

021124

508

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report1. Arrest 3. Request For Warrant  
2. N.T.A. 4. Request For Capias

1 Juvenile

OBTS Number	1
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Agency ORI Number <b>FLO 5 0 0 0 0 0</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number <b>06 17038695</b>							
Charge Type: Check as many as apply <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type		Multiple Clearance Indicator <b>0 1</b>							
Location of Arrest (Including Name of Business) <b>22298 VISTA LAGO DRIVE BOCA RATON, FL 33428</b>		Location of Offense (Including Name of Business) <b>22298 VISTA LAGO DRIVE BOCA RATON, FL 33428</b>									
Date of Arrest <b>Feb 12, 2017</b>	Time of Arrest <b>0015</b>	Booking Date	Booking Time	Jail Date    Jail Time    Location of Vehicle <b>N/A</b>							
Name (Last, First, Middle) <b>CHIOFFE ARTHUR FRANK</b>				Alias (Name, DOB, Soc. Sec. #, Etc.)							
Race W - White   I - American Indian B - Black   O - Oriental/Asian		Sex <b>W M</b>	Date of Birth <b>5/25/62</b>	Height <b>5'11</b>	Weight <b>225</b>	Eye Color <b>BROWN</b>	Hair Color <b>BROWN</b>	Complexion <b>MED</b>	Build <b>LG</b>		
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>NONE</b>					Marital Status <b>S</b>	Religion <b>NONE</b>	Indication of: Y   N   Unk Alcohol Influence    Drug Influence				
Local Address (Street, Apt. Number) <b>22298 VISTA LAGO DRIVE</b>		City	State <b>FL</b>	Zip <b>33428</b>	Phone <b>561-715-5488</b>	Residence Type: 1. City    3. Florida 2. County    4. Out of State					
Permanent Address (Street, Apt. Number) <b>22298 VISTA LAGO DRIVE</b>		City	State <b>FL</b>	Zip <b>33428</b>	Phone	Address Source <b>FL DL</b>					
Business Address (Street, Apt. Number)		City	State	Zip	Phone	Occupation <b>RETIRED</b>					
DL Number, State <b>C100 046 62 185 0</b>		Social Security Number		INS Number		Place of Birth		Citizenship <b>MASSAPEQUA, NY</b>			
Co-Defendant Name (Last, First, Middle)					Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile			
Co-Defendant Name (Last, First, Middle)					Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile			
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other	Name (Last, First, Middle)								Phone		
Address (Street, Apt. No.)				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 <input type="checkbox"/> defendant and/or <input type="checkbox"/> defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 561-355-2526) informed of any address change <input type="checkbox"/> Yes, by (Name) <input type="checkbox"/> No, (Reason)					School Attended				Grade		
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property								Value of Property	
Drug Activity N/A P. Possesses		S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Dispense/ Distribute	M. Manufacture/ Produce	Z. Other Cultivate	Drug Type N. N/A A. Amphetamine	B. Barbiturates C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana	P. Paraphernalia/ Equipment	U. Unknown Z. Other
Charge Description		Counts <b>1</b>		Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number <b>784.03(1a1)</b>		Violation or ORD. #				
Drug Activity <b>N</b>	Drug Type <b>N</b>	Amount/Unit	Offense # <b>17038695</b>		Warrant/Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation or ORD. #					
Drug Activity	Drug Type	Amount/Unit	Offense #		Warrant/Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation or ORD. #					
Drug Activity	Drug Type	Amount/Unit	Offense #		Warrant/Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation or ORD. #					
Drug Activity	Drug Type	Amount/Unit	Offense #		Warrant/Capias Number		Bond				
Location (Court, Address, Room Number)											
Court Date and Time		Month	Day	Year	Time	AM <input type="checkbox"/>	PM <input type="checkbox"/>				
I AGREE TO APPEAR AT THE ABOVE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT I SHOULD 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.											
Signature of Defendant (or Juvenile and Parent/Custodian)											
HOLD for Other Agency		Signature of Arresting Officer <i>Toll clt 9360</i>		ID # <b>9360</b>		Name Verification (Printed by Arrestee)					
Name <i>Thomas Zb</i>		Name of Arresting Officer <b>D/S T. HART</b>		(PRINT)							
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Transporting Officer ID # <b>D/S T. HART 9360</b>		Agency <b>PBSO</b>							
Witness here if subject signed with an 'X'											
Page <b>1 of 1</b>											

SCANNED

FEB 12 2017

OBTS Number

## PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

Agency ORI Number <b>FLO 5 0 0 0 0 0</b>	Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>	Agency Report Number <b>06</b>	<b>17038695</b>		
Charge Type Check as many as apply 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor 5. Ordinance 6. Other _____			Special Notes		
Defendant Name (Last, First, Middle) <b>CHIOFFE ARTHUR FRANK</b>			Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>5/25/62</b>
Charge <b>BATTERY (DOMESTIC)</b>		Charge			
Charge		Charge			
Victim Name (Last, First, Middle) <b>CHIOFFE ANNA MICHELLE</b>			Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>1/26/71</b>
Local Address (Street, Apt. Number) <b>22298 VISTA LAGO DRIVE BOCA RATON</b>		City	State	Zip	Phone
Business Address (Street, Apt. Number)		City	State	Zip	Phone
Occupation					
<p>The undersigned 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...</p> <p><input type="checkbox"/> committed the below acts in my presence.</p> <p><input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input checked="" type="checkbox"/> confessed to admitting to the below facts.</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.</p>					
<p>On the <u>11</u> day of <u>FEBRUARY</u> 20 <u>17</u> at <u>1153</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM</p>					

ON 2/11/17 AT 2353 HOURS I RESPONDED TO 22298 VISTA LAGO LANE BOCA RATON, FLORIDA 33428 IN UNINCORPORATED PALM BEACH COUNTY IN RESPONSE TO A 911 CALL FROM CAROL CORNETT WHO STATED HER SISTER, ANNA CHIOFFE HAD BEEN IN A DOMESTIC ALTERCATION WITH HER HUSBAND, ARTHUR FRANK CHIOFFE. CORNETT ADVISED 911 THAT THE MALE LEFT THE HOUSE WITH A SMITH WESSON 357 REVOLVER AND IS POSSIBLY SUICIDAL.

UPON ARRIVAL ARTHUR CHIOFFE HAD PULLED THE CAR OUT INTO THE DRIVEWAY THEN BACK INTO GARAGE AND SHUT GARAGE DOOR. A FEW MOMENTS LATER THE GARAGE DOOR OPENED AND ANNA CHIOFFE WALKED OUT. ANNA CHIOFFE WAS TOLD TO WALK ACROSS THE STREET TO DEPUTIES. A FEW MOMENTS AFTER THAT ARTHUR CHIOFFE WALKED OUT OF THE GARAGE INTO THE DRIVEWAY. ARTHUR CHIOFFE WAS INSTRUCTED TO KEEP HIS HANDS IN THE AIR AND LAY DOWN IN THE DRIVEWAY. ARTHUR CHIOFFE COMPLIED AND WAS PLACED IN HANDCUFFS.

ANNA CHIOFFE TOLD ME THAT SHE AND ARTHUR CHIOFFE WERE IN THE CAR ON THE WAY HOME FROM DINNER AND HAD AN ARGUMENT OVER HER DAUGHTER'S WEDDING. ARTHUR WAS ALSO NOT HAPPY THAT ANNA WAS JUST LET GO FROM HER JOB. ANNA CHIOFFE TOLD ME THAT ARTHUR CHIOFFE, WHILE DRIVING THE CAR, PUNCHED HER IN THE MOUTH WITH HIS RIGHT FIST/HAND. ANNA HAD A CUT LOWER LEFT LIP. ANNA STATED WHEN THEY GOT HOME ARTHUR GOT HIS GUN AND LEFT THE RESIDENCE. ANNA CALLED HER SISTER, CAROL CORNETT IN NEVADA.

ARTHUR FRANK CHIOFFE WAS IN VIOLATION OF FLORIDA STATE STATUTE 784.03(1a1) BATTERY; TO INTENTIONALLY TOUCH OR STRIKE ANOTHER AGAINST THE WILL OF THE OTHER.

ARTHUR CHIOFFE WAS PLACED INTO THE REAR OF MY PATROL VEHICLE AND TRANSPORTED TO THE DISTRICT WHERE I COMPLETED THE ARREST PAPERWORK. I THEN TRANSPORTED ARTHUR FRANK CHIOFFE TO THE PALM BEACH COUNTY JAIL FOR BOOKING.

SCANNED  
FEB 12 2017

The foregoing instrument was sworn to and affirmed before me this <u>12</u> day of <u>FEBRUARY</u> 20 <u>17</u> , by:		
<p><b>D/S T. DAVIS 24111</b></p> <p>Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)</p> <p><i>[Signature]</i></p>		
<p><b>D/S T. HARP 9360</b></p> <p>Name of Arresting/Investigating Officer</p> <p><i>[Signature]</i></p> <p>Signature of Arresting/Investigating Officer</p>		
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