

0517653

Arrest Report

NR

50-2020-CT-008944-ANB

3027



FLORIDA HIGHWAY PATROL
P.O. BOX 540007, GREENACRES, FL 33454

Report Date / Time 7/24/2020 01:44 PM	Report Number FHP99ARR830689	Case Number/Cad Number FHPL20OFF040183 / LWRC20CAD107877	Reporting Officer Name TOMAS ANTONIO, ANIBA
Originating Agency ORI	Occur Date Time Range 07/24/2020 12:09:40 -	Jurisdiction	Clearance

Location of Occurrence		Location Description	
County PALM BEACH	Location Type PUBLIC PLACE	EXT RAMP	
Street Number 1-95 SB	Street I-95 SB	Apt/Lot/Bldg LAKE WORTH	City LAKE WORTH
		State FL	Zip Code 33462

Defendant		Race	Sex	Height	Weight	Hair	Eyes
First Name JESSICA	Middle Name DANIELE	WHITE	FEMALE	508	180	BLO	GRN
Last Name ROSS	Suffix	Drivers License or other ID R200424907710		State FL	OCA / Agency ID		
MNI #	SSN	Date of Birth 07/31/1990	Age 29	ID Type E	Place of Birth:		

Address
* RESIDENCE / 2425 2ND AVE N APT 51 , , FL 33461 /

Arrest		Arrest Location Description	
Arrest Date/Time 7/24/2020 12:46:12 PM	Arrest Location Type PUBLIC PLACE	SHELL GAS STATION	
Street Number 1320	Street E LANTANA RD	Apt/Lot/Bldg	County PALM BEACH
		City LANTANA	State FL
		Zip Code	

Charge : S	Bond Amount \$0.00	<input type="checkbox"/> No Bond
Counts 1	Charge 316.193.1A	General Offense Code DUI-UNLAW BLD ALCH
Charge Degree N	Charge Level MISDEMEANOR	

Charge Description DUI ALCOHOL OR DRUGS	No
Is Arrestee Juvenile?	On-View Arrest (apprehension without a warrant or previous incident report)
Type of Arrest	

Bond Set by Court	JUL 25 AM 12:03
Bond Amount	<input type="checkbox"/> No Bond
Bond Type(s)	

Probable Cause
On July 24, 2020 at approximately 12:09 pm, I Trooper Anibal Tomas Antonio (#1820), was dispatch

Report Date / Time 7/24/2020 01:44 PM	Report Number FHP99ARR830689	Case Number/Cad Number FHPL20OFF040183 / LWRC20CAD107877	Reporting Officer Name TOMAS ANTONIO, ANIBA
Originating Agency ORI	Occur Date Time Range 07/24/2020 12:09:40 -	Jurisdiction	Clearance

by LWRCC (Lake Worth Regional Communication Center) to a vehicle crash that occurred on Interstate 95 (State Road 9) southbound exit ramp to Lantana Road. Dispatched later advised me that the vehicles that were involved in the vehicle crash were relocated to the Shell gas station on Lantana Road just east of the Interstate 95. Upon my arrival I observed a white Dodge vehicle as well as a black BMW vehicle. The white Dodge vehicle had a Florida Tag attached: Z20HMU and was operated by a white male who was identified by his Florida driver license: W630739652210 as Roland Wayne Worth from Palm Beach County, FL. The driver of the black BMW was operated by a female driver who was later identified by her Florida driver license: R200424907710 as Jessica Daniele Ross from Lake Worth, FL. Mr. Worth advised me that Ms. Ross had reversed and rear-ended Mr. Worth Vehicle on the exit ramp to Lantana Rd on Interstate 95 southbound. After king with Ms. Ross about the crash, I was able to observe Ms. Ross had a slurred speech when talking and had a hard time keeping her eyes open. Ms. Ross about the crash. After completing the vehicle crash investigation, I advised Ms. Ross that I have concluded the crash investigation and was going to conduct a DUI investigation (Driving Under the Influence). Trooper William Leon (#1115) was also at the scene to observed and guide me through the exercises that I was going to conduct. I read Ms. Ross her Miranda Right from an issued Miranda Rights card. Ms. Ross acknowledge that she understood her rights and was willing to perform several series of roadside exercises to which she consented. The area for the following roadside exercise was level. I asked Mr. Ross if she had any problem with her eyes aside from corrective vision, or injuries that would prevent Ms. Ross from performing any of the exercises that she will be requested of her to perform. The following exercise were conducted and observed:

Horizontal Gaze Nystagmus:

- LT eye lack of smooth pursuit
- RT eye lack of smooth pursuit
- LT eye distinct & sustained nystagmus at max. deviation
- RT eye distinct & sustained nystagmus at max. deviation
- LT eye distinct & sustained onset prior to 45 degree
- RT eye distinct & sustained onset prior to 45 degree

During the Horizontal Gaze Nystagmus Ms. Ross failed to keep her head still while conducting the exercise.

Walk & Turn Exercise:

Interaction Phase:

- Subject started exercise before demonstrating
- The exercise was demonstrated and explained
- Subject was advised that she understood each instruction
- Subject failed to maintain starting position
- Subject failed to take front heel to toe steps and back heel to toe steps as instructed to do so.
- Subject failed to do an improper turn.

One leg Stand Exercise:

Interaction Phase:

- Exercise was demonstrated and explained

Report Date / Time 7/24/2020 01:44 PM	Report Number FHP99ARR830689	Case Number/Cad Number FHPL20OFF040183 / LWRC20CAD107877	Reporting Officer Name TOMAS ANTONIO, ANIBA
Originating Agency ORI	Occur Date Time Range 07/24/2020 12:09:40 -	Jurisdiction	Clearance

-Subject advised that she understood the instructions explained
 -Subject failed to maintain her arms to her side and used arms for balance
 -Subject put her foot down during the exercises.
 Due to the totality of the circumstance, Ms. Ross was then placed under arrest for DUI pursuant to Florida Statute 316.193. at 1:32pm. Ms. Ross was then searched and placed in my patrol vehicle and was then transported to the Palm Beach County Jail's Breath Alcohol Test (BAT) facility to provide a breath sample. I then conducted a 20-minute observation of Ms. Ross and Ms. Ross did not take anything in her mouth during the 20-minute observation that was conducted by me. Ms. Ross first breath sample result were 0.000. A second breath sample was taken, and the result of the breath were 0.000. I then requested Ms. Ross to provided me with a urine sample. Ms. Ross consented to provide a urine sample at 3:55 pm. The Urine sample was then placed into evidence for further investigation. Ms. Ross was then transported to JFK Medical Center for medical clearance. During the medical clearance at the hospital, Ms. Ross advised the nurse that she had taken Xanax and heroin. After the medical clearance Ms. Ross was then taken to the Palm Beach County jail for booking with incident.

The video of the roadside exercises and the transport to the Palm Beach County Jail can be obtained through FHP custodian.

The video of the Palm Beach County Jail's BAT can be obtained through the Palm Beach County.

All the event occurred in Palm Beach County, FL

Jail Booking Facility

Booking Date/Time	Booking County PALM BEACH	Booking Facility PALM BEACH COUNTY CORRECTIONS	Booking Facility Phone (561) 688-4400
Booking Facility Location 3228 GUN CLUB ROAD WEST PALM BEACH, FLORIDA 33406		Booking Number	
Booking Comments			

Court

Court County PALM BEACH	Court Location 3188 PGA BLVD. PALM BEACH GARDENS, FL 33410		
Court PALM BEACH NORTH COUNTY COURTHOUSE	Court Phone 561-624-6608	Court Appearance Date / Time 9/3/2020	Court Fine 1100 Am
Comments			

Officer Name Rank / ID # TOMAS ANTONIO, ANIBA TPR	Involvement On Report / Reporting Role REPORTING OFFICER	Officer Agency Org/Unit FLORIDA HIGHWAY PATROL FHPL/LWRCC/PALM BEACH/BROW LN TO SR804
4750		



PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 20-090550 PBSO ZONE 1-32

AGENCY CASE # FHP200FF040183 CRASH CASE # _____

TIME OF STOP/CRASH 12:09pm DATE 7/24/20 DAY Friday

SUBJECT'S NAME Jessica Daniele Ross RACE W SEX F

HGT 5'08" WGT 160 DOB 07/31/1990

LOCATION Lantana RD eastbound

ARRESTING OFFICER'S NAME & ID Tomas Antonio 4750 AGENCY FHP

DIVISION: _____

NOTIFIED BY COMMO Y

ARRIVAL AT FACILITY 14:23

Arrest Time 13:32

BREATH RESULTS:

- 1. .000
- 2. .000
- 3. N/A
- 4. URINE

TESTING OFFICER'S ID 24639

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: FHP-L

SUBJECT: ROSS, JESSICA D

CASE NUMBER: 20-090550

DATE: Jul 24, 2020

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 14:48

ENDING TIME: 15:19

BREATH TESTS RESULTS: 1) .000 TIME 14:54 A.M. P.M. 2) .000 TIME 14:57 A.M. P.M.
3) N/A TIME N/A A.M. P.M. 4) N/A TIME N/A A.M. P.M.

BREATH OPERATOR: P.POUND #24639

MAINTENANCE TECHNICAN: J. KARLECKE# 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: SLEEPY

CLOTHING: TEAL/BLACK/ORANGE/RED DRESS, WHITE/BLACK NADALS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: GLASSY AND BLOODSHOT

NO DRE CONDUCTED

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 14:23 HRS.

SUBJECT: AGREED TO TAKE TEST

TECH: READ TEST RESULTS

SUBJECT: STATED SHE UNDERSTOOD TEST RESULTS

A/O: ASKED FOR URINE AT 15:00 HRS

SUBJECT: STATED SHE WOULD PROVIDE A URINE SAMPLE AT 15:01 HRS

A/O: READ I/C

SUBJECT: STATED SHE UNDERSTOOD I/C AND WOULD PROVIDE A URINE SAMPLE 15:02 HRS

A/O: READ RIGHTS

SUBJECT: STATED SHE UNDERSTOOD RIGHTS

A/O: CONDUCTED Q&A

SUBJECT: ANSWERS QUESTIONS

SUBJECT: PROVIDE A URINE SAMPLE AT 15:55 HRS

**FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT**

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006478 Software: 8100.27
Date of Test: 07/24/2020

Date of Last Agency Inspection: 07/17/2020

Observation Period Began: 14:23

Subject's Name: JESSICA D ROSS

DOB: 07/31/1990 Sex: F

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:	Test	g/210L	Time
	Diagnostics Check	OK	14:52
	Air Blank	0.000	14:53
	Control Test	0.082	14:53
	Air Blank	0.000	14:53
	Subject Sample #1	0.000	14:54
	Air Blank	0.000	14:55
	Air Blank	0.000	14:57
	Subject Sample #2	0.000	14:57
	Air Blank	0.000	14:58
	Control Test	0.081	14:58
	Air Blank	0.000	14:59
	Diagnostics Check	OK	14:59

Cylinder Lot: 28719080A1
Exp: 12/05/2021

State of Florida, County of Palm Beach.

Personally appeared before me the undersigned authority, who () is personally known to me or () produced _____ as identification, and who after being placed under oath, states:

I PARIS D POUND, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____ Date: 07/24/20
Signature

Sworn to (or affirmed) before me this 24th day of JULY, 2020

Signature of Notary Public-State of Florida: [Signature] Printed Name of Notary Public-State of Florida: TRP. A. TAMAS ANTONIO

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

SUBJECT: ROSS, JESSICA D

CASE NUMBER: FHP200FF01183

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.

-OR-

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances.

-OR-

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am _____ of the _____.

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X) READ ON CAMERA

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X) READ ON CAMERA

SUBJECT: Ross, JESSICA D CASE NUMBER: 478-490

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? NO WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE: EPILEPSY? _____
 GLASS EYE? _____
 FALSE TEETH? _____
 EAR INFECTION? _____
 INNER EAR TROUBLE? _____
 DIABETES? _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: James A. [unclear]
WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL



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: 2020017729	Date: 7/25/2020
	Specialist Name/ID: B Evans / 23649