



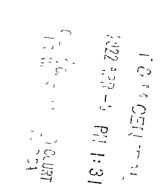
Broward County Sheriff's Office

Booking Report



CIS#	57220087	7		BCCN	# 9	95039	3		Booking Sheet Control Date and Time					
OBTS	607304684		Print	Clearan	ce 04/0	39 16 Prints	Yes	04/03/22 11 10 57						
Arrest #	FL 2200877		Offen	ise Repo	ort# :	34-2204	-059379	<u> </u>	Agen	cy FOR	T LAUDERDALE			
Last Name First Middle	t WEIG	AND, I	KATHL	EEN A	NN				SSN	#		101		
Race	Sex	Height	Weight	Eyes	Haır	Comp	Age Admitted	DOB	Place	of Birth	State	FDLE		
W	F	502	100	GRN	BLN		37	11/30/1984	CONW	AY	SOUTH CAROLINA	0		
Permanent Address	1413 NE 171	H WAY	FORT L	AUDERI	DALE FL		Months of Residence 0							
Arrest Date	04/03/22 00	6 44 00	Р	lace of A			7TH WAY FORT	Γ Arrest	ing Office	r 2098 NOF	RMAN			
Inmate Log	ged Date	04/03/2	2 08 10 2	23	Inmate Lo	д Туре	FULL INTAKE	Г	Place Adm	nitted	MAIN			
Intake Com	ments 29/54/	SP/CO-8	3705 W/C	-15548			10				· · · · · · · · · · · · · · · · · · ·			
Alias Last i	name, First, Mi	ddle, DO	В											
Warrants O	Officer Id bs155	48												
Scars,Mark	s,Tattoos													
Tattoos	Arm, left					RUSSIA	N WRITING							
Tattoos			Arm, righ	at		RUSSIA	N WRITING							
Release Date/Time Release Reason									Release Authorized By					
Charge No	04	Initiatio 1/03/22 1	0 19		03-1a2(H	3)	Warrant/Capıas	Level 1M	M C D	B Type HOLD FOR N		Amount		
Charges	BATTERY-C	AUSE B	ODILY HA	ARM - D	OMESTIC	VIOL	Comments							

* End of Report *



2954

\neg	CO	MPI	ΔΙΙ	NTIA	FF	DΔ	VIT

BBOWARD COUNTY			SHADED	FIELD	S MUST BE A	NSWE	ED'IF DEFENC	ANT N	IOT IN CUSTODY			🖾 ARR	EST FORM	
BROWARD COUNTY ARREST # 22-008	77	_					1			— OBTS#	!			
Filing Agency FI L. IUDERD		Offense Re	eport & &ocal3D#				FDLE		FBI	FBI		\$\$#		
Defendant's Last Name		<u>,, , , , , , , , , , , , , , , , , , ,</u>				liddle	ddle SUF		Alias/Street Name		Citizenship			
· WEIGAND	· · · · · · · · · · · · · · · · · · ·				LEEN 4NN		Inon	D 11 6						
Race Sex	Figt Wg 5'02 (C		ئد ا ۔۔۔	yes ΣΩΟΙΛ	comp	Age 37	DOB 11/30/1984	Birth F	Place					
Permanent Address	3 172 110	70 110	, <u></u>	21.	10011.11	<i>5</i> ,	11/30//1/01		Marks TT					
Residence Type (1) 0								Diace	of Employment			———	Length	
		ounty L ut of State	Local Addit		413 NL 171			, lace	or Employment				Lengui	
How long defendant in	Breathaly	ser By/CCI	N Rea	<u>L</u> iding	AUDERDA Place of Ari		33304	Date	/Time Arrested	TĀ	rresting Officer(I s) CCN		
Broward County					1413 NE 1	7111 13 4		ı		1	NORMIN JOS		R (2098)	
Officer Injured Y N	☑ Unit Z	Zone Be <i>3423</i>		oft 201	Trans Unit 11500	PMD	Y D N X	Transp	oorting Officer/CCN NORMAN	٧	Pick-up Time	Time Ai	rrived/BSO	
TYPE / ACTIVITY	Type N N/A		eroin ailucinogen		P Paraphernalia Equipment	/ Activ		affic	M Manufact	ure/ ce/Cultivate	Indication			
N. J. N.	A Amphetar	mine M.N	5	S Synthetic P Possess D De			el ver K Dispense/				Alcohol influence 🔀 🗀 🗆 Drug influence 🗆 🛣 🗆			
	B Barbiturat C Cocaine	e 00	pium/Deriv		Z Other	B Bu		se	Z Othe	ute	Drug mild	ance L		
۸ ۵۵ ا-	Defendan	- t's Vehicle	Make			Туре	Yea	r	Color	VII	V#			
Attach Defendant's	Vehicle	Towed To					-	1	#	. 1	er identifiers o	r remarks	i.	
Photo				·-···			**************************************]						
									120					
					:			_						
Count #		=	Offens	ses Ch	arged				WC# / Citation #	(if applicable	e) FS or	Capias/W	arrant #	
1 B.11	LRY-CAUSE	<u>BODILY H.</u>	1RM - DO	MLSII	C HOLLNCE							4. 03- 1.42(1	7G)	
							3							
		_												
					Pro	bable C	ause Affidav	ıt						
Before me this date pe	sonally appea	ared _ 101	RM4N JO	24 4 <i>TI</i>					who be	ing first duly	sworn deposes	and says	that on	
3 day of 4	orıl (vear)	2022	at								,	_ (crime lo	cation)	
the above named defer	idant committe	ed the abov						use to b	believe the same a	re as follow	s	• `		
This is a s	ummary	of my	body 1	worr	n camera	vıd	eo							
0- 2 31	2000 -			_1	3 1 - 141	2 200	17mm							
On 3 April disturbance									_				ant	
physically														
defended hi									-					
		<u></u>			_,-						* * Cont		* * *	
Under penalties of perj					=			rue and	d correct to the bes	st of my kno	•			
Offiger/Affiant's Signature					NORMAN, JONATHAN R (2098) Officer's Name/CCN					Offic	<i>Operation</i> ers Division	Operations Bureau s Division		
STATE OF FLORIDA	uie				Officer 5 (Val)	IE/CCIN				Onic	ei s Division			
COUNTY OF BROW	RD													
Sworn to (or affirmed)	and subscribe	ed before m	e this	3	day of _		1pril	,	2022 (y	ear)				
by <u>OFFICL</u>	R NORM 1	<u>v, 1044</u>	1114 V R	₹	(name an	d title) v	ho is personally	known	n to me or has prod	duced	1-7 [N3		
))							as identifi	cation	, ;='1	679	!	
	$\overline{\mathcal{M}}$							\bigcirc	Ac 16	33		بري. دري	Ća	
Notary Public Deputy Cle	k of the Soun	Assistant S	State Attorne	Э у				Title	/Rank and CCN	_	<i>a</i> 1	٠ زد		
<u></u>	SOU	120 10	2								-,	1. C	7	
Print Type or Stamp Com	missioned Nam	e of Notary F	Public						(SEAL)		- 5	0 1	1	
Seventeenth Judicial C				FIRST A	PPEARA	NCE/ARREST	FORM			马沙山	ii i ⊉ng ∧⊾Oc	. j rugt		
Broward County State of Florida		ouer = :=	DIT:	on	DE V====							2nd Fil	ate Aftorney Ing Agency	
BSO DB #2 (Revised 05/0	0)	(SHOULD A	UDITIONAL	SPACE	BE NEEDED (JSE THE	PROBABLE CAU	SE AFFI	IDAVIT CONTINUATI	ION (RZO DB	#zajj j		resting Agency	

COLIRT COPY 29/348PICO-8705 WC 15548

☐ COMPLAINT AFFIDAVIT PROBABLE CAUSE AFFIDAVIT CONTINUATION ARREST FORM **BROWARD COUNTY** ARREST # 22-00877 OBTS# Offense Report 34-2204-059379 Local ID# FDLE FBI 55# FT LAUDERDALE PD Defendant's Last Name Middle Alias/Street Name Citizenshin **WEIGAND** KATHLEEN ANN Name of victim(s) (if corporation exact legal name and state of incorporation) Count # Offenses Charged WC# / Citation # (if applicable) FS or Capias/Warrant # **Probable Cause Affidavit** Before me this date personally appeared <u>NORMAN_JON_1TH4N_R</u> (2098) who being first duly sworn deposes and says that on (crime location) phone video, which displayed the defendant in an irrate state during the incident. The victim possessed blood coming from his nose and scratch marks to his right lower back The defendant received no obvious injuries during the altercation. A three-year-old child in common was located in an adjacent bedroom during the incident but was not involved Lie B. The defendant was transported and booked into the Broward County Jail without incident I swear the above statement is correct and true to the best of my knowledge and belief NORMAN, JONATH 4N R (2098) Operations Bureau Officer/Affiant's Signature Officer's Name/CCN Officer's Division STATE OF FLORIDA COUNTY OF BROWARD

Print Type or Stamp Commissioned Name of Notary Public

Sworn to (or affirmed) and subscribed before me this _

OFFICER NORMAN, JONATHAN R.

tre-Court of Assistant State Attorney

Seventeenth Judicial Circuit

Broward County State of Florida

BSO DB #2a (Revised 05/00)

FIRST APPEARANCE/ARREST FORM

_____ day of ___

COURT COPY

1*pril*

____ (name and title), who is personally known to me or has produced

(SEAL)

as identification

Oria 2nd 3rd

Court State Attorney Filing Agency

Arresting Agency