J#0504982 (NIR) P# 32977

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number | 1: Arrest 2: N.T.A. 3: Request for Warrant 4: Request for Capias | 1 | Juvenile

ADMINISTRATIVE

Agency ORI Number: FLO 5 0 0 0 0 0 | Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE | Agency Report Number: 06-19-031887

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: U

Location of Arrest (including Name of Business): 3200 Belvedere Rd. WPB FL 33406 PBIA | Location of Offense (Business Name, Address): 3200 Belvedere Rd. WPB FL PBIA

Date of Arrest: 01/31/19 | Time of Arrest: 1530 | Booking Date | Booking Time | Jail Date | Jail Time | Location of Vehicle

DEFENDANT

Name (Last, First, Middle): RAY Nicole C | Alias (Name, DOB, Soc. Sec. #, Etc.)

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	04/25/77	5'4"	130	Blue	Brn	Med	Med

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): Face, Indian Feature Bull | Marital Status: M | Religion: None | Indication of: Alcohol Influence, Drug Influence (Y / N / Unk.)

Local Address (Street, Apt. Number) (City) (State) (Zip) | Phone: 561 0130248 | Residence Type: 1. City 2. County 3. Florida 4. Out of State: 4

Permanent Address (Street, Apt. Number): 15 Valley Dr E66 (City): Harbor Township (State): NJ (Zip): 08234 | Phone: ( ) | Address Source: Dept DL

Business Address (Name, Street) (City) (State) (Zip) | Phone: ( ) | Occupation: Personal Trainer

DL Number, State: R0952597335477 2 | Soc. Sec. Number: [redacted] | INS Number | Place of Birth (City, State): Los Angeles Calif. | Citizenship: US

CO-DEF.

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

JUVENILE

Parent / Legal Custodian / 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 ☐ defendant and / or ☐ 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. ☐ Yes, by: (Name) ☐ No: (Reason) | School Attended | Grade

Property Crime? ☐ Yes ☐ No | Description of Property | Value of Property

CODE

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, O. Opium/Deriv., P. Paraphernalia/ Equipment, S. Synthetic, U. Unknown, Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
CCW (knife)	1	☐Y ☒N	790.01 (1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
			19-031887		OR

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

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CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

NOTICE TO APPEAR

Location (Court, Room Number, Address)

Court Date and Time: Month Day Year Time A.M. P.M.

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) | Date Signed

ADMIN.

HOLD for other Agency Name: | Signature of Arresting Officer: x | Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other: | Name of Arresting Officer (Print): Daniel Pari | I.D. #: 4650

Intake Deputy: ORIGINAL SIGNED | I.D. # | Booked # | Transporting Officer: DSO Kirchen | I.D. #: 3142 | Agency: PBSO | Witness here if subject signed with an "X"

SCANNED FEB - 1 2019

PAGE 1 OF 1

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PBSO #148 REV. 8/97

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2019 FEB -1 AM 8:06

PROBABLE CAUSE AFFIDAVIT

OBTS Number:

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

Juvenile:

ADMIN.

Agency ORI Number: FL0 5 0 0 0 0 0

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 06-19-031887

Charge Type: Check as many as apply. ☑ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF.

Name (Last, First, Middle): Ray Nicole L

Alias:

Race: W Sex: F Date of Birth: 09/25/72

CHARGES

Charge Description: CCW

Charge Description:

Charge Description:

Charge Description:

VICTIM

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:

PROBABLE CAUSE STATEMENT

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.

☑ confessed to _____ admitting to the below facts.

☑ was observed by DA who told D/S Davis 4650 that he/she saw the arrested person commit the below acts.

☐ was found to have commited the below acts, resulting from my (described) investigation.

On the 31 day of January 2019 at _____ ☐ A.M. ☑ P.M. (Specifically include facts constituting cause for arrest.)

ON 1/31/19 AT 1510 I RESPONDED TO C-SCREEN ON REPORT OF A PASSENGER IN POSSESSION OF A SWITCHBLADE KNIFE. UPON ARRIVAL I MET WITH DEP. NICOLE RAY WHO STATED SHE WASN'T AWARE THAT IT WAS ILLEGAL AND HAS BEEN TRAVELING WITH IT FOR YEARS. I SPOKE WITH TSA AARON JONES WHO STATED WHILE SCREENING THE PASSENGERS BAG HE FOUND THE SAID KNIFE THAT HAD SHOWED UP ON THE X-RAY SCREEN. AARON STATED IT WAS A GREEN SWITCHBLADE KNIFE. NICOLE WAS ARRESTED AND CHARGED WITH CCW 790.01-2 AND TRANSPORTED TO PBSO JAIL [redacted]

NO PRIORS AT THIS TIME

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer) 4650

The foregoing instrument was sworn to or affirmed and subscribed before me this 31 day of January 2019 by D/S Rich Siciliano

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced _____

D/S #4872

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

ADMINISTRATIVE

PAGE 1 OF 1

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PBSO # 0004 REV. 04/01

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Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	3
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2019003536	**Date:** 1/31/2019
	Specialist Name/ID: J. Beck/9007