0261222 ISC1 20079

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1 Arrest 3. Request for Warrant
2 NTA 4 Request for Capias

Juvenile

ADMINISTRATIVE

OBTS Number

Agency ORI Number: FL0500000 | Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE | Agency Report Number: 061-11141191

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: 01

Location of Arrest (Includes Name of Business): 1225 45th St

Location of Offense (Business Name, Address): MAGNOLIA PARK 33407

Date of Arrest: 11051 | Time of Arrest: 1057 | Booking Date | Booking Time | Jail Date | Jail Time | Location of Vehicle

DEFENDANT

Name (Last, First, Middle): MALDONADO, RICARDO

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	M	08191968	5'8"	210	BR	BR	PGB	MED

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): TATTOO OF BATMAN SHOULDER.

Marital Status: MARRIED | Religion: CATHOLIC | Indication of Alcohol Influence / Drug Influence: Y N Unk

Local Address (Street, Apt. Number) (City) (State) (Zip) | Phone: (561)729-8311 | Residence Type: 1 City, 2 County, 3 Florida, 4 Out of State

Permanent Address (Street, Apt. Number): 7842 SAGEBRUSH PT. | (City): ORLANDO | (State): FL | (Zip): 32822 | Phone: ( ) | Address Source: DL

Business Address (Name, Street) (City) (State) (Zip): 32822 | Phone: ( ) | Occupation: CONTRACTOR

D/L Number, State: M435920682990 [redacted] | INS Number | Place of Birth (City, State): NEW YORK. | Citizenship: US.

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	In Custody: 1 Arrested, 2 At Large	Offense: 3 Felony, 4 Misdemeanor, 5 Juvenile
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	In Custody: 1 Arrested, 2 At Large	Offense: 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, D Deliver, E Use, R Smuggle, 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 #
NO VALID DL.	1	☐Y ☐N	322.03	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		11141191		

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

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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): PALM BCH County Courthouse 3228 Gun Club Rd WPB FL 33406

Court Date and Time: Month 11 | Day 28 | Year 18 | Time 1:30 | 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.

X [signature] — Signature of Defendant (or Juvenile and Parent/ Custodian) — Date Signed: 11/5/2018

ADMIN

HOLD for other Agency Name

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Intake Deputy | ID # | Pouch #

Signature of Arresting Officer: [signature] 8257

Name of Arresting Officer (Print): [illegible] ID # PB50

Transporting Officer | ID # | Agency

Name Verification (Printed by Arrestee) (PRINT)

NOV 5 2018 11:27

Witness here if subject signed with an "X"

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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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:	

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REVIEW COMPLETED BY

Booking Number: 2018037019	**Date:** 11/5/2018
	Specialist Name/ID: J. Beck/9007