

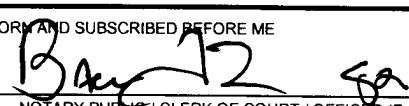
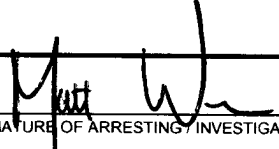
JB 0455132
ARREST / NOTICE TO APPEAR

PLH 1869
1

AD M I N I S T R A T I O N	OBTS Number	Agency ORI Number 0500400		Agency Name Delray Beach Police Department		Agency Report Number (N.T.A.'s only) 410 17-002119		Request for Warrant 1		Request for Capias 1		JUVENILE													
D E F E N D A N T	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: None/not Applicable		Multiple Clearance Indicator 1															
	Location of Arrest (Including Name of Business) 1200 W LINTON BLVD, DELRAY BEACH						Location of Offense (Business Name, Address) 1200 W LINTON BLVD, DELRAY BEACH, FL 33444																		
	Date of Arrest 02/07/2017	Time of Arrest 11:16	Booking Date 02/07/2017	Booking Time 11:34	Jail Date	Jail Time	Location of Vehicle																		
	Name (Last, First, Middle) D'AURIA, MATTHEW QUENTIN												Alias (Name, DOB, Soc. Sec. #, Etc.)												
D E F E N D A N T	Race W - White B - Black	Sex M		Date of Birth 11/23/1983	Height 5'08	Weight 200	Eye Color BROWN	Hair Color BROWN	Complexion LIGHT	Build LARGE															
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status S	Religion NOT INDICA	Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>																
	Local Address (Street, Apt. Number) 3100 NE 48TH ST 311, FORT LAUDERDALE, FL 33308						Phone		Residence Type: 1. City 2. County 3. Florida 4. Out of State 2																
	Permanent Address (Street, Apt. Number) 3100 NE 48TH ST 311, FORT LAUDERDALE, FL 33308						Phone		Address Source VERBAL																
	Business Address (Name, Street) UNEMPLOYED,						Phone		Occupation																
	D/L Number, State D600555834230 / FL		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) MIAMI, FL, United		Citizenship US																
C O D E F	Co-Defendant Name (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 Name (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														
J U V E N I L E	<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ Name (Last, First, Middle)												Residence Phone												
	<input type="checkbox"/> Legal Custodian												Business Phone												
	Address (Street, Apt. Number) (City) (State) (Zip)																								
	Notified by: (Name)				Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated																		
C O D E F	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																
	<input type="checkbox"/> Yes, by: _____ <input type="checkbox"/> No: _____						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
C H A R G E	Charge Description INHALE/INGEST HARMFUL CHEMICALS						Statute Violation Number 877.111(1)						Violation of ORD #												
	Drug Activity	Drug Type N	Amount / Unit	Offense # 17-002119	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number		Bond																
C H A R G E	Charge Description						Statute Violation Number						Violation of ORD #												
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number		Bond																
C H A R G E	Charge Description						Statute Violation Number						Violation of ORD #												
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number		Bond																
I N T A K E	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																		
	Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail						PROPERTY - Received By						Released By		Released To										
N O T I C E T O A P P E A R	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 03/09/2017 08:30:00		No Photo Available										
A D M I N I S T R A T I O N	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) [Signature]						Date Signed												
	HOLD for Other Agency						Signature of Arresting Officer [Signature]						Name Verification (Printed by Arrestee) [Signature]												
A D M I N I S T R A T I O N	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other						Name of Arresting Officer (Print) WARNE, MATTHEW						I.D. # 0958												
	Inmate Deputy [Signature]						Pouch # SCANNED						I.D. # 958						Agency DELRA						
Witness here if subject signed with an "X".												PAGE 1 OF 1													

COUG DATE ATTORNEY FERRY CENTRAL RECORDS PA CHAS ANTHONY 1/16 IMPROVANT

11:07 PM 1:23

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 N.T.A. 3 Request for Warrant 4 Request for Capias		1	JUVENILE
ADMINISTRATIVE	Agency ORI Number	Agency Name	Agency Report Number				
	FL 0500400	DELRAY BEACH POLICE DEPARTMENT	4 0 17-002119				
CHARGES	Charge Type Check as many as apply		Special Notes				
	<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						
DEFENDANT	Name (Last, First, Middle)				Race	Sex	Date of Birth
	D'AURIA, MATTHEW QUENTIN				W	M	11/23/1983
VICTIM	Charge Description				Charge Description		
	877.111(1) INHALE/INGEST HARMFUL CHEMICALS						
VICTIM	Victim's Name (Last, First, Middle)				Race	Sex	Date of Birth
	State Of Florida						
VICTIM	Local Address (Street, Apt. Number) (City) (State) (Zip)				Phone		Address Source
	Business Address (Name, Street) (City) (State) (Zip)				Phone		Occupation
<p>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.</p> <p>The Person taken into custody . . .</p> <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to _____ admitting to the below facts. </div> <div> <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 my (described) investigation. </div> </div> <p>On the <u>7</u> day of <u>February</u>, <u>2017</u> at <u>11:16</u> (Specifically include facts constituting cause for arrest.)</p>							
<p>This incident occurred within the City of Delray Beach, Palm Beach County FL;</p> <p>On 02/07/2017 at 1100 hours, A witness by the name of Anthony Gangale called 911 and said a former client of his identified as Matthew D'Auria was actively huffing on an aerosol can on the East side of Target (1200 W. Linton Blvd). Gangale said D'Auria was wearing a bright orange #23 jersey and was holding an aerosol can.</p> <p>Upon my arrival, I observed a W/M wearing a bright orange #23 jersey actively huffing. I ran up and grabbed the aerosol can from the subject, who was later identified as Matthew D'Auria. When I grabbed the can, he passed out and remained unconscious for about a minute. He then regained consciousness and appeared to be fine. Ofc Siegel arrived as my back-up officer at this time. As DBFD was checking on D'Auria, he lunged for the Endust aerosol can and began huffing in front of officers and members of DBFD. Ofc Siegel and I wrestled the can away from D'Auria and placed him in handcuffs. Once DBFD cleared D'Auria, he was arrested for inhaling/ingesting a harmful chemical.</p> <p>Based on the above stated facts, Matthew D'Auria did unlawfully inhale, ingest or possess with intent to breathe, inhale or drink any compound, liquid or chemical containing toluol, hexane, trichloroethylene, acetone, toluene, ethyl acetate, methyl ethyl ketone, trichloroethane, isopropanol, methyl isobutyl ketone, ethylene glycol monomethyl ether acetate, cyclohexanone, nitrous oxide, diethyl ether, alkyl nitrites (butyl nitrite) or any similar substance for the purpose of inducing a condition of intoxication or which distorts or disturbs the auditory, visual or mental processes, contrary to Florida Statute 877.111(1).</p>							
ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME				SIGNATURE OF ARRESTING / INVESTIGATING OFFICER		
	 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <u>02/07/2017</u> DATE				 WARNE, MATTHEW (0958) NAME OF OFFICER (PLEASE PRINT) <u>02/07/2017</u> DATE		

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.