

0351395

20 CF 7413

3841

ARREST / NOTICE TO APPEAR

- 1. Arrest (No Warrant)
- 2. N.T.A.
- 3. Request for Warrant
- 4. Request for Capias
- 5. Juvenile Referral

1

JUVENILE

OBTS Number	Agency ORI Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N.T.A.'s only) 3 2 2020-010210	
Charge Type: Check as many as apply	<input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	
Location of Arrest (Including Name of Business) 1061 SW 18TH ST				Location of Offense (Business Name, Address) 1061 SW 18TH ST, BOCA RATON, FL 33486		
Date of Arrest 09/10/2020	Time of Arrest 22:00	Booking Date 09/10/2020	Booking Time 22:10	Jail Date 09/10/2020	Jail Time 22:10	Location of Vehicle N/A
Name (Last, First, Middle) WIDIGER, TONJA R			Alias:			
Race W - White B - Black	Sex W F	Date of Birth 06/01/1959	Height 5'04	Weight 160	Eye Color GREEN	Hair Color BLONDE
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)			Marital Status M	Religion CHRISTIAN	Indication of: Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>	
Local Address (Street, Apt. Number) 1061 SW 18TH ST, BOCA RATON, FL 33486			Phone (561) 347-1097		Residence Type: 1. City <input checked="" type="checkbox"/> 2. Country <input type="checkbox"/> 3. Florida <input type="checkbox"/> 4. Out of State <input type="checkbox"/> 1	
Permanent Address (Street, Apt. Number) 1061 SW 18TH ST, BOCA RATON, FL 33486			Phone (561) 347-1097		Address Source FL DL	
Business Address (Name, Street) COASTAL INSPECTION TECHNOLOGIE, 1061 SW 18TH ST BOCA RATON, FL			Phone (561) 391-8193		Occupation Co-owner	
D/L Number, State W326816597010 / FL		Sec. Sec. Number	INS Number		Place of Birth (City, State) MASSLAND, OH,	Citizenship US
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
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian			Name (Last, First, Middle)			Residence Phone
Address (Street, Apt. Number)			(City)	(State)	(Zip)	Business Phone
Notified by: (Name)			Date	Time	JUVENILE DEPOSITION T. Handled/Processed within Department and Released to T.O.T. JAC	
Released To: (Name)			Relationship	Date	Time	REQUIRED RECORDED
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 355-2526) informed of any change of address.			School Attended		Grade	
<input type="checkbox"/> Yes, by: <input type="checkbox"/> No:			Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property	
Drug Activity N. N/A P. Possess			S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use	
K. Disperse/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 Description BATTERY ON PERSON 65 YOA OR OLDER				Statute Violation Number 784.08(2C)		Violation of ORD #
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number
	N			1	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
Charge Description				Statute Violation Number		Violation of ORD #
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number
					<input type="checkbox"/> Y <input type="checkbox"/> N	
Charge Description				Statute Violation Number		Violation of ORD #
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number
					<input type="checkbox"/> Y <input type="checkbox"/> N	
Health / Apparent Physical Condition of Defendant GOOD				Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input checked="" type="checkbox"/> Deformities <input type="checkbox"/> Injuries		
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail				PROPERTY - Received By		Released By
<input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health				Date Transported		Time Transported
Transported By J. CASAS ID818				Date Transported		Time Transported
<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input checked="" type="checkbox"/> 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		
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.				No Photo Available		
Signature of Defendant (or Juvenile and Parent/Custodian)				Date Signed		
HOLD for Other Agency			Signature of Arresting Officer J. CASAS		Name Verification (Printed by Arrestee)	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal			<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		LD # 818	
I.D. # 05 00115 7002			Poach #		Agency BRPD	
I.D. # 818			Poach #		Agency BRPD	
I.D. # 818			Poach #		Agency BRPD	

No Photo Available


SCANNED

5/11/2020

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

A D M I N	Date / Time 09/10/2020 22:00		Agency ORI Number FL 0500200			Agency Name BOCA RATON POLICE DEPARTMENT			Agency Report Number 3 2 2020-010210			
	Name (Last, First, Middle) WIDIGER, TONJA R						Race W		Sex F		Date of Birth 06/01/1959	
D E F I C I E N T	Charge Description 784.08(2C) BATTERY ON PERSON 65 YOA OR OLDER											
	Victim's Name (Last, First, Middle) WIDIGER, HORST DIETER						Race W		Sex M		Date of Birth 09/03/1949	
V I C T I M	Local Address (Street, Apt. Number) (City) (State) (Zip) 1061 SW 18ST, BOCA RATON, FL 33486					Phone			Address Source			
	Business Address (Name, Street) (City) (State) (Zip)					Phone			Occupation			
A D D I T I O N A L I N F O R M A T I O N	DEFENDANT'S STATEMENTS: Written <input type="checkbox"/> Taped <input checked="" type="checkbox"/> Oral <input type="checkbox"/>			OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): FAIR								
	VICTIM'S STATEMENTS: Written <input type="checkbox"/> Taped <input checked="" type="checkbox"/> Oral <input type="checkbox"/>											
N A R R	RELATIONSHIP BETWEEN VICTIM & SUSPECT MARRIED											
	<p>PHOTOGRAPHS: Scene: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>Victim: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>911 CALL: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO CALLER: TONJA WIDIGER</p> <p>WEAPON USED: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO TYPE: HANDS/FISTS</p> <p>WITNESSES: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (If YES, attach witness list)</p> <p>INJURIES: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>MEDICAL TREATMENT: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>AT: Scene: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO PARAMEDICS:</p> <p>Hospital: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO PHYSICIAN(S) / HOSPITAL:</p> <p>ACT COMMITTED IN PRESENCE OF MINOR(S): <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO NAMES/AGES:</p> <p>H. R. S. NOTIFIED: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>VICTIM PREGNANT: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>VIOLATION OF RESTRAINING ORDER: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO CASE #: 2007-005921</p> <p>PRIOR HISTORY OF DOMESTIC VIOLENCE: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>ALCOHOL OR DRUGS INVOLVED: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>											
<p>On 9/10/20, at approximately 2121 hours, I responded to 1061 SW 18th St in reference to a domestic disturbance.</p> <p>Upon arrival I met with Tonja Widiger. Tonja advised that she and her husband, Horst Widiger, were involved a</p>												
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p>Appeared before me, <u>Javier Casas</u> personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.</p> <p> SIGNATURE OF ARRESTING OFFICER</p> <p>Sworn to and subscribed to before me this <u>10</u> day of <u>September</u>, <u>2020</u>.</p> <p><u>IMMLER, DOUGLAS J</u> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p style="text-align: right;">SCANNED SEP 11 2020</p>												

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

Narrative Continuation

A D M I N N A R R A T I V E	Date / Time 09/10/2020 22:00	Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2020-010210
	Agency ORI Number FL 0500200		

verbal argument which ultimately became physical. Tonja claimed that Horst pushed her while they were arguing in the kitchen. Tonja first reported that was pushed down and later said she was pushed against the island. She initially stated she did not suffer any injuries but later showed me a bruise on her lower back and her left ribcage which were determined to be from a previous argument over a week ago.

I then met with Horst. Horst reported that on several occasions throughout the day, Tonja approached him in an aggressive manner, got very close to his face, and began screaming at him and telling him that everything was his fault. He claimed that during these instances, Tonja pointed her finger at him and poked his chest repeatedly while screaming. Horst also reported that Tonja scratched him on his left arm, left hand, and under his neck. I observed Horst had visible scratches in the areas he claimed to have been battered. I then asked Horst if he pushed Tonja at any time during the day. Horst confessed to pushing Tonja but claimed that he did it in an attempt to get away from her because he was being battered.

Based on the statements provided, the injuries observed, and the totality of the circumstances, it was determined that Tonja was the primary aggressor during this incident and that she actually and intentionally struck Horst against his will. Specifically, Horst did have fresh injuries consistent with his statement while Tonja had none to corroborate with hers. Tonja was placed under arrest for battery on a person 65 YOA or older per F.S.S. 784.08(2c). She was transported to BRPD for the completion of arrest paperwork and later TOT CJ.

NOT A CERTIFIED COPY

STATE OF FLORIDA
COUNTY OF PALM BEACH

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

[Signature]
SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 10 day of September, 2020.

[Signature]
IMMLER, DOUGLAS J
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

SCANNED
SEP 11 2020



**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	<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"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2020021484	Date: 09/11/2020
	Specialist Name/ID: T Howard/7185

SCANNED
SEP 11 2020