



Broward County Sheriff's Office

17-10380
FI
Booking Report



CIS #	571703454	BCCN #	887920	Booking Sheet Control Date and Time							
OBTS	607235714	Print Clearance	09/05/17 03:19:26	Prints	Yes	09/05/17 05:33:24					
Arrest #	FL 1703454	Offense Report #	34-1709-139545	Agency	FORT LAUDERDALE						
Last Name First Middle	BARTHA, ANNA J				SSN #						
Race	Sex	Height	Weight	Eyes	Hair	Comp	Age Admitted	DOB	Place of Birth	State	FDLE
W	F	505	143	BRO	RED	MED	35	12/20/1981		POLAND	0
Permanent Address	21 SE 16 ST FTL FL 33316							Months of Residence			
							24				
Arrest Date	09/05/17 01:03:00	Place of Arrest	200 NE 7TH AVENUE			Arresting Officer	1916 NURSE, JASON				
Inmate Logged Date	09/05/17 02:55 34	Inmate Log Type	FULL INTAKE			Place Admitted	MAIN				
Intake Comments 29/SP/CO 6162 WC/15548											
Alias Last name, First, Middle, DOB											
Warrants Officer Id bs15548											
Scars,Marks,Tattoos											
Release Date/Time		Release Reason				Release Authorized By					
Charge No.	Charge Initiation Date	Statute	Warrant/Capias		Level	M.C	B. Type	Bond Amount			
1	09/05/17 05 27	316 027-2a			3F	Y	HOLD FOR MAG	\$0 00			
Charges	FAIL TO STOP REMAIN ACCDNT INVOLV NON-SER INJRY										
Comments											
Booking Off. ID	bs09724	County	BROWARD				Judge				

* End of Report *

COMPLAINT AFFIDAVIT

SHADED FIELDS MUST BE ANSWERED IF DEFENDANT NOT IN CUSTODY

☒ ARREST FORM

BROWARD COUNTY

ARREST # 17-03454

OBTS #

Filing Agency FT LAUDERDALE PD		Offense Report 34-1709-139545		Local ID #		FDLE		FBI		SS #		
Defendant's Last Name BARTHA				First ANNA J		Middle SUF		Alias/Street Name Poland				Citizenship Immigrant
Race W	Sex F	Hgt 5'05	Wgt	Hair Brown	Eyes Brown	Comp	Age 35	DOB 12/20/1981	Birth Place			
Permanent Address 417 SE 16TH ST, FORT LAUDERDALE, FL 33316								Scars, Marks, TT left hip				
Residence Type		(1) City	(2) County	Local Address		Place of Employment			Length			
		(3) Florida	(4) Out of State	417 SE 16TH ST, FORT LAUDERDALE, FL 33316		Unemployed						
How long defendant in Broward County 2		Breathalyzer By/CCN		Reading		Place of Arrest 200 NE 7TH AV		Date/Time Arrested 09/05/2017 01:03		Arresting Officer(s) CCN NURSE, JASON H. (1916)		
Officer Injured Y ☐ N ☒	Unit A23	Zone 21	Beat	Shift FLA	Trans Unit	PMD Y ☐ N ☒	Transporting Officer/CCN		Pick-up Time	Time Arrived/BSO		
TYPE / ACTIVITY N / N		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	Activity N-N/A P-Possess S-Sell B-Buy	T-Traffic A-Smuggle D-Deliver E-Use	M-Manufacture/ Produce/Cultivate K-Dispense/ Distribute Z-Other	Indication of Alcohol Influence Y ☐ N ☐ UK ☒ Drug Influence Y ☐ N ☐ UK ☒				

Attach
Defendant's
PhotoDefendant's Vehicle Make: **BMW** Type: **03** Year: **2008** Color: **WHI** VIN # **SUXFE43548L036776**

Vehicle Towed To: _____

Tag #: **21EXJ**

Other identifiers or remarks: _____

Name of victim(s) (if corporation, exact legal name and state of incorporation)

Count #	Offenses Charged	WC# / Citation # (if applicable)	FS or Capias/Warrant #
1	FAIL TO STOP REMAIN ACCDNT INVOLV NON-SER INJURY		316.027-2A

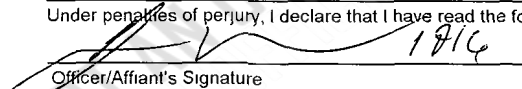
Probable Cause Affidavit

Before me this date personally appeared NURSE, JASON H. (1916) who being first duly sworn deposes and says that on 5 day of September, (year) 2017 at 600 E BROWARD BLVD, FORT LAUDERDALE, FL 33301 (crime location) the above named defendant committed the above offenses charged and the facts showing probable cause to believe the same are as follows

I was dispatched to 600 E Broward Blvd to assist on a traffic crash. Prior to arrival I was advised the listed Def and her passenger (occupants of the at-fault vehicle) left the scene after being involved in this collision. Assisting Officers located the listed Def and passenger (in possession of the involved vehicle's keys) standing several blocks away from the accident scene. The Def was positively identified as the driver of the involved vehicle during a victim show-up. The Def was advised of the charges

* * * Continued * * *

Under penalties of perjury, I declare that I have read the foregoing and that the facts stated therein are true and correct to the best of my knowledge and belief

Officer/Affiant's Signature
NURSE, JASON H. (1916)
Officer's Name/CCNPatrol
Officer's DivisionSTATE OF FLORIDA
COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me this 5 day of September, 2017 (year),
by OFFICER NURSE, JASON H. (name and title), who is personally known to me or has produced
as identification

Notary Public, Deputy Clerk of the Court, or Assistant State Attorney

SERGEANT / 1245
Title/Rank and CCNFOULKS, FRANKLIN M

Print, Type or Stamp Commissioned Name of Notary Public

(SEAL)

Seventeenth Judicial Circuit
Broward County
State of Florida

FIRST APPEARANCE/ARREST FORM

BSO DB-#2 (Revised 05/00)

(SHOULD ADDITIONAL SPACE BE NEEDED, USE THE PROBABLE CAUSE AFFIDAVIT CONTINUATION (BSO DB#2a))

Orig - Court
2nd - State Attorney
3rd - Filing Agency
4th - Arresting Agency

COURT COPY

29/54 6662

SP/CO 6662

WC/15548

☐ **COMPLAINT AFFIDAVIT**
PROBABLE CAUSE AFFIDAVIT CONTINUATION

☒ ARREST FORM

BROWARD COUNTY
ARREST # **17-03454**

OBTs #

Filing Agency FT LAUDERDALE PD	Offense Report 34-1709-139545	Local ID #	FDLE	FB#	SS #
Defendant's Last Name BARTHA	First ANNA J	Middle	SUF	Alias/Street Name	Citizenship
Name of victim(s) (if corporation, exact legal name and state of incorporation)					
Count #	Offenses Charged			WC# / Citation # (if applicable)	FS or Capias/Warrant #
	*** SEE PAGE 1 ***				

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against her then taken into custody without incident. The Def was medically cleared then transported to BSO main jail for booking.

I swear the above statement is correct and true to the best of my knowledge and belief.

[Signature] 1916 NURSE, JASON H. (1916) Patrol
Officer/Affiant's Signature Officer's Name/CCN Officer's Division

STATE OF FLORIDA
COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me this 5 day of September, 2017 (year),
by OFFICER NURSE, JASON H. (name and title), who is personally known to me or has produced
as identification

Notary Public, Deputy Clerk of the Court, or Assistant State Attorney

SERGEANT / 1245
Title/Rank and CCN

FOULKES, FRANKLIN M
Print, Type or Stamp Commissioned Name of Notary Public
Seventeenth Judicial Circuit
Broward County
State of Florida
BSO DB-#2a (Revised 05/00)

(SEAL)

FIRST APPEARANCE/ARREST FORM

COURT COPY

- Org - Court
- 2nd - State Attorney
- 3rd - Filing Agency
- 4th - Arresting Agency