0509408 19MM8277 754

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number

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

Juvenile: 1 [N]

Agency ORI Number	Agency Name	Agency Report Number
FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	06 19-092650

Charge Type (Check as many as apply): 1. Felony; 2. Traffic Felony; [X] 3. Misdemeanor; 4. Traffic Misdemeanor; 5. Ordinance; 6. Other

If Weapon Seized — Enter Type

Multiple Clearance Indicator: 0 1

Location of Arrest (Including Name of Business)		Location of Offense (Including Name of Business)	
1219 N M ST	LAKE WORTH, FL 33460	1219 N M ST	LAKE WORTH FL 33460

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
Jul 13, 2019	0328					

Name (Last, First, Middle)			Alias (Name, DOB, Soc. Sec. #, Etc.)
SIMONS	JUDITH	H	

Race (W - White, B - Black, U - Unknown)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	06/10/1970	5-00	130	BLUE	BLONDE	MED	MED

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)	Marital Status	Religion	Indication of Alcohol Influence / Drug Influence: Y / N / Unk
SCAR ON RIGHT FORE ARM, 4 TATTOOS	MARRY	CATHOLIC	

Local Address (Street, Apt. Number)	City	State	Zip	Phone	Residence Type (1 City, 2 County, 3 Florida, 4 Out of State)
1219 N M ST	LAKE WORTH	FL	33460		

Permanent Address (Street, Apt. Number)	City	State	Zip	Phone	Address Source
SAME	SAME				VERBAL

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

DL Number, State	Social Security Number	INS Number	Place of Birth	Citizenship
S552-428-70-710-0/FL	[redacted]		UNITED KINGDOM	UNITED KINGDOM

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

Parent / Legal Guardian / Other — Name (Last, First, Middle)	Phone

Address (Street, Apt. No.)	City	State	Zip	Business Phone

Notified By (Name)	Date	Time	Juvenile Disposition (1 Handled/Processed within Dept and Released; 2 TOT HRS/DYS; 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 561 355-2526) informed of any address change
[ ] Yes, by (Name) [ ] No (Reason)

School Attended	Grade

Property Crime?	Description of Property	Value of Property
[ ] Yes [X] No		

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; P. Paraphernalia Equipment; U. Unknown; Z. Other

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation or ORD. #
DOMESTIC BATTERY(SIMPLE)	1	[X] Y [ ] N	784.03(1A1)	

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
			19-092650		

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation or ORD. #
		[ ] Y [X] N		

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

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation or ORD. #
		[ ] Y [X] N		

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

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation or ORD. #
		[ ] Y [ ] N		

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

Location (Court, Address, Room Number): CRIMINAL JUSTICE COMPLEX, 3228 GUN CLUB RD WPB, FL 33406

Court Date and Time

Month | Day | Year | Time | AM [ ] | PM [ ]

I AGREE TO APPEAR AT THE ABOVE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT I SHOULD WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS **NOTICE TO APPEAR**, THAT I MAY HELD IN CONTEMPT 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)
Name		(PRINT)
[ ] Dangerous [ ] Resisted Arrest [ ] Suicidal [ ] Other	Name of Arresting Officer: D/S R. CRISPIN FUENTES — ID #: 34263	
Intake Deputy — ID # — Pouch #	Transporting Officer — ID # — Agency: D/S R CRISPIN FUENTES — PBSO	Witness here if subject signed with an "X"

2019 JUL 14 AM 6:40

Page 1 of 1

OBTS Number

PROBABLE CAUSE AFFIDAVIT

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

1 Juvenile N

Agency ORI Number	Agency Name	Agency Report Number
FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	06 19-092650

Charge Type (Check as many as apply): [ ] 1. Felony [ ] 2. Traffic Felony [X] 3. Misdemeanor [ ] 4. Traffic Misdemeanor [ ] 5. Ordinance [ ] 6. Other

Special Notes

Defendant Name (Last, First, Middle)			Race	Sex	Date of Birth
SIMONS	JUDITH	H	W	F	06/10/1970

Charge	Charge
DOMESTIC BATTERY(SIMPLE)	
Charge	Charge

Victim Name (Last, First, Middle)			Race	Sex	Date of Birth
BURGIN	RICHARD	H	W	M	07/25/1970

Local Address (Street, Apt. Number)	City	State	Zip	Phone	Address Source
1219 N M ST	LAKE WORTH	FL	33460	561-660-3233	VERBAL

Business Address (Street, Apt. Number)	City	State	Zip	Phone	Occupation
					MARINE TECH

The undersign 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.

[X] was found to have committed the below acts, resulting from (described) investigation.

On the 13TH day of JULY 20 19 at 0223 [X] AM [ ] PM

On the above date and time I responded to 1219 N M St Lake Worth, Florida 33460 in reference a Domestic battery call.

Upon my arrival I met with the Victim Richard H Burgin DOB 7/25/1970 who stated the fallowing; He and his live in girlfriend Judith H Simons DOB 6/10/1970 had gone downtown to have drinks when Richard and Judith got into a verbal argument and Richard left the bar and walked home. Richard stated his girlfriend Judith took an Uber home and when he got home she had locked him outside the residence. Richard said he then started breaking a window on the north side of the residence that was already broken from a previous incident to get inside the residence. Richard received a cut and scratches during the process. Richard stated that once he was inside the residence he went to the room to confront Judith about locking him outside the residence when Judith was infuriated and attacked Richard by striking him with her fist and kicking him. Richard said he then to protect himself grabbed Judith and took her to the spare bedroom of the residence, and told her to sleep there. Judith grabbed furniture and other items from inside the residence and started throwing it and breaking it. Richard then said he also started grabbing furniture and throwing it.

Probable Cause exist to charge Judith H Simons with Battery (Simple) FSS 784.03(1A1)

The foregoing instrument was sworn to and affirmed before me this _____ day of _____ 20 _____, by:

D/S J Desmond #9714	D/S R. CRISPIN FUENTES 34263
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Name of Arresting/Investigating Officer
Signature of Notary Public / Clerk of Court / Officer (F S S. 117.00)	Signature of Arresting/Investigating Officer

Palm Beach County Sheriff's Office

DOMESTIC VIOLENCE/DATING VIOLENCE SUPPLEMENTAL PROBABLE CAUSE FORM

(Submit this form with the original Probable Cause Affidavit)

Defendant: SIMONS JUDITH H DOB: 06/10/1970 Case #: 19-092650

Victim: BURGIN RICHARD H DOB: 07/25/1970 Race: W Sex: M

Relationship between Victim and Defendant: _____

Photographs: Scene ☑Yes ☐No Victim ☑Yes ☐No Defendant ☑Yes ☐No

911 Call: ☑Yes ☐No Caller: Judith H Simons

Weapon Used: ☐Yes ☑No Type: _____

Witness: ☐Yes ☑No Name: _____

Victim Pregnant: ☐Yes ☑No If yes, _____Weeks _____Months

Injuries: ☑Yes ☐No Description: cuts/scratches

Medical Treatment: ☐Yes ☑No

At Scene: ☐Yes ☑No Paramedics: REFUSED

At Hospital: ☐Yes ☑No Hospital: REFUSED Physician: N/A

Are children living in the 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: HE ATTACKED ME

Vicitm's statements ☑Yes ☐No If yes, ☑written ☐recorded ☐oral

First words Victim said when you responded to scene: SHE ATTACKED ME

Did the Victim contact anyone other than the 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 _____

Victim contact information:

Local Address: 1219 N M ST

LAKE WORTH FL 33460

Phone: Home: 561-660-3233 Work: _____ Cell: _____

Employer: _____

Name of Relative: _____ Phone: _____

PBSO #0004A REV. 01/01

VICTIM NOTIFICATION FORM

- **Homicide** (Ch.782)
- **Attempted Murder**
- **Stalking** (F.S. 784.048)
- **Sexual Offense** (Ch.794)
- **Attempted Sexual Offense**
- **Dating Violence**
- **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.**

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

1. Incident Report #: 19-092650 Agency: Palm Beach County Sheriff's Office
   Offense: DOMESTIC BATTERY(SIMPLE)
   Suspect/Offender: SIMONS JUDITH H
   DOB: 06/10/1970 Race: W Sex: F

2. Warrant #(s):

3.a. Victim's Name: BURGIN RICHARD H DOB: 07/25/1970 Race: W Sex: M
   Address: 1219 N M ST
   City: LAKE WORTH State: FL Zip: 33460
   Home #: 561-660-3233 Work #: Other #:

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

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

Deputy's Name: D/S R. CRISPIN FUENTES ID #: 34263 Date: Jul 13, 2019

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

PBSO #0029A REV 05/11

SUSPECT/OFFENDER

(FOR WARRANTS USE ONLY) COURT CASE/WARRANT #

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:	

REVIEW COMPLETED BY

Booking Number: 2019022874	**Date:** 07/14/2019
	Specialist Name/ID: AM/31562