23MM5503 MB

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number (N T A's only)
	0500400	Delray Beach Police Department	4 0 23-008900

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

If Weapon Seized — Enter Type: UNARMED

Multiple Clearance Indicator: 1

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
4070 LIVE OAK BLVD	4070 LIVE OAK BLVD, DELRAY BEACH, FL 33445

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
07/07/2023	01:26	07/07/2023	01:36	07/07/2023	01:39	UNKNOWN

DEFENDANT

Name (Last, First, Middle): TINDALL, MARGARET SHELTON Alias:

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	F	05/04/2001	5'05	100	BLUE	BLOND OR	LIGHT	THIN

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description) | Marital Status: S | Religion | Indication of Alcohol Influence: ☒ Yes ☐ No ☐ Unk; Drug Influence: ☐ ☐ ☒

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type (1 City, 2 County, 3 Florida, 4 Out of State)
4070 LIVE OAK BLVD, DELRAY BEACH, FL 33445				(913) 235-7724	

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
4070 LIVE OAK BLVD, DELRAY BEACH, FL 33445				(913) 235-7724	

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

D/L Number, State	Soc Sec Number	INS Number	Place of Birth (City, State)	Citizenship
T534577016640 / FL	[redacted]		Naples, FL	US

CO-DEFENDANT

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

JUVENILE

☐ Parent ☐ Other ☐ Legal Custodian — Name (Last, First, Middle) — Residence Phone

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

Notified by: (Name)	Date	Time	JUVENILE DISPOSITION: 1 Handled/Processed within Department and Released; 2 TOT JAC; 3 Incarcerated

Released To (Name)	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 355-2526) informed of any change of address.
☐ Yes, by: ☐ No

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 Disperses/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	Statute Violation Number	Violation of ORD #
SIMPLE BATTERY(TOUCH OR STRIKE)	784.03(1A1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/	23-008900	1	☒ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant: OKAY

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries — Explain

Check which applies: ☐ Released O R ☐ Released to Parent/Guardian ☒ T O T County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By | Released By | Released To

FILED PBC - CLERK CLUB-- '23 JUL 7 AM 6:56

Transported By	Date Transported	Time Transported	Other
SHINN	07/07/2023	01:40	

NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court
☐ 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

Court Date and Time: 08/04/2023 08:30:00

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

No Photo Available

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Signature of Arresting Officer	Name Verification (Printed by Arrestee)
	(PRINT)

Name of Arresting Officer (Print)	ID #
SHINN, KAILEY	1227

Intake Deputy	ID #	Pouch #	Transporting Officer	ID #	Agency
			SHINN	1227	DBPD

Witness here if [illegible] refuses to sign

PAGE 1 OF 1

SCANNED JUL 07 2023

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P I O ☐ DEFENDANT

NOT A CERTIFIED COPY

5331

DOMESTIC VIOLENCE PROBABLE CAUSE
AFFIDAVIT
Palm Beach County

ADMIN

Date / Time	Agency ORI Number	Agency Name	Agency Report Number
07/07/2023 01:45	FL 0500400	DELRAY BEACH POLICE DEPARTMENT	4 0 23-008900

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
TINDALL, MARGARET SHELTON		W	F	05/04/2001

CHRG

Charge Description: 784.03(1A1) SIMPLE BATTERY(TOUCH OR STRIKE)

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
THOMAS, STEPHEN MICHAEL	W	M	12/13/1967

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
4070 LIVE OAK BLVD, DELRAY BEACH, FL 33445	(561) 289-8195	

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

ADDITIONAL INFORMATION

	Written	Taped	Oral
DEFENDANT'S STATEMENTS:	☐	☐	☒
VICTIM'S STATEMENTS:	☐	☐	☒

OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): OKAY

RELATIONSHIP BETWEEN VICTIM & SUSPECT: BOYFRIEND

	YES	NO	
PHOTOGRAPHS: Scene:	☐	☐	
Victim:	☐	☐	
911 CALL:	☐	☐	CALLER:
WEAPON USED:	☐	☐	TYPE:
WITNESSES:	☐	☐	(If YES, attach witness list)
INJURIES:	☐	☐	
MEDICAL TREATMENT:	☐	☐	
AT: Scene:	☐	☐	PARAMEDICS:
Hospital:	☐	☐	PHYSICIAN(S) / HOSPITAL:
ACT COMMITTED IN PRESENCE OF MINOR(S):	☐	☐	NAMES/AGES:
H. R. S. NOTIFIED:	☐	☐	
VICTIM PREGNANT:	☐	☐	
VIOLATION OF RESTRAINING ORDER:	☐	☐	CASE #:
PRIOR HISTORY OF DOMESTIC VIOLENCE:	☐	☐	
ALCOHOL OR DRUGS INVOLVED:	☐	☐	

NARR

The following incident occurred in The City of Delray Beach, Palm Beach County Florida.

STATE OF FLORIDA
COUNTY OF PALM BEACH

Appeared before me, Shinn, 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 July, 2023.

RUSCZYK, JONATHAN N
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)

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SCANNED
JUL 07 2023

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

DOMESTIC VIOLENCE PROBABLE CAUSE
AFFIDAVIT
Palm Beach County
Narrative Continuation

ADMIN

Date / Time		
07/07/2023 01:45		
Agency ORI Number	Agency Name	Agency Report Number
FL 0500400	DELRAY BEACH POLICE DEPARTMENT	4 0 23-008900

NARRATIVE

On 07/07/2023 I responded to 4070 Live Oak Blvd at approximately 1228 hours in the morning for a domestic complaint.
Upon arrival, I made contact with Stephen Thomas (12/13/1967) who stated that he had a physical fight with his girlfriend which left him with a laceration to his left arm.
Per Sworn Statement, Thomas explained that he and his girlfriend who was later identified as Margaret Tindall (DOB:05/04/2001), went out to dinner on Palm Beach Island with a couple friends. He stated that Margaret did not like this group of friends to begin with and was unhappy at dinner. Stephen stated that they had started arguing on the way home from dinner and stopped the vehicle before they got out to head into the house. He stated that they both agreed they would sleep in separate bedrooms to stop fighting.
Stephen stated that they both headed into the house when he laid down in the master bedroom and turned off the lights. He stated that Margaret came to the bedroom and completely shut the door. Stephen got up from the bed and opened the door and stated that he did not want his bedroom door shut due the cat. Stephen then exited the room and sat in the living room when Margaret followed. He stated that they both started verbally arguing when Margaret got up and put her finger in his face. The argument, then became physical when Margaret started to lunge at him. He held her back in a self-defensive manner and that`s when Margaret left the laceration to his left arm. He then called 911 and officers arrived on scene.
Per Sworn Statement, Margaret explained that her and Thomas had gone to dinner this evening with a group of friends she did not care for. She stated that Thomas always ends up picking up the tab and that had left her very upset. She stated that they both did agree to stay in separate bedrooms, however she did not immediately go into the guest bedroom. Margaret stated that she went into the master bedroom to change out of her dinner clothes and turned on the closet light when Thomas got upset. She stated that she picked up the cat they share and quickly left the bedroom and shut the door. That`s when Thomas came out and sat down in another chair in the living room. They both then started verbally arguing about their relationship when she stated that it got physical. She stated Thomas had held her down by her neck facing upwards on their kitchen bar and that`s when she squeezed both arms and left the laceration. There was a small red dot on Margaret`s neck however she did not appear to receive any substantial injuries. Margaret stated that she had fake nails, and that they leave marks.

Based on the stated facts above, Margaret Tindall was deemed the primary aggressor in this incident and was subsequently charged with Simple Battery (Touch or Strike) which is pursuant with F.S.S. 784.03(1A1).

NOT A CERTIFIED COPY

STATE OF FLORIDA
COUNTY OF PALM BEACH

Appeared before me, Shinn, 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 July, 2023.

RUSCZYK, JONATHAN N
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

SCANNED
JUL 07 2023

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIMINAL INVST. P. I. O.

VICTIM NOTIFICATION FORM

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

- **Homicide** (Ch. 782)
- **Attempted Murder**
- **Stalking** (S. 784.048)
- **Sexual Offense** (Ch. 794)
- **Attempted Sexual Offense**
- **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 #: 23-008900 Agency: DBPD
   Offense: Simple Battery - 784.03(1A1)
   Suspect/Offender: Margaret Tindall
   D.O.B. 05/04/2001 Race: W Sex: F

2. Warrant #(s): N/A

3. Complete one (1) of the following:

   a. Victim's name: Stephen Thomas
   Address: 4070 Live Oak Blvd
   City: Delray Beach State: FL Zip: 33445
   Home #: 561-289-8915 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.

SCANNED

Signature of person waiving notification: _____ 07 2023
Printed name of person waiving notification: _____

Officer's Name: Shinn.K I.D.: 1224 Date: 07/07/23

SUSPECT/OFFENDER: _____

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

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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	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2023017659	**Date:** 07/07/2023
	Specialist Name/ID: T.Howard/7185

SCANNED
JUL 07 2023