

ARREST / NOTICE TO APPEAR

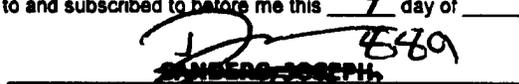
18MM/2018

ADMI NIST RATI ON	OBTS Number	Agency ORI Number 0502000		Agency Name Lantana Police Department		Agency Report Number (N T A's only) 6, 4 18-001330		Arrest 2 N T A	Request for Warrant 3	Request for Capias 4	1	JUVENILE
DEF END ANT	Charge Type Check as many as apply	3 Misdemeanor		5 Ordinance		6 Other		If Weapon Seized Emer Type: None/not Applicable		Multiple Clearance Indicator 1		
	Location of Arrest (Including Name of Business) 901 N 8TH ST, LANTANA FL 33462						Location of Offense (Business Name, Address) 1581 W LANTANA RD, LANTANA, FL 33462					
CO DEF E	Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle					
	06/07/2018	17:29	06/07/2018	17:39								
J U V E N I L E	Name (Last, First, Middle) RUOCCO, THOMAS SALVATORE 2						Alias (Name, DOB, Soc. Sec. #, Etc.) Alias:					
	Race	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build			
C O D E	W - White	I - American Indian	W	M	08/17/1972	6'01	212	BROWN	SALT &	LIGHT		
	B - Black	O - Oriental/Asian										
C H A R G E	Scars, Marks, Tattoos, Unusual Physical Features (Location, Type, Description)						Marital Status	Religion	Indication of Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>			
							M	CATHOLIC				
C H A R G E	Local Address (Street, Apt. Number)			(City)	(State)	(Zip)	Phone		Residence Type			
	1833 CORAL RIDGE DR, CORAL SPRINGS, FL 33071						(954) 825-3932		1 City 3 Florida			
C H A R G E	Permanent Address (Street, Apt. Number)			(City)	(State)	(Zip)	Phone		Address Source			
	1833 CORAL RIDGE DR, CORAL SPRINGS, FL 33071						(954) 825-3932		DEFENDENT			
C O D E	Business Address (Name, Street)			(City)	(State)	(Zip)	Phone		Occupation			
	DISABLED,								Iron Worker			
C O D E	D/L Number, State		Sec. Sec. Number		INS Number		Place of Birth (City, State)		Citizenship			
	R200837722970 / FL						QUEENS, NY		US			
C O D E	Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth		<input type="checkbox"/> 1 Arrested <input type="checkbox"/> 3 Felony <input type="checkbox"/> 5 Juvenile <input type="checkbox"/> 2 At Large <input type="checkbox"/> 4 Misdemeanor			
C O D E	Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth		<input type="checkbox"/> 1 Arrested <input type="checkbox"/> 3 Felony <input type="checkbox"/> 5 Juvenile <input type="checkbox"/> 2 At Large <input type="checkbox"/> 4 Misdemeanor			
C O D E	Name (Last, First, Middle)											
	<input type="checkbox"/> Parent <input type="checkbox"/> Other <input type="checkbox"/> Legal Custodian											
C O D E	Address (Street, Apt. Number)			(City)	(State)	(Zip)	Residence Phone					
C O D E	Notified by (Name)		Date	Time	JUVENTILE DISPOSITION		<input type="checkbox"/> 1 Handled/Processed within Department and Released <input type="checkbox"/> 2 TOT JAC <input type="checkbox"/> 3 Incarcerated					
C O D E	Released To (Name)				Relationship	Date	Time					
C O D E	The above address was provided by <input type="checkbox"/> defendant and/or <input type="checkbox"/> defendant's parents.						School Attended		Grade			
	The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address											
C O D E	<input type="checkbox"/> Yes, by <input type="checkbox"/> No						Property Crime?		Description of Property			
C O D E	Drug Activity	S Sell	R Snuggle	K Dispense/Distribute	M Manufacture/Produce/Cultivate	Z Other	Drug Type	B Barbiturate	H Hallucinogen	P Paraphernalia/Equipment	U Unknown	
	N N/A	B Buy	D Deliver	E Use			N N/A	C Cocaine	M Marijuana	O Opium/Heroin	Z Other	
C H A R G E	Charge Description BATTERY - SIMPLE TOUCH / STRIKE						Statute Violation Number 784.03 (1A)		Violation of ORD #			
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number		Bond			
C H A R G E	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number		Bond			
C H A R G E	Charge Description						Statute Violation Number		Violation of ORD #			
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number		Bond			
C H A R G E	Charge Description						Statute Violation Number		Violation of ORD #			
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number		Bond			
C H A R G E	Health / Apparent Physical Condition of Defendant						Any knowledge of the following <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries					
							Explain					
C H A R G E	Check which applies		Released O.R.		Released to Parent/Guardian		TOT County Jail		PROPERTY - Received By		Released By	Released To
C H A R G E	Transported By		Date Transported		Time Transported		Other					
	POLICE		06/07/2018		20:43							
C H A R G E	<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court						Location (Court, Room)		No Photo Available			
	<input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.											
C H A R G E	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			
C H A R G E	HOLD for Other Agency		Signature of Arresting Officer		Name Verification (Printed by Arrestee)							
C H A R G E	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print)		ID #		PAGE			
					GUARIN, EDGAR L.		866		1 OF 1			
C H A R G E	Intake Deputy		ID #		Pouch #		Transporting Officer		ID #		Agency	
							DORFMAN J		889		64	
C H A R G E	Witness here if subject signed with an "X"											

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

A D M I N	Date / Time 06/07/2018 17:29		Agency Report Number 6 4 18-001330			
	Agency ORI Number FL 0502000		Agency Name LANTANA POLICE DEPARTMENT			
D E F	Name (Last, First, Middle) RUOCCO, THOMAS SALVATORE 2			Race W	Sex M	Date of Birth 08/17/1972
	Charge Description 784.03 BATTERY - SIMPLE TOUCH / STRIKE					
C H R G E	Victim's Name (Last, First, Middle) RUOCCO, DOREEN VERONICA			Race W	Sex F	Date of Birth 06/18/1973
	Local Address (Street, Apt. Number) (City) (State) (Zip) 10655 LAKE SHORE DR, WELLINGTON, FL 33414			Phone (561) 856-3307		Address Source
V I C T I M	Business Address (Name, Street) (City) (State) (Zip) CVS, 1581 W LANTANA			Phone		Occupation MANAGER
	DEFENDANT'S STATEMENTS		Written <input type="checkbox"/>	Taped <input checked="" type="checkbox"/>	Oral <input type="checkbox"/>	OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): SCARED
VICTIM'S STATEMENTS		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
RELATIONSHIP BETWEEN VICTIM & SUSPECT SPOUCE						
A D D I T I O N A L I N F O R M A T I O N	PHOTOGRAPHS:	Scene:	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>		
		Victim:	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
		911 CALL:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	CALLER: SHARNESE BYRD	
		WEAPON USED:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	TYPE:	
		WITNESSES:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(If YES, attach witness list)	
		INJURIES:	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
		MEDICAL TREATMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
		AT: Scene:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PARAMEDICS:	
		Hospital:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PHYSICIAN(S) / HOSPITAL:	
		ACT COMMITTED IN PRESENCE OF MINOR(S):	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NAMES/AGES:	
	H. R. S. NOTIFIED:	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
	VICTIM PREGNANT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
	VIOLATION OF RESTRAINING ORDER:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	CASE #:		
	PRIOR HISTORY OF DOMESTIC VIOLENCE:	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
	ALCOHOL OR DRUGS INVOLVED:	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
N A R R	On Thursday, June 07, 2018 at approximately 1437 I was dispatched to CVS located at 1581 W Lantana Rd, Lantana FL 33462, in reference to a disturbance. Prior to officer's arrival they were advised that a manager was attacked by her "ex", the suspect had already left the area and was heading toward Publix. The subject was described as a white male wearing black/white/gray shirt and black shorts. On scene I made contact with w/f,					
	STATE OF FLORIDA COUNTY OF PALM BEACH Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.  SIGNATURE OF ARRESTING OFFICER					
Sworn to and subscribed to before me this <u>7</u> day of <u>June</u> , 2018.  NOTARY PUBLIC / CLERK OF COURT / OFFICER (F S S 117 10)						

CERTIFIED COPY

SCANNED
JUN - 8 2018

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County
Narrative Continuation

A D M I N	Date / Time 06/07/2018 17:29	
	Agency ORI Number FL 0502000	Agency Name LANTANA POLICE DEPARTMENT
N A R R A T I V E	Agency Report Number 6 4 18-001330	

victim Doreen Ruocco (06/18/1973) who advised me the following:

Prior to calling police she was leaving work and was being picked up by a friend. Upon attempting to get into the vehicle her ex-husband w/a, Thomas Ruocco (08/17/1972) was standing to the left of the front door of CVS. Thomas then pulled her out of the vehicle and grabbed her right arm causing redness and pain. Her co-workers then said they were calling police to assist her and Thomas left the scene.

I then made contact with witness b/f, Sophia Anderson (09/10/1967) who advised me the following:

She arrived at CVS to see Doreen's ex-husband pull her out of the vehicle. He then had his hands on her face. Anderson attempted to tell Thomas to leave her alone but he continued. The driver of the vehicle then stepped out to help Doreen. The driver then pulled Thomas off of Doreen and Thomas started fighting him. The driver then went back into the car and Thomas left cursing and walking to Publix.

I then made contact with a second witness b/f, Sharnese Byrd (06/26/1995) who advised me the following:

She returned to the store from being on break. Her store manager "Doreen" was going home when her ex-husband walked into the store and attempted to speak with her. Doreen told Thomas to leave. Thomas then hung around the outside of the store for approximately 10-15 minutes. When Doreen's ride arrived she tried to get into the vehicle Thomas then pulled her out. Doreen kept trying to go into the vehicle but Thomas continued pulling her back and forth. The driver of the vehicle then told Doreen to get into the car and for Thomas to leave. Thomas then tried attacking the driver. Byrd then told Thomas she was calling the police. Thomas then left the scene cursing at Doreen.

Doreen, Anderson and Byrd filled and signed sworn written statement of the events that transpired. Doreen was also issued a case number and filled and signed a domestic violence diagram.

Two digital photographs were taken of the victim.

I then attempted several times to contact Thomas with negative results. Upon leaving a voice mail on his cell phone he returned a call to the Lantana Police Department and made arrangements to speak with me.

At approximately 1703 hours Thomas arrived at the police department. I then brought him into the interview room. I advised Thomas of his constitutional rights and Miranda warnings. He understood his rights and initialed next to each warning and signed the Miranda form.

The following is a summary of the interview:

Thomas advised me that he was at CVS in order to speak with his wife. Thomas advised me that they are still currently married but have not been together for a while. It should be noted that they have two children in common and have been together for approximately 25 years. While at CVS he observed Doreen's vehicle pull to the front of the store with a white male driver. Thomas wanted to get a picture to prove to his children that their mother was with another man. When Doreen went to the car and opened the door Thomas attempted to take a picture of the driver. She then started fighting for the phone to not allow Thomas to take the picture and show their children. The driver then leaned over the seat and spat at Thomas. The driver then got out of the vehicle and went around the car toward Thomas. The driver then swung at him. Thomas then started yelling at

STATE OF FLORIDA
COUNTY OF PALM BEACH

Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.


SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 7 day of June, 2018.


NOTARY PUBLIC / CLERK OF COURT / OFFICER (F S S 117 10)

SEARCHED
JUN - 8 2018

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

Narrative Continuation

A D M I N I S T R A T I V E	Date / Time 06/07/2018 17:29	Agency Name LANTANA POLICE DEPARTMENT		Agency Report Number 6 4 18-001330
	Agency ORI Number FL 0502000			

Doreen saying "Really Doreen you're going to allow a man to attack your husband" Thomas then left the area. During the incident Thomas's phone was knocked to the floor and got wet causing it to malfunction. Upon getting my voice mail he contacted the police department in order to state his side of events.

Thomas also advised me that he occasionally goes to Doreen's work in order to speak with his wife in an attempt to get answers to why she is not living with them. He does not know if they are getting divorced because she does not speak with him.

Thomas has several concerns about his daughters. They currently live with him and he is the main contributor to their finances.

Based on the facts from above I believe there is sufficient probable cause to charge Thomas with Domestic battery.

Thomas was advised that he was under arrest for domestic battery, he was then walked into a holding cell across from the interview room.

His property was turned over to his daughter Deanna Ruocco who arrived at the police department.

Thomas was then placed in handcuffs they were double locked and checked for tightness. He was then transported to the Palm Beach County Jail and turned over to staff.

STATE OF FLORIDA
COUNTY OF PALM BEACH

Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.


SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 7 day of June, 2018.


NOTARY PUBLIC / CLERK OF COURT / OFFICER (F S S 117 10)

SCANNED

JUN - 8 2018

VICTIM NOTIFICATION FORM

This form must be filled out in a case involving one of the following crimes:

- Homicide (Ch. 782)
- Sexual Offense (Ch. 794)
- Attempted Murder
- Attempted Sexual Offense
- Stalking (S. 784.048)
- Domestic Violence - (This includes any assault, agg. Assault, battery, agg. Battery, sexual assault, sexual battery, stalking, agg. Stalking or any criminal offense resulting in physical injury or death of one family member or household member by another, who is or was residing in the same single dwelling.)

Upon completion, this form must accompany the booking paperwork. If applying for a warrant, attach this form to the filing packet.

1. Incident Report#: 18-001330 Agency: Lantana Police
 Offense: Battery
 Suspect/Offender: THOMAS RUCCO
 D.O.B. 08/17/72 Race: W Sex: M

2. Warranty #(s): _____

3. Complete one (1) of the following:

a. Victim's name: Doreen Rucco
 Address: 10655 Lake Shore Dr.
 City: Wellington State: FL Zip: 33414
 Home #: (561) 8567307 Work #: _____ Other#: _____

b. Victim's next of kin: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Home #: _____ Work #: _____ Other#: _____

c. Victim's designated contact other than next of kin (for example: a friend or neighbor):
 Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Home #: _____ Work #: _____ Other#: _____

4. Relevant identification or case numbers assigned to the case (please specify):

WAIVER: I CHOOSE NOT TO COMPLETE THIS VICTIM NOTIFICATION FORM, AND UNDERSTAND THAT I AM WAIVING MY RIGHT TO BE NOTIFIED OF THE RELEASE OF THE SUSPECT/OFFENDER.

Signature of person waiving notification: _____
 Printed name of person waiving notification: _____
 Officer's Name: K. CAVALEN I.D.: 866 Date: 6/7/18

SUSPECT/OFFENDER: THOMAS RUCCO

COURT CASE/WARRANT #:
(FOR WARRANT USE ONLY)

30 JUN 2018
 JUN - 8 2018



Palm Beach County Sheriff's Office – Arrests Only

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

REVIEW COMPLETED BY

Booking Number: 2018019074	Date: 06/08/2018
	Specialist Name/ID: howard/7185

SCANNED

JUN - 8 2018