

0520704

21CT 409ANB

2340

ARREST / NOTICE TO APPEAR

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

1

JUVENILE

AD M I N I S T R A T I O N	OBTS Number		Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 514 21-000115		1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias		1	JUVENILE				
D E F E N D A N T	Charge Type: Check as many as apply		1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/>		3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/>		5. Ordinance <input type="checkbox"/> 6. Other <input type="checkbox"/>		If Weapon Seized		Multiple Clearance Indicator					
	Location of Arrest (Including Name of Business) 4177 W INDIANTOWN RD JUPITER, FL 33478		Location of Offense (Business Name, Address) 4177 W INDIANTOWN RD, JUPITER, FL 33478		Date of Arrest 01/10/2021		Time of Arrest 18:47		Booking Date		Booking Time		Jail Date	Jail Time	Location of Vehicle	
C O D E F	Name (Last, First, Middle) JOLLEY, JESSICA ANN		Alias:		Alias (Name, DOB, Soc. Sec. #, Etc.)											
	Race W - White 1 - American Indian B - Black 0 - Oriental/Asian		Sex W		Date of Birth 11/24/1980		Height 5'09		Weight 150		Eye Color BROWN		Hair Color BROWN		Complexion LIGHT	Build Medium
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status M		Religion CHRISTIAN		Indication of Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>		Residence Type: 1. City 3. Florida 2. County 4. Out of State		Address Source FL DL		Occupation Unknown			
	Local Address (Street, Apt. Number) 12111 182ND RD N-FLSO, FL 33478		(City) Jupiter		(State)		(Zip)		Phone (561) 779-6945		Citizenship US					
Permanent Address (Street, Apt. Number) 12111 182ND RD N-FLSO, FL 33478		(City) Jupiter		(State)		(Zip)		Phone (561) 779-6945		Citizenship US						
Business Address (Name, Street) UNKNOWN,		(City)		(State)		(Zip)		Phone		Occupation Unknown						
D/L Number, State J400421809240 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) JUPITER		Citizenship US								
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 <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor								
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 <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor								
<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		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 <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		Grade		Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property						
Drug Activity N. N/A S. Sell R. Smuggle K. Disperse/Distribute M. Manufacture/Produce/Cultivate Z. Other P. Possess B. Buy D. Deliver E. Use		Drug Type N. N/A B. Barbiturate H. Hallucinogen P. Paraphernalia/Equipment S. Synthetic A. Amphetamine C. Cocaine E. Heroin O. Opium/Deriv.		U. Unknown Z. Other												
Charge Description DUI - DAMAGE TO PERSON/PROPERTY		Statute Violation Number 316.193(3)(C)(1)		Violation of ORD #												
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence		Warrant / Capias Number		Bond		
N								I		<input type="checkbox"/> Y <input checked="" type="checkbox"/> N						
Charge Description CITATION - REFUSE TO SIGN/ACCEPT CITATION		Statute Violation Number 318.14(3)		Violation of ORD #												
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence		Warrant / Capias Number		Bond		
N								I		<input type="checkbox"/> Y <input checked="" type="checkbox"/> N						
Charge Description		Statute Violation Number		Violation of ORD #												
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence		Warrant / Capias Number		Bond		
										<input type="checkbox"/> Y <input checked="" type="checkbox"/> N						
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"/> Deformities <input type="checkbox"/> Injuries		Explain:										
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		Released By		Released To								
<input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health																
Transported By		Date Transported		Time Transported		Other										
<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.		Location (Court, Room)		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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.		Signature of Defendant (or Juvenile and Parent/Custodian) COMISATIVE		Date Signed										No Photo Available		
HOLD for Other Agency		Signature of Arresting Officer JES		Name Verification (Printed by Arrestee)												
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Name of Arrestee (Print) YOCUM, CRAIG		ID.# 1185		(PRINT) JAN 11 2021 JOSEPH ABRUZZO, CLERK PALM BEACH COUNTY, FL		WITNESS here if subject signed with an		PAGE 1 OF 1						
Intake Deputy White 0140		Pouch #		Transporting Officer Ychum, Craig		ID.# 383		Agency JPD								

COURT STATE ATTORNEY AGENCY CENTRAL RECORDS JAIL CRIME ANALYSIS DEFENDANT

SCANNED

JAN 11 2021

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

OBTS Number	Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT	Agency Report Number 5 4 21-000115
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other

Name (Last, First, Middle) JOLLEY, JESSICA ANN	Alias	Race W	Sex F	Date of Birth 11/24/1980
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Charge Description 316.193(3)(C)(1) DUI - DAMAGE TO PERSON/PROPERTY	Charge Description 318.14(3) CITATION - REFUSE TO SIGN/ACCEPT CITATIO
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Victim's Name (Last, First, Middle) State Of Florida	Race	Sex	Date of Birth
Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	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 10 day of January, 2021 at 18:47 (Specifically include facts constituting cause for arrest.)



On 01/10/2021 at approximately 1823 hours, I responded to the area of S.R. 706 (W Indiantown Rd.) and Florida's Turnpike in the Town of Jupiter, Palm Beach County, FL in reference to a motor vehicle crash. At the time, I was driving a fully-marked Jupiter Police Department patrol vehicle (vehicle 1425), I was wearing a JPD uniform clearly identifying myself as a Jupiter Police Officer, and I was wearing my department-issued Axon body camera.



While enroute to the call, dispatch advised the vehicles involved (black 2015 Nissan SUV FL tag # MBU184 and gray 2011 Hyundai sedan FL tag # RKX9J) were being relocated to the CVS parking lot located at 4177 W Indiantown Rd. Dispatch further advised the caller, later identified to be Regina Sellers (w/f; 09/17/1968), stated the driver of the other vehicle appeared to be intoxicated - citing the odor of alcohol and unsteadiness of the other driver.

Upon arrival, I observed both vehicles parked (facing west) on the east side of the CVS building. I observed minor damage to the rear of the Nissan, which was unoccupied. I walked to the Hyundai and observed a white female, later identified by her valid Class E Florida driver license to be Jessica Jolley (11/24/1980), sitting in the driver seat. Jolley was the sole occupant of the vehicle. The vehicle was running.

I knocked on the window and Jolley looked at me. I observed Jolley was crying and she did not immediately open the door. Jolley ultimately opened the door and I immediately noted the strong odor of an unknown alcoholic beverage inside the vehicle. I observed a large, opened can of (what appeared to be) an alcoholic beverage in the center console cupholder. I requested Jolley produce her driver license and she complied. Jolley exited the vehicle and I observed she was unsteady on her feet (swaying as she stood still). While I spoke with Jolley about the crash, I noted her speech was heavily slurred and detected the odor of an unknown alcoholic beverage on her breath which intensified as

SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <u>01/10/2021</u> DATE	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER YOCUM, CRAIG (1185) NAME OF OFFICER (PLEASE PRINT) <u>01/10/2021</u> DATE	PAGE 1 OF 3
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OBT Number Agency ORI Number FL 0501700	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	JUVENILE
Agency Name JUPITER POLICE DEPARTMENT	Agency Report Number 5 4 21-000115			
Charge Type Check as many as apply.			Special Notes:	
<input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other				
Name (Last, First, Middle) JOLLEY, JESSICA ANN		Race W	Sex F	Date of Birth 11/24/1980
<p>she spoke. I requested Jolley produce her registration and proof of insurance for the vehicle several times and she was ultimately unable to do so. Jolley had mood swings and appeared as though she was having a hard time speaking during her bouts of crying.</p> <p>I provided the collected information to Officer Fandrey # 340, who was investigating the crash. I also advised Officer Fandrey of Jolley's statements about the crash, from her perspective. Officer Fandrey advised Jolley he was finished with the crash investigation and was turning the investigation over to me.</p> <p>I advised Jolley I was conducting a criminal DUI investigation and read her her Miranda Warnings from a prepared text. Jolley advised she understood. Jolley stated she was coming from the Inlet with her children, which she had dropped off to her husband before the crash happened. Jolley advised she had consumed 2 alcoholic beverages before driving the car and whatever was gone from the can in the center console (later confirmed to be Straw-ber-rita brand beverage). Jolley stated she did not feel under the influence but would not answer me when I asked if she felt as though she should be driving.</p> <p>I made contact with the other driver involved in the crash (Sellers). Sellers advised me she exited her vehicle after the crash occurred and observed Jolley as the sole-occupant of the Hyundai. Sellers stated both women drove to the parking lot of the CVS to get out of the roadway, where Jolley attempted to only exchange information with Sellers outside of any Police involvement. Sellers stated she could smell alcohol on Jolley and stated Jolley almost fell to the ground after tripping over a concrete parking stop in the parking lot.</p> <p>I again approached Jolley who was sitting on a nearby bench. I requested Jolley complete Standardized Field Sobriety Tasks (SFSTs). She refused by shaking her head. I advised Jolley of her Taylor Warnings, confirmed she understood, and again requested she complete SFSTs. Jolley again refused by shaking her head.</p> <p>I placed Jolley under arrest for DUI and transported her to the Jupiter Medical Center, as she was involved in a motor vehicle crash. Officer Anderson # 313 stood by in the hospital with Jolley while I completed the arrest paperwork.</p> <p>When Jolley was cleared, Officer Anderson and Officer Fandrey escorted Jolley back to my patrol vehicle where I requested she provide a lawful sample of her breath for the purpose of determining the alcohol content. Jolley refused. I read Jolley Implied Consent (excluding the CDL portion of Implied Consent), confirmed she understood, and again requested she provide a breath sample. Jolley refused at 1949 hours.</p> <p>I asked Jolley if she was willing to sign her DUI citation and she refused.</p>				
SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 01/10/2021 DATE		 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER YUCHUM, CRAIG (1185) NAME OF OFFICER (PLEASE PRINT) 01/10/2021 DATE		
		PAGE 2 OF 3		

DBTS Number Agency ORI Number FL 0501700	Agency Name JUPITER POLICE DEPARTMENT	Agency Report Number 5 4 21-000115	1 Arrest 2 N.T.A.	3 Request for Warrant 4 Request for Capias	1	JUVENILE
Charge Type. Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other			Special Notes:			
Name (Last, First, Middle) JOLLEY, JESSICA ANN			Race W	Sex F	Date of Birth 11/24/1980	
<p>Based on the aforementioned facts resulting from my investigation, I find Probable Cause to charge Jessica Jolley with DUI - Damage to Property pursuant to FSS 316.193(3)(c)(1).</p>						
NOT A CERTIFIED COPY						
PROBABLE CAUSE STATEMENT	SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 01/10/2021 DATE					
ADMINISTRATIVE	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER YOCUM, CRAIG (1185) NAME OF OFFICER (PLEASE PRINT) 01/10/2021 DATE					
						PAGE 3 OF 3

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

**STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH AND/OR URINE TEST**

I, Officer Craig Yochum, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of Jupiter Police Department, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 10th day of Jupiter, 20 21, at 6:47 P.M. A.M.

DRIVER Jessica Ann Jolley,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# J-400-421-80-924-0, state of Florida, was placed under lawful arrest for

the offense of DUI - Damage to Property by Officer Craig Yochum and
(Name of Arresting Officer)

issued Citation # ADB9BJE

That on or about the 10th day of January, 20 21, at 7:49 P.M. A.M.

in Palm Beach County,

I requested that the driver submit to a breath and/or urine test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended for refusing to submit to a breath, urine or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.

[Signature] 583
Signature of Law Enforcement Officer or
Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)

The foregoing instrument was sworn and subscribed before me:

[Signature] 340
Signature of Arresting Officer

Title Police Officer

Date 01/10/2021

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before

me this 10th day of January, 20 21,

by Officer Craig Yochum # 383,

who is personally known to me or who has produced

Personally Known as identification

Notary Public _____

Note: Mail or hand deliver to the designated Bureau of Administrative Reviews office, Department of Highway Safety and Motor Vehicles, with the driver's license, the appropriate copy of the UTC, and the probable cause affidavit.



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"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>	Other:		
	<input type="checkbox"/>	Other:		

REVIEW COMPLETED BY

Booking Number: 2021000804	Date: 01/11/2021
	Specialist Name/ID: C. Denzel/8691