

2018MM001655

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

1 Juvenile

OBTS Number		Agency ORI Number FLO 5 0 0 0 0		Agency Name PALM BEACH COUNTY SHERRIF'S OFFICE		Agency Report Number 06 18036178				
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 n/a		Multiple Clearance Indicator 0 1						
Location of Arrest (Including Name of Business) 22861 CASCADE RD Boca Raton FL 33428				Location of Offense (Including Name of Business) 22861 CASCADE RD Boca Raton FL 33428						
Date of Arrest Feb 8, 2018	Time of Arrest 09:33	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle				
Name (Last, First, Middle) Braica Michael A				Alias (Name, DOB, Soc. Sec. # Etc.)						
Race W - White B - Black O - Oriental/Asian	Sex M	Date of Birth 04/14/1961	Height 5'11	Weight 230	Eye Color Hazel	Hair Color Black	Complexion Light	Build Large		
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status		Religion		Indication of Alcohol Influence Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk <input type="checkbox"/>		
Local Address (Street, Apt. Number) 22861 CASCADE RD		City Boca Raton		State FL		Zip 33428		Phone 561-856-0390		
Permanent Address (Street, Apt. Number)		City		State		Zip		Phone		
Business Address (Street, Apt. Number)		City		State		Zip		Phone		
DL Number, State B620-541-61-134-0		Social Security Number		INS Number		Place of Birth Spring Field, Ma		Citizenship US		
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile		
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other	Name (Last, First, Middle)						Phone			
Address (Street, Apt. No.)		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 561-365-2526) informed of any address change. <input checked="" type="checkbox"/> Yes, by (Name) <input type="checkbox"/> No (Reason)						School Attended				
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 B 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	P Paraphernalia/ Equipment	U Unknown Z Other
Charge Description Disorderly Conduct		Counts 1	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 877.03		Violation or ORD. #				
Drug Activity N/A	Drug Type N/A	Amount/Unit	Offense # 18036178	Warrant/Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation or ORD. #				
Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation or ORD. #				
Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation or ORD. #				
Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number		Bond				
Location (Court, Address, Room Number) South County Courthouse 200 W Atlantic Ave Delray Beach FL33444										
Court Date and Time Month 3 Day 8 Year 2018 Time 0830 AM <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 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)				Date Signed						
HOLD for Other Agency		Signature of Arresting Officer <i>[Signature]</i>		Name Verification (Printed by Arrestee)						
Name <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		Registered Arrest <input type="checkbox"/> Other		Name of Arresting Officer D/S Gayle		ID # 8242				
Intake Deputy		ID # Pouch #		Transporting Officer Fraga 9681		Agency PBSO				
Witness here if subject signed with an "X"						Page 1 of 1				

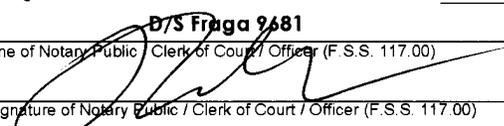
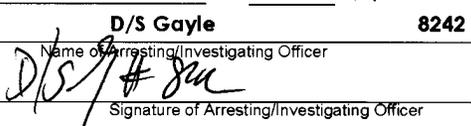
NOT A CERTIFIED COPY
2018 FEB -9 AM 5:34
SHERIFF'S OFFICE
PALM BEACH COUNTY
GUM OLUB RRAH

SCANNED
FEB 09 2018

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 5 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 06 18036178			
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 _____		Special Notes		
Defendant Name (Last, First, Middle) Braica Michael A				Race W	Sex M	Date of Birth 04/14/1961		
Charge Disorderly Conduct				Charge				
Victim 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 (Street, Apt. Number)		City	State	Zip	Phone	Occupation		
The undersign 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 checked="" 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 type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.								
On the 8th day of February 20 18 at 0933 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM								

On 2/8/2018 at 09:04hrs I responded to 22861 CASCADE RD in unincorporated Boca Raton, FL 33428 in reference to a disturbance. Upon my arrival I observed defendant Michael Braica standing outside on the front lawn of his residence yelling obscene abusive language at his girlfriend Debroah Fuller. Let it be noted I responded to this residence earlier this morning for neighborhood trouble with the defendant. I gave Michael several verbal commands to stop yelling and disturbing the peace of the neighborhood. He refused to stop yelling and stated my girlfriend is a "Cunt Bitch" get her out my house." Michael appeared to be intoxicated and I could smell an odor of alcohol coming from his facial area. I ask Michael has he been drinking and stated I had a few beers today. Michael continued to yell obscene language and refused to return back inside his home. At this point, Michael was detained and refused to cooperate with my investigation. I then made contact with witness Lee Obrien and she told me the following: Earlier this morning I observed and heard Michael yelling at his girlfriend outside on the sidewalk. I approached him and ask him to leave her alone and he threatened to shoot me. I then returned back to my home.

During my investigation I also made contact with witness Lyon Walls and Chance Garner who completed a sworn written statement and told me that they observed and heard Michael yelling obscene language. They both live in the neighborhood and were disturbed by the loud yelling Michael was causing. Based on my investigation and the statements provide by all parties involved defendant Michael Braica did intentionally violate FSS 877.03 Disorderly Conduct. Michael was placed under arrest and handcuffs were placed on both his hands. Michael was later transported to Palm Beach County Jail for further processing.

The foregoing instrument was sworn to and affirmed before me this 8 day of February 20 18 , by:			
D/S Fraga 9681		D/S Gayle 8242	
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)		Name of Arresting/Investigating Officer	
			
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)		Signature of Arresting/Investigating Officer	
			Page 1 of 1

SCANNED
FEB 19 2018