Offense (Business Name, Address): 190 WOODBINE WAY 116, RIVIERA BEACH, FL 33404

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
10/20/2026	21:23	10/20/2026	21:33	/ / : :		

DEFENDANT

Name (Last, First, Middle): SINISCALCHI, ROSARIA MARIA

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

Race (W - White, I - American Indian, B - Black, Q - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	02/10/1984	5'01	120	BROWN	BROWN	LIGHT	SMALL

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

Marital Status: S

Religion: CHRISTIAN

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

Local Address (Street, Apt. Number) (City) (State) (Zip): 190 WOODBINE WAY 116, RIVIERA BEACH, FL 33404

Phone: (914) 382-3410

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

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 190 WOODBINE WAY 116, RIVIERA BEACH, FL 33404

Phone: (914) 382-3410

Address Source: DL

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

Phone:

Occupation:

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
S524733845500 /	[redacted]		LEEKSKILL, NY,	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) | Relationship | Date | Time

JUVENILE DISPOSITION: 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated

Released To: (Name) | Date | Time

(NO BOND)

VICTIM NOTIFICATION REQUIRED

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-SIMPLE (TOUCH OR STRIKE)	784.03(1)(A)(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/	26-06390	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

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

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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

No Photo Available

Signature of Defendant (or Juvenile and Parent/Custodian) | Date Signed

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Intake Deputy I.D. # | Pouch #

Signature of Arresting Officer

Name of Arresting Officer (Print): HOLLIGAN, O. | I.D. #: 7350

Transporting Officer: O.HOLLIGAN | I.D. #: 7350 | Agency: RBPD

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X".

OCT 21 0:50

26 OCT 21 AM 5:08

PAGE 1 OF 1

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

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052178 3241

DOMESTIC VIOLENCE PROBABLE CAUSE AFFIDAVIT

Palm Beach County

ADMIN

Date / Time	Agency ORI Number	Agency Name	Agency Report Number
10/20/2026 22:11	FL FL0500700	Riviera Beach Police Department	8 | 4 | 26-06390

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
SINISCALCHI, ROSARIA MARIA		W	F	02/10/1984

CHRG

Charge Description: **784.03(1)(A)(1) BATTERY-SIMPLE (TOUCH OR STRIKE)**

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
[redacted]			

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

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

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

RELATIONSHIP BETWEEN VICTIM & SUSPECT: [redacted]

ADDITIONAL INFORMATION

	YES	NO	
PHOTOGRAPHS: Scene:	☐	☒	
Victim:	☒	☐	
911 CALL:	☒	☐	CALLER:
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

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.

7350
SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 20 day of October, 2026.

BROWN, MICHAEL L
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

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

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Victim Information Confidential Per Marsy's Law

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

ADMIN

OBTS Number

Agency ORI Number: FL FL0500700

Agency Name: Riviera Beach Police Department

Agency Report Number: 8 | 4 | 26-06390

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

Special Notes:

DEF [redacted]

CHARGES

Charge Description: 784.03(1)(A)(1) BATTERY-SIMPLE (TOUCH OR STRIKE)

Charge Description

Charge Description

Charge Description

VICTIM [redacted]

Race | Sex | Date of Birth

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

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 committ the below acts.

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

On the 20 day of October, 2026 at 21:23 (Specifically include facts constituting cause for arrest.)

Officer`s department issued Body-Worn Camera (BWC) was utilized.

On October 20, 2026, at approximately 2053 hours, I responded to 190-116 Woodbine Way, Riviera Beach, Florida in reference to a domestic disturbance. The caller stated that her boyfriend pushed her and that she wants him to leave.

Upon arrival, I spoke with [redacted] who provided a sworn recorded statement.

[redacted] Rosaria Siniscalchi (W/F, 2/10/1984) arrived home at approximately 1700 hours in an intoxicated state. Upon entering the residence, she prepared another alcoholic beverage and sat on the couch.

[redacted] was in the bedroom when he received a telephone call from another female. Once Siniscalchi heard another female`s voice, she ran into the bedroom yelling at [redacted]. Siniscalchi struck him in the face with a closed fist and then grabbed and pulled a chain from his neck, causing scratches.

Siniscalchi got her car keys and attempted to leave the residence. [redacted] took the car keys from her and positioned himself in front of the doorway to prevent her from leaving and driving while intoxicated. While [redacted] was standing in front of her, Siniscalchi became upset, ran towards him, jumped, and kicked him on his left thigh.

Another verbal altercation occurred when Siniscalchi demanded to see his cellphone. Siniscalchi grabbed the telephone from [redacted]. She continued to strike [redacted] in the face multiple times. [redacted] eventually restrained Siniscalchi until she calmed down. He then went into the bedroom and that`s when Siniscalchi contacted law enforcement.

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

BROWN, MICHAEL L 5564

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

10/20/2026

DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

HOLLIGAN, OMAR (7350)

NAME OF OFFICER (PLEASE PRINT)

10/20/2026

DATE

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

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ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1 JUVENILE

Agency ORI Number: FL FL0500700

Agency Name: Riviera Beach Police Department

Agency Report Number: 8 | 4 | 26-06390

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

Special Notes:

DEF [redacted] Race Sex Date of Birth

PROBABLE CAUSE STATEMENT

Officer Robinson made contact with Siniscalchi who provided the following statement.

She stated that she arrived home from work at approximately 1700 hours and asked [redacted], to leave her residence. Siniscalchi stated that she no longer wanted [redacted] at her residence due to a prior incident that occurred the previous night. [redacted] refused to leave, which led to a verbal dispute that escalated into a physical altercation.

Siniscalchi stated that, because [redacted] refused to leave, she decided to leave the residence herself. However, [redacted] blocked the front door, preventing her from exiting. Siniscalchi further stated that [redacted] pushed her numerous times to prevent her from leaving, resulting in minor bruising to her left arm. Siniscalchi also stated that [redacted] took her keys and wallet and threw them.

Siniscalchi then called 911 for assistance in having [redacted] removed from the residence. Siniscalchi stated that [redacted] i initially agreed to leave but quickly changed his mind and decided to remain at the residence.

Based upon the above described investigation, Siniscalchi was placed under arrest for Simple Battery (Domestic). Siniscalchi was transported to Riviera Beach Police Department for processing and later turned over to Palm Beach County Jail.

[redacted] declined a Domestic Violence Lethality Assessment. [redacted] was given a Domestic Violence Pamphlet with a case number and information regarding the incident.

Photos of [redacted]'s injuries were later uploaded to Evidence.com.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

BROWN, MICHAEL L 5564
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

10/20/2026
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

HOLLIGAN, OMAR (7350)
NAME OF OFFICER (PLEASE PRINT)

10/20/2026
DATE

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, 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** 26-06390 **Agency** Riviera Beach Police Department
   Offense: Simple Battery (Domestic)
   Suspect/Offender: Siniscalchi, Rosaria
   D. O. B.: 2/10/1984 **Race:** W **Sex:** Female
2. **Warrant #(s):**
3. **Complete one (1) of the following:**
   a. [redacted]
   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**

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: O. Holligan **I.D. #** 7350 **Date:** 10/20/26

SUSPECT/OFFENDER Siniscalchi, Rosaria **COURT CASE/WARRANT#**
(FOR WARRANTS USE ONLY)

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Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☐	119.071(2)(e)	Confession	
	☐	119.071(2)(j)1.e.	Name of a law enforcement officer who, in the course of their duties became a victim, is confidential and exempt for 72 hours after the incident. This information is exempt for an additional 60 days after the initial 72 hours	
Public Info. Exemptions	☐	119.071(2)(j)1.b.(I)	Identity, home or employment phone number, home or employment address, or any other information that could be sued to locate or harass the victim	
	☐	119.071(2)(j)	Home/employment telephone number, home/employment address, or personal assets of a person who has been the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence	
	☐	119.0712(2)	Personal information contained in a motor vehicle record	
	☐	316.650(11)	Driver information contained in a uniform traffic citation	
	☐	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
Florida Rules of Judicial Administration 2.420	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	☐	(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	☐			
	☐			
	☐			
	☐			

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REVIEW COMPLETED BY

Booking Number: 2026028697	**Date:** 10/21/2026
	Specialist Name/ID#: C. Daniels/ 30347