

21CF7947

|  |                                   |   |  |   |                           |  |   |   |
|--|-----------------------------------|---|--|---|---------------------------|--|---|---|
| <b>ARREST / NOTICE TO APPEAR</b>   |                                   | 1. Arrest<br>2. N.T.A.                                    |  | 3. Request for Warrant<br>4. Request for Capias   |                           | 1  | Juvenile  | N   |
| OBTS Number  |                                   | Agency ORI Number<br><b>FLO 500000</b>                    |  | Agency Name<br><b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>  |                           | Agency Report Number (N.T.A.'s only)<br><b>06-21-111241</b>  |   |   |
| Charge Type:<br>Check as many as apply:<br><input checked="" type="checkbox"/> 1. Felony<br><input checked="" type="checkbox"/> 2. Traffic Felony<br><input type="checkbox"/> 3. Misdemeanor<br><input type="checkbox"/> 4. Traffic Misdemeanor<br><input type="checkbox"/> 5. Ordinance<br><input type="checkbox"/> 6. Other    |                                   | Weapon Seized / Type<br>2 1. Yes<br>2. No N/A             |  | Multiple Clearance Indicator<br>1   |                           |  |   |   |
| Location of Arrest (Including Name of Business)<br><b>Ponderosa Rd / Palmetto Park Rd</b>  |                                   |   |  | Location of Offense (Business Name, Address)<br><b>Palmetto Park Rd / Lyons Rd #N/A, Boca Raton, FL 33433</b> |                           |  |   |   |
| Date of Arrest<br><b>09/27/2021</b>  | Time of Arrest<br><b>2323 Hrs</b> | Booking Date  | Booking Time   | Jail Date   | Jail Time                 | Location of Vehicle  |   |   |
| Name (Last, First, Middle)<br><b>Muni, Jessica,</b>  |                                   |   |  | Alias (Name, DOB, Soc. Sec. #, Etc.)  |                           |  |   |   |
| Race<br>W - White I - American Indian<br>B - Black O - Oriental/Asian  | Sex<br>W F                        | Date of Birth<br><b>1/10/1982</b>                         | Height<br><b>5'06</b>  | Weight<br><b>130</b>  | Eye Color<br><b>Brown</b> | Hair Color<br><b>Blonde</b>  | Complexion<br><b>Light</b>  | Build<br><b>Thin</b>  |
| Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)<br><b>Chest, Back Tattoo "3 brids"</b>   |                                   |   |  | Marital Status<br><b>Single</b>   |                           | Religion<br><b>NONE</b>  |   | Indication of Alcohol Influence<br>Y <input type="checkbox"/> N <input type="checkbox"/> Unk <input type="checkbox"/> |
| Local Address (Street, Apt. Number) (City) (State) (Zip)<br><b>21098 SHADY VISTA LN, BOCA RATON FL 33428</b>   |                                   |   |  | Phone<br><b>(561) 563-9852</b>  |                           | Residence Type:<br>1. City 2. County 3. Florida 4. Out of State<br><b>2</b>                              |   |   |
| Permanent Address (Street, Apt. Number) (City) (State) (Zip)   |                                   |   |  | Phone<br>( )  |                           | Address Source<br><b>DL</b>  |   |   |
| Business Address (Name, Street) (City) (State) (Zip)   |                                   |   |  | Phone<br>( )  |                           | Occupation   |   |   |
| D/L Number, State<br><b>M500420825100,</b>   |                                   | Soc. Sec. Number  |  | INS Number  |                           | Place of Birth (City, State)<br><b>New York, Oyster Bay</b>  |   | Citizenship<br><b>US</b>  |
| Co-Defendant Name (Last, First, Middle)  |                                   |   |  | Race  | Sex                       | Date of Birth  | <input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony<br><input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor<br><input type="checkbox"/> 5. Juvenile |   |
| Co-Defendant Name (Last, First, Middle)  |                                   |   |  | Race  | Sex                       | Date of Birth  | <input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony<br><input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor<br><input type="checkbox"/> 5. Juvenile |   |
| Name (Last) (First) (Middle)   |                                   |   |  | Residence Phone<br>( )  |                           |  |   |   |
| Address (Street, Apt. Number) (City) (State) (Zip)   |                                   |   |  | Business Phone<br>( )   |                           |  |   |   |
| Notified by: (Name)  |                                   |   |  | Date  | Time                      | Juvenile Disposition<br>1. Handled/processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated |   |   |
| 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.<br><input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason) |                                   |   |  | School Attended   |                           |  |   | Grade   |
| Property Crime?<br><input type="checkbox"/> Yes <input type="checkbox"/> No  |                                   | Description of Property                                   |  |   | Value of Property         |  |   |   |
| Drug Activity<br>N. N/A<br>P. Possess  | S. Sell<br>B. Buy<br>T. Traffic   | R. Smuggle<br>D. Deliver<br>E. Use                        | K. Dispense/<br>Distribute   | M. Manufacture/<br>Produce/<br>Cultivate  | Z. Other                  | Drug Type<br>N. N/A<br>A. Amphetamine  | B. Barbiturate<br>C. Cocaine<br>E. Heroin   | H. Hallucinogen<br>M. Marijuana<br>O. Opium/Deriv.  |
| Charge Description<br><b>Crash involving death or personal injuries</b>  |                                   | Counts<br><b>1</b>  | Domestic Violence<br><input type="checkbox"/> Y <input type="checkbox"/> N | Statute Violation Number<br><b>316.027(2a)</b>  |                           | Violation of ORD #   |   |   |
| Drug Activity<br><b>UNK</b>  | Drug Type<br><b>UNK</b>           | Amount / Unit   | Offense #<br><b>21-111241</b>  | Warrant / Capias Number   |                           | Bond<br><b>1000</b>  |   |   |
| Charge Description   |                                   | Counts  | Domestic Violence<br><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<br><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<br><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)<br><b>South County Courthouse, Courtroom #1, 200 W. Atlantic Ave., Delray Beach, FL 33444 - Ph: (561) 355-2996</b>  |                                   |   |  |   |                           |  |   |   |
| Court Date and Time<br>Month Day Year Time AM PM<br><b>09/27/2021</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.                  |                                   |   |  |   |                           |  |   |   |
| Signature of Defendant (or Juvenile and Parent /Custodian)   |                                   |   |  | Date Signed<br><b>SEP 28 2021</b>   |                           |  |   |   |
| HOLD for other Agency Name:  |                                   | Signature of Arresting Officer<br><b>D/S J. Giglio</b>    |  | Name Verification (Printed by <b>SEP 28 2021</b> )  |                           |  |   |   |
| <input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest<br><input type="checkbox"/> Suicidal <input type="checkbox"/> Other  |                                   | Name of Arresting Officer (Print)<br><b>D/S J. Giglio</b> |  | I.D. #<br><b>35623</b>  |                           | (PRINT)  |   |   |
| Transporting Officer<br><b>D/S J. Giglio</b>   |                                   | ID #<br><b>35623</b>                                      |  | Agency<br><b>PBSO</b>   |                           | Witness here if subject signed with an "X" <b>1</b> OF <b>1</b>  |   |   |

DISTRIBUTION: WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - AGENCY

GOLD - DEFENDANT (N.T.A.'s ONLY)

PBSO #148 REV. 8/97

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|  |  |  |  |   |  |   |  |                                   |          |                |  |
|--|--|--|--|---|--|---|--|-----------------------------------|----------|----------------|--|
| OBTS Number  |  | <b>PROBABLE CAUSE AFFIDAVIT</b>  |  | 1. Arrest<br>2. N.T.A.  |  | 3. Request for Warrant<br>4. Request for Capias                         |  | 1                                 | Juvenile | N              |  |
| Agency ORI Number<br><b>FLO 500000</b>   |  | Agency Name<br><b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>                                 |  | Agency Report Number<br><b>06-21-111241</b>   |  |   |  |                                   |          |                |  |
| Charge Type:<br>Check as many as apply.  |  | 1. Felony <input checked="" 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"/> |  | Special Notes:                    |          |                |  |
| Name (Last, First, Middle)<br><b>Muni, Jessica,</b>  |  | Alias  |  | Race<br><b>W</b>  |  | Sex<br><b>F</b>   |  | Date of Birth<br><b>1/10/1982</b> |          |                |  |
| Charge Description<br><b>Crash involving death or personal injuries</b>  |  | 316.027(2a)  |  | Charge Description  |  |   |  |                                   |          |                |  |
| Charge Description   |  | Charge Description   |  |   |  |   |  |                                   |          |                |  |
| Victim's Name (Last, First, Middle)<br><b>The State Of Florida, ,</b>  |  | 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     |  |
| <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.<br/>The Person taken into custody</p> <p><input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>27th</u> day of <u>September</u> 20<u>21</u> at <u>2220 HRS</u> <input checked="" type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p><b>On September 27th, 2021, at approximately 2110 hours, while on uniformed patrol in a marked Palm Beach County Sheriff's Office (PBSO) patrol vehicle, I responded to Palmetto Park Rd / Lyons Rd, in unincorporated Boca Raton, in reference to a hit and run.</b></p> <p><b>Upon arrival, I met with a white male, identified through his FL D.L. as Miguel Pumariega who told me the following: He was on a date with a female he identified as Jessica (later identified as Jessica Muni) and they went to two different bars, Duffy's and Miller's Ale House and were drinking alcohol. Jessica was driving Miguel home in her 2017 white Nissan (HQVT99) and was on Lyons Rd driving south bound approaching Palmetto Park Rd. Miguel observed the car in front of him stopped at the red light and Jessica was not stopping. Miguel yelled stop multiple times but Jessica did not listen, hitting the vehicle in front of her. Both Miguel and Jessica got out of the vehicle to check for damage. Miguel then observed Jessica go back into the car and stated to him "get in." Miguel confused as to why she was leaving stated "no, don't leave" multiple times but, Jessica drive away at a high rate of speed.</b></p> <p><b>D/S T. Torres #36859 observed the vehicle matching FL tag HQVT99 driving west on Palmetto Park Rd and conducted a traffic stop. Myself and Miguel conducted a "Show up" and Miguel pointed his finger and positivity IDing Jessica as driving the vehicle he was inside. Jessica was transported to West Boca Medical Center from the injuries she received from the car accident.</b></p> <p><b>I determined that probable cause exists to arrest Jessica Muni for the crime of leaving the scene of a crash with injuries F.S.S 316.027(2a).</b></p> |  |  |  |   |  |   |  |                                   |          |                |  |
| <p><b>SCANNED</b></p> <p><b>SEP 28 2021</b></p>  |  |  |  |   |  |   |  |                                   |          |                |  |
| <p>STATE OF FLORIDA<br/>COUNTY OF PALM BEACH</p> <p><b># 35423</b></p> <p><b>D/S J. Giglio</b></p> <p>(Signature of Arresting/Investigative Officer)</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>27th</u> day of <u>September</u> 20<u>21</u> by <u>D/S J. Giglio</u></p> <p>(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>LEO</u></p> <p><b>36859</b></p> <p>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>   |  |  |  |   |  |   |  |                                   |          |                |  |
| <p>PAGE<br/>1 OF 1</p>   |  |  |  |   |  |   |  |                                   |          |                |  |



**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),<br>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),<br>(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),<br>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: 2021024229 | Date: 9/28/2021                  |
|                            | Specialist Name/ID: J. Beck/9007 |

**SCANNED**  
**SEP 28 2021**