

0386571 / 2234
19CT 023904 SB

ARREST / NOTICE TO APPEAR

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

OBTS Number	Agency ORI Number 0500400		Agency Name Delray Beach Police Department		Agency Report Number (N.T.A.'s only) 4, 0 19-020393	
Charge Type: Check as many as apply	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	If Weapon Seized Enter Type None/not Applicable		Multiple Clearance Indicator 2
Location of Arrest (Including Name of Business) 974 MCCLEARY ST			Location of Offense (Business Name, Address) 909 MCCLEARY ST, DELRAY BEACH, FL 33483			
Date of Arrest 12/30/2019	Time of Arrest 22:56	Booking Date 12/30/2019	Booking Time 23:06	Jail Date	Jail Time	Location of Vehicle

Name (Last, First, Middle) RICCIOLI, ELIZABETH ANN						Alias:					
Race W - White B - Black	I - American Indian O - Oriental/Asian	Sex W	Date of Birth 02/10/1943	Height 5'04	Weight 135	Eye Color BLUE	Hair Color BLOND OR	Complexion LIGHT	Build SMALL	Indication of: Alcohol Influence Drug Influence	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status S	Religion CATHOLIC	Residence Type: 1. City 3. Florida 2. County 4. Out of State		Address Source 4	
Local Address (Street, Apt. Number) 974 MCCLEARY ST, DELRAY BEACH, FL 33483			(City)	(State)	(Zip)	Phone (561) 414-4660		Occupation VERBAL			
Permanent Address (Street, Apt. Number) 974 MCCLEARY ST, DELRAY BEACH, FL 33483			(City)	(State)	(Zip)	Phone (561) 414-4660		Occupation			
Business Address (Name, Street)			(City)	(State)	(Zip)	Phone		Occupation			
D/L Number, State R240221435500 / FL		Soc. Sec. Number	INS Number		Place of Birth (City, State) BOSTON, MA, United		Citizenship US				

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested	<input type="checkbox"/> 3. Felony	<input type="checkbox"/> 5. Juvenile
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 2. At Large	<input type="checkbox"/> 4. Misdemeanor	

<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian	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 Department and Released		2. TOT JAC	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.			School Attended	Grade		
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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. Disperse/ 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 DUI-DAMAGE TO PERSON/PROPERTY					Statute Violation Number 316.193(3)(C)(1)	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number
	N			1	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	

Charge Description CRASH-FAIL TO LEAVE INFORMATION UNATTENDED VEH- PROP DAMAGE					Statute Violation Number 316.063(1)	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number
	N			1	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	

Charge Description	Statute Violation Number	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit

Health / Apparent Physical Condition of Defendant	Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries Explain:				
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond	<input type="checkbox"/> Released to Parent/Guardian	<input checked="" type="checkbox"/> T.O.T. County Jail	PROPERTY - Received By	Released By	Released To
Transported By	Date Transported	Time Transported	Other		

<input checked="" 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 Page 2.	Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444	Court Date and Time 02/03/2020 08:30:00	No Photo Available
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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.			
Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed	

HOLD for Other Agency	Signature of Arresting Officer BUTNER, JAMES R	Name Verification (Printed by Arrestee)
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	Name of Arresting Officer (Print) BUTNER, JAMES R	(PRINT)
Intake Deputy SPANN, BIL	Transporting Officer BUTNER	Agency DBPD
ID #	ID #	Agency
	1172	DBPD
Witness here if subject signed with an "X"		

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

OBTS Number	Agency ORI Number FL 0500400		Agency Name DELRAY BEACH POLICE DEPARTMENT	Agency Report Number 4 0 19-020393
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 3. Misdemeanor	<input checked="" type="checkbox"/> 4. Traffic Misdemeanor
	<input type="checkbox"/> 5. Ordinance	<input type="checkbox"/> 6. Other	Special Notes:	

Name (Last, First, Middle) RICCIOLI, ELIZABETH ANN	Alias	Race W	Sex F	Date of Birth 02/10/1943
Charge Description 316.193(3)(C)(1) DUI-DAMAGE TO PERSON/PROPERTY	Charge Description 316.063(1) CRASH- FAIL TO LEAVE INFORMATION UNATTE			

Victim's Name (Last, First, Middle) State Of Florida	Race	Sex	Date of Birth
Local Address (Street, Apt. Number) (City) (State) (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 ...
 committed the below acts in my presence. was observed by **MARC ANDERSON AND JOHN ROBERTS** who told **OFC. BUTNER** that he/she saw the arrested person commit the below acts.
 confessed to **OFC. BUTNER** admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.
 On the **31** day of **December**, **2019** at **01:10** (Specifically include facts constituting cause for arrest.)

The following incident occurred in the City of Delray Beach, County of Palm Beach, Florida.

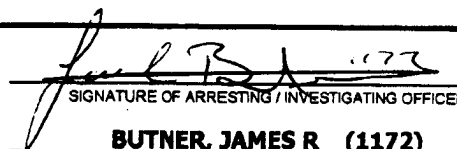
OFFICER'S NARATIVE:

On 12/30/2019 at 2136 hours I was dispatched to the area of 909 McCleary St. reference to a possible drunk driver who crashed into a parked vehicle and left the scene.

Upon arrival I made contact with the witnesses Marc Anderson and John Roberts. Roberts stated the following: He was walking back to Anderson's house after leaving Duffy's Sports Bar. When they entered the neighborhood, they observed a blue Mercedes E300 bearing FL tag 906MVM stopped at the stop sign at the intersection of Eve St. and Spanish Trl. The driver, who he described as an older white female, with blonde or possibly light brown hair, said something to him however he could not understand her. The vehicle pulled off onto the shoulder of the road. Roberts stated that he is currently a Los Angeles County Firefighter and previously worked as a deputy sheriff for the Los Angeles Sheriffs Department. He went to conduct a welfare check on the subject when he immediately smelled a strong odor of an unknown alcoholic beverage. He asked the driver if she had been drinking in which she replied "yes". When he asked if she was intoxicated and that he can drive her home she quickly said no, put the car in reverse, then again in drive, and turned down McCleary St. Shortly after turning down McCleary St. He heard a loud crash that was consistent with the sound of another vehicle crashing into another. When he went to McCleary St he discovered a black Yukon FL TAG KMEA09 had fresh damage to the rear passenger side bumper. He observed the suspect vehicle drive down to the dead end of the street and parked.

Anderson's statement was consistent with Roberts. Both of their sworn statements were

SWORN AND SUBSCRIBED BEFORE ME	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
BONET, LUIS C NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	BUTNER, JAMES R (1172) NAME OF OFFICER (PLEASE PRINT)
12/31/2019 DATE	12/31/2019 DATE

OBTS Number Agency ORI Number FL 0500400	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	JUVENILE
Agency Name DELRAY BEACH POLICE DEPARTMENT	Agency Report Number 4 0 19-020393			
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other			Special Notes:	
Name (Last, First, Middle) RICCIOLI, ELIZABETH ANN			Race W	Sex F
Date of Birth 02/10/1943				
<p>captured on my body worn camera. The owner of the black Yukon was Steven Michael. Michael stated that the damage was not there prior to this incident.</p> <p>I located the suspect vehicle in front of 974 McCleary St. The vehicle was left with the windows down and had fresh damage to the front driver side bumper that was consistent with the damage of the black Yukon. The driver side headlight was cracked, and black paint chips were discovered inside the housing unit of the headlight. Ofc. Pimentel collected the paint chips and compared them to that of the black Yukon and it appeared to be from that vehicle. I attempted to make contact with the suspect, Elizabeth Riccioli, who refused to come out and give a statement. Riccioli called 911 and informed that they she was not going to come out and give a statement. Shortly after, Riccioli decided to come out and give a statement. Immediately after making contact with her Riccioli, I smelled a strong odor of an unknown alcoholic beverage, I noticed that she was uneasy on her feet and struggled to keep her balance.</p> <p>Post Miranda Warning, Riccioli stated the following: She was at the Harvest Grill (1841 S Federal Hwy) with her son for dinner. There she had two alcoholic drinks. She claimed to have chocolate martinis. She stated that she is the only one who drives her car, and that no one else has driven her car in the last 24 hours. However, tonight she stated that she walked to and from the Harvest Grill.</p> <p>A live show up was conducted with both Anderson and Roberts in which they both positively identified Riccioli as the driver and the sole occupant of the vehicle at the time of the incident. I then informed Riccioli that I was no longer investigating the crash, that I was now conducting a driving under the influence investigation. I gave Riccioli the opportunity to conduct a series of Standardized Field Sobriety Tasks to dispel my belief that she has been driving under the influence. Riccioli refused to conduct the tasks.</p> <p>Riccioli was then placed in handcuffs (double locked and checked for proper spacing) and transported to the Palm Beach County Jail Breath Alcohol Testing Facility. While on the way to the testing facility Riccioli kept stating that I was kidnapping her and that she was going to make flyers to post in her neighborhood that stated "do not drink and drive, because this man will take you to prison".</p> <p>Westway Towing responded to the scene and towed the vehicle.</p> <p>With Riccioli's refusal, statement from the witness, and observation of Riccioli, probable cause exists to charge the defendant with Driving Under the Influence- Damage to Person/Property; Pursuant to F.S.S. 316.193(3)(C)(1) and leaving the scene of a crash of an unattended vehicle without leaving information; Pursuant to F.S.S. 316.063(1).</p>				
SWORN AND SUBSCRIBED BEFORE ME				
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) BONET, LUIS C 12/31/2019 DATE		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  BUTNER, JAMES R (1172) NAME OF OFFICER (PLEASE PRINT) 12/31/2019 DATE		
				PAGE 2 OF 4

OBTS Number A D M I N D E F P R O B A B L E C A U S E S T A T E M E N T	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	JUVENILE	
Agency ORI Number: FL 0500400		Agency Name: DELRAY BEACH POLICE DEPARTMENT		Agency Report Number: 4 0 19-020393	
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other				Special Notes:	
Name (Last, First, Middle): RICCIOLI, ELIZABETH ANN			Race: W	Sex: F	Date of Birth: 02/10/1943
<p>DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEFENDANT BEHIND THE WHEEL OF THE VEHICLE): Witnesses Marc Anderson and John Roberts positively identified her as the sole occupant and driver of the vehicle.</p> <p>OBSERVATION OF DRIVER:</p> <p>DRIVER'S STATEMENTS: She had two alcoholic drinks. Chocolate martinis</p> <p>ODORS: unkown alcoholic beverage</p> <p>SPEECH: Verbally agressive towards law enforcement.</p> <p>ATTITUDE: Verbally agressive towards law enforcement.</p> <p>CLOTHING: black dress, black and white jacket.</p> <p>MEDICAL PROBLEMS:</p> <p>MEDICATIONS: Xanax, High blood pressure, .</p> <p>BREATH TESTING REQUEST IS VIDEO RECORDED:</p> <p>** ROAD SIDE TASKS **</p> <p>HORIZONTAL GAZE NYSTAGMUS: refused</p> <p>LEFT EYE: refused</p> <p>RIGHT EYE: refused</p> <p>WALK AND TURN: refused</p> <p>ONE LEG STAND: refused</p> <p>FINGER TO NOSE: refused</p> <p>ROMBERG ALPHABET: refused</p> <p>BREATH ALCOHOL TEST RESULTS:</p> <p>The test results were:</p> <p>Defendant sample #1: .226</p>					
SWORN AND SUBSCRIBED BEFORE ME					
_____ BONET, LUIS C NOTARY PUBLIC / CLERK OF COURT / OFFICER (P.S.S. 117.10)			_____ SIGNATURE OF ARRESTING / INVESTIGATING OFFICER		
_____ 12/31/2019 DATE			_____ BUTNER, JAMES R (1172) NAME OF OFFICER (PLEASE PRINT)		
			_____ 12/31/2019 DATE		
PAGE 3 OF 4					

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1 JUVENILE

OBTS Number		
Agency ORI Number FL 0500400	Agency Name DELRAY BEACH POLICE DEPARTMENT	Agency Report Number 4 0 19-020393
Charge Type: Check as many as apply	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	Special Notes:

Name (Last, First, Middle) RICCIOLI, ELIZABETH ANN	Alias	Race W	Sex F	Date of Birth 02/10/1943
--	-------	------------------	-----------------	------------------------------------

Defendant sample #2: .223

CHARGES:

Based on the above stated facts probable cause exists to charge the defendant, Elizabeth Riccioli, with one count of driving under the influence-damage to person/property in violation of F.S.S. 316.193(3) (C) (1) and one count of leaving the scene of a crash of an unattended vehicle without leaving information; Pursuant to F.S.S. 316.063(1).

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME	
	BONET, LUIS C NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	<i>[Signature]</i> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
	12/31/2019 DATE	BUTNER, JAMES R (1172) NAME OF OFFICER (PLEASE PRINT)
		12/31/2019 DATE

PAGE
4 OF 4

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006029 Software: 8100.27
Date of Test: 12/31/2019

Date of Last Agency Inspection: 12/06/2019

Observation Period Began: 23:27

Subject's Name: ELIZABETH A RICCIOLI

DOB: 02/10/1943 Sex: F

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:	Test	g/210L	Time
	Diagnostics Check	OK	23:55
	Air Blank	0.000	23:55
	Control Test	0.082	23:55
	Air Blank	0.000	23:56
	Subject Sample #1	0.226	23:58
	Air Blank	0.000	23:59
	Air Blank	0.000	00:01
	Subject Sample #2	0.223	00:02
	Air Blank	0.000	00:02
	Control Test	0.080	00:03
	Air Blank	0.000	00:03
	Diagnostics Check	OK	00:03

Cylinder Lot: 17919080A1
Exp: 08/05/2021

State of Florida, County of Palm Beach

Personally appeared before me the undersigned authority, who () is personally known to me or () produced _____ as identification, and who after being placed under oath, states:

I PARIS D POUND, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____

Signature

Date: 12/31/19

Sworn to (or affirmed) before me this 31st day of December, 2019

Signature of Notary Public-State of Florida

Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.



**PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET**

PBSO CASE # 19-154142 PBSO ZONE 4-11

AGENCY CASE # 19-20393 CRASH CASE # _____

TIME OF STOP/CRASH 2136 DATE 12/30/19 DAY Monday

SUBJECT'S NAME Elizabeth Riccioli RACE W SEX F

HGT 5'04 WGT 135 lb DOB 2/10/1943

LOCATION 974 McCleary St

ARRESTING OFFICER'S NAME & ID Butner 1172 AGENCY Delray PD

DIVISION: _____

NOTIFIED BY COMMO 2257

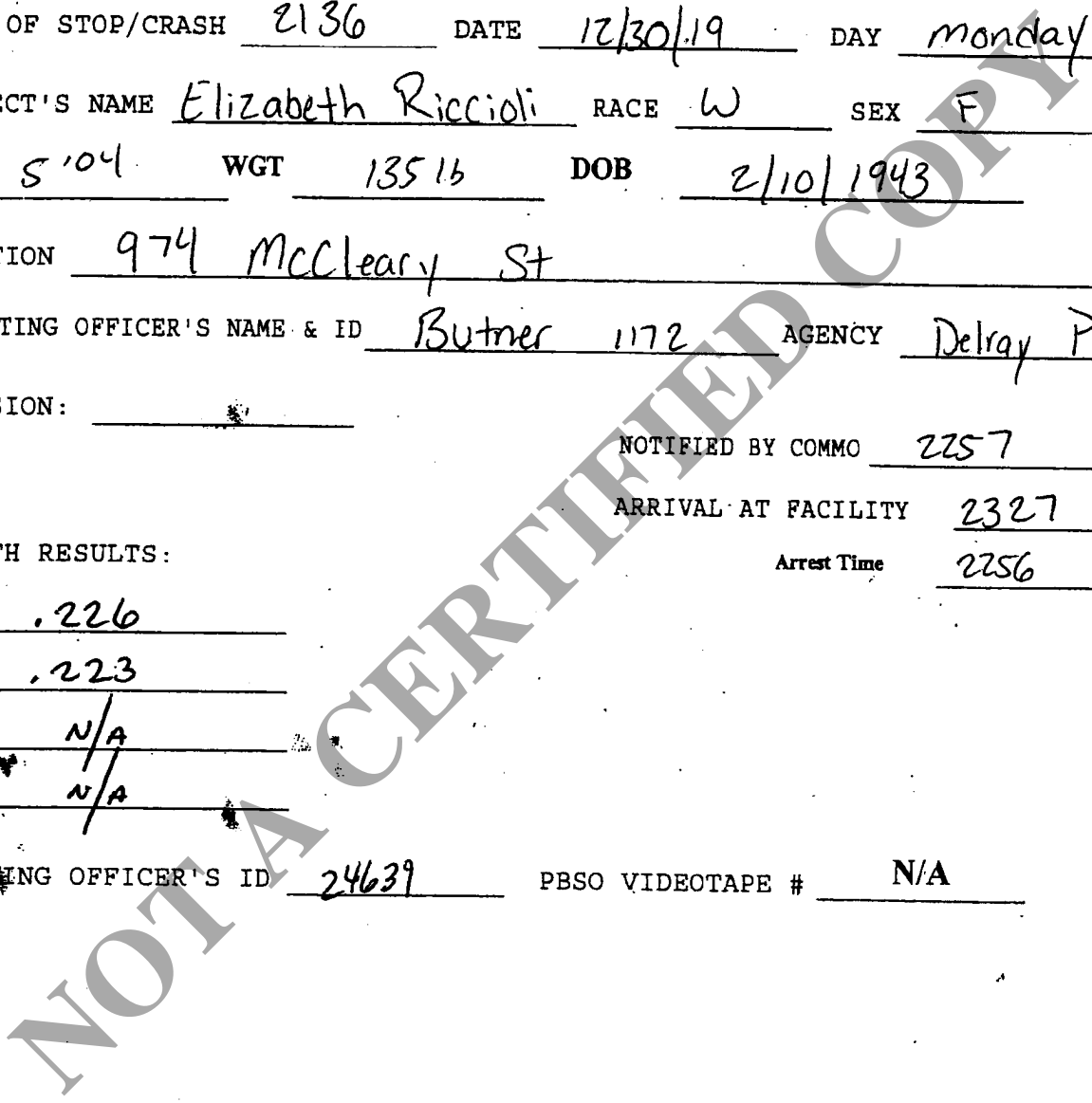
ARRIVAL AT FACILITY 2327

Arrest Time 2256

BREATH RESULTS:

- 1. .226
- 2. .223
- 3. N/A
- 4. N/A

TESTING OFFICER'S ID 24639 PBSO VIDEOTAPE # N/A



SCANNED
DEC 31 2019



Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>	782.04 (FS)	Other: Witness	
	<input type="checkbox"/>	415.107 (1)	Other: In order to protect the rights of the individual or other persons responsible for the welfare of a vulnerable adult, all records concerning reports of abuse, neglect, or exploitation of the vulnerable adult.	

REVIEW COMPLETED BY

Booking Number: 2019041386	Date: 12/31/2019
	Specialist Name/ID: M. Tooks #8557

SCANNED
DEC 31 2019