

## ARREST / NOTICE TO APPEAR

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

1

JUVENILE

OBTS Number	Agency ORI Number <b>0500200</b>		Agency Name <b>Boca Raton Police Department</b>		Agency Report Number (N.T.A.'s only) <b>3, 2   2019-005107</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	If Weapon Seized Enter Type: <b>Hands, Feet, Fist, Teeth</b>				Multiple Charge Indicator	
Location of Arrest (Including Name of Business) <b>7701 NE SPANISH RIVER TRAIL CT</b>			Location of Offense (Business Name, Address) <b>7701 NE SPANISH RIVER TRAIL CT, BOCA RATON, FL</b>			
Date of Arrest <b>04/11/2019</b>	Time of Arrest <b>02:19</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
Name (Last, First, Middle) <b>DASCALU, LINDA ANITA</b>						
Alias:						
Race W - White B - Black O - Oriental/Asian <b>W</b>	Sex M - Male F - Female <b>F</b>	Date of Birth <b>05/05/1979</b>	Height <b>5'02</b>	Weight <b>122</b>	Eye Color <b>BLUE</b>	Hair Color <b>BROWN</b>
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>TATT LOR HIP / BUTTERFLY</b>				Marital Status <b>S</b>	Religion <b>NONE</b>	Indication of Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>
Local Address (Street, Apt. Number) <b>7701 NE SPANISH TRAIL CT, BOCA RATON, FL 33487</b>				Phone <b>(561) 707-3816</b>		Residence Type: 1. City 2. County 3. Florida 4. Out of State
Permanent Address (Street, Apt. Number) <b>7701 NE SPANISH TRAIL CT, BOCA RATON, FL 33487</b>				Phone <b>(561) 707-3816</b>		Address Source <b>DEFENDANT</b>
Business Address (Name, Street) <b>SELF,</b>				Phone <b>(561) -</b>		Occupation <b>Interior Design</b>
DL Number, State <b>D240521796650 / FL</b>		Soc. Sec. Number	INS Number		Place of Birth (City, State) <b>BUCAREST, Romania</b>	Citizenship <b>S</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"/> Parent <input type="checkbox"/> Other: _____ Name (Last, First, Middle) <input type="checkbox"/> Legal Custodian Address (Street, Apt. Number) (City) (State) (Zip) Notified by: (Name) Released To: (Name) Relationship Desc.						Residence Phone Business Phone JUVENILE DISPOSITION 2. TOT IAC 3. Incompetent
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. <input type="checkbox"/> Yes, by: <input type="checkbox"/> No:						School Attended 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. 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/Opior.	P. Paraphernalia/ Equipment S. Synthetic	U. Unknown Z. Other	
Charge Description <b>BATTERY / DOMESTIC BATTERY</b>				State Violation Number <b>784.03(1) A1</b>		Violation of ORD #
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number
	<b>N</b>	<b>/</b>		<b>1</b>		<b>NO BOND</b>
Charge Description <b>TAMPERING WITH A WITNESS, VICTIM OR INFORMANT</b>				State Violation Number <b>914.22(1)</b>		Violation of ORD #
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number
	<b>N</b>	<b>/</b>		<b>1</b>		<b>NO BOND</b>
Charge Description				State Violation Number		Violation of ORD #
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number
Health / Apparent Physical Condition of Defendant				Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformation <input type="checkbox"/> Injuries		
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input 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				Released To		
Date Transported				Time Transported		
Other						
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.				Location (Court, Room) <b>South County 200 W Atlantic Ave Delray Beach, FL 33444</b> Court Date and Time <b>05/09/2019 08:30:00</b>		
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.				No Photo Available		
Signature of Defendant (or Juvenile and Parent/Custodian)				Date Signed		
HOLD for Other Agency <input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other				Name Verification (Printed by Arrestee) (PRINT)		
Name of Arresting Officer (Print) <b>BURNETTE, A. N.</b>				LD. # <b>798</b>		
Transposing Officer <b>Burnette</b>				LD. # <b>798</b>		
Agency <b>BP</b>				PAGE <b>1 OF 1</b>		
Witness here if subject signed with an "X".						

O 506941

3319

# PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

OBT Number		Agency ORI Number <b>FL 0500200</b>		Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>		Agency Report Number <b>3 2 2019-005107</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>DASCALU, LINDA ANITA</b>						Race <b>W</b>	Sex <b>F</b>
Date of Birth <b>05/05/1979</b>							
Charge Description <b>784.03(1) BATTERY / DOMESTIC BATTERY</b>				Charge Description <b>914.22(5) TAMPERING WITH A WITNESS, VICTIM OR INFO</b>			
Victim's Name (Last, First, Middle) <b>LAUSTEN, MOGENS</b>				Race <b>W</b>		Sex <b>M</b>	Date of Birth <b>09/29/1973</b>
Local Address (Street, Apt. Number) <b>608 BOCA MARINA CT, BOCA RATON, FL 33487</b>				Phone <b>(561) 221-8007</b>		Address Source	
Business Address (Name, Street) (City) (State) (Zip)				Phone		Occupation	
<p>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.</p> <p>The Person taken into custody ...</p> <p><input type="checkbox"/> committed the below acts in my presence.</p> <p><input checked="" type="checkbox"/> confessed to <b>OFC. BURNETTE</b> admitting to the below facts.</p> <p><input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <b>11</b> day of <b>April</b>, <b>2019</b> at <b>01:25</b> (Specifically include facts constituting cause for arrest.)</p> <p>On 04/11/2019 at 0017 hours, I responded to 7701 NE Spanish River Trail Ct in reference to a domestic disturbance.</p> <p>Upon arrival, I met with a white male and a white female who were exiting the residence. I observed the white female, later identified as Linda Dascalu grabbing the white male. The white male later identified as Mogens Lausten was yelling at Linda to let him go and to stop touching him. I immediately separated both parties, ordering Linda to stand on the opposite side of the driveway. I then asked Mogens about the events that occurred. Mogens stated that Linda went out with some friends and came home intoxicated. He continued explaining that when she came home, she was heard blasting music outside in her car. Mogens approached Linda and asked her to turn down the music because he was trying to sleep. Linda then began to slam doors and scream at Mogens, stating that he was disrespectful and a cheater. Mogens stated that she increasingly became angry and began to hit him with open hands, slapping him in the face, neck and shoulder area. At that point, Mogens grabbed his cell phone and attempted to call 911, however, Linda kept trying to grab the phone from him to prevent him from calling 911.</p> <p>I then spoke with Linda and asked her for her account of what happened. Linda stated that she was out with her friends and was informed that Mogens was cheating on her. Linda explained that one of her friends was out at a bar last week and saw Mogens with an unknown woman leaving the bar. Linda stated that on that corresponding night, Mogens did not return home. This made her very upset and she went home to confront him about the situation. When she got home, Mogens was sitting on the couch and she started to question him about the woman he was seen with. She then stated that she became increasingly upset, screaming at Mogens. Mogens then attempted to dial 911 but Linda stated that she was trying to take the phone from him because she felt they could talk things through.</p>							
SWORN AND SUBSCRIBED BEFORE ME				SIGNATURE OF ARRESTING / INVESTIGATING OFFICER			
<b>GRAHAM, KEITH J</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 119.01) <b>04/11/2019</b> DATE				<b>BURNETTE, ASHLEY NICOLE (798)</b> NAME OF OFFICER (PLEASE PRINT) <b>04/11/2019</b> DATE			
				PAGE 1 of 2			

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
Agency ORI Number <b>FL 0500200</b>	Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>	Agency Report Number <b>3   2   2019-005107</b>					
Charge Type: <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>DASCALU, LINDA ANITA</b>		Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>05/05/1979</b>			
<p>Mogens daughter, Chloe Lausten, was also on scene but stated that she did not see anything physical take place. She did state, however, that she heard what sounded like punches or slaps coming from the living room area.</p> <p>I then looked at Mogens head, face and shoulder area for any marks or bruises. I observed red marks on Mogens forehead, left neck area and left shoulder. These marks are consistent with trauma to the skin such as a slap or punch. Mogens also sustained a superficial scratch to the left side of his forehead. Photos of these injuries were taken and a statement was collected from Mogens and submitted into evidence.</p> <p>Based on the findings of my investigation, I have determined that Linda did actually and intentionally strike Mogens against his will, contrary to Florida Statute 784.03(1). Mogens and Linda have been dating for 2 years and share a home together. I have also determined that Linda did knowingly physical force to prevent Mogens from communicating with a law enforcement officer in his attempt to dial 911, contrary to Florida Statute 914.22(1).</p> <p>I then placed Linda under arrest at 0053 hours.</p> <p>Linda as transported and turned over to the Palm Beach County Jail without incident.</p>							
<div style="position: relative;"> <div style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%) rotate(-45deg); opacity: 0.1; font-size: 100px; pointer-events: none;">NOT A CERTIFIED COPY</div> </div>							
SWORN AND SUBSCRIBED BEFORE ME  <b>GRAHAM, KEITH T</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)  <b>04/11/2019</b> DATE		<div style="text-align: center;">            SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  <b>BURNETTE, ASHLEY NICOLE (798)</b>            NAME OF OFFICER (PLEASE PRINT)  <b>04/11/2019</b>            DATE         </div>					

# VICTIM NOTIFICATION FORM

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

- Homicide (Ch. 782)
- Sexual Offense (Ch. 794)
- Attempted Murder
- Attempted Sexual Offense
- 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.)

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

1. Incident Report#: 19-005107 Agency: BRPD  
Offense: Domestic Battery  
Suspect/Offender: Dasch, Linda  
D.O.B. 5/5/79 Race: White Sex: Female
2. Warrant#(s):
- 3.a. Victim's name: Lausten, Mogens D.O.B. 9/29/73 Race: White Sex: Male  
Address: 7701 NE Spanish River Trail Ct  
City: Boca Raton State: FL Zip: 33487  
Home#: 561-214-2171 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 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: Pursuant to F.S. 119.07 (3)(S)1, I request that the address and telephone number on this form be kept confidential (applicable only to sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery, or domestic violence cases).  
Other confidentiality provisions of Florida State Statutes may also be applicable

Signature of person waiving notification:       

Printed name of person waiving notification:       

Officer's Name: Burnette I.D.# 798 Date: 4/11/19  
White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records

SUSPECT/OFFENDER:       

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT#:

**PALM BEACH CNTY SHERIFF'S OFFICE**

Date: 04/11/2019  
Time: 10:02 AM  
Page: 1 of 1

**VICTIM NOTIFICATION ENTRY**

Defendant Name: DASCALU, LINDA ANITA

SSN: [REDACTED] Book #: 2019011986

Victim First Name: MOGENS

Victim Middle Name:

Victim Last Name: LAUSTEN

Victim Full Name: LAUSTEN, MOGENS

Victim Minors Name:

Victim Address 1: 7701 NE SPANISH RIVER TR

Victim Address 2:

Victim City: BOCA RATON

Victim State/Zip: FL 33487

Minor Relationship:

Day Phone: (561) 214-2171

Night Phone:

Last 4 SSN:

Victim Type: DOMESTIC VIOLENCE

Victim Id: 165757

Book #: 2019011986

Entry By: 32779 Modified By: 32779



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

**REVIEW COMPLETED BY**

Booking Number: 2019011986	Date: 4/11/2019
	Specialist Name/ID: J. Beck/9007