

ARREST / NOTICE TO APPEAR

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

1

JUVENILE

OBTS Number	Agency ORI Number <b>0500200</b>		Agency Name <b>Boca Raton Police Department</b>		Report Number (N.T.A.'s only) <b>18MM3382</b>	2018-004095
Charge Type: Check as many as apply	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	If Weapon Seized Enter Type	<b>Hands, Feet, Fist, Teeth</b>	
Location of Arrest (Including Name of Business) <b>690 W GLADES RD, BOCA RATON, FL 33431</b>			Location of Offense (Business Name, Address) <b>690 W GLADES RD, BOCA RATON, FL 33431</b>			
Date of Arrest <b>03/22/2018</b>	Time of Arrest <b>02:02</b>	Booking Date <b>03/22/2018</b>	Booking Time <b>02:12</b>	Jail Date <b>03/22/2018</b>	Jail Time <b>03:25</b>	Location of Vehicle <b>N/A</b>

Name (Last, First, Middle) <b>WILLIAMS, CHRISTINA</b>		Alias: Alias (Name, DOB, Soc. Sec. #, Etc.)				
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex <b>F</b>	Date of Birth <b>06/30/1992</b>	Height <b>5'03</b>	Weight <b>92</b>	Eye Color <b>BROWN</b>	Hair Color <b>BROWN</b>
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>SCAR F CHEST / ZIPPER; TATT LOR ARM / INFINITIY</b>		Marital Status <b>S</b>	Religion <b>CHRISTIAN</b>	Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input checked="" 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) (City) (State) (Zip) <b>4000 NW 3RD AVE, BOCA RATON, FL 33431</b>		Phone <b>(305) 902-9678</b>		Residence Type: 1. City 3. Florida 2. County 4. Out of State <b>1</b>		
Permanent Address (Street, Apt. Number) (City) (State) (Zip) <b>4000 NW 3RD AVE, BOCA RATON, FL 33431</b>		Phone <b>(305) 902-9678</b>		Address Source <b>Subject</b>		
Business Address (Name, Street) (City) (State) (Zip)		Phone <b>(561) -</b>		Occupation		
D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State) <b>MIAMI/DADE, FL,</b>		Citizenship <b>US</b>	

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
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile

<input type="checkbox"/> Parent <input type="checkbox"/> Other	Name (Last, First, Middle)	Residence Phone
<input type="checkbox"/> Legal Custodian		
Address (Street, Apt. Number) (City) (State) (Zip)	Business Phone	
Notified by: (Name)	Date	Time
Released To: (Name)	Relationship	Date
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
<input type="checkbox"/> Yes, by: <input type="checkbox"/> No:		Grade
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Description of Property	Value 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
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Charge Description <b>BATTERY</b>	Statute Violation Number <b>784.03(1A1)</b>	Violation of ORD #
Drug Activity	Drug Type <b>N</b>	Amount / Unit
Offense #	Counts <b>1</b>	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Warrant / Capias Number	Bond	

Health / Apparent Physical Condition of Defendant <b>GOOD</b>	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
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
<input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health	Released By
Transported By	Date Transported
	Time Transported
	Other

<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court	Location (Court, Room) <b>South County 200 W Atlantic Ave Delray Beach, FL 33444</b>
<input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.	Court Date and Time
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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.	
Signature of Defendant (or Juvenile and Parent/Custodian)	Date Signed

HOLD for Other Agency	Signature of Arresting Officer	Name-Verification (Printed by Arrestee)
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest	Name of Arresting Officer (Print) <b>PREWITT, J.</b>	(PRINT)
<input type="checkbox"/> Suicidal <input type="checkbox"/> Other	ID.# <b>812</b>	
Intake Deputy	Transporting Officer <b>Roberto Bohon</b>	Agency <b>BRP1</b>
LD.#	ID.# <b>799</b>	Agency <b>BRP1</b>
Pouch #	Witness here if subject signed with an "X"	

SCANNED  
MAR 22 2018

2018 MAR 22 AM 8:44  
SOUTH COUNTY JUVENILE COURT  
DELRAY BEACH BRANCH

No Photo Available

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

OBTS Number	Agency ORI Number <b>FL 0500200</b>		Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>	Agency Report Number <b>3   2   2018-004095</b>
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other				Special Notes:

Name (Last, First, Middle) <b>WILLIAMS, CHRISTINA</b>	Alias	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>06/30/1992</b>
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Charge Description <b>784.03(1A1) BATTERY</b>	Charge Description
Charge Description	Charge Description

Victim's Name (Last, First, Middle) <b>WILLIAMS, AUTUMN MARIE</b>	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>03/21/1994</b>
Local Address (Street, Apt. Number) (City) (State) (Zip) <b>4000 NW 3RD AVE, BOCA RATON, FL 33431</b>	Phone <b>(954) 655-9628</b>	Address Source	
Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation	

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.     was observed by \_\_\_\_\_ who told \_\_\_\_\_ that he/she saw the arrested person commit the below acts.  
 confessed to \_\_\_\_\_ admitting to the below facts.     was found to have committed the below acts, resulting from my (described) investigation.  
 On the 22 day of March, 2018 at 02:02 (Specifically include facts constituting cause for arrest.)

On 03/22/2018 Ofc Codling and I responded to 690 W Glades Rd (Mobil) in reference to a fight.

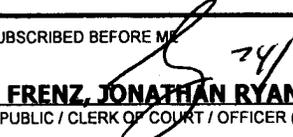
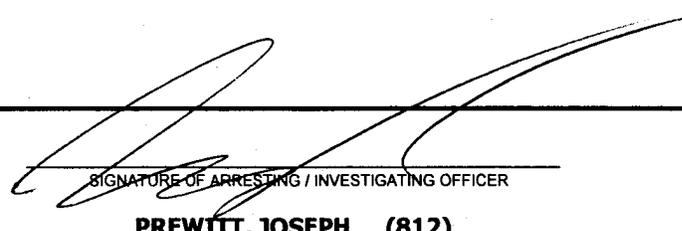
Upon arrival, Ofc McInnis had detained two W/Fs later identified as sisters Autumn Williams DOB 03/21/1994 and Christina Williams DOB 06/30/1992. Ofc McInnis stated that during routine patrol he observed the two females fighting in the parking lot of the Mobil gas station. According to Ofc McInnis, he was unsure who was the primary aggressor. Ofc McInnis stated he only observed both girls pulling one another's hair.

I spoke with Autumn first who stated, she and her sister Christina had gotten into a fight over Autumn calling Christina's boyfriend a name. According to Autumn, Christina became angry and struck her in the face followed by hair pulling.

Next I spoke with Christina who admitted to hitting Autumn in the face. Christina stated she started the fight and was sorry. Christina explained that she lost her temper and that resulted in her hitting her sister in the face.

I observed no visible injuries to either party.

Based on statements made, Christina was taken into custody for FSS 784.03 (1A1) simple battery /domestic. Autumn refused to write a statement or allow photos to be taken. Autumn was given a Domestic Violence Pamphlet. Christina was transported to BRPD for booking and later to Palm Beach County Jail.

SWORN AND SUBSCRIBED BEFORE ME  <b>FRENZ, JONATHAN RYAN</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <u>03/22/2018</u> DATE	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <b>PREWITT, JOSEPH (812)</b> NAME OF OFFICER (PLEASE PRINT) <u>03/22/2018</u> DATE	PAGE <b>1 OF 1</b>
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