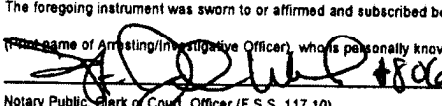


0506090 19MM3006 967

ADMINISTRATIVE		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile		N											
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-19-046364																			
Charge Type Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Weapon Seized / Type ☒ 1. Yes ☐ 2. No		Multiple Clearance Indicator 01																			
Location of Arrest (Including Name of Business) 6592 Villa Sonrisa Dr, Boca Raton, FL 33433				Location of Offense (Business Name, Address) 6592 Villa Sonrisa Dr, Boca Raton, FL 33433																			
Date of Arrest 03/10/2019		Time of Arrest 05:17		Booking Date 03/10/2019		Booking Time		Jail Date		Jail Time		Location of Vehicle											
Name (Last, First, Middle) Ceron, David,												Alias (Name, DOB, Soc. Sec. #, Etc.)											
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex M		Date of Birth 11/27/1996		Height 5'06		Weight 170		Eye Color brown		Hair Color brown		Complexion medium		Build medium							
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) none												Martial Status Single		Religion NONE		Indication of Alcohol Influence Y ☐ N ☐ Unk. ☐							
Local Address (Street, Apt. Number) 136 Main St, Lancaster, MA 01523												(City)		(State)		(Zip)		Phone () () ()					
Permanent Address (Street, Apt. Number) 1												(City)		(State)		(Zip)		Phone () () ()					
Business Address (Name, Street) 1												(City)		(State)		(Zip)		Phone () () ()					
D/L Number, State S13516600, MA				Soc. Sec. Number [REDACTED]				INS Number				Place of Birth (City, State) Austin, PA				Citizenship US							
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			
☐ Parent ☐ Legal Custodian ☐ Other: Name (Last) (First) (Middle) Address (Street, Apt. Number) (City) (State) (Zip) Residence Phone () () () 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 provided by ☐ defendant and / or ☐ defendant's parents. The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. ☐ Yes, by (Name) ☐ No. (Reason)												School Attended		Grade									
Property Crime? ☐ Yes ☐ No												Description of Property		Value of Property									
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			
Charge Description Disorderly Intoxication												Counts 1		Domestic Violence ☐ Y ☒ N		Statute Violation Number 856.011		Violation of ORD #					
Drug Activity N												Drug Type N		Amount / Unit		Offense # 19-046364		Warrant / Capias Number		Bond			
Charge Description												Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number		Violation of ORD #					
Drug Activity N												Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond			
Charge Description												Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number		Violation of ORD #					
Drug Activity N												Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond			
Charge Description												Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number		Violation of ORD #					
Drug Activity N												Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond			
Location (Court, Room Number, Address) South County Courthouse, Courtroom #1, 200 W. Atlantic Ave., Delray Beach, FL 33444 - Ph: (561) 355-2996																							
Court Date and Time Month April Day 4th Year 2019 Time 08:30 AM X PM																							
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 03/10/2019																							
Signature of Defendant (or Juvenile and Parent /Custodian)												Date Signed											
HOLD for other Agency Name												Signature of Arresting Officer [Signature]											
☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other: SCAR												Name of Arresting Officer (Print) D/USINTU P.											
I.D. # 16032												Agency PBSO											
Transporting Officer D/S MOSS												I.D. # 9195											
Witness here if subject signed with an "X"												PAGE 1 OF 1											

		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile N	
ADMIN	OBTS Number										
	Agency ORI Number FLO 500000	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number 06- 19-046364					
DEF	Charge Type: Check as many as apply.	☐ 1. Felony		☒ 3. Misdemeanor		☐ 5. Ordinance		Special Notes:			
		☐ 2. Traffic Felony		☐ 4. Traffic Misdemeanor		☐ 6. Other					
CHARGES	Name (Last, First, Middle) Ceron, David,	Alias				Race W		Sex M		Date of Birth 11/27/1996	
	Charge Description Disorderly Intoxication	856.011				Charge Description					
VICTIM	Charge Description	Charge Description									
	Victim's Name (Last, First, Middle) Cohen, Marc, Evan	Race W				Sex M		Date of Birth 05/22/1969			
	Local Address (Street, Apt. Number) 6592 Villa Sonrisa Dr Apt 1014, Boca Raton, FL 33433	(City)		(State)		(zip)		Phone (561) 395 5122		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 ☒ committed the below acts in my presence. ☒ was observed by <u>victim</u> who told <u>me</u> that he/she saw the arrested person commit the below acts. ☐ confessed to _____ admitting to the below facts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the <u>10th</u> day of <u>March</u> 20 <u>19</u> at <u>04:56</u> ☒ A.M. ☐ P.M. (Specifically include facts constituting cause for arrest.) I responded to 6592 Villa Sonrisa Dr, Apt 1014, in unincorporated Boca Raton, Palm Beach County, Florida, for a possible in progress burglary. Upon arrival I made contact with Marc Cohen, the complainant and victim who told me and wrote in a sworn statement that his burglar alarm woke him up. He walked down his stairs and found an unknown male in his kitchen. Cohen walked the man outside on the front yard. The male was identified by his Massachusetts DL as David Ceron. He appeared extremely intoxicated and was unable to provide me a local address nor a local contact number. There was no sign of forced entry in the unit, and Cohen was not sure that he had locked the door. Due to his intoxication and his explanation that he believed that he was at his home, there was no probable cause that Ceron had a criminal intent entering Cohen's home. Ceron had an unsteady gait and had to lean over the wall to keep his balance. A strong odor of unknown alcohol beverage was coming from his breath. His eyes were glassy and bloodshot. While I continued to talk to Ceron to attempt to find more information from him, he became extremely loud and started swearing at me and at Cohen. He became extremely obnoxious and refused to follow orders. Neighbors started being waken up by the commotion. Based on my investigation I had probable cause that David Ceron was intoxicated and endangered the safety of another person or property, or was intoxicated or drank an alcoholic beverage in a public place or in or upon a public conveyance and caused a public disturbance, contrary to Florida Statute 856.011(1).											
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH										
	 D/S POINTU P. (Signature of Arresting/Investigative Officer)										
The foregoing instrument was sworn to or affirmed and subscribed before me this <u>10th</u> day of <u>March</u> 20 <u>19</u> by <u>D/S POINTU P.</u>											
(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced <u>known</u>											
 Notary Public, Clerk of Court, Officer (F.S.S. 117.10)											
PAGE <u>1</u> OF <u>1</u>											

PALM BEACH COUNTY SHERIFF'S OFFICE – **SWORN STATEMENT**

Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.

C500545691820

MARCOHEN

☐ WITNESS ☒ VICTIM ☐ OTHER

CASE #:	19046364	ZONE:	7-21	SUSPECT:	DAVID CEROM	DATE & TIME OF ORIGINAL EVENT/OFFENSE:	3/10/19
EVENT TYPE:	Disorderly Conduct			DEPUTY:	F. DILSBY	ID#:	26683

COMPLETE EVERYTHING BELOW – PRINT LEGIBLY

LAST NAME:		Cohen		FIRST NAME:		Marc		MIDDLE INITIAL:	RACE:	SEX:	
DATE OF BIRTH:		(MM/DD/YYYY) 05 22 1969		YOUR HEIGHT:		6'2"		YOUR WEIGHT:		235	
YOUR HOME ADDRESS:		6522 W. 11th St #1014		☐ CHECK IF HOMELESS		CITY:		Boca Raton		STATE:	
YOUR WORK NAME & ADDRESS:		Boca Raton, FL 33401		☐ CHECK IF UNEMPLOYED OR RETIRED		CITY:		STATE:		ZIP:	
WORK PHONE:		☐ CHECK IF NONE		CELL PHONE:		☐ CHECK IF NONE		HOME PHONE:		☐ CHECK IF NONE	
()		()		()		()		()		()	

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL – PRINT LEGIBLY

YOUR NAME:	1 Marc Cohen	DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...
I woke up in bed in my home when I heard the alarm going off. I went to go see what was there. A stranger was standing in my kitchen. I took him out of my home. He appeared to be drunk (drunk) or had been drinking. He said he knew people who lived here. The police came after. He was getting loud and irritable.		
PAGE 1 OF 1		

READ AND SIGN

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:

YOUR SIGNATURE: X

☒ DEPUTY SHERIFF ☐ NOTARY PUBLIC FSS: 117.10

SWORN TO AND SUBSCRIBED BEFORE ME TODAY:

DATE: 3/10/19 TIME: 0532

SIGNATURE: ID: 26683

IF YOU DO NOT WISH TO PROSECUTE, COMPLETE THE ABOVE STATEMENT, READ THIS DISCLAIMER AND INITIAL BELOW: I AM OF LEGAL AGE AND I AM THE REPORTED VICTIM OF A CRIME UNDER FLORIDA LAW. I HEREBY STATE THAT I WILL NOT COOPERATE ANY FURTHER WITH THE INVESTIGATION OF THE ALLEGED CRIME. I FURTHER RELEASE THE PALM BEACH COUNTY SHERIFF'S OFFICE OF ANY PRESENT OR FUTURE RESPONSIBILITY AS TO MY CASE. I ACKNOWLEDGE THAT I UNDERSTAND MY RIGHTS AS A CRIME VICTIM, PARTICULARLY REGARDING VICTIM COMPENSATION ELIGIBILITY, WHICH INCLUDES SUCH BENEFITS AS REIMBURSEMENT FOR: DISABILITY; LOST WAGES; LOSS OF SUPPORT; MEDICAL, DENTAL, MENTAL HEALTH COUNSELING AND FUNERAL EXPENSES. I AM AWARE I MAY BE GIVING UP THESE RIGHTS FOR MY FAMILY AND MYSELF BY INITIALING BELOW. I AM TAKING THIS POSITION OF MY OWN FREE WILL KNOWING THAT THE CASE CAN ONLY BE FURTHER INVESTIGATED AND PROSECUTED WITH MY COOPERATION.

☐ DO NOT WISH TO PROSECUTE (INITIAL _____)

(PROSECUTION WAIVER NOT TO BE USED FOR CASES INVOLVING DOMESTIC OR DATING VIOLENCE PER G.O. 508.00)

WHITE - RECORDS COPY CANARY - STATE ATTORNEY COPY PINK - OFFICER'S COPY GOLD - WITNESS / VICTIM COPY



**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:	

REVIEW COMPLETED BY

Booking Number: 2019008258	Date: 03/11/2019
	Specialist Name/ID: AM/31562