~~SS~~#0588871   19mm007404   PD#3254

ARREST / NOTICE TO APPEAR

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

ADMINISTRATION

OBTS Number			
Agency ORI Number: 0500400	Agency Name: Delray Beach Police Department	Agency Report Number (N.T.A.'s only): 4 0 19-009880	
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: None/not Applicable	Multiple Clearance Indicator: 1
Location of Arrest (Including Name of Business): 1400 WATERFORD PL, DELRAY BEACH,FL		Location of Offense (Business Name, Address): 1400 WATERFORD PL, DELRAY BEACH, FL 33444	
Date of Arrest: 06/21/2019	Time of Arrest: 13:40	Booking Date: 06/21/2019	Booking Time: 13:50
Jail Date:	Jail Time:	Location of Vehicle:	

DEFENDANT

Name (Last, First, Middle): DILLUVIO, PATRIZIA BENEDETTA					Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:				
Race (W - White, B - Black, I - American Indian, O - Oriental/Asian): W	Sex: F	Date of Birth: 07/11/1976	Height: 5'03	Weight: 140	Eye Color: BLUE	Hair Color: BROWN	Complexion: FAIR	Build: SMALL	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description):					Marital Status: S	Religion: NOT INDICA	Indication of: Alcohol Influence Yes ☐ No ☒ Unk. ☐; Drug Influence Yes ☐ No ☒ Unk. ☐		
Local Address (Street, Apt. Number) (City) (State) (Zip): 1646 NW 8TH ST, BOCA RATON, FL 33486					Phone: (917) 623-3737		Residence Type (1. City 2. County 3. Florida 4. Out of State): 2		
Permanent Address (Street, Apt. Number) (City) (State) (Zip): 1646 NW 8TH ST, BOCA RATON, FL 33486					Phone: (917) 623-3737		Address Source: VERBAL		
Business Address (Name, Street) (City) (State) (Zip):					Phone:		Occupation:		
D/L Number, State: 502874625 / NY	Soc. Sec. Number: [redacted]	INS Number:			Place of Birth (City, State): BRONX, NY		Citizenship: US		

CO-DEFENDANTS

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	
				☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
				☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Other: ☐ 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 ☐ 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: ☐ No:

School Attended: Grade:

Property Crime? ☒ Yes ☐ No | Description of Property: PAINT,GLUE,LIGHT | Value of Property: $148

CODES

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						Statute Violation Number	Violation of ORD #
THEFT RETAIL (SHOPLIFTING)						812.015(1)(D)	
Drug Activity:	Drug Type: N	Amount / Unit: /	Offense #:	Counts: 1	Domestic Violence: ☐ Y ☒ N	Warrant / Capias Number: (812.014 3A)	Bond: OR

Charge Description						Statute Violation Number	Violation of ORD #
Drug Activity:	Drug Type:	Amount / Unit: /	Offense #:	Counts:	Domestic Violence: ☐ Y ☐ N	Warrant / Capias Number:	Bond:

Charge Description						Statute Violation Number	Violation of ORD #
Drug Activity:	Drug Type:	Amount / Unit: /	Offense #:	Counts:	Domestic Violence: ☐ Y ☐ N	Warrant / Capias Number:	Bond:

INTAKE

Health / Apparent Physical Condition of Defendant: | Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries Explain:

Check which applies: ☐ Released O.R. ☐ Posted Bond ☐ Released to Parent/Guardian ☐ South County Mental Health ☒ T.O.T. County Jail | PROPERTY - Received By | Released By | Released To

Transported By: | Date Transported: / / | Time Transported: : | Other:

NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court
☐ 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: 07/18/2019 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]
Signature of Defendant (or Juvenile and Parent/Custodian)   Date Signed

2019 JUN 22 AM 7:22

ADMIN

HOLD for Other Agency ☐ Dangerous ☐ Suicidal ☐ Resisted Arrest	Signature of Arresting Officer: [signature]		Name Verification (Printed by Arrestee) (PRINT)
	Name of Arresting Officer (Print): COLLARETTI, ANDREW	I.D. #: 0962	
Intake Deputy: I.D. #	Pouch #:	Transporting Officer: COLLARETTI I.D. #: 962 Agency: DBPD	PAGE 1 OF 1
			Witness here if subject signed with an "X".

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P.I.O. ☒ DEFENDANT

SCANNED JUN 22 2019

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	Agency Name	Agency Report Number
FL 0500400	DELRAY BEACH POLICE DEPARTMENT	4 0 19-009880

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)	Alias	Race	Sex	Date of Birth
DILLUVIO, PATRIZIA BENEDETTA		W	F	07/11/1976

CHARGES

Charge Description	Charge Description
812.015(1)(D) THEFT RETAIL (SHOPLIFTING)	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
HOME DEPOT,			

Local Address (Street, Apt Number) (City) (State) (Zip)	Phone	Address Source
1400 WATERFORD PL, DELRAY BEACH, FL 33444	(561) 272-5127	
Business Address (Name, Street) (City) (State) (Zip)	**Phone**	**Occupation**
	(561) 272-5127	RETAILER

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 LOSS PREVENTION who told POLICE that he/she saw the arrested person commit the below acts.
☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 21 day of June, 2019 at 13:40 (Specifically include facts constituting cause for arrest.)

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

On 06/21/2019 at approximately 1340 hours, DBPD officers and I were conducting a retail theft operation at 1400 Waterford Pl (Home Depot). Loss Prevention Officer Shaun Kirk notified Ofc. Defranco that a white female,later identified as Patrizia Dilluvio by NY/DL, was in the self service checkout line and did not scan multiple items. The items not scanned were 3 cans of paint valued at $82.94, Gorilla Glue valued at $5.77 and LED lights valued at $59.94. In total the sum of all items was $ 148.65.

Kirk provided a sworn statement indicating the facts behind the theft and that Home Depot wishes to prosecute.

Due to the above stated facts, there is probable cause to charge the defendant, Patrizia Dilluvio, with Retail Theft, Pursuant to FSS 812.015(1)(d).

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

DEBREE, MICHAEL
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

06/21/2019
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

COLLARETTI, ANDREW (0962)
NAME OF OFFICER (PLEASE PRINT)

06/21/2019
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

PALM BEACH COUNTY
SHERIFF'S OFFICE
Florida State Statute Exemption Sheet

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.	
	☐	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:	

REVIEW COMPLETED BY

Booking Number: 2019020434	**Date:** 06/22/2019
	Specialist Name/ID: AM/31562