

0404503

23CT4560

OBTS Number		ARREST / NOTICE TO APPEAR				1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias		1	Juvenile	N
Agency ORI Number FL 0500300		Agency Name BOYNTON BEACH POLICE DEPT.				Agency Report Number 34-23-005723				
Charge Type: Check as many as Apply.		☐ 1. Felony ☐ 2. Traffic Felony		☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		If Weapon Seized Enter Type		Multiple Clearance Indicator
Location of Arrest (Including Name of Business) SW 23rd Ave & Ridge Pointe Dr, BB, FL						Location of Offense (Business Name, Address) SW 23rd Ave & Ridge Pointe Dr, BB, FL				
Date of Arrest 03/08/2023		Time of Arrest 2140		Booking Date		Booking Time		Jail Date		Jail Time
Name (Last, First, Middle) Roeser, Denise, Ann										
W - White B - Black		I - American Indian O - Oriental / Asian		Race W	Sex F	Date of Birth 10/13/1958	Height 5'0	Weight 135	Eye Color Brown	Hair Color Blonde
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status Single		Religion Unk		Indication of: Alcohol Influence ☐ Y ☐ N ☐ Unk Drug Influence ☐ Y ☐ N ☐ Unk
Local Address (Street, Apt. Number) (City) (State) (Zip) 1 Bethesda Park Cir, Boynton Beach Florida, 33431						Phone (561) 577-3800		Residence Type 1. City 3. Florida 2. County 4. Out of State 1		
Permanent Address (Street, Apt. Number) (City) (State) (Zip)						Phone () -		Address Source FL DL		
Business Address (Street, Apt. Number) (City) (State) (Zip)						Phone () -		Occupation Teacher		
D/L Number, State R260161588730 FL				Soc. Sec. Number [REDACTED]		INS Number		Place of Birth Pittsburgh, Penn		Citizenship USA
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth		☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile ☐ 2. At Large ☐ 4. Misdemeanor		
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth		☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile ☐ 2. At Large ☐ 4. Misdemeanor		
☐ Parent ☐ Legal Custodian ☐ Other		Name (Last) (First) (Middle)		Residence Phone						
Address (Street, Apt. Number)		(City) (State) (Zip)		Business Phone						
Notified by: (Name)				Date	Time	Juvenile Disposition 1. Handled/Processed within Dept. and Released 2. TOT HRS/DYS 3. Incarcerated				
Released To: (Name)				Relationship		Date	Time			
The above address was provided by ☐ defendant and/or ☐ defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 561-355-2526) informed of any change of address: ☐ Yes, By (Name) ☐ No (Reason)						School Attended		Grade		
Property Crime? Yes ☐ No ☐		Description of Property				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. Barbituate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Derv.		P. Paraphernalia/ Equipment S. Synthetic		U. Unknown Z. Other		
Charge Description DUI Property Damage/ Injury				Counts 1	Domestic Violence ☐ Yes ☒ No		Statute Violation Number 316.193.3C1		Violation of ORD#	
Drug Activity		Drug Type		Amount/Unit		Offense # 23-005723		Warrant/Capias Number		Bond 25
Charge Description				Counts	Domestic Violence ☐ Yes ☐ No		Statute Violation Number		Violation of ORD#	
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond
Charge Description				Counts	Domestic Violence ☐ Yes ☐ No		Statute Violation Number		Violation of ORD#	
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond
Charge Description				Counts	Domestic Violence ☐ Yes ☐ No		Statute Violation Number		Violation of ORD#	
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond
☐ Instruction No. 1 Mandatory Appearance in Court		☐ Instruction No. 2 You need not appear in Court but must comply with instruction on reverse side.		Location (Court, Room Number, Address) South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444						
Court Date and Time Month April Day 10th Year 2023 Time 8:30 ☐ A.M. ☐ P.M.				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						
HOLD for other Agency Name:				Signature of Arresting Officer				Name Verification (Printed by Arrestee) (PRINT)		
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:				Name of Arresting Officer (Print) L. Nalerio				I.D. # 982		BU#
Intake Deputy DUNN 30102 LD. #				Pouch #		Transporting Officer L. Nalerio		I.D. # 982		Agency BBPD
				Witness here is subject Signed with an "X".				Page 1 OF 1		

J Kt 03/08/23

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 8th DAY OF March 2023 AT 2140 ☐ A.M ☒ P.M.

CASE #: 23-005723 DEFENDANT: Roeser, Denise, Ann

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATION OF DRIVER:

On 3/8/2023 at approximately 2011 hours, I received a call on my cellphone from Sgt. Munro in regards to a vehicle accident involving a vehicle and a pedestrian. I was on an on-call basis due to being on the Traffic Homicide Investigations unit. I arrived at the accident scene at SW 23rd Ave & Ridge Pointe Dr (Boynton Beach) and was debriefed on the accident; which I was advised of the following; Pedestrian 1 (Rebeca Oliveira D.O.B 3/9/89) was pushing a piano on a cart, westbound on SW 23rd Ave in the area of Ridge Pointe Dr. Oliveira was walking westbound along the roadway as she was pushing the piano (westbound lanes). Oliveira was not in a pedestrian designated area. Vehicle 1, a Blue Chevrolet Cruze bearing FL tag Y84UQW was being operated by Denise Roeser D.O.B 10/13/1958, who was traveling westbound on SW 23rd Ave in the area of Ridge Pointe Dr. As Roeser drove the Cruze westbound on Sw 23rd Ave, Roeser drove the Cruze onto Oliveira. As the vehicle struck Oliveira, her body ended up on top of the hood and her head struck the bottom left area of the windshield. Oliveira's body came to a final rest just a couple feet southwest of the vehicle.

Oliveira was transported to Delray Medical Hospital and suffered from a concussion and scratches to her body. Contact was made with the driver Roeser, who was sitting on the driver seat of the vehicle. I asked Roeser about the accident; Roeser advised that she did not see Oliveira walking on the roadway. I asked Roeser if she was injured and she stated that she was not. It should be noted that air bags were not activated on the Cruze. Roeser stated that she was traveling home from an event. When Roeser spoke to me, I could smell a strong odor of an unknown alcoholic beverage coming from her mouth. Roeser also had glassy eyes and a slurred speech. I asked Roeser to step out of the vehicle. While out of the vehicle, Roeser was swaying and I could still smell the strong odor of an unknown alcoholic beverage coming from her breath, which intensified every time she spoke. See Ofc. Hickman's crash report for further information.

Roeser was advised of her constitutional rights; which she understood. I asked Roeser once again where she was coming from and she said that she was picking up a check from a friends house. I asked Roeser if she consumed any alcoholic beverages and she told me that she had one Vodka drink at around 1900 hours. I could still smell the strong odor of an unknown alcoholic beverage coming from her breath. Roeser was swaying front and forth and had slurred speech. I asked Roeser if she had a speech impediment which she stated no. She then changed her story and stated that she had "new teeth". Roeser eyes were still glassy. I once again asked Roeser if she was injured which she said no. I asked her if she takes any medication, which she stated for high blood pressure. Roeser told me that she wears glasses and has no other issued with her eyesight. I asked Roeser if she would submit to Standardized Field Sobriety Task; which she stated that she would.

Pen Task: Roeser moved her head several times. Roeser was swaying.

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|--|---|
| ☐ Left eye does not follow smoothly | ☐ Right eye does not follow smoothly |
| ☐ Left eye prior to 45 degrees | ☐ Right eye prior to 45 degrees |
| ☐ Distinct jerking in left eye at maximum deviation | ☐ Distinct jerking in right eye at maximum deviation |
| ☐ Vertical Nystagmus in left eye | ☐ Vertical Nystagmus in right eye |

WALK AND TURN:

Walk and Turn: Roeser was advised of the instructions which she stated that she understood. Roeser stepped off the line during the instructional phase, several times. Roeser was unsteady on her feet and using her arms for balance. Roeser started the task too early. Roeser stepped off the line while walking forward. Roeser did not conduct heel to toe touching steps. Roeser was not able to complete the exercise due to poor balance and not following instructions.

ONE LEG STAND:

One Leg Stand: Roeser was advised of the instructions which she stated that she understood. Roeser counted incorrectly. Roeser put her foot down multiple times.

FINGER TO NOSE:

FTN: Roeser was advised of the instructions which she stated that she understood. Roeser did not bring her finger down automatically. Roeser was swaying. I had to explain the instructions multiple times to Roeser.

ROMBERG/ALPHABET:

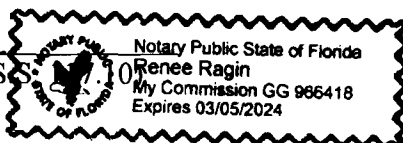
Alphabet: Roeser was advised of the instructions which she stated that she understood. Roeser sung the alphabet to me. Roeser did not recite the alphabet correctly.

Based on my investigation, I found Probable Cause to charge Roeser with DUI property damage/injury pursuant to F.S.S 316.193.3C1. Roeser was transported to the BAT where a 20 minute observation was conducted. After the observation, I requested a breath test from Roeser. Roeser refused and was advised of implied consent; which she understood. Roeser refused to provide a breath test after implied consent. Roeser was advised of her Constitutional Rights; which she refused to partake in Q&A's. Roeser was medically cleared at Good Samaritan Hospital and then TOT PBCJ without incident.

The following instrument was sworn to before me this 8t day of March 2022

By: Ofc. Naleria

[Signature]
Notary/Police Officer (F.S.S.)



[Signature]
Signature of Arresting Officer



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

PBSO CASE # 23-044468 PBSO ZONE 6-12

AGENCY CASE # 23-005723 CRASH CASE # _____

TIME OF STOP/CRASH 1958 DATE 3-8-23 DAY Wednesday

SUBJECT'S NAME Roeser, Denise, Ann RACE W SEX F

HGT 5'0 WGT 130 DOB 10/13/1958

LOCATION SW 23rd Ave & Ridge Pointe Dr, BB, FL

ARRESTING OFFICER'S NAME & ID Nalerio 982 AGENCY BBPD

DIVISION: PATROL

NOTIFIED BY COMMO N

ARRIVAL AT FACILITY 2202

BREATH RESULTS:

Arrest Time 2140

1. _____
2. _____
3. _____
4. _____

REFUSED

TESTING OFFICER'S ID 16877

TESTING FACILITY TASK REPORT

AGENCY: BBPD

SUBJECT: Roeser, Denise A.

CASE NUMBER: 23 -044468

DATE: Mar 8, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 22:26

ENDING TIME: 22:29

BREATH TESTS RESULTS: 1) Refused TIME 22:28 A.M. ☐ P.M. ☒ 2) N/A TIME ☐ A.M. ☐ P.M. ☐
3) N/A TIME ☐ A.M. ☐ P.M. ☐ 4) N/A TIME ☐ A.M. ☐ P.M. ☐

BREATH OPERATOR: R. Ragin #16877

MAINTENANCE TECHNICIAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Talkative, calm

CLOTHING: White pants, white & Blue shirt, tan heels

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER:

Eyes are red
Odor of unknown alcoholic beverage on breath

COMMENTS:

Arrived at center A/O started 20 minute observation period at 22:02 hrs.

Subject refused to perform breath test.

A/O read I/C and subject stated she understood I/C.

Subject refused to take test.

A/O read rights.
Subject stated she understood rights.

A/O attempted Q&A.
Subject refused to answer Q&A

STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST

I, Patrolman L NALERIO, a duly certified Law Enforcement Officer or Correctional Officer,
(Person reading Implied Consent Warning)
am a member of Boynton Beach Police Department, and I do swear
(Name of enforcement agency)
or affirm that on or about the EIGHTH day of March, 2023, at 9:53 PM
DRIVER DENISE ANN ROESER
(Type or Print) FIRST MIDDLE OR MAIDEN LAST
DL # R260161588730, state of FL, was placed under lawful arrest for
the offense of DUI by Patrolman L NALERIO and
(Name of Arresting Officer)
issued Citation # AE159DE.

That on or about the EIGHTH day of March, 2023, at 10:28 PM
in Palm Beach County,

I requested that the driver submit to a **BREATH** test for the purpose of determining its alcohol content. I informed the driver that the refusal to submit to such test 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, or if he or she had been previously fined under s. 327.35215, F.S., 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, or if he or she has been previously fined under s. 327.35215, F.S., for refusal to submit to a lawful test of his or her breath, urine, or blood. Nonetheless, the driver refused to submit to the test requested.

Signature of Law Enforcement Officer or Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (s. 117.10, F.S.)



The foregoing instrument was sworn and subscribed before
me this 8th day of March, 2023,
by AFC. Nalerio
who is personally known to me or who has produced
LEO as identification.
Notary Public _____

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title _____

Date _____

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: _____

CASE NUMBER: _____

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 determining the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am _____ of the _____

If you refuse to take the test I have requested of you, your driving privilege will be suspended for a period of one (1) year for a FIRST REFUSAL, or eighteen (18) months if your driving privilege has been PREVIOUSLY SUSPENDED, or if you have been PREVIOUSLY FINED under s. 327.35215, for refusing to submit to a lawful test of your breath, urine, or blood. Additionally, if you refuse to take the test I have requested of you, and if your driving privilege has been previously suspended, or if you have been previously fined under s. 327.35215, for a refusal to submit to a lawful test of your **breath, urine** or blood, you will be committing a misdemeanor, in addition to any other penalties which can be imposed by law.

Refusal to submit to the test I have requested is admissible into evidence in any criminal proceeding.

Do you understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO

NOTE: IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER'S LICENSE (CDL), READ THE FOLLOWING,

If you are a Commercial Driver License (CDL) holder or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privilege for a period of one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from holding a CDL or operating a CMV.

Do you understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO

SUBJECTS SIGNATURE: (X) _____

CONSTITUTIONAL WARNINGS

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

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. 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.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X) _____

WHITE: STATE ATTY.

YELLOW: DHSMV

PINK: CENTRAL RECORDS

GOLD: JAIL

SUBJECT: 71-1000-1 CASE NUMBER:

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? WHAT'S WRONG?

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE:

- ☐ **EPILEPSY?** _____
- ☐ **GLASS EYE?** _____
- ☐ **FALSE TEETH?** _____
- ☐ **EAR INFECTION?** _____
- ☐ **INNER EAR TROUBLE?** _____
- ☐ **DIABETES?** _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: _____



**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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2023006393	Date: 3/9/2023
	Specialist Name/ID: Chantel Daniels/30347