

J# 0490407

ARREST NOTICE TO APPEAR
Juvenile Referral Report1. Arrest 3. Request For Warrant
2. N.T.A. 4. Request For Capias

D# 3387

Juvenile

1

OBTS Number

Agency Report Number

06

17112087

Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06		17112087		
Charge Type: Check as many as apply 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor		5. Ordinance 6. Other		If Weapon Seized Enter Type		Multiple Clearance Indicator 0 1		
Location of Arrest (Including Name of Business) 22492 MIDDLETOWN DR BOCA RATON, FL 33428				Location of Offense (Including Name of Business) 22492 MIDDLETOWN DR BOCA RATON, FL 33428				
Date of Arrest Aug 8, 2017	Time of Arrest 0046	Booking Date Aug 8, 2017	Booking Time	Jail Date	Jail Time	Location of Vehicle N/A		
Name (Last, First, Middle) RINGWALT MARY FRANCES				Alias (Name, DOB, Soc. Sec. #, Etc.) [REDACTED]				
Race W-White B-Black	Sex W-F	Date of Birth 11/6/78	Height 5'2	Weight 106	Eye Color BLUE	Hair Color BLONDE	Complexion MED	Build SMALL
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) N/A				Marital Status M	Religion CATHOLIC	Indication of: Alcohol Influence Drug Influence Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Unk <input type="checkbox"/>		
Local Address (Street, Apt. Number) 22492 MIDDLETOWN DR		City BOCA RATON	State FL	Zip 33428	Phone 484-467-7779	Residence Type 1. City 2. County 3. Florida 4. Out of State		
Permanent Address (Street, Apt. Number) 22492 MIDDLETOWN DR		City BOCA RATON	State FL	Zip 33428	Phone	Address Source FL DL / VERBAL		
Business Address (Street, Apt. Number)		City	State	Zip	Phone	Occupation SELF EMPLOYED		
DL Number, State R524 586 78 906 0		Social Security Number [REDACTED]		INS Number	Place of Birth PHILADELPHIA, PA	Citizenship Y		
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	
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other	Name (Last, First, Middle)					Phone		
Address (Street, Apt. No.) [REDACTED] City				State	Zip	Business Phone		
Notified By (Name) [REDACTED] Date No Bond				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 561 355-2526) informed of any address change <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 S. Sell N. NA P. Possess	R. Smuggle B. Buy T. Traffic	K. Dispense/ D. Deliver E. Use	M. Manufacture/ Produce Cultivate	N. Other	Drug Type B. Barbiturate N. N/A A. Amphetamine	H. Hallucinogen C. Cocaine M. Marijuana	P. Paraphernalia/ Equipment	U. Unknown Z. Other
Charge Description SIMPLE BATTERY (DOMESTIC)				Counts 1	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 784.03(1a1)	Violation or ORD. #	
Drug Activity N	Drug Type N	Amount/Unit	Offense # 17112087	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant/Capias Number	Bond	
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation or ORD. #	
Drug Activity	Drug Type	Amount/Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant/Capias Number	Bond	
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation or ORD. #	
Drug Activity	Drug Type	Amount/Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant/Capias Number	Bond	
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation or ORD. #	
Drug Activity	Drug Type	Amount/Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant/Capias Number	Bond	
Location (Court, Address, Room Number)				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation or ORD. #	
Court Date and Time				Month	Day	Year	Time	AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>
I AGREE TO APPEAR AT THE ABOVE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT I SHOULD 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				
HOLD for Other Agency			Signature of Arresting Officer			Name Verification (Printed by Arrestee)		
Name			Name of Arresting Officer D/S T. HART			(PRINT)		
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal			ID # 9360			Page		
Intake Deputy SPAWN 8101			Transporting Officer ID # D/S T. HART 9360			Agency PBSO		
Witness here if subject signed with an "X"								

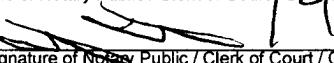
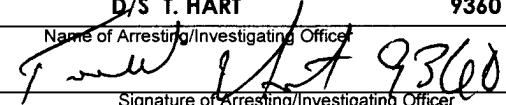
OBTS Number

PROBABLE CAUSE AFFIDAVIT

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

Agency ORI Number FLO 5 0 0 0 0 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06	17112087		
Charge Type Check as many as apply 1. Felony <input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 5. Ordinance 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other _____		Special Notes			
Defendant Name (Last, First, Middle) RINGWALT MARY FRANCES		Race W	Sex F	Date of Birth 11/6/78	
Charge SIMPLE BATTERY (DOMESTIC)		Charge			
Charge		Charge			
Victim Name (Last, First, Middle) BROWN RYAN CHARLES		Race W	Sex M	Date of Birth 9/4/79	
Local Address (Street, Apt. Number) 22492 MIDDLETOWN DR		City BOCA RATON	State FL	Zip 33428	Phone 484-467-0967
Business Address (Street, Apt. Number)		City	State	Zip	Phone
					Occupation ENGINEER
The undersigned 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"/> confessed to admitting to the below facts.			<input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.		
On the 8 day of AUGUST 20 17 at 0046 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM					

ON 8/8/17 AT 0028 HOURS I RESPONDED TO 22492 MIDDLETOWN DRIVE BOCA RATON, FLORIDA 33428 IN UNINCORPORATED PALM BEACH COUNTY AND MET WITH THE COMPLAINANT/VICTIM, RYAN BROWN IN REFERENCE TO A DOMESTIC DISTURBANCE BETWEEN HE AND HIS WIFE, MARY RINGWALT. UPON ARRIVAL, BROWN AND HIS TWO CHILDREN, RYAN AND MEGAN, WERE OUTSIDE IN THE DRIVEWAY. RYAN TOLD ME THAT MARY HAD HAD A FRIEND OVER AND DRANK A BOTTLE OF WINE. RYAN TOLD ME AFTER THE FRIEND LEFT, MARY BECAME AGGRESSIVE TOWARDS HIM. RYAN SAID HE WENT UPSTAIRS TO HIS BEDROOM WHERE HIS TWO CHILDREN WERE SLEEPING. RYAN TOLD ME THAT MARY WAS YELLING AND WOKE THE CHILDREN UP. RYAN TOLD ME THAT MARY BEGAN SWINGING AT HIM IN AN ATTEMPT TO HIT HIM AND FINALLY MARY STRUCK HIM IN THE THIGH WITH A KNEE STRIKE. I ASKED RYAN IF THE CHILDREN WITNESSED THE INCIDENT AND HE STATED, "YES, UNFORTUNATELY". AT THIS TIME I ASKED LITTLE RYAN IF HE SAW MOMMY HIT DADDY? LITTLE RYAN STATED, "YES". I ASKED LITTLE RYAN IF DADDY HIT MOMMY AT ANYTIME AND HE STATED, "NO". I ENTERED THE RESIDENCE AND SPOKE WITH MARY. I ASKED MARY WHAT HAPPENED? MARY TOLD ME SHE HAD CALLED AN ATTORNEY BECAUSE SHE AND RYAN ARE HAVING MARITAL ISSUES AND POSSIBLY SEEKING DIVORCE. MARY TOLD ME THAT RYAN WAS MAD BUT WOULD NOT ELABORATE ON ANYTHING INVOLVING THE INCIDENT. I TOLD MARY WHAT RYAN AND LITTLE RYAN'S ACCOUNT OF THE INCIDENT WAS. MARY DID NOT DENY HITTING RYAN AND SHOOK HER HEAD UP AND DOWN IN AGREEMENT. BASED ON MY INVESTIGATION, MARY FRANCES RINGWALT IS IN VIOLATION OF FLORIDA STATE STATUTE 784.03(1a1) BATTERY; TO INTENTIONALLY TOUCH OR STRIKE ANOTHER (RYAN BROWN) AGAINST THE WILL OF THE OTHER.

The foregoing instrument was sworn to and affirmed before me this 8 day of AUGUST 20 17 , by: D/S M. MILLER 7947					
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00) 			D/S T. HART 9360 Name of Arresting/Investigating Officer 		
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00) 					
Signature of Arresting/Investigating Officer 					