0540895 23MM4358AMB 74

☒ Marsy's Law CVI FL Const. Art.1 § 16(b)

☐ Check if Supplement is Attached

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias: 1

Juvenile:

ADMINISTRATIVE

Agency ORI Number: FL0 5 0 1 0 0 0 0 | Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE | Agency Report Number: 0 6 - 23-073965

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

If Weapon Seized: Enter Type

Multiple Clearance Indicator: 01

Location of Arrest (including Name of Business): [redacted]

Location of Offense (Business Name, Address)

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
05/31/23	2153					

DEFENDANT

Name (Last, First, Middle): **Weinberger Jimy**

Alias (Name, DOB, Soc. Sec. #, Etc.)

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	11/07/1952	5'6	155	BROWN	BROWN	FAIR	MEDIUM

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)

Marital Status: Single | Religion: None | Indication of: Alcohol Influence ☐ Y ☒ N ☐ Unk; Drug Influence ☐ Y ☒ N ☐ Unk

Local Address (Street, Apt. Number) (City) (State) (Zip): [redacted]

Mobile Phone: 917-623-7846 | Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip): [redacted]

Phone: 917-623-7846 | Address Source: VERBAL

Business Address (Name, Street) (City) (State) (Zip)

Phone | Occupation: Retired

D/L Number State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
212176191 , NY	[redacted]		Mexico City, Mexico	USA

CO-DEF

Co-Defendant (Last, First, Middle)	Race	Sex	Date of Birth	1. Arrested 2. At Large	3. Felony 4. Misdemeanor 5. Juvenile
				☐ 1. ☐ 2.	☐ 3. ☐ 4. ☐ 5.
Co-Defendant (Last, First, Middle)	Race	Sex	Date of Birth	1. Arrested 2. At Large	3. Felony 4. Misdemeanor 5. Juvenile
				☐ 1. ☐ 2.	☐ 3. ☐ 4. ☐ 5.

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other: Name (Last) (First) (Middle) | Residence Phone ( )

Address (Street, Apt. Number) (City) (State) (Zip) | Business Phone ( )

Notified by: (Name) VICTIM NOTIFICATION Date Time | Juvenile Disposition 1. Handled/Processed within Dept. and Released. 2. TOT HRS/DYS 3. Incarcerated

Released To: (Name) REQUIRED Relationship | 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 (Phone (561) 355-6511) informed of any change of address.
☐ Yes, by: (Name) ☐ No (Reason)

School Attended | Grade

Property Crime? ☐ Yes ☐ No | Description of Property | Value of Property

CODE

Drug Activity: N. N/A, P. Possess, S. Sell, B. Buy, T. Traffic, R. Smuggle, D. Deliver, E. Use, K. Dispense/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

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Battery (Domestic)	01	☒ Y ☐ N	784.03(1a1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	N/A	23-073965		NO BOND

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

NOTICE TO APPEAR

Location (Court, Room Number, Address)

Court Date and Time

Month Day Year Time A.M. ☐ 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

05/31/23

Signature of Defendant (or Juvenile and Parent/Custodian) Date Signed

FILED PBC - GUN CLUB
'23 JUN 1 AM 5:31

I consent to receive text reminders of court date(s) and times for this case by automated technology to the mobile number identified above. I understand that standard text message rates may apply, and that I may revoke this consent via the text message system if I choose. Signature

ADMIN

HOLD for other agency

☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other:

Intake Deputy: J. DUNN I.D. # 36103 Pouch #

Signature of Arresting Officer: X

Name of Arresting Officer (Print): Cpl. Costello I.D. # 36186

Transporting Officer: Cpl. Costello I.D. # 36186 Agency: PBSO

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X"

SCANNED JUN 01 2023

PAGE 2 OF 2

PBSO #0148 REV. 11/22 DISTRIBUTION: COURT COPY STATE ATTORNEY AGENCY AGENCY DEFENDANT (N.T.A.'s ONLY)

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PROBABLE CAUSE AFFIDAVIT

OBTS Number | 1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias | 1 | Juvenile

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 23-073965

ChargeType: Check as many as apply. 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
Weinberger Jimy		W	M	11/07/1952

CHARGES

Battery (Domestic) 784.03(1a1)	

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
[redacted]	W	F	[redacted]

Local Address (Street, Apt. Number) (City) (State) (zip)	Phone	Address Source
[redacted]		VERBAL

Business Address (Name, Street) (City) (State) (zip)	Phone	Occupation
		Unemployed

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

- ☐ committed the below acts in my presence.
- ☒ confessed to Cpl. Costello admitting to the below facts.
- ☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
- ☒ was found to have commited the below acts, resulting from my (described) investigation.

On the 31 day of May 2023 at 9:24 ☐ A.M. ☒ P.M. (Specifically include facts constituting cause for arrest.)

PROBABLE CAUSE STATEMENT

☒ **Marsy's Law CVI**
FL. Const. Art.1 § 16(b)

On the above date and time, I responded to [redacted] in reference to a neighbor calling in loud yelling coming from the above mentioned address.

Upon my arrival, I made contact with a white male who identified himself as Jimy Weinberger and a white female who identified herself as [redacted] When I asked if everything was okay they both stated, that they were arguing and it became physical. Weinberger had a small cut on his left shin that was bleeding slightly and [redacted] lifted her shirt where she had several scratches on her stomach. Both Weinberger and [redacted] refused medical assistance.

I first spoke to Weinberger who stated that he and [redacted] got into a verbal argument over clothing and when she got into his face, he pushed her using both hands causing last to fall to the ground. Weinberger advised that he didn't like that she was in his face so thats why he pushed her. Weinberger said that they were good now and that he doesn't need any police assistance.

I then spoke with [redacted] who kept saying that it's her fault and that she doesn't want him to get arrested. [redacted] said that Weinberger didn't push her but then would constantly change her story and say that he did but it was her fault. [redacted] plead with me to not arrest him and that everything was okay now. When I asked about the scratches on her stomach, she advised that they were from the dog jumping on her.

After hearing both statements, and the fact that Weinberger admitted to pushing [redacted] Weinberger was placed into custody for Domestic Battery. Weinberger was handcuffed with his hands to the rear, checked for proper fit and double locked.

Based on the above facts and statements, I believe there is probable cause to charge the defendant, Jimy Weinberger, with Battery (Domestic) pursuant to F.S.S. 784.03(1a1).

The Victims' Rights Brochure was explained and provided to [redacted] invoked her rights under Marsy's Law. [redacted] meets the criteria for a Specified Crime and invoked her rights.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH
Cpl. Costello (ID #) 36186
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 31 day of May 20 23 by Cpl. Costello 36186

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced KNOWN Sworn

D/S M. Arroyo 386127
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

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SCANNED JUN 01 2023

Palm Beach County Sheriff's Office

DOMESTIC VIOLENCE/DATING VIOLENCESUPPLEMENTAL PROBABLE CAUSE FORM

(Submit this form with the original Probable Cause affidavit)

Name (Last, First, Middle)

Suspect: Weinberger Jimy **DOB:** 11/07/1952 **Case #:** 23-073965

Name (Last, First)

Victim: [redacted] **DOB:** [redacted] **Race:** W **Sex:** F

Relationship between Victim and Defendant:

Photographs: Scene × Yes No Victim × Yes No Defendant Yes × No

911 Call: × Yes No **Caller:** Neighbor

Weapon Used: Yes No **Type:**

Witness: Yes × No **Name:** (Last) (First) (Middle)

Victim Pregnant: Yes × No **If yes,** weeks months

Injuries: Yes × No **Description:**

Medical Treatment: Yes × No

At Scene: Yes No **Paramedics:**

At Hospital: Yes No **Hospital:** **Doctor:**

Are Children Living in Home? Yes × No **DCF Notified?** Yes × No

Name: **DOB:**

Name: **DOB:**

Name: **DOB:**

Injunction Yes × No **Case #:**

No Contact Order Yes × No **Case #:**

Alcohol or Drugs Yes No × Unknown

Prior History of Domestic/Dating Violence Yes × No

Defendant's Statements × Yes No **If yes,** written × recorded × oral

First words Defendant said when you responded to scene: Refer to Body Worn Camera

Victim's Statements × Yes No **If yes,** written × recorded × oral

First words Victim said when you responded to scene: Refer to Body Worn Camera

Did the Victim contact anyone other than police within an hour of the incident regarding the incident?

Yes × No **If yes, name:** **phone:**

Observations of Victim (Physical & Emotional)

Upset Crying Fearful Hysterical Afraid × Calm Nervous

Complained of pain × Other Intoxicated

Victim Contact Information: (Last) [redacted]

Local Address: [redacted]

Phone: [redacted]

Employer: (Name) Unemployed (Employer Address)

Name of Relative: (Last) (First) **Phone:**

Address:

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SCANNED JUN 01 2023

VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been committed:

- **Homicide** (Ch. 782)
- **Attempted Murder**
- **Stalking** (F.S. 784.048)
- **Domestic Violence** - **(This includes any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated 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.**
- **Sexual Offense** (Ch. 794)
- **Attempted Sexual Offense**
- **Dating Violence**

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

1. Incident Report #: **23-073965** Agency: **PBSO**
   Offense: **Battery (Domestic)**
   Suspect/Offender: Name (Last) **Weinberger** (First) **Jimy** (Middle)
   D.O.B. **11/07/1952** Race: **W** Sex: **M**

2. Warrant #(s):

3.a. Victim's name: Name (Last, First) [redacted] D.O.B. [redacted] Race: **W** Sex: **F**
   Address: [redacted]
   City: [redacted] State: [redacted] Zip: [redacted]
   Home #: [redacted] Work #: Other:

b. Victim's next of kin, friend or neighbor: (Last) (First)
   Address:
   City: State: Zip:
   Home #: Work #: Other:

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY BE SUBJECT TO CONFIDENTIALITY.

Victim/Relation Notification Waiver and Confidential Information Request.

(check applicable boxes)

☐ **Waiver:** **I choose not to be notified when the arrestee is released from custody.**

☐ **Confidential:** **I request the information on this form be kept confidential (applicable only to sexual battery, stalking, child abuse, harassment or domestic violence cases).**

Signature of person waiving notification:
Printed name of person waiving notification: Name (Last, First) [redacted]
Deputy's Name: **Cpl. Costello** I.D. # **36186** Date: **05/31/23**

White = Corrections or State Attorney (Warrant Application) Yellow = Warrants Section Pink = Central Records

PBSO #0029A REV. 05/11

SUSPECT/OFFENDER **Weinberger** **Jimy** COURT CASE/WARRANT #:
(FOR WARRANTS USE ONLY)

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SCANNED JUN 01 202

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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☒	Art.I s.16 (b)(5)	Other: Marsy's Law	1-6
	☒	119.071(2)(l)	Other: Victims of Specified Crimes	1-5

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REVIEW COMPLETED BY

Booking Number: 2023014303	**Date:** 6/1/2023
	Specialist Name/ID: Chantel Daniels/30347

SCANNED
JUN 01 2023