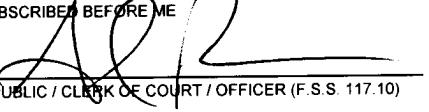


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N/R

17MM004913A**MB**
61

OBTS Number			ARREST / NOTICE TO APPEAR Juvenile Referral Report					1 Arrest 2 NTA	3 Request for Warrant 4 Request for Capia	Juvenile				
ADMINISTRATIVE	Agency ORI Number		Agency Name			Agency Report Number (N.T.A.'s only)								
	FLO 5 0 0 6 0 0		PALM BEACH POLICE DEPARTMENT			7 6 1-1 7 1-0 0, 0 6, 1 0 (1, 1)								
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							
Location of Arrest (Including Name of Business)		155 Hammon Ave PB FL			Location of Offenses (Business Name, Address) 155 Hammon Ave									
Date of Arrest		Time of Arrest		Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle						
04/21/17		2112												
DEFENDANT	Name (Last, First, Middle)					Alias (Name, DOB, Soc. Sec. #, Etc.)								
	Schoetz, Clifford, J					W M 1.0.04.4.3 5'9 171 brown grey Fair med.								
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian					Sex		Date of Birth		Height	Weight	Eye Color	Hair Color	Complexion	Build
									5'9	171	brown	grey	Fair	med.
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)					Marital Status		Religion		Indication of: Alcohol Influence <input type="checkbox"/> N <input type="checkbox"/> Unk. Drug Influence <input type="checkbox"/> N <input type="checkbox"/>		Residence Type: 1. City 3. Florida 2. County 4. Out of State			
Local Address (Street, Apt. Number)					(City)		(State)		(Zip)	Phone				
1200 Town center Dr Apt 219 Jupiter, FL 33458														
Permanent Address (Street, Apt. Number)					(City)		(State)		(Zip)	Phone		Address Source		
1200 Town center Dr Apt 219 Jupiter, FL 33458												FL 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			
S420110433640								Jamaica, NY			US			
CO-DEF.	Co-Defendant Name (Last, First, Middle)					Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile		
JUVENILE	Co-Defendant Name (Last, First, Middle)					Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile		
CODE	Name (Last) (First) (Middle)										Residence Phone ()			
CHARGE	Address (Street, Apt. Number)					(City)			(State)		(Zip)	Business Phone ()		
TOT JAC										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 355-2526) informed of any change of address. <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							
CHARGE	Drug Activity N. N/A B. 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			
	Simple battery					Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 7 8 4 1 0 3, 1 1 1 A, 1, 1			Violation of ORD #			
CHARGE	Drug Activity N	Drug Type N	Amount / Unit	Offense #		Warrant / Capias Number					Bond			
	17-000610													
CHARGE	Disorderly conduct					Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 8 7 7 1 0 3, 1 1 1			Violation of ORD #			
						Warrant / Capias Number						Bond		
CHARGE	Charge Description					Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 1 1 1			Violation of ORD #			
						Warrant / Capias Number						Bond		
CHARGE	Charge Description					Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 1 1 1			Violation of ORD #			
						Warrant / Capias Number						Bond		
CHARGE	Charge Description					Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 1 1 1			Violation of ORD #			
						Warrant / Capias Number						Bond		
NOTICE TO APPEAR	<input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court <input type="checkbox"/> Instruction No. 2 You need not appear in Court but must comply with instructions on Reverse Side.			Location (Room, Room Number, Address)		32280 W Club Rd WBB, FL 33496								
				Court Date and Time		Month	Day	Year	Time	8:30 A.M.	P.M.			
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.														
Signature of Defendant (or Juvenile and Parent / Custodian)														
Date Signed 4/21/17														
ADMIN.	HOLD for other Agency Name:			Signature of Arresting Officer X 9156			Name Verification (Printed by Arrestee)							
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:			Name of Arresting Officer (Print) A. MAZZA 9156			(PRINT) 04/22/11							
Intake Deputy: <i>Spun B101</i>			I.D. #	Pouch	Transporting Officer	I.D. #	Agency	PAGE						
					A. MAZZA 9156	7880								
Witness here if subject signed with an "X". <i>1 OF 1</i>														

	OBTS Number	PROBABLE CAUSE AFFIDAVIT			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	Agency Name	PALM BEACH POLICE DEPARTMENT			Agency Report Number			
	FL 0500600					7 6 17-000610			
	Charge Type: <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance Check as many as apply. <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other			Special Notes:					
D E F	Name (Last, First, Middle)			Alias			Race	Sex	Date of Birth
	SCHOLZ, CLIFFORD J						W	M	10/04/1943
C H A R G E S	Charge Description			Charge Description					
	784.03(1A1) SIMPLE BATTERY(TOUCH OR STRIKE)			877.03 BREACH OF PEACE/DISORDERLY CONDUCT/DISTURB					
V I C T I M	Charge Description			Charge Description					
V I C T I M	Victim's Name (Last, First, Middle)						Race	Sex	Date of Birth
	STEIN, LINDA ESTELLE						W	F	11/05/1954
P R O B A B L E	Local Address (Street, Apt. Number)			(City)	(State)	(Zip)	Phone		Address Source
	1300 A1A 316, JUPITER, FL 33477						(561) 972-1777		
C A U S E S T A T E M E N T	Business Address (Name, Street)			(City)	(State)	(Zip)	Phone		Occupation
<p>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.</p> <p>The Person taken into custody . . .</p> <p><input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____</p> <p><input type="checkbox"/> confessed to _____ that he/she saw the arrested person committ the below acts.</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>21</u> day of <u>April</u> <u>2017</u> at <u>21:12</u> (Specifically include facts constituting cause for arrest.)</p>									
<p>04/21/2017 at 2054 hours I was dispatched to 150 Hammon Ave (The Colony Hotel) in reference to a disturbance. Upon my arrival I met with hotel personal who stated that there was a white male wearing white pants, yellow shirt and a blue jacket who was disturbing guests. I made contact with the white male who matched the description above, Clifford Scholz (W/M 10/04/1943) identified by his Florida driver's license. Scholz immediately became aggressive and started yelling "this country is going to shit". I attempted to ask what the problem was to which Scholz would attempt to talk to random people walking by and not answer any of my questions. Officer Bango and Officer Santelli arrived on scene to provide additional assistance.</p> <p>I met with Linda Stein (W/F 11/05/1954) identified by her Florida driver's license. Stein stated that Scholz was sitting at the bar where she and her friends were at. Stein advised that Scholz came over to her and started screaming "you must be Jewish!!! You Jews and blacks should just get over Hitler." Stein stated that he continued to yell at her and say "Im German royalty." Stein advised that she tried to ignore Scholz however, when she did not respond to him, Scholz pushed stein on her left shoulder. Hotel personal asked Scholz to leave to which he started to argue with them.</p> <p>I read Scholz his Miranda warning from a Palm Beach Police Department issued Miranda card. He stated that he understood his rights. Post Miranda, Scholz stated he did not touch anyone and chose to remain silent. At 2112 hours, I placed Clifford Scholz under arrest for Simple Battery pursuant to F.S.S 784.03(1) and Disorderly Conduct pursuant to F.S.S 877.03. Scholz was placed into handcuffs which were double locked and checked for tightness. Scholz was transported to the Palm Beach County Jail without incident after a stop for processing at the PBPD HQ. Stein completed an Affidavit of Prosecution wishing to prosecute.</p>									
A D M I N I S T R A T I V E	SWEORN AND SUBSCRIBED BEFORE ME								
									
				SIGNATURE OF ARRESTING / INVESTIGATING OFFICER					
				MAZZA, ANTHONY M (0291560)					
				NAME OF OFFICER (PLEASE PRINT)					
				04/21/2017					
				DATE					
P A G E				04/21/2017					
				DATE					
				1 OF 1					

SWORN AND SUBSCRIBED BEFORE ME

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

04/21/2017

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

NAME OF OFFICER (PLEASE PRINT)

NAME OF OFFICER (PLEASE PRINT)

04/21/2017

DATE

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.