

20CT 8424

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-20-086154	
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
Location of Arrest (Including Name of Business) Southern Blvd/195, W Palm Beach FL			Location of Offense (Business Name, Address) Southern Blvd/195, W Palm Beach FL			
Date of Arrest 07/09/2020	Time of Arrest 2315	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle Kellie Towing

Name (Last, First, Middle) Causey, Kourtney, Eve		Alias (Name, DOB, Soc. Sec. #, Etc.)						
Race W - White I - American Indian	Sex W F	Date of Birth 3/5/2000	Height 4'11"	Weight 130	Eye Color Blue	Hair Color Br.	Complexion Fair	Build SM
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) arms, legs, chest, back			Marital Status Single	Religion NONE	Indication of: Alcohol Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk. Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk.			
Local Address (Street, Apt. Number) 8242 Rosemarie Ave W, Boynton Beach FL 33472		(City)	(State)	(Zip)	Phone (561) 699 6137	Residence Type: 1. City 2. County 3. Florida 4. Out of State 2		
Permanent Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone	Address Source DEF		
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation Waitress		
D/L Number, State C200505005850, FL		Sec. Sec. Number		INS Number	Place of Birth (City, State) W Palm Beach FL		Citizenship US	

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested	<input type="checkbox"/> 3. Felony
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"/> 5. Juvenile	<input type="checkbox"/> 5. Juvenile

Parent Legal Custodian Other:	Name (Last) (First) (Middle)	Residence Phone
Address (Street, Apt. Number)	(City) (State) (Zip)	Business Phone
Notified by: (Name)	Date	Time
Released To: (Name)	Relationship	Date
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.		School Attended
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		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/Deriv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other
Charge Description Driving Under the Influence		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)B		Violation of ORD #				
Drug Activity N	Drug Type N	Amount / Unit	Offense # 20-086154	Warrant / Capias Number		Bond OR				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" 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 <input type="checkbox"/> Y <input checked="" 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 <input type="checkbox"/> Y <input checked="" 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) Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600	
Court Date and Time Month 8 Day 6 Year 20 Time 8:30 AM X PM	
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) <i>[Signature]</i>	Date Signed 07/09/2020

HOLD for other Agency Name:	Signature of Arresting Officer <i>[Signature]</i>	Name Verification (Printed by) SCANNED
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:	Name of Arresting Officer (Print) A. Soloway 8586	(PRINT) JUL 10 2020
Intake Deputy # 15 THOMAS Pouch #	Transporting Officer ID # A. Soloway 8586	Agency PBSO
Witness here if subject signed with an "X"		PAGE 1 OF 1

PROBABLE CAUSE AFFIDAVIT

1 Arrest
2 NTA
3 Request for Warrant
4 Request for Capias

1

Juvenile

ADMIN	OBTS Number	Agency ORI Number FLO. 5 0 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 20-086154
	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	Special Notes Supp. PC

DEF	Name (Last, First, Middle) Causey, Kourtney, Eve	Alia	Race W	Sex F	Date of Birth 03/05.2000
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CHARGES	Charge Description DUI	Charge Description
	Charge Description	Charge Description

VICTIM	Victim's Name (Last, First, Middle) State of Florida	Race	Sex	Date of Birth
	Local Address (Street, Apt Number)	(City)	(State)	(Zip)
	Business Address (Name, Street)	(City)	(State)	(Zip)

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.
 confessed to _____ admitting to the below facts.

was observed by _____ who told _____
 that he/she saw the arrested person commit the below acts.
 _____ was found to have committed the below acts, resulting from my (described) investigation.

On the 9th day of July 2020 at 1025 A.M P.M (Specifically include facts constituting cause for arrest.)

On 07/09/2020 at approximately 22:25hrs, while on routine patrol in the area of Haverhill Rd. and Southern Blvd., which is located in unincorporated West Palm Beach, Palm Beach County, Florida. I initiated a traffic stop on the defendant's vehicle, a 2014 Lexus bearing FL tag IT3-7UR, for observed traffic violations. The defendant failed to maintain her lane and nearly collided with multiple cars. The defendant abruptly changed lanes to avoid colliding with other vehicles. In the vicinity of Southern Blvd., traveling under the Congress Ave. overpass, the defendant increased her speed to 95/45 MPH. The defendant was traveling in the #3 lane and nearly struck an AMR ambulance, which was traveling east in the #4 lane. The defendant again swerved abruptly to avoid colliding, changing from the #3 lane directly to the #1 lane. The driver was identified as Kourtney Eve Causey, by their Florida driver license. Causey was the sole occupant of the vehicle

Upon making contact with the driver, I observed Causey had glassy, glazed, and blood shot eyes. Causey's speech was slurred. Causey's movements were slow, deliberate, lethargic with poor coordination. Causey was wearing a tube top, gray shorts, and slippers

Kourtney Eve Causey showed signs of possible impairment so I requested a DUI Unit to conduct an assessment. This affidavit is for supplemental purposes only.

PROBABLE CAUSE STATEMENT

NOTARIAL

ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH	(Signature of Arresting / Investigative Officer)
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>9th</u> day of <u>July</u> 20 <u>2020</u> by <u>Capt Dieter Josef</u>	Known LEO
	(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>8586</u>	<u>JUL 10 2020</u>

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 9 DAY OF July 20 20, AT 2226 AM PM
SUBJECT: Causey, Kourtney, Eve CASE NUMBER: 20-086154
AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: A. Soloway 8586

PERSONAL CONTACT

DRIVING PATTERN: Actual physical control (physical evidence or statements putting def. behind wheel of vehicle)

I responded to assist Capt. D Josef #4962 with a possible impaired driver. Upon arrival he advised me:

On 07/09/2020 at approximately 22:25hrs, while on routine patrol in the area of Haverhill Rd. and Southern Blvd., which is located in unincorporated West Palm Beach, Palm Beach County, Florida. I initiated a traffic stop on the defendant's vehicle, a 2014 Lexus bearing FL tag IT3-7UR, for observed traffic violations. The defendant failed to maintain her lane and nearly collided with multiple cars. The defendant abruptly changed lanes to avoid colliding with other vehicles. In the vicinity of Southern Blvd., traveling under the Congress Ave. overpass, the defendant increased her speed to 95/45 MPH. The defendant was traveling in the #3 lane and nearly struck an AMR ambulance, which was traveling east in the #4 lane. The defendant again swerved abruptly to avoid colliding, changing from the #3 lane directly to the #1 lane. The driver was identified as Kourtney Eve Causey, by their Florida driver license. Causey was the sole occupant of the vehicle.

Upon making contact with the driver, I observed Causey had glassy, glazed, and blood shot eyes. Causey's speech was slurred. Causey's movements were slow, deliberate, lethargic with poor coordination. Causey was wearing a tube top, gray shorts, and slippers

OBSERVATION OF DRIVER:

Upon my arrival the defendant was sitting in the driver's seat of her vehicle. Her eye lids were drooping. The defendant had an odor of an unknown alcoholic beverage on her breath. Her eyes were red and glassy.

DRIVER'S STATEMENTS:

The defendant stated she was heading to the hospital to visit her father. She said she knew she was being stopped for speeding. She stated she drank 2 shots of Jack Daniels Honey. She also stated she smoke a marijuana blunt with her friend tonight.

ODORS:

The defendant had an odor of an unknown alcoholic beverage on her breath.

GENERAL OBSERVATIONS

SPEECH:

ATTITUDE: mood swings, crying

CLOTHING: tube top, shorts, slippers

MEDICAL/OTHER: stated anxiety and depression

STATE OF FLORIDA
COUNTY OF PALM BEACH

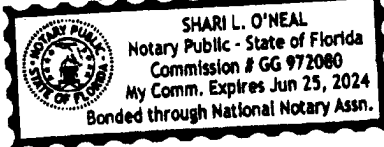
A. Soloway 8586

Signature of Arresting/Investigative Officer

The foregoing instrument was sworn to or affirmed and subscribed before me this 9 day of July 20 20 by A. Soloway 8586

Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification. Type of identification produced: K9 LEO

Shari O'Neal (#6212)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)



SCANNED
JUL 10 2020

SUBJECT: Causey, Kourtney, Eve

CASE NUMBER 20-086154

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|---|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT |
| <input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input checked="" type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input checked="" type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

The defendant eye lids were drooping. Both eyes displayed VGN. Her eyelids were fluttering.

WALK & TURN:

The defendant was unable to maintain her balance during the instructions. She stepped off the line and missed heel to toe several times. She walked backwards on the second pass. She used her arms for balance during this task.

ONE LEG STAND:

The defendant looked straight, not at her raised foot. She was swaying during this task. She used her arms for balance. She put her foot down several times before 30 seconds elapsed.

FINGER TO NOSE:

The defendant did not keep her head tilted back. The defendant was swaying. She touched the side of her nose on the first attempt. She used the pad of her finger for attempts 2-6.

ROMBERG ALPHABET:

The defendant incorrectly recited the alphabet.

BREATH TEST RESULTS: 1) .154 2) .154 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

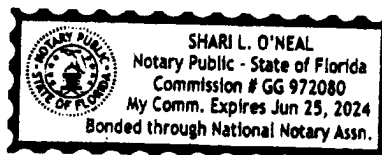
A. Soloway 8586

Signature of Arresting/Investigative Officer

foregoing instrument was sworn to or affirmed and subscribed before me this 9 day of July 20 20 by A. Soloway 8586

Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification. Type of identification produced Known LEO

Shari O'Neal (#6212)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)



SCANNED
JUL 10 2020

WITNESS LIST

CASE NUMBER: 20-086154

ARRESTING OFFICER: A. Soloway 8586

ADDRESS: PBSO

PHONE NUMBERS (HOME): _____ (WORK) 561 688 3000

CAN TESTIFY TO: DUI INVESTIGATION

NAME: Capt. D Josef #4962

ADDRESS: PBSO

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: Stopping Capt.

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

SCANNED

JUL 10 2020

TESTING FACILITY TASK REPORT

AGENCY: INV. SOLOWAY #8586

SUBJECT: CAUSEY, KOURTNEY E.

CASE NUMBER: 20-086154

DATE: 07-09-2020

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 2346 HRS

ENDING TIME: 2359 HRS

BREATH TESTS RESULTS: 1) .154 TIME 2350 A.M. P.M. 2) .154 TIME 2353 A.M. P.M.
3) TIME A.M. P.M. 4) TIME A.M. P.M.

BREATH OPERATOR: S.O'NEAL #6212

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: A LITTLE AGITATED, BUT BEING COOPERATIVE, SARCASTIC

CLOTHING: SHIRT- WHITE TUBE TOP SHORTS-GRAY

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: VERY RED, GLASSY AND WATERY FROM CRYING
ODOR OF UNKNOWN ALCOHOLIC BEVERAGE.

COMMENTS:

20 MIN. OBSERVATION DONE BY A/O SOLOWAY #8586
A/O REQUESTED THE BREATH TEST.
D SUBMITTED TO THE BREATH REQUEST.
D COMPLETED THE BREATH REQUEST CORRECTLY.
C/W READ ON CAMERA.
EXPLAINED THE RESULTS TO THE D.
Q&A CONDUCTED.

SCANNED

JUL 10 2020

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: 07/09/2020

Date of Last Agency Inspection: 06/26/2020
Observation Period Began: 23:25
Subject's Name: KOURTNEY E CAUSEY

DOB: 03/05/2000 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	23:49
Air Blank	0.000	23:49
Control Test	0.081	23:49
Air Blank	0.000	23:50
Subject Sample #1	0.154	23:50
Air Blank	0.000	23:51
Air Blank	0.000	23:53
Subject Sample #2	0.154	23:53
Air Blank	0.000	23:54
Control Test	0.081	23:54
Air Blank	0.000	23:55
Diagnostics Check	OK	23:55

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 SHARI L O'NEAL, 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: S. O'neal Date: 07-10-20
Signature

Sworn to (or affirmed) before me this 10 day of July, 2020

Signature of Notary Public-State of Florida [Signature] Printed Name of Notary Public-State of Florida Inv. Solaway # 8586

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.



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

PBSO CASE # 20-086154 PBSO ZONE 1-11

AGENCY CASE # _____ CRASH CASE # _____

TIME OF STOP/CRASH 2226 DATE 07/09/2020 DAY Thursday

SUBJECT'S NAME Causey, Kourtney, Eve RACE W SEX F

HGT 4'11" WGT 130 DOB 3/5/2000

LOCATION Southern Blvd/I95, W Palm Beach FL

ARRESTING OFFICER'S NAME & ID A. Soloway 8586 (8586) AGENCY Palm Beach County Sheriff's Office

DIVISION: VCD/DUI

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 2325

ARREST TIME 2315

BREATH RESULTS:

- 1) .154
- 2) .154
- 3) _____
- 4) _____

TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # /

NOT A CERTIFIED COPY

SCANNED
JUL 10 2020



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: 2020016576	Date: 7/10/2020
	Specialist Name/ID: B Evans / 23649

SCANNED
JUL 10 2020