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Rough Arrest Only

OBTS Number			ARREST / NOTICE TO APPEAR Juvenile Referral Report						1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	Juvenile	
ADMINISTRATION	Agency ORI Number		Agency Name		PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number		1	
	FL0500000								06-17-026776			
Charge Type: Check as many as apply.			<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			Weapon Seized/Type		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Multiple Clearance Indicator 0 1		
Location of Arrest (Including Name of Business)			Location of Offense (Business Name, Address)						Type			
14775 Lyons Road, Delray Beach, FL 33446 - Frank Theatres			Same 14775 Lyons rd, Delray Beach, FL 33446									
Date of Arrest		Time of Arrest		Booking Date		Booking Time		Jail Date		Jail Time		
Jan 14, 2017		2211										
Name (Last, First, Middle) MCCARTHY, ROBERT W												
DEFENDANT	Race W - White I - American Indian B - Black O - Oriental/Asian		Sex W	Date of Birth Apr 30, 1993	Height 6-00	Weight 185	Eye Color Brown	Hair Color Brown	Complexion Light	Build Med		
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status Single		Religion Unk		Indication of: Alcohol Influence Drug Influence	
Local Address (Street, Apt. Number)			(City) 5604 ARBOR CLUB WAY APT 5	(State) Boca Raton	(Zip) Florida 33433	Phone ()		Residence Type 1 City 3 Florida 2 County 4 Out of State				
Permanent Address (Street, Apt. Number)			(City)	(State)	(Zip)	Phone ()		Address Source FI D/L				
Business Address (Street, Apt. Number)			(City)	(State)	(Zip)	Phone ()		Occupation				
D/L Number, State M-263-779-83-150-0			Soc. Sec. Number		INS Number		Place of Birth Rhode Island		Citizenship USA			
Co-Defendant Name (Last, First, Middle) Derrick A Miranda			Race W	Sex M	Date of Birth Aug 7, 1992	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input checked="" 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 checked="" type="checkbox"/> 4. Misdemeanor		<input type="checkbox"/> 5. Juvenile		
CO-DEF	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other			Name (Last) (First) (Middle)			Residence Phone ()					
	Address (Street, Apt. Number)			(City)	(State)	(Zip)	Business Phone ()					
JUVENILE	Notified by: (Name)			Date	Time	Juvenile Disposition						
	Released To: (Name)			Relationship	FCIC/NCIC	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 informed of any change of address.							School Attended			Grade		
<input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)												
Recovery Information												
0. N/A 1. Voluntary 2. Located Not Returned 3. Hospitalized 4. H.R.S Custody 5. Law Enforcement Custody 6. Returned to Parent 7. Deceased 8. Other												
CODE	Drug Activity		S. Sell N. N/A P. Possess	R. Smuggle B. Buy D. Deliver	K. Dispense/ Distribute L. Manufacture M. Produce/ Cultivate	Z. Other	Drug Type		B. Barbituate C. Cocaine A. Amphetamine	H. Hallucinogen M. Marijuana E. Heroin	P. Paraphernalia/ Equipment O. Opium/Deriv.	U. Unknown Z. Other S. Synthetic
	Drug Activity		Amount/Unit		Offense #		Counts 1		Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Statute Violation Number 877.03	
CHARGE	Charge Description Disorderly Conduct / Breach			Counts		Domestic Violence		Statute Violation Number				Violation of ORD #
	Drug Activity			Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond
CHARGE	Charge Description P			Counts		Domestic Violence		Statute Violation Number				Violation of ORD #
	Drug Activity			Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond
CHARGE	Charge Description			Counts		Domestic Violence		Statute Violation Number				Violation of ORD #
	Drug Activity			Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond
CHARGE	Charge Description			Counts		Domestic Violence		Statute Violation Number				Violation of ORD #
	Drug Activity			Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond
NOTICE TO APPEAR	<input type="checkbox"/> Instruction No. 1 <input type="checkbox"/> Mandatory Appearance in Court			Location (Court, Room Number, Address) 200 W. Atlantic Avenue, Delray Beach, FL 33444								
	<input type="checkbox"/> Instruction No. 2 <input type="checkbox"/> You need not appear in Court but must <input type="checkbox"/> Comply with instructions on reverse side.			Court Date and Time Month February Day 9 Year 2017 Time 08 :30 AM								
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 of Arresting Officer X				Name Verification (Printed by Arrestee) (PRINT)				Date Signed 2017				
HOLD for other Agency Name: <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:				Name of Arresting Officer (Print) D/S Vislocky				I.D. # 7119				
Intake Deputy D. # Pouch #				Transporting Officer D/S Moore S2017				Signature here if subject signed with an 'X' 1 OF 1				

Signature of Defendant (or Juvenile and Parent/Custodian)

Date Signed

HOLD for other Agency Name:		Signature of Arresting Officer		Name Verification (Printed by Arrestee)™ (PRINT)	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other: _____		Name of Arresting Officer (Print) I.D. #		D/S Virocky 7119	
Intake Deputy I.D. #		Transporting Officer I.D. #		D/S Moore 57	
Pouch # <i>7105</i>					
Please sign here if subject signed with an 'X' <i>X</i>					
PBSO # REV. 6/9/07					

PBSO # 1-3 REV. 6/97

Signature of Defendant (or Juvenile and Parent/Custodian)

Name Verification (Printed by Arrestee)

HOLD for other Agency _____ Signature of Arresting Officer _____ Name Verification (Printed by Arrestee) _____

Name: _____ X _____ (PRINT) _____

Dangerous Resisted Arrest Name of Arresting Officer (Print) I.D. # PAGE

A Suicidal Other: _____ D/S Viskoky 7119 5 PAGE

Intake Deputy / D. # Pouch # Transporting Officer

Check here if subject signed with an "X" _____

PBSO # 145 REV. 6/97

Digitized by srujanika@gmail.com

JAN 16, 2017

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2024-01-15 22:25:55

SEARCHED 7-3 AM 12/30

JAN 16 2017

Jan 15 2012 55

OBTS Number

PROBABLE CAUSE AFFIDAVIT

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

Agency ORI Number FLO 5 0 0 0 0 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06			
Charge Type Check as many as apply	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) McCarthy	Robert	William	Race W	Sex M	Date of Birth 4/30/93
Charge Disorderly Conduct	Charge				
Charge	Charge				
Victim Name (Last, First, Middle) State of Florida				Race	Sex
Local Address (Street, Apt. Number)	City	State	Zip	Phone	Address Source
Business Address (Street, Apt. Number)	City	State	Zip	Phone	Occupation
The undersigned 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 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 checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.		
On the <u>14th</u> day of <u>January</u> 20 <u>17</u> at <u>10:11</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM					

On the above date and time I responded to Frank Theater located at 14775 Lyons Rd in regard to a disturbance in progress. D/S Donna Korb, who was working on duty assigned to the shopping center, initially responded to a complaint of a disturbance in the outside bar area of the theater. On scene D/S Korb intervened in an altercation between the theater manager, Robert DeLeo, and Robert McCarthy where McCarthy, after being asked to leave by DeLeo, grabbed DeLeo in a bear hug and took him to the ground. D/S Korb placed McCarthy into handcuffs and secured him. At this time a large crowd was forming and disrupting the business. Derrick Miranda then confronted and challenged D/S Korb interfering in her taking custody of McCarthy. D/S Korb had to display her baton giving several lawful commands to get Miranda to back off for officer safety which Miranda compromised. Miranda was then also secured in handcuffs by other responding deputies. Based on my investigation on scene and the sworn statement of the theater manager, Robert DeLeo I determined that probable cause exists to charge Derrick Miranda with disorderly conduct under FSS 877.03 and resisting without violence under FSS 843.02. I also determined probable cause exists to charge Robert McCarthy with disorderly conduct under FSS 877.03.

The foregoing instrument was sworn to and affirmed before me this 14th day of January 20 17, by:

D/S Moore 22071
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)

D/S John Viskicky 17114
Name of Arresting/Investigating Officer

Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)

Signature of Arresting/Investigating Officer

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