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2017MM8349 3464

ADMINISTRATION	OBTS Number			ARREST / NOTICE TO APPEAR Juvenile Referral Report						1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1 Juvenile	N	
	Agency ORI Number <b>FL 0 5 0 0 3 0 0</b>			Agency Name <b>BOYNTON BEACH POLICE DEPT.</b>						Agency Report Number <b>34-17-036852</b>				
DEFENDANT	Charge Type: Check as many as Apply.			<input type="checkbox"/> 1. Felony <input 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			If Weapon Seized Enter Type			Multiple Clearance Indicator				
	Location of Arrest (Including Name of Business) <b>Intercoastal Park, 2240 N. Federal Hwy, Boynton Beach</b>			Location of Offense (Business Name, Address) <b>Intercoastal Park, 2240 N. Federal Hwy, Boynton Beach</b>										
	Date of Arrest <b>07/01/2017</b>		Time of Arrest <b>2214</b>		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle	
	Name (Last, First, Middle) <b>Ellison, Steven Joseph</b>													
	Alias (Name, DOB, Soc. Sec. #, Etc)													
	W - White I - American Indian B - Black O - Oriental / Asian			Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>07/09/67</b>	Height <b>602</b>	Weight <b>190</b>	Eye Color <b>BLUE</b>	Hair Color <b>BLONDE</b>	Complexion <b>Fair</b>	Build <b>Med</b>		
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status		Religion		Indication of: Y N Unk. Alcohol Influence <input type="checkbox"/> <input type="checkbox"/> Drug Influence <input type="checkbox"/> <input type="checkbox"/>			
	Local Address (Street, Apt. Number) <b>2458 SW 42nd Ave, Unit 3H, Boynton Beach</b>			(City) <b>FL</b>		(State) <b>33317</b>		Phone ( ) -		Residence Type 1. City 3. Florida 2. County 4. Out of State				
	Permanent Address (Street, Apt. Number)			(City)		(State)		Phone ( ) -		Address Source				
	Business Address (Street, Apt. Number)			(City)		(State)		Phone ( ) -		Occupation				
D/L Number, State <b>E425790672490/ FL</b>			Soc. Sec. Number <b>0</b>		INS Number			Place of Birth <b>Boston</b>		Citizenship <b>United States</b>				
CO-DEF	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 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 type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile						
JUVENILE	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other			(First) <b>BR</b> (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 <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 561-355-2526) informed of any change of address: <input type="checkbox"/> Yes, By: (Name) <input type="checkbox"/> No: (Reason)								School Attended				Grade		
Property Crime?		Description of Property						Value of Property						
Yes <input type="checkbox"/> No <input type="checkbox"/>														
CODE	S. Sell N. N/A P. Possess	R. Smuggle B. Buy T. Traffic	K. Dispense/ D. Deliver E. Use	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine	B. Barbituate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetic	U. Unknown Z. Other				
CHARGE	Charge Description <b>Disorderly Intoxication</b>			Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number <b>856.011</b>		Violation of ORD#					
CHARGE	Drug Activity <b>N</b>	Drug Type <b>N</b>	Amount/Unit	Offense # <b>17-036852</b>				Warrant/Capis Number		Bond				
CHARGE	Charge Description			Counts	Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number		Violation of ORD#					
CHARGE	Drug Activity	Drug Type	Amount/Unit	Offense #				Warrant/Capis Number		Bond				
CHARGE	Charge Description			Counts	Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number		Violation of ORD#					
CHARGE	Drug Activity	Drug Type	Amount/Unit	Offense #				Warrant/Capis Number		Bond				
CHARGE	Charge Description			Counts	Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number		Violation of ORD#					
CHARGE	Drug Activity	Drug Type	Amount/Unit	Offense #				Warrant/Capis Number		Bond				
NOTICE TO APPEAR	<input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court <input type="checkbox"/> Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side.			Location (Court, Room Number, Address) <b>South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444</b>										
NOTICE TO APPEAR				Court Date and Time		Month	Day	Year	Time	<input type="checkbox"/> A.M. <input type="checkbox"/> 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: <b>Thomas 7836.</b>			Signature of Arresting Officer <b>S. A. Dornan</b>			Name Verification (Printed by Arrestee) (PRINT) <b>7/1</b>							
ADMIN.	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal			<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:  <b>D. Wagner</b>			Name of Arresting Officer (Print) Transporting Officer I.D. # <b>BBPD</b>			I.D. # Agency <b>BBPD</b>				
ADMIN.	Intake Deputy			Pouch #							Witness here is subject Signed with an 'X.'			

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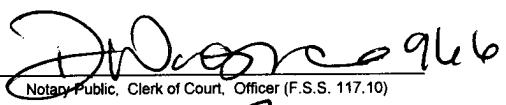
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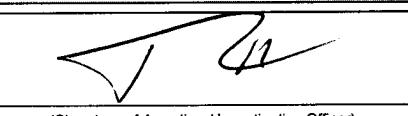
OBTS Number		PROBABLE CAUSE AFFIDAVIT				1 Arrest 2 NTA	3 Request for Warrant 4 Request for Capias	1	Juvenile N								
Agency ORI Number <b>FL 0 5 0 0 3 0 0</b>	Agency Name <b>BOYNTON BEACH POLICE DEPT.</b>	Agency Report Number <b>34 -17-036852</b>															
Charge Type Check all that Apply	<input type="checkbox"/> 1 Felony <input checked="" type="checkbox"/> 3 Misdemeanor <input type="checkbox"/> 2 Traffic Felony <input type="checkbox"/> 4 Traffic Misdemeanor	<input type="checkbox"/> 5 Ordinance <input type="checkbox"/> 6 Other	Special Notes														
Name (Last, First, Middle) <b>Ellison, Steven Joseph</b>	Alias			Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>07/09/67</b>											
Charge Description <b>Disorderly Intoxication</b>	Charge Description																
Charge Description	Charge Description																
Victim's Name (Last, First, Middle) <b>Tolbert, Sam</b>	Race <b>W</b>	Sex <b>M</b>	Date of Birth														
Local Address (Street, Apt Number) <b>100 E. Boynton Beach Blvd</b>	(City) <b>Boynton Beach</b>	(State) <b>FL</b>	(Zip) <b>33435</b>	Phone <b>561-742-6000</b>	Address Source												
Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation												
<p>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..</p> <table> <tr> <td><input type="checkbox"/> Committed the below acts in my presence.</td> <td><input type="checkbox"/> Was observed by</td> <td>Who told</td> <td>That he/she saw the arrested person commit the below acts.</td> </tr> <tr> <td><input type="checkbox"/> Confessed to</td> <td>Admitting the below facts</td> <td><input checked="" type="checkbox"/> Was found to have committed the below acts, resulting from my (described) investigation.</td> <td></td> </tr> </table> <p>On The <b>1</b> Day of <b>July</b> <b>20 17</b> At <b>1014</b> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.</p>										<input type="checkbox"/> Committed the below acts in my presence.	<input type="checkbox"/> Was observed by	Who told	That he/she saw the arrested person commit the below acts.	<input type="checkbox"/> Confessed to	Admitting the below facts	<input checked="" type="checkbox"/> Was found to have committed the below acts, resulting from my (described) investigation.	
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I made contact with the victim BBFD Lt. Sam Tolbert. Tolbert stated he was approached by the suspect W/M Steven Ellison (DOB 7/9/67). Tolbert stated Ellison's eyes were bloodshot and glassy. Ellison was slurring his words and was spitting as he spoke to Tolbert. Tolbert stated Ellison was unable to maintain his balance and kept falling into Tolbert. Tolbert stated he smelled the odor of an unknown alcoholic beverage emitting from Ellison's breath. Tolbert stated he listened as Ellison spoke for approximately 10 minutes, rambling incoherently. Ellison then walked away. Tolbert then stated Ellison approached him a second time with his hand out and began slurring his words again. Tolbert was unable to understand what Ellison was saying. Ellison then stated, "If you were a gentleman you would've shaken my hand" and walked away a second time. Tolbert then approached Ellison a third time in a threatening manner and stated, "You're a punk" and began verbally threatening Tolbert, stating he would break Tolbert's jaw. At this time Tolbert was able to flag down a BBPD officer and advise what was happening. Ellison was then detained (double locked and checked for spacing.) Tolbert provided a sworn statement via BWC (Body Worn Camera).

Based on the above facts I find probable cause to charge Ellison with Disorderly Intoxication pursuant to F.S.S. 856.011. Ellison was subsequently processed and transported to PBCJ where he was turned over to PBCJ officials.

The foregoing instrument was sworn to or affirmed and subscribed before me

  
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)  
7/11/17  
Date

  
(Signature of Arresting / Investigative Officer)  
Off. A. Donahue 977  
(Print name of Arresting/Investigative Officer)  
07/01/17  
Date

SCANNED  
JUL 07 2017