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3418

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

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

Juvenile  N

ADMINISTRATIVE	OBTS Number		Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number (N.T.A.'s only) <b>06-18022107</b>				
	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		Weapon Seized / Type 1. Yes 2. No		Multiple Clearance Indicator <b>1</b>				
	Location of Arrest (Including Name of Business) <b>2903 Sw 22nd Cir #41d, Delray, FL 33445</b>				Location of Offense (Business Name, Address) <b>8938 WINDTREE ST, BOCA RATON, FL 33496</b>						
	Date of Arrest <b>01/04/2018</b>	Time of Arrest <b>0235HRS</b>	Booking Date <b>1/4/18</b>	Booking Time	Jail Date	Jail Time	Location of Vehicle				
Name (Last, First, Middle) <b>Bridges, Derek, Jason</b>								Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex <b>M</b>	Date of Birth <b>03/30/1977</b>	Height <b>6'04</b>	Weight <b>270</b>	Eye Color <b>BROWN</b>	Hair Color <b>BROWN</b>	Complexion <b>med</b>	Build <b>med</b>		
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)					Marital Status <b>Married</b>	Religion	Indication of Alcohol Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>				
Local Address (Street, Apt. Number) <b>2903 Sw 22nd Cir #41d, Delray, FL 33445</b>			(City)	(State)	(Zip)	Phone <b>( ) 954-864-0536</b>	Residence Type 1. City 2. County 3. Florida 4. Out of State <b>1</b>				
Permanent Address (Street, Apt. Number)			(City)	(State)	(Zip)	Phone	Address Source <b>Florida DL</b>				
Business Address (Name, Street)			(City)	(State)	(Zip)	Phone	Occupation <b>sales</b>				
D/L Number, State <b>B632170771100, FL</b>		Soc. Sec. Number		INS Number		Place of Birth (City, State) <b>Tampa, Florida</b>		Citizenship <b>USA</b>			
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				
Parent Legal Custodian Other:		Address (Street, Apt. Number)		(City)	(State)	(Zip)	Residence Phone				
Notified by: (Name)		Date	Time	Juvenile Disposition 1. Handle in Juvenile Court 2. Transfer to Adult Court 3. Incarcerated		TOT HRS / DYS		<b>1</b>			
Released To: (Name)				Relationship	Date	Time					
The above address 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 (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)						School Attended		Grade			
Property Crime? <input type="checkbox"/> Yes <input 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. 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/Derv.		P. Paraphernalia/ Equipment S. Synthetics		U. Unknown Z. Other			
Charge Description <b>BATTERY (DOMESTIC)</b>		Counts <b>01</b>	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number <b>784.03(1)(a)(1)</b>		Violation of ORD #					
Drug Activity <b>N</b>		Drug Type <b>N</b>	Amount / Unit	Offense # <b>18022107</b>	Warrant / Capias Number		<b>NO BOND</b>				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #					
Drug Activity		Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #					
Drug Activity		Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #					
Drug Activity		Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
Location (Court, Room Number, Address)											
Court Date and Time Month _____ Day _____ Year _____ Time <b>0830</b> AM _____ PM _____											
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 <b>01/04/2018</b>											
Signature of Defendant (or Juvenile and Parent /Custodian)								Date Signed			
HOLD for other Agency		Signature of Arresting Officer <b>x DISC...</b>				Name Verification (Printed by Arrestee) <b>JAN 4 AM 3:36</b>					
Name: <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) <b>DS BUTTERWORTH #16040 PBSO</b>		I.D. #		PAGE			
Intake Deputy <b>D/S J. THOMAS #7956</b>		ID #		Pouch # <b>#7956</b>		Transporting Officer <b>DS Butterworth #16040 PBSO</b>		ID #			
Agency		Agency		Agency		Agency		Agency			
Witness here if subject signed with an "X" <b>1</b> OF <b>1</b>											

VICTIM NOTIFICATION  
REQUIRED

STAMP: PALM BEACH COUNTY SHERIFF'S OFFICE  
JAN 4 2018

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'S ONLY)

DISC... 2018 PBSO

CANNED  
JAN 04 2018

PROBABLE CAUSE AFFIDAVIT

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

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Juvenile N

OBTS Number	Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>	Agency Report Number <b>06-18022107</b>
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	Special Notes:

Name (Last, First, Middle) <b>Bridges, Derek, Jason</b>	Alias	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>03/30/1977</b>
Charge Description <b>BATTERY (DOMESTIC)</b>	784.03(1)(a)(1)	Charge Description		
Charge Description		Charge Description		

Victim's Name (Last, First, Middle) <b>Bridges, TATIANA, VLADIMROVNA</b>	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>10/11/1987</b>
Local Address (Street, Apt. Number) <b>2903 Sw 22nd Cir #41d, Delray, FL 33445</b>	(City)	(State)	(zip)
Business Address (Name, Street)	(City)	(State)	(zip)

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 \_\_\_\_\_ 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 committed the below acts, resulting from my (described) investigation.

On the **3rd** day of **January** 20**18** at **2115**  A.M.  P.M. (Specifically include facts constituting cause for arrest.)  
**On 01/03 /2018 at approximately 2110 hours, I was dispatched to 8938 WINDTREE ST in unincorporated Boca Raton, FL in reference to a domestic battery.**

**Upon my arrival I met with the complainant/victim, identified by Florida DL as, Tatiana Bridges. The victim explained she and her estranged husband/ Defendant ,later identified by Florida DL as, Derek Bridges physically attacked her at the couples residence in the City of Delray Beach at approximately 1300 hours today. The victim fled the residence with her seven year old special needs daughter and were staying at the defendant's mothers residence located at 8938 Windtree St. The victim stated at approximately 2000 hours the defendant came to the residence and demanded she and their daughter return to the Delray residence. The victim asked the defendant to leave he would not and started walking down the hallway to a back bedroom where the couple's daughter was at. The victim attempted to block the defendant by standing in the way, but the defendant grabbed the victim and pushed her to the ground. The victim and defendant than became involved in a verbal argument while the defendant went through the victim's purse and grabbed the keys to her vehicle. The defendant than exited the residence and began ransacking the vehicle looking for his cell phone charger. The victim stated the defendant than took a handful of papers from the center console and pushed them in her face till she also fell over. The defendant only left after the victim was able to call 911.**

**I spoke to Beatrice Donowitz a witness and the defendant's mother. The witness verbally stated she observed the defendant push the victim to the floor and shove his hand into her face. The witness refused to complete a sworn statement.**

**I observed the victim, who was upset and extremely fearful for her daughter's safety as well as hers. I observed several lacerations to her wrist and bruising to the arms and upper chest area of the victim's person.**

**The defendant fled the scene before my arrival. The victim completed a sworn written statement about this incident.**

**Based upon my investigation the defendant did actually and intentionally touch and strike the victim against the will of the victim and did cause bodily harm to the victim, contrary to Florida Statute 784.03(1)**

STATE OF FLORIDA  
 COUNTY OF PALM BEACH  
 \_\_\_\_\_ **DS BUTTERWORTH ;**  
 (Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this **3rd** day of **January** 20**18** by **DS BUTTERWORTH 16040**  
 (Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification. Type of identification produced **personal known**)

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)  
 \_\_\_\_\_

**SCANNED**  
**JAN 04 2018**