

21CT11285ANB

ADMINISTRATIVE	OBTS Number		ARREST / NOTICE TO APPEAR				1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
	Agency ORI Number 0501700		Agency Name Jupiter Police Department				Agency Report Number (N.T.A.'s only) 5, 4 21-002373					
	Charge Type: Check as many as apply: <input type="checkbox"/> 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		If Weapon Seized Enter Type UNARMED		Multiple Clearance Indicator 1			
CRIMINAL	Location of Arrest (Including Name of Business) 3555 MILITARY TRL JUPITER, FL 33458						Location of Offense (Business Name, Address) 3555 MILITARY TRL, JUPITER, FL 33458					
	Date of Arrest 07/08/2021		Time of Arrest 01:40		Booking Date		Booking Time		Jail Date		Jail Time	
	Name (Last, First, Middle) SUTHERLAND, TRACI JEAN		Alias (Name, DOB, Soc. Sec. #, Etc.)									
DEFENDANT	Race W - White B - Black O - Oriental/Asian		Sex M F		Date of Birth 09/25/1988		Height 5'03		Weight 190		Eye Color GREEN	
	Hair Color BROWN		Complexion LIGHT		Build Large		Marital Status S		Religion		Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>	
	Local Address (Street, Apt. Number) 423 FORESTERIA AVE, LAKE PARK, FL 33430						(City)		(State)		(Zip)	
CO-DEFENDANT	Permanent Address (Street, Apt. Number) 423 FORESTERIA AVE, LAKE PARK, FL 33430						(City)		(State)		(Zip)	
	Business Address (Name, Street) 423 FORESTERIA AVE, LAKE PARK, FL 33430						(City)		(State)		(Zip)	
	D/L Number, State S364810888450 / FL						Sec. Sec. Number		INS Number		Place of Birth (City, State) BOYNTON BEACH, FL	
JUVENILE	Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth	
	Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth	
	Name (Last, First, Middle)						Residence Phone		Business Phone		Notified by: (Name)	
CHARGE	Address (Street, Apt. Number) 423 FORESTERIA AVE, LAKE PARK, FL 33430						(City)		(State)		(Zip)	
	Released To: (Name)						Date		Time		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated	
	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	
CHARGE	Drug Activity N. N/A P. Possess						S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Disperse/ 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. Synthetic		U. Unknown Z. Other	
CHARGE	Charge Description DUI - NORMAL FACULTIES IMPAIRED						Statute Violation Number 316.193(1)(A)		Violation of ORD #		Bond	
	Drug Activity N						Drug Type N		Amount / Unit /		Offense # 21-002373	
	Counts 1						Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond	
CHARGE	Charge Description						Statute Violation Number		Violation of ORD #		Bond	
	Drug Activity						Drug Type		Amount / Unit		Offense #	
	Counts						Domestic Violence		Warrant / Capias Number		Bond	
CHARGE	Charge Description						Statute Violation Number		Violation of ORD #		Bond	
	Drug Activity						Drug Type		Amount / Unit		Offense #	
	Counts						Domestic Violence		Warrant / Capias Number		Bond	
IN TAKE	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					
	Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health						PROPERTY - Received By		Released By		Released To	
	Transported By						Date Transported		Time Transported		Other	
NOTICE TO APPEAR	<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) North County PALM BEACH GARD		Court Date and Time 08/18/2021 08:30:00		Photo Available	
	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		PAGE 1 OF 1	
	HOLD for Other Agency						Signature of Arresting Officer JOCHUM, CRAIG		Name Verification (Printed by Arrestee) JOCHUM, CRAIG		Witness here if subject signed with an "X".	
ADMIN	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other						Name of Arresting Officer (Print) JOCHUM, CRAIG		I.D. # 1185		Agency SPD	
	Intake Deputy SPD						I.D. # 1157		Agency SPD		Witness here if subject signed with an "X".	
	Pouch #						Transporting Officer OR C. LOWE		I.D. # 1157		Agency SPD	

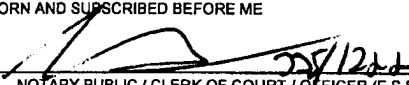

☒ COURT ☐ STATE ATTORNEY ☐ AGENCY ☒ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P.T.O. ☐ DEFENDANT

SCANNED

JUL 08 2021

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OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE	
A D M I N	Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 5 4 21-002373					
	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:				
D E F	Name (Last, First, Middle) SUTHERLAND, TRACI JEAN					Race W		Sex F		Date of Birth 09/25/1988
	Alias									
C H A R G E S	Charge Description 316.193(1)(A) DUI - NORMAL FACULTIES IMPAIRED					Charge Description				
	Charge Description					Charge Description				
V I C T I M	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		
<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> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to _____ admitting to the below facts. </div> <div> <input checked="" type="checkbox"/> was observed by SGT. SALVEMINI who told OFC. YOCHUM that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation. </div> </div> <p>On the 8 day of July, 2021 at 01:50 (Specifically include facts constituting cause for arrest.)</p> <p>On 07/08/2021 at approximately 0133 hours, I responded to the 3555 Military Trl. (Admiral's Crossing Plaza) in the Town of Jupiter, Palm Beach County, FL as a backup unit for Sergeant Salvemini who had conducted a traffic stop on a gray 2005 Chevrolet Trailblazer bearing FL tag # 1A84GH. At the time, I was driving an unmarked Jupiter Police Department patrol vehicle (vehicle 1308), I was wearing a JPD uniform clearly identifying myself as a Jupiter Police Officer, and I was wearing my department-issued Axon body camera.</p> <p>Upon arrival, I made contact with Sergeant Salvemini who advised the following: He observed the aforementioned vehicle traveling northbound on C.R. 809 (Military Trl.). The vehicle was traveling in the outside lane of C.R. 809 and stopped for the red traffic control signal at the intersection with W Frederick Small Rd. When the light turned green, the vehicle was slow to respond to the change in traffic lights and began proceeding slowly northbound through the intersection. The vehicle traveled north with both passenger side tires in the northbound bicycle lane, almost riding the curb. The vehicle then quickly turned into the Admiral's Crossing Plaza at 3555 Military Trl. and parked in a parking space when Sergeant Salvemini conducted a traffic stop. The driver of the vehicle had 3 large Labrador Retrievers in the vehicle and, due to the presence of the dogs, the driver [later identified as Tracie Sutherland (w/f; 09/25/1988)] was ordered out of the vehicle. See supplement from Sergeant Salvemini.</p> <p>On scene, I observed Sutherland standing in front of Sergeant Salvemini's vehicle, speaking with Officer Waltenburg. Sutherland appeared very unsteady on her feet. I approached Sutherland and identified myself. I immediately noted Sutherland's eyes were bloodshot and glassy. Sutherland had the strong odor of an unknown alcoholic beverage on her breath which intensified as she spoke. Sutherland was moving around a fair bit and appeared unsteady on her feet as she was swaying back and forth and side to side. Sutherland's speech was extremely slurred.</p>										
A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME									
	 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)					 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER				
	07/08/2021 DATE					YOCHUM, CRAIG (1185) NAME OF OFFICER (PLEASE PRINT)				
						07/08/2021 DATE				
<div style="display: flex; justify-content: space-between; padding: 0 10px;"> COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O. </div>										

A D M I N I S T R A T I V E	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 FL 0501700		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 5 4 21-002373					
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	Name (Last, First, Middle) SUTHERLAND, TRACI JEAN		Alias		Recd W		Sex F		Date of Birth 09/25/1988	

Sutherland advised me that she was intoxicated and had drank way too much. I requested Sutherland perform Standardized Field Sobriety Tasks (SFSTs) and Sutherland began questioning what would happen if she "failed" the roadsides. I advised Sutherland that the roadsides were not a pass or fail but that I look for a series of indicators of impairment. Sutherland cyclically began questioning what would happen if she did not want to do the roadsides, plead with me to be kind to her dogs, and questioned multiple times what would happen to her dogs if she was placed under arrest.

Due to the fact that Sutherland was not providing an answer as to whether or not she wished to perform SFSTs, I attempted to explain to her the tasks. Sutherland interrupted me after I explained the Walk and Turn and again began talking/asking about the same aforementioned topics. I provided Sutherland ample opportunity to perform SFSTs but she never provided me with an answer of whether or not she was willing to perform them.

Based on the totality of the circumstances up until this point, I determined Sutherland was far too intoxicated to make a decision on her own and I placed her under arrest for DUI. I requested at roadside Sutherland provide a lawful sample of her breath for the purpose of determining the alcohol content. Sutherland questioned what would happen if she did not wish to take a breath test and I read her Implied Consent (excluding the CDL portion of Implied Consent). I confirmed Sutherland understood the consequences of refusing a breath test and again asked if she was willing to provide a breath sample. Sutherland took several moments to decide and ultimately refused at 0151 hours.

Based on the aforementioned facts resulting from my investigation, I find Probable Cause exists to charge Tracie Sutherland with DUI pursuant to FSS 316.193(1) (a).

A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME		 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		 SIGNATURE OF ARRESTING INVESTIGATING OFFICER	
	07/08/2021 DATE		YUCHUM, CRAIG (1185) NAME OF OFFICER (PLEASE PRINT)		07/08/2021 DATE	
					PAGE 2 OF 2	

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

WITNESS LIST

CASE NUMBER: 21-002373

ARRESTING OFFICER: Craig Yochum

ADDRESS: 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME): _____ (WORK) (561) 746-6201

CAN TESTIFY TO: PC

NAME: Sergeant Michael Salvemini # 223

ADDRESS: 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME) _____ (WORK) (561) 746-6201

CAN TESTIFY TO: Supplement

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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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: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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 8th day of July, 20 21, at 1:50 ☐ P.M. ☒ A.M.

DRIVER Traci Jean Sutherland,
 (Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# S-364-810-88-845-0, state of Florida, was placed under lawful arrest for
 the offense of DUI by Officer Craig Yochum and
 issued Citation # ADB9E0E
 (Name of Arresting Officer)

That on or about the 8th day of July, 20 21, at 1:51 ☐ 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] 383
 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]
 Signature of Attesting Officer

Title Police Officer

Date 07/08/2021

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before

me this 8th day of July, 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.

SUBJECT: **Sutherland, Traci Jean**

CASE NUMBER: 21-002373

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 Officer Craig Yochum of the Jupiter Police Department

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: Read on Body Camera Sutherland, Traci Jean

CONSTITUTIONAL WARNINGS

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

You have the right to remain silent and not answer any questions.

Any statement must be freely and voluntarily given.

You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.

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.

If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.

I can make no threats or promises to induce you to make a statement. This must be of your own free will.

Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: Not Read on Camera Sutherland, Traci Jean



**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: 2021016743

Date: 7/8/2021

Specialist Name/ID: M. Took #8557