

PCH# 956

☐ Check if Supplement is Attached

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

Juvenile

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		Juvenile													
Agency ORI Number FLO 5 0 2 7 0 0		Agency Name PALM SPRINGS PUBLIC SAFETY		Agency Report Number (N.T.A.'s only) 8 2 1 1 7 1 1 2 9 5 2 1 1 1																	
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) 2765 10th Ave N. Palm Springs Walmart		Location of Offense (Business Name, Address) 2765 10th Ave N. Palm Springs																			
Date of Arrest 05.30.17		Time of Arrest 0225		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle									
Name (Last, First, Middle) Mollinedo Ruiz, Jr. Didier		Alias (Name, DOB, Soc. Sec. #, Etc.)																			
Race W - White B - Black		Sex M		Date of Birth 04.14.79		Height 509		Weight 165		Eye Color BRO		Hair Color BRO		Complexion FAIR		Build MED					
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE		Mental Status SN		Religion CATH		Indication of: Alcohol Influence Drug Influence		Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Unk <input type="checkbox"/>													
Local Address (Street, Apt. Number) 4291 Kent Ave Lake Worth FL 33461		(City) Lake Worth		(State) FL		(Zip) 33461		Phone ()		Residence Type: 1. City 2. County 3. Florida 4. Out of State		2									
Permanent Address (Street, Apt. Number) 4291 Kent Ave Lake Worth FL 33461		(City) Lake Worth		(State) FL		(Zip) 33461		Phone ()		Address Source DC											
Business Address (Name, Street) None		(City)		(State)		(Zip)		Phone ()		Occupation None											
D/L Number, State R23416079B46		INS Number A089765526		Place of Birth (City, State) Havana, Cuba		Citizenship US															
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											
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> 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																	
Drug Activity N. N/A P. Possess		S. Sell D. 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 Description Trespass after Warning		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 816.08(2)(b)		Violation of ORD #													
Drug Activity N		Drug Type N		Amount / Unit 4		Offense # 17-12052		Warrant / Capias Number		Bond											
Charge Description Disorderly Intoxication		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 816.01(1)(4)		Violation of ORD #													
Drug Activity N		Drug Type N		Amount / Unit 4		Offense # 17-12052		Warrant / Capias Number		Bond											
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number		Violation of 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 of ORD #													
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond											
Location (Court, Room Number, Address) 3228 Gun Club Rd WPB, FL 33406		Court Date and Time June 21 2017 1:00 A.M.		Date Signed MAY 30 AM 3:30																	
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) X		Date Signed																	
HOLD for other agency <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Signature of Arresting Officer x [Signature] #133		Name Verification (Printed by Arrestee) (PRINT) SCANNED																	
Intake Deputy [Signature] #1200		Pouch #		Transporting Officer Khatami #133 ASD		I.D.#		Agency		Witness has subject sign with an "X"		PAGE 1 OF 1									

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias		1	Juvenile <input type="checkbox"/>
Agency ORI Number FLO 502700		Agency Name PALM SPRINGS POLICE DEPARTMENT		Agency Report Number 82- 2017-12052			
Charge Type: Check as many as apply.		<input type="checkbox"/> 1. Felony	<input checked="" type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	Special Notes:		
		<input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other			
CHARGES	Name (Last, First, Middle) RUIZ MOLLINEDO, DIDIER		Alias		Race W	Sex M	Date of Birth 4/14/79
	Charge Description DISORDERLY INTOX		Charge Description TRESPASS AFTER WARNING				
	Charge Description		Charge Description				
VICTIM	Victim's Name (Last, First, Middle) STATE OF FL		Alias		Race	Sex	Date of Birth
	Local Address (Street,Apt,Number) (City) (State) (Zip) 230 CYPRESS LANE PALM SPRINGS, FL 33461				Phone 561-968-8243		Address Source
	Business Address (Street,Apt,Number) (City) (State) (Zip) SAME AS ABOVE				Phone		Occupation
<p>The undersigned certifies and swears that he/she has just and reasonable grounds, and does believe the above named Defendant committed the following violation of law. The person taken into custody....</p> <p><input checked="" 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 acts below.</p> <p><input type="checkbox"/> Confessed to _____ admitting to the below acts. <input type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the 30TH day of MAY 2017 at 0224 <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p style="text-align: center;">(PROBABLE CAUSE STATEMENT)</p> <p>On 5/30/17 at approximately 0207 hours I was dispatched to Wal-Mart 2765 10th Ave N in reference to a intoxicated white male causing a disturbance inside and refusing to leave.</p> <p>When I arrived I met W/M Ruiz Mollinedo, Didier. Ruiz Mollinedo was very intoxicated, his eyes were blood shot red, he was swaying side to side, his speech was slurred, and the odor of alcohol was coming from his breathe. Ruiz Mollinedo was caught trying to leave the store with unpaid items. The manager on duty stated that he did not want to press charges for the unpaid items but instead just wanted him to leave the store. Ruiz Mollinedo was asked to leave the store numerous times and he refused. Ruiz Mollinedo was upset that Wal-Mart wanted him to leave so Ruiz Mollinedo began to swear at employees and officers on scene. Ruiz Mollinedo was escorted outside where he still refused to leave the property. After being asked numerous times to leave the property and causing a disturbance while intoxicated in public, Ruiz Mollinedo was placed under arrest for trespass after warning and disorderly intoxication. Ruiz Mollinedo was handcuffed, double locked, placed in the back of my vehicle. He was processed on scene and TOT PBC CJ.</p>							
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p><i>[Signature]</i> #132</p> <p>Signature of Arresting/Investigating Officer</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this 30th day May 2017 by OFC KHATAMI #133</p> <p>(Print name if Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced: personally known to me</p> <p><i>[Signature]</i></p> <p>Signature of Notary Public/Clerk of Courts/Police Officer</p>							

SCANNED
JUN 01 2017