

ADMINISTRATIVE	OBTS Number			ARREST / NOTICE TO APPEAR Juvenile Referral Report						<input type="checkbox"/> Check if Supplement is Attached			
	Agency ORI Number FLO 5 0 0 3 0 0			Agency Name BOYNTON BEACH POLICE DEPARTMENT			Agency Report Number (N.T.A.'s only) 3 4 - 17-36176 1111			1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Copies	2 Juvenile N	
Charge Type: Check as many as apply	<input type="checkbox"/> 1. Felony	<input type="checkbox"/> 2. Traffic Felony	<input checked="" type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance	<input type="checkbox"/> 6. Other	If Weapon Seized Enter Type			Multiple Clearance Indicator			
Location of Arrest (including Name of Business) 3625 S. FEDERAL HWY, BOYNTON BEACH FL 33435	Location of Offense (Business Name, Address) SAME												
Date of Arrest 06/28/17	Time of Arrest 3:44	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle							
Name (Last, First, Middle) MAZZA, DANIELLE C			Alias (Name, DOB, Soc. Sec. #, Etc.)										
Race W - White B - Black	I - American Indian O - Oriental/Asian	Sex W/F	Date of Birth 20792	Height 509	Weight 145	Eye Color BROWN	Hair Color BROWN	Complexion LIGHT	Build MED				
Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description)						Marital Status Single	Religion UNKNOWN	Indication of: Alcohol Influence Drug Influence			Y <input type="checkbox"/>	N <input type="checkbox"/>	Unk <input type="checkbox"/>
Local Address (Street, Apt. Number)			(City)	(State)	(Zip)	Phone ()	Residence Type: 1. City 2. County			Address Source FL 1D			
Permanent Address (Street, Apt. Number)			(City)	(State)	(Zip)	Phone ()	3. Florida 4. Out of State						
Business Address (Name, Street)			(City)	(State)	(Zip)	Phone ()	Occupation UNEMPLOYED						
D/L Number, State			Soc. Sec. Number			INS Number	Place of Birth (City, State) MASS.			Citizenship USA			
Co-Defendant (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			
Co-Defendant (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			
Parent Legal Custodian Other						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 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 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			201				
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 RETAIL THEFT			Counts 1	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 812015			Violation of ORD # W				
CHARGE	Drug Activity N	Drug Type N	Amount / Unit N	Offense # 17-86176	Warrant / Capias Number N			Bond			<input type="checkbox"/> W		
CHARGE	Charge Description			Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number			Violation of ORD #				
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number			Bond					
CHARGE	Charge Description			Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number			Violation of ORD #				
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number			Bond					
CHARGE	Charge Description			Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number			Violation of ORD #				
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number			Bond					
NOTICE TO APPEAR	Location (Court, Room Number, Address) South County Courthouse • 200 W. Atlantic Avenue, Delray Beach, FL 33444												
NOTICE TO APPEAR	Court Date and Time Month AUG Day 17 Year 2017 Time 0830 AM 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, THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.													
ADMIN	Signature of Defendant (or Juvenile and Parent/Custodian) Danielle C. Mazza			Signature of Arresting Officer X DC. J. LEWIS 847			Name Verification (Printed by Arrestee) (PRINT)						
ADMIN	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal			<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other			I.D. # 847			PAGE 1 OF 1			
ADMIN	Intake Deputy			I.D. #	Pouch #	Transporting Officer	I.D. #	Agency	Witness here if subject signed with an "X"				

Please contact
one of the following
telephone numbers
for further information

CENTRAL CLERK'S OFFICE	NORTH CLERK'S OFFICE	SOUTH CLERK'S OFFICE	WEST CLERK'S OFFICE
Violations Bureau, Room 2.2300 206 N. Dixie Highway W. Palm Beach, FL 33402 Telephone: 561-355-2994	Room 1210 3188 PGA Blvd. Palm Beach Gardens, FL 33410 Telephone: 561-624-6608	Room 1S-124 200 West Atlantic Ave. Delray Beach, FL 33444 Telephone: 561-274-1530	Room S-100 2950 State Road 15 Belle Glade, FL 33430 Telephone: 561-996-4843

NOT A CERTIFIED COPY

OBTS Number		PROBABLE CAUSE AFFIDAVIT					1 Arrest 2 NTA	3 Request for Warrant 4 Request for Capias	2	Juvenile	N		
Agency/ORI Number FL 0 5 0 0 3 0 0		Agency Name BOYNTON BEACH POLICE DEPT.			Agency Report Number 34-17-36176								
Charge Type Check all that 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		Special Notes									
Name (Last, First, Middle) MAZZA, DANIELLE C		Alias			Race W	Sex F	Date of Birth 12/07/1992						
Charge Description RETAIL THEFT 812.015		Charge Description											
Charge Description		Charge Description											
Victim's Name (Last, First, Middle) WALMART					Race	Sex	Date of Birth						
Local Address (Street, Apt Number) 3625 S. FEDERAL HWY		(City) , BOYNTON BCH, FL	(State) 33435	(Zip)	Phone	Address Source							
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation							
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.													
<input type="checkbox"/> Committed the below acts in my presence.				<input type="checkbox"/> Was observed by		Who told	That he/she saw the arrested person commit the below acts.						
<input type="checkbox"/> Confessed to				Admitting the below facts		<input checked="" type="checkbox"/> Was found to have committed the below acts, resulting from my (described) investigation.							
On The 28th		Day or June	2017	At 1:32	<input type="checkbox"/> A.M.		<input checked="" type="checkbox"/> P.M.						

On 6/28/17 at approximately 1324hrs I responded to Walmart located at 3625 S. Federal Hwy in reference to a shoplifter in custody. Upon arrival I met LPO Barnard, Frantz (9/9/67) who advised that he observed a W/F enter the business, conceal items and attempt to walk out without paying for the items. Bernard advised that he observed W/F Mazza, Danielle (12/7/92) enter the store and walk to the dental hygiene isle. Via CCTV video, Bernard observed Mazza select two Oral B electric toothbrushes (\$79.99 value), then walk to the shoe section and conceal the items in her black purse. Bernard then advised that Mazza walked past all points of sales and attempted to exit the store without paying for the items. Bernard then intercepted Mazza, identified himself as LPO and escorted her back to the office to wait for BBPD. The above property was recovered and returned to Walmart. Mazza was arrested and charged with Retail Theft pursuant to FSS#812.015. Mazza was processed and released with an NTA.

A sworn verbal statement by Bernard was captured by my BBPD issued BWC.

SEARCHED
INDEXED
SERIALIZED
FILED
JULY 11 2017
AM 11:26

The foregoing instrument was sworn to or affirmed and subscribed before me


Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

06/28/2017
Date


(Signature of Arresting / Investigative Officer)

OFC. J. LEVINE 842
(Print name of Arresting/Investigative Officer)

06/28/2017
Date

NOT A CERTIFIED COPY