Broward County Sheriff's Office

21-14690M410A

Booking Report

mA

CIS #	**122100707**	BCCN #	**945066**	Booking Sheet Control Date and Time	
OBTS	607296132	Print Clearance	10/10/21 02 40 37 Prints Yes	**10/10/21 07 10 06**	
Arrest #	DR 2100707	Offense Report #	10-2110-001500	Agency	DEERFIELD BEACH
Last Name First Middle	**MOORE, KASEY E**			SSN #	[redacted]

Race	Sex	Height	Weight	Eyes	Hair	Comp	Age Admitted	DOB	Place of Birth	State	FDLE
W	F	506	167	GRN	BRO	FAR	28	11/28/1992	SPRINGHILL	ILLINOIS	0

Permanent Address	17927 LEE RD FORT MYERS FL 33967	Months of Residence	12
Arrest Date	10/09/21 21 22 00	Place of Arrest	200 NE 2ND ST DEERFIELD BEACH FL 33441
Arresting Officer	9446 FACCINI		
Inmate Logged Date	10/10/21 02 22 53	Inmate Log Type	FULL INTAKE
Place Admitted	MAIN		

Intake Comments SP/CO/29-17720, 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	10/10/21 07 01	316 193-2a2a		4M	Y	BOND	$500 00
Charges	DUI ALCOHOL OR DRUGS 1ST OFFENSE		**Comments**				
Booking Off ID	bs13320	**County**		**Judge**			

Charge No	Charge Initiation Date	Statute	Warrant/Capias	Level	M C	B Type	Bond Amount
2	10/10/21 07 02	316 193-3c1		4M	Y	BOND	$1,000 00
Charges	DUI W/DAM TO PROP OR PERSON OF ANOTHER		**Comments**				
Booking Off ID	bs13320	**County**		**Judge**			

Charge No	Charge Initiation Date	Statute	Warrant/Capias	Level	M C	B Type	Bond Amount
3	10/10/21 07 05	322 03(5)		XT	Y	NO CHARGE	$0 00
Charges	EXPIRED D/L OVER 6 MONTHS		**Comments**				
Booking Off ID	bs13320	**County**		**Judge**			

Charge No	Charge Initiation Date	Statute	Warrant/Capias	Level	M C	B Type	Bond Amount
4	10/10/21 07 05	316 185		0I	N	NOT APPLICABLE	$0 00
Charges	FAIL TO USE DUE CARE		**Comments**				
Booking Off ID	bs13320	**County**		**Judge**			

* End of Report *

☐ COMPLAINT AFFIDAVIT

SHADED FIELDS MUST BE ANSWERED IF DEFENDANT NOT IN CUSTODY

☒ ARREST FORM

BROWARD COUNTY

ARREST #

OBTS #

Filing Agency	Offense Report	Local ID #	FDLE	FBI	SS #
BROWARD COUNTY SO	10-2110-001500				[redacted]

Defendant's Last Name	First	Middle	SUF	Alias/Street Name	Citizenship
MOORE	KASEY E				US

Race	Sex	Hgt	Wgt	Hair	Eyes	Comp	Age	DOB	Birth Place
W	F	5'06	167	BLOND	GREE	FAIR	28	11/28/1992	SPRINGHILL, IL, United States Of America

Permanent Address: 17927 LEE RD, FORT MYERS, FL 33967

Scars, Marks, TT:

Residence Type (1) City (2) County (3) Florida (4) Out of State — Local Address: 17927 LEE RD, FORT MYERS, FL 33967

Place of Employment: — Length:

How long defendant in Broward County	Breathalyser By/CCN	Reading	Place of Arrest	Date/Time Arrested	Arresting Officer(s) CCN
		REF	200 NE 2ND ST	10/09/2021 21 22	FACCINI, DAVID R. (9446)

Officer Injured	Unit	Zone	Beat	Shift	Trans Unit	PMD	Transporting Officer/CCN	Pick-up Time	Time Arrived/BSO
Y ☐ N ☒	DUI	1001		ALPH		Y ☐ N ☒	SEEDIG		

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	Y	N	UK
Alcohol Influence	☒	☐	☐
Drug Influence	☐	☐	☒

Attach Defendant's Photo

Defendant's Vehicle Make: MERZ Type: 01 Year: 2015 Color: SILV VIN #:

Vehicle Towed To: Tag #: 294CNO Other identifiers or remarks:

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

State Of Florida

[redacted]

Count #	Offenses Charged	WC# / Citation # (if applicable)	FS or Capias/Warrant #
1	DUI ALCOHOL OR DRUGS 1ST OFFENSE	AAX3KE	316.193-2A2A
1	DUI W/DAM TO PROP OR PERSON OF ANOTHER	AF3GK5E	316.193-3C1
1	DRIVING W/ EXP LIC > 6MO	AF3GK7E	322.03-5
1	FAILURE TO USE DUE CARE	AF3GK6E	316.185

Probable Cause Affidavit

Before me this date personally appeared FACCINI DAVID R (9446) who being first duly sworn deposes and says that on 9 day of October, (year) 2021 at 2000 NE 2ND ST, DEERFIELD BEACH, FL 33441 (crime location) the above named defendant committed the above offenses charged and the facts showing probable cause to believe the same are as follows

Time of Crash. 2022 / Enroute. 2034 / On Scene· 2056

The undersigned responded to 200 NE 2nd St Pompano Beach, Broward County Florida in reference to a DUI investigation.

Upon arrival I spoke with Deputy Seedig # 10194 who advised that he was flagged down in

* * *. 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 — Officer's Name/CCN: FACCINI, DAVID R (9446) — Officer's Division: Regional Traffic Enforcement

STATE OF FLORIDA
COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me this 9 day of October 2021 (year), by FACCINI, DAVID R. (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 — Title/Rank and CCN: DS/10194

Print Type or Stamp Commissioned Name of Notary Public — (SEAL)

FILED FOR RECORD 17TH CIRCUIT COUNTY COURT BROWARD COUNTY, FLORIDA 2021 OCT 11 AM 10:03 TRM CENTRAL

'21 OCT 10 AM 2:21

Seventeenth Judicial Circuit
Broward County
State of Florida

BSO DB #2 (Revised 05/00)

FIRST APPEARANCE/ARREST FORM

57-W29-17720 WC. 15548

(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

☐ **COMPLAINT AFFIDAVIT**
PROBABLE CAUSE AFFIDAVIT CONTINUATION

BROWARD COUNTY
ARREST #

☒ ARREST FORM

OBTS #

Filing Agency	Offense Report	Local ID #	FDLE	FBI	SS #
BROWARD COUNTY SO	10-2110-001500				[redacted]

Defendant's Last Name	First	Middle	SUF	Alias/Street Name	Citizenship
MOORE	KASEY E				US

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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reference to a crash and he observed the defendant in the driver`s seat The deputy further advised that upon contact with the defendant he noticed an odor of alcoholic beverages on her breath, slurred speech, unsteady on her feet, could not locate any of the requested documents including her driver`s license, she appeared confused and she could not remember her address.

I spoke with driver Jullyane Almeida who advised that she was facing east stopped on the roadway because of traffic when she felt a bump from behind and she identified the other driver/defendant by her purple clothing who was speaking to another deputy Sworn statement taken from Almeida by Deputy Seedig

I observed damage to the defendant`s driver`s side front fender area and damage to the victim`s passenger side right rear bumper/quarter panel area visually estimating at approximately $10,000.00.

While speaking to the defendant I noticed somewhat bloodshot eyes, an odor of alcoholic beverages on her person and a stronger odor as she stood close to me as she spoke and possibly slurred speech.

I asked the defendant if she had any illnesses, injuries or disabilities and if she was taking any medication The defendant stated that she suffers from Insomnia, hyper tension and sensitivity to light and advised that she didn`t take any medications. The defendant later additionally stated that she was fully functional and Autistic

I advised the defendant that I was conducting a DUI investigation and asked her if she

* * * Continued * * *

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

Officer/Affiant's Signature

FACCINI, DAVID R (9446)
Officer's Name/CCN

Regional Traffic Enforcement
Officer's Division

STATE OF FLORIDA
COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me this 9 day of October 2021 (year)
FACCINI, DAVID R. (name and title), who is personally known to me or has produced _____ as identification

Judge of the Court, or Assistant State Attorney

01S/10194
Title/Rank and CCN

Notary Public

(SEAL)

FILED FOR RECORD
CLERK, CIRCUIT COUNTY COURT
BROWARD COUNTY, FLORIDA
2021 OCT 11 AM 10:03
I&M CENTRAL

FIRST APPEARANCE/ARREST FORM

COURT COPY

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

☐ COMPLAINT AFFIDAVIT
PROBABLE CAUSE AFFIDAVIT CONTINUATION

BROWARD COUNTY

☒ ARREST FORM

ARREST #

OBTS #

Filing Agency	Offense Report	Local ID #	FDLE	FBI	SS #
BROWARD COUNTY SO	10-2110-001500				[redacted]

Defendant's Last Name	First	Middle	SUF	Alias/Street Name	Citizenship
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would perform roadside exercises I additionally advised the defendant that if she refused to perform the roadside exercises that she may be subject to arrest and I was offering her an opportunity to dispel suspicion of impairment and she may be subject to arrest The defendant requested that if she could call her father because she felt that she could "actually fuck herself" because she was late in taking her dosage and when asked about her last statement she stated that she takes [redacted]. The defendant also stated that she was not prescribed anything and that she had not been drinking

I offered the defendant several opportunities to perform the exercise and she refused to do so.

I concluded my investigation formulating my opinion that the defendant was under the influence of an alcoholic beverage to the extent that her normal faculties were impaired placing her under arrest.

I advised the defendant of her arrest and requested that she submit to the breath test The defendant additionally refused to submit to the breath test and I advised her of the Implied Consent Law informing her of the penalties of refusal.

Unable to locate a valid license via teletype except for a 2018 expired Illinois drivers license.

Victims advised of Marcy`s LawDeputy Seedig subsequently transported the defendant to BSO jail for booking.

*** Continued ***

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

Officer/Affiant's Signature

FACCINI, DAVID R. (9446)
Officer's Name/CCN

Regional Traffic Enforcement
Officer's Division

STATE OF FLORIDA
COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me this 9 day of October 2021 (year)
by FACCINI, DAVID R. (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

MS/10194
Title/Rank and CCN

Print Type or Stamp Commissioned Name of Notary Public

(SEAL)

FILED FOR RECORD
BROWARD COUNTY, FLORIDA
CIRCUIT COUNTY COURT
2021 OCT 11 AM 10:03
T&M CENTRAL

Seventeenth Judicial Circuit
Broward County
State of Florida

FIRST APPEARANCE/ARREST FORM

COURT COPY

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

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

☐ **COMPLAINT AFFIDAVIT**
PROBABLE CAUSE AFFIDAVIT CONTINUATION

☒ ARREST FORM

BROWARD COUNTY
ARREST #

OBTS #

Filing Agency	Offense Report	Local ID #	FDLE	FBI	SS #
BROWARD COUNTY SO	10-2110-001500				[redacted]

Defendant's Last Name	First	Middle	SUF	Alias/Street Name	Citizenship
MOORE	KASEY E				US

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

Count #	Offenses Charged	WC# / Citation # (if applicable)	FS or Capias/Warrant #
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BWC

T&M CENTRAL
2021 OCT 11 AM 10:03
FILED FOR RECORD
CLERK, CIRCUIT COUNTY COURT
BROWARD COUNTY, FLORIDA

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

Officer/Affiant's Signature | FACCINI, DAVID R (9446) Officer's Name/CCN | Regional Traffic Enforcement Officer's Division

STATE OF FLORIDA
COUNTY OF BROWARD

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by FACCINI, DAVID R. (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 | MS/0194 Title/Rank and CCN

L. Seely
Print Type or Stamp Commissioned Name of Notary Public

(SEAL)

Seventeenth Judicial Circuit
Broward County
State of Florida

FIRST APPEARANCE/ARREST FORM

COURT COPY

BSO DB #2a (Revised 05/00)

Orig Court
2nd State Attorney
3rd Filing Agency
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