

Scars, Marks, Tattoos

Broward County Sheriff's Office

22-003844 MUIOA

Booking Report MP



| CIS# | cis # 572200783 | | | BCCN# | | | | Ì | Booking Sheet Control Date and Time 03/25/22 04 58 39 | | | | |
|------------------------------|----------------------------------------------------------|----------|--------------------|-----------|----------------|-----------------------------|------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------|--|--|
| OBTS | 607304209 | | Print Clearance 03 | | | 3/25/22 02 42 31 Prints Yes | | | | | | | |
| Arrest # | FL 2200783 | Offer | se Repo | ort# | 34-2203-053301 | | | Agency FORT LAUDERDALE | | | | | |
| Last Name First Middle | SAR | ACINO, | ASHLI | ΞY | | | | - | SSN# | .< | A) | | |
| Race | Sex | Height | Weight | Eyes | Haır | Comp | Age Admitted | DOB | Place of Birth | State | FDLE | | |
| w | F | 502 | 115 | BRO | BRO | LGT | 27 | 5/15/1994 | | CALIFORNI | A 0 | | |
| Permanent Address | 3101 PORT ROYALE BLVD Apt# 1025 FORT LAUDERDALE FL 33308 | | | | | | | Months of Residence 2 | | | | | |
| Arrest Date | 03/25/22 0 | 0 51 00 | Р | lace of A | | | DERAL HWY FO ALE FL 33308 | | ng Officer 1817 CA | | | | |
| Inmate Logo | ged Date | 03/25/2 | 22 02 14 2 | 22 | Inmate | Log Type | FULL INTAKÉ | STATE | lace Admitted | MAIN | | | |
| Intake Com | ments SP/C0 | D/29/54- | 18043 W/ | C- 1028 | 1 | | | | OF THE PARTY OF TH | | | | |
| Alias Last n | name, First, Mi | ddle, DO | В | | | | ~ 1/2 | | - ALTAN | Con | | | |
| Warrants Of | fficer ld bs102 | 281 | | | | | | | | -OF | | | |

| Release Date/Time | | Release Reason | Release Authorized By | | | | | | |
|---------------------------------------------------|-------------------------|-------------------------|-----------------------|-------------|----------|----------------|--------------|-------------------------|---------------|
| Charge No Charge Initiation Date 1 03/25/22 03 45 | | Statute 316 193-2a2a | Warrant/Capias | Level 4M | M C Y | B Type BOND | | Bond Amount \$500 00 | |
| Charges DL | JI ALCOHOL OR DRUGS 15 | T OFFENSE | Comments | | | | | | |
| Booking Off ID | bs15828 | County | | Judge | | | | | |
| Charge No | Charge Initiation Date | Statute | Warrant/Capias | Level | мс | В Туре | | Bond Amount | |
| 2 | 03/25/22 04 08 | 316 193-4b1 | | 4M | Υ | BOND | \$1,000 00 | | |
| Charges DL | JI UBAL> 15 OR ACCOM BY | PERS < 18YOA | Comments | | | | C) | r~3 | |
| Booking Off ID | bs15828 | County | | Judge | | | ر ، ق ب ر | 2022 | razza. Jan |
| Charge No | Charge Initiation Date | Statute | Warrant/Capias | Level | МC | В Туре | - , - | Bond Âm | ount, |
| 3 | 03/25/22 04 11 | 316 074(1) | | 01 | Υ | NOT APPI | -ICĄBLE | \$0.00 | ffe a |
| Charges DISOBEY/AVOID TRAFFIC DEVICE | | | Comments | | | | • | င်ဘိ | |
| Booking Off IE | bs15828 | County | | Judge | | | - | فآ | |
| | | | * End of Report * | | | | F | | أيذ |

☐ COMPLAINT AFFIDAVI

DED FIELDS MUST BE ANSWERED IF DEFENDANT N

CUSTODY

ARREST FORM

BROWARD COUNTY ARREST # 22-00783 OBTS# Offense Report FT LAUDERDALE PD 34-2203-053301 Defendant s Last Name First SUF Alias/Street Name Citizenship SARACINO <u>ASHLEY</u> Race Comp DOB Birth Place Age Eyes 5'02 BROW **BROW MEDIU** 05/15/1994 Permanent Address 3101 PORT ROYALE BLVD 1025, FORT LAUDERDALE, FL 33308 Local Address 3101 PORT ROYALE BLVD Place of Employment Residence Type (1) City Length (2) County (4) Out of State (3) Florida 1025, FORT LAUDERDALE How long defendant in Breathalyser By/CCN Reading Place of Arrest Date/Time Arrested Arresting Officer(s) CCN **Broward County** CARTER/1817 5154 N FEDERAL HWY 03/25/2022 00 51 CARTER, JAMES W (1817) 172 Trans Unit PMD Y N X Officer Injured Y N X Unit Zone Beat Shift Transporting Officer/CCN Pick-up Time Time Arrived/BSO **PATR** 3432 FL03 10687 CARTER/1817 E-Heroin -Paraphemalia M-Manufacture Activity N-N/A TYPE / ACTIVITY T-Traffic Indication of UK H-Hallucinogen Equipment Produce/Cultivate A-Smuggle Alcohol Influence X A-Amphetamine M-Manjuana S-Synthetic P-Possess K-Dispense/ D-Deliver B-Barbiturate O-Opium/Deriv U-Unknown S-Sell Distribute I NE-Use Z-Other B-Buy Z-Other Defendant's Vehicle Make: VISS Color: SIL VIN# - 2020 Attach Defendant's Vehicle Towed To Westway Towing Tag# Other identifiers or remarks Photo Offenses Charged Count # WC# / Citation # (if applicable) FS or Capias/Warrant # DUI ALCOHOL OR DRUGS 1ST OFFENSE 316 193-2A2A DUI UBAL>.15 OR ACCOM BY PERS < 18YOA 316 193-4B1 DISOBEY/AVOID TRAFFIC DEVICE 316 074-1 Probable Cause Affidavit Before me this date personally appeared ______CARTER, JAMES W (1817) who being first duly sworn deposes and says that on March , (year) 2022 (crime location) the above named defendant committed the above offenses charged and the facts showing probable cause to believe the same are as follows **This incident was captured on my department issued Axon body camera and In Car camera under listed case number** **Body camera and In Car camera may or may not capture all of the incident described in this report or show all results as observed by Officer James Carter #1817** Arrival Time. 0037 hours |Arrest. 0051 hours | Implied Consent N/A ** * 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 CARTER, JAMES W (1817) Patrol Officer/Affiant's Signature Officer's Name/CCN Officer's Division STATE OF FLORIDA COUNTY OF BROWARD 2022 (year), 25____ day of _ March Sworn to (or affirmed) and subscribed before me this OFFICER CARTER, JAMES W (name and title), who is personally known to me or has produced as identification OFFICER / 1554 Title/Rank and CCN Notary Public Deputy Clerk of the Court or Assistant State Attorney. WOOD, KYLE J Print Type or Stamp Commissioned Name of Notary Public (SEAL) Seventeenth Judicial Circuit FIRST APPEARANCE/ARREST FORM Court **Broward County** 2nd - State Attorney State of Florida Filing Agency 3rd (SHOULD ADDITIONAL SPACE BE NEEDED, USE THE PROBABLE CAUSE AFFIDAVIT CONTINUATION (BSO DB#2a)) Arresting Agency

COURT COPY

SP/CO-18043

BSO DB-#2 (Revised 05/00)

29/54-18013

W/C-10281

**** FILED: BROWARD COUNTY, FL Brenda D. Forman, CLERK 3/28/2022 4:23:07 PM.**** COMPLAINT AFFIDA PROBABLE CAUSE AFFIDAVIT CONTINUA ARREST FORM BROWARD COUNTY ARREST# 22-00783 OBTS# FDLE Offense Report FT LAUDERDALE PD 34-2203-053301 Defendant's Last Name Citizenship Alias/Street Name SARACINO **ASHLEY** Name of victim(s) (if corporation exact legal name and state of incorporation) Offenses Charged WC# / Citation # (if applicable) FS or Capias/Warrant # SEE PAGE Probable Cause Affidavit Before me this date personally appeared ______ CARTER, JAMES W (1817) who being first duly sworn deposes and says that on 2022 at March (year) (crime location) the above named defendant committed the above offenses charged and the facts showing probable cause to believe the same are as follows On March 25, 2022 at or about 0051 hours at 5154 N Federal Hwy which is located within the jurisdictional limits of the City of Fort Lauderdale, within Broward County and the State of Florida, the above named defendant did commit the violation of Driving Under the Influence of alcoholic beverage (Florida State Statue 316 193) Ashley Saracino did, then and unlawfully drive, or was in actual physical control of a motor vehicle, bearing Florida tag while he was under the influence of an alcoholic beverage to the extent that her normal faculties were impaired or has a breath-alcohol level of 0 08 or more grams of alcohol per 210 liters of breath On 03/25/2022, I was driving north in the area of 3700 N. Federal Hwy when I observed the listed vehicle weaving within the lane of travel and on multiple occasions the vehicle actually left the lane of travel without actually making any attempt to change lanes Based on the driving I observed I believed the driver might be ill, injured, or impaired so I conducted a traffic stop to check on the well-being of the driver. The vehicle pulled over in to the parking lot at 5154 N Federal Hwy and I made contact with the driver and sole occupant of the vehicle, Saracino I asked Saracino if she was ok and she said she was fine I explained my concern and why I stopped her and she said she was messing with her phone While speaking with Saracino I could smell the odor of an alcoholic beverage coming from her breath/person and her eyes were glassy I asked Saracino how much she had to drink and she said two glasses of wine. I asked Saracino to step out of the vehicle so I could speak with her and she complied. I explained that I was conducting a criminal D U.I. Investigation and I asked Saracino, if she would submit to a series of field sobriety exercises, which she agreed to * * * Continued ve statement is correct and true to the best of my knowledge and belief CARTER, JAMES W (1817) Patrol Officer's Name/CCN Officer's Division

I swear the abo Officer/Affiant's Signature STATE OF FLORIDA COUNTY OF BROWARD Sworn to (or affirmed) and subscribed before me this 25 ___ day of _ March OFFICER CARTER, JAMES W. (name and title) who is personally known to me or has produced as identification OFFICER / 1554 Title/Rank and CCN Notary Public Deputy Clerk of the Court or Assistant State Attorney

WOOD, KYLE J

Filing Agency

Count #

Print Type or Stamp Commissioned Name of Notary Public

(SEAL)

Seventeenth Judicial Circuit **Broward County** State of Florida

FIRST APPEARANCE/ARREST FORM

Court 2nd State Attorney Filing Agency 3rd Arresting Agency

**** FILED: BROWARD COUNTY, FL Brenda D. Forman, CLERK 3/28/2022 4:23:07 PM.**** ☐ COMPLAINT AFFIDA' ARREST FORM PROBABLE CAUSE AFFIDAVIT CONTINUA **BROWARD COUNTY** ARREST # 22-00783 OBTS# Filing Agency Offense Report 34-2203-053301 FT LAUDERDALE PD Defendant s Last Name Alias/Street Name Citizenship SARACINO **ASHLEY** Name of victim(s) (if corporation exact legal name and state of incorporation) Count # Offenses Charged WC# / Citation # (if applicable) FS or Capias/Warrant # Probable Cause Affidavit Before me this date personally appeared CARTER, JAMES W (1817) who being first duly sworn deposes and says that on 25 day of March (year) 2022 the above named defendant committed the above offenses charged and the facts showing probable cause to believe the same are as follows perform. I asked Saracino the following questions prior to starting the field sobriety exercises Are you sick or injured? No Are you diabetic or epileptic? No Do you take insulin? No Are you under the care of a doctor or dentist? No Are you taking any medications? Birth Control Do you have a physical handicap or any physical alignments? No Do you wear glasses or contacts? Glasses Field Sobriety Exercise - Horizontal Gaze Nystagmus The first exercise performed was the horizontal gaze nystagmus which was completed using a red pen light stimulus The directions of the exercise were explained to Saracino I asked Saracino if she understood the directions of the exercise which she acknowledged she did. I checked the eyes for equal pupil size, resting nystagmus, and equal tracking The exercise was performed starting with the subjects left eye and I observed the following clues in the left and right eye, Lack of smooth Distinct and sustained nystagmus at maximum deviation Onset of nystagmus prior to 45 degrees. Total clues observed: 6 / 6 I swear the above statement is correct and true to the best of my knowledge and belief CARTER, JAMES W (1817) Patrol 1 4 1 Officer's Division Officer/Affiant's Signature Officer's Name/CCN حزز STATE OF FLORIDA COUNTY OF BROWARD Sworn to (or affirmed) and subscribed before me this _ ____ day of __ March OFFICER CARTER, JAMES W. (name and title), who is personally known to me or has produced OFFICER / 1554 Notary Public Deputy Clerk of the Court or Assistant State Attorney Title/Rank and CCN

WOOD, KYLE J

Print Type or Stamp Commissioned Name of Notary Public

(SEAL)

Seventeenth Judicial Circuit Broward County

State of Florida

BSO DB-#2a (Revised 05/00)

FIRST APPEARANCE/ARREST FORM

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

**** FILED: BROWARD COUNTY, FL Brenda D. Forman, CLERK 3/28/2022 4:23:07 PM.**** ☐ COMPLAINT AFFIDA ARREST FORM PROBABLE CAUSE AFFIDAVIT CONTINU, **BROWARD COUNTY** ARREST # 22-00783 **OBTS#** 34-2203-053301 FT LAUDERDALE PD Defendant's Last Name First Middle SARACINO **ASHLEY** Name of victim(s) (if corporation exact legal name and state of incorporation) Offenses Charged WC# / Citation # (if applicable) FS or Capias/Warrant # Probable Cause Affidavit who being first duly sworn deposes and says that on 2022 March _ (year) _ at _ (crime location) the above named defendant committed the above offenses charged and the facts showing probable cause to believe the same are as follows Observations: Saracino was swaying noticeably while I checked her eyes for nystagmus Field Sobriety Exercise - Walk and Turn The second exercise performed was a divided attention exercise, which was the walk and turn. The walk and turn was performed using an actual line on a flat level dry surface free of debris The directions of the exercise were explained and demonstrated to Saracino at which time I asked Saracino if she understood. Saracino responded "yes" instructed Saracino to begin the exercise The following clues were observed; Can't Keep balance while listening to instructions Misses heel-to-toe Steps off the line Improper turn Total Clues observed 4 / 8 Observations. Field Sobriety Exercise - One Leg Stand The third exercise performed was a divided attention exercise, which was the one leg stand The directions of the exercise were explained to Saracino at which time I asked her if she understood Saracino responded "yes" Saracino was instructed to being the exercise at which time she lifted her left foot. I observed the following clues; Sways while balancing I swear the aba e statement is correct and true to the best of my knowledge and belief

CARTER, JAMES W. (1817)

March

FIRST APPEARANCE/ARREST FORM

COURT COPY

(name and title) who is personally known to me or has produced

OFFICER / 1554 Title/Rank and CCN

(SEAL)

Officer's Name/CCN

25 day of

Officer's Division

Court

2nd

State Attorney

Filing Agency

Arresting Agency

Filing Agency

Count #

Officer/Affiant's Signature

Sworn to (or affirmed) and subscribed before me this

Print Type or Stamp Commissioned Name of Notary Public

OFFICER CARTER, JAMES W

Notary Public Deputy Clerk of the Court or Assistant State Attorney

STATE OF FLORIDA COUNTY OF BROWARD

WOOD. KYLE J

Broward County

State of Florida

Seventeenth Judicial Circuit

BSO DB-#2a (Revised 05/00)

**** FILED: BROWARD COUNTY, FL Brenda D. Forman, CLERK 3/28/2022 4:23:07 PM.**** ☐ COMPLAINT AFFIDA **四** ARREST FORM **BROWARD COUNTY** PROBABLE CAUSE AFFIDAVIT CONTINU, ARREST # 22-00783 OBTS# Offense Report FT LAUDERDALE PD 34-2203-053301 Defendant s Last Name First Alias/Street Name Citizenship SARACINO **ASHLEY** Name of victim(s) (if corporation exact legal name and state of incorporation) Offenses Charged WC# / Citation # (if applicable) FS or Capias/Warrant # Probable Cause Affidavit Before me this date personally appeared _CARTER, JAMES W __(1817) who being first duly sworn deposes and says that on 25 day of March 2022 (crime location) the above named defendant committed the above offenses charged and the facts showing probable cause to believe the same are as follows Uses arms to balance Hopping Puts foot down Total Clues observed 4 / 4 Observations Saracino started counting from 1 when she put her foot down Field Sobriety Exercise - Finger to Nose The fourth exercise performed was the finger to nose The directions of the exercise were explained and demonstrated to Saracino, I asked Saracino if she understood the directions of the exercise which she responded "yes" The exercise was performed using the sequence left, right, left, right, left Saracino performed the exercise, which I observed the following clues, Failed to touch nose with index finger Observations. Saracino was swaying during this exercise Based on my observations Saracino normal faculties are impaired by an alcoholic,

Total clues observed 1 / 4

controlled or chemical substance Saracino was placed into Custody at 0051 hours 1 advised Saracino that she was under arrest for driving under the influence of alcohol

| and/ or a chemical substance, | and or a cor | ested Saracıno√submıt — | | | | | | |
|---------------------------------------------------------------------|------------------------|-------------------------|-----------------------|--------------|--------------------|-----------------|-------------------------------------------------|---|
| | | | | | * * * Co | ntinue | d (*;* | * |
| I swear the above statement is correct and true to the best | of my knowledge and be | lief | | _ | 4 | ~ | 77 | |
| | CARTER, JA | MES W (181) | 7) | | | <u>Patrol ₃</u> | 1 1995 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| Officer/Affiant's Signature | Officer's Name/Co | CN | | | Officer's Division | | 7 | |
| STATE OF FLORIDA COUNTY OF BROWARD | | | | | E ST | <u>င်</u> | == | |
| Sworn to (or affirmed) and subscribed before me this | day of | March | 2022 | (year), | -, | | | |
| by OFFICER CARTER, JAMES W. | (name and titl | e), who is personal | ly known to me or has | produced | | | | |
| | | | as ide | entification | 1 | | | |
| | | | OFFICER / 1: | 554 | | | | |
| Notary Public Deputy Clerk of the Court of Assistant State Attorney | еу | | Title/Rank and CC | N | | | | |
| WOOD, KYLE J Print Type or Stamp Commissioned Name of Notary Public | | | (SEAL) | | | | | |

Seventeenth Judicial Circuit

Broward County

State of Florida

Count #

BSO DB-#2a (Revised 05/00)

FIRST APPEARANCE/ARREST FORM

Court State Attorney 3rd Filing Agency Arresting Agency

**** FILED: BROWARD COUNTY, FL Brenda D. Forman, CLERK 3/28/2022 4:23:07 PM.**** ☐ COMPLAINT AFFIDA PROBABLE CAUSE AFFIDAVIT CONTINU ARREST FORM **BROWARD COUNTY** ARREST # 22-00783 ORTS # FDLE FBI Offense Report FT LAUDERDALE PD 34-2203-053301 Defendant s Last Name **SARACINO** *ASHLEY* Name of victim(s) (if corporation exact legal name and state of incorporation) WC# / Citation # (if applicable) Offenses Charged FS or Capias/Warrant # Probable Cause Affidavit Before me this date personally appeared <u>CARTER, JAMES W</u> (1817) who being first duly sworn deposes and says that on March (year) 2022 at (crime location) the above named defendant committed the above offenses charged and the facts showing probable cause to believe the same are as follows to a breath test to determine the alcohol content of her breath and she agreed conducted the 20 minute observation and Saracino provided two valid breath samples of 171 and .172 I transported Saracino to the Broward Sheriff's Office Main Jail where she was booked and charged, without incident The vehicle was towed by West Way Towing to West Way Towing's facility 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 Electronically Signed: Officer James Carter #1817 Date 3/25/22 e statement is correct and true to the best of my knowledge and belief Patrol CARTER, JAMES W (1817) Officer's Name/CCN Officer's Division 25 ___ day of _ March OFFICER CARTER, JAMES W (name and title), who is personally known to me or has produced as identification

I swear the aba Officer/Affiant's Signature STATE OF FLORIDA COUNTY OF BROWARD Sworn to (or affirmed) and subscribed before me this _ OFFICER / 1554 Title/Rank and CCN Notary Public Deputy Clerk of the Court or Assistant State Attorney WOOD, KYLE J (SEAL) Print Type or Stamp Commissioned Name of Notary Public

Seventeenth Judicial Circuit

Broward County

State of Florida

Count #

BSO DB-#2a (Revised 05/00)

FIRST APPEARANCE/ARREST FORM

State Attorney 3rd Filing Agency Arresting Agency

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