J# C539572

23 CT 6392 SB

P# 39077

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1. Arrest 3. Request for Warrant
2. N.T.A. 4. Request for Capias

1 Juvenile N

ADMINISTRATION

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number
	FL0500300	BOYNTON BEACH POLICE DEPT.	34-23-011987

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)	Location of Offense (Business Name, Address)
Knight Rd & W Gateway Blvd Boynton Beach, FL , 33426	Knight Rd & W Gateway Blvd Boynton Beach, FL , 33426

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
04/08/2023	2201					

DEFENDANT

Name (Last, First, Middle): Johnson, Jessica, Michelle

Alias (Name, DOB, Soc. Sec. #, Etc):

W - White I - American Indian B - Black O - Oriental / Asian	Race	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
	W	F	06/04/1973	5'6	190	Blue	Red	Fair	Large

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)	Phone	Residence Type (1. City 2. County 3. Florida 4. Out of State)
515 W PINE ST APT A, Lantana	Florida,	33462		(765)407-8254	2

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
				( ) -	FL DL

Business Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Occupation
				( ) -	Server

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth	Citizenship
J525433737040 FL	[redacted]		Handcock, Indiana	USA

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ 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:

CODE

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/Deriv. P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
DUI Property Damage	1	☐ Yes ☒ No	316.193.3C1	

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
-	-	-	23-011987		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐ Yes ☐ No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
-	-	-			

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐ Yes ☐ No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
-	-	-			

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐ Yes ☐ No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond

NOTICE TO APPEAR

☐ 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 May Day 22 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

ADMIN

HOLD for other Agency Name:

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Intake Deputy: [illegible] I.D. #: 7206 Pouch #:

Signature of Arresting Officer:

Name of Arresting Officer (Print): L.Nalerio I.D. #: 982

Transporting Officer: L.Nalerio I.D. #: 982 Agency: BBPD

Name Verification (Printed by Arrestee) (PRINT):

BU#

Witness here is subject Signed with an "X":

Page 1 OF 1

FILED PBC - GUN CLUB '23 APR 9 AM 7:37

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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 8th **DAY OF** April **2023 AT** 2201 ☐ **A.M** ☒ **P.M.**

CASE #: 23-11987 **DEFENDANT:** Johnson, Jessica, Michelle

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATION OF DRIVER:

On 4/8/23 at approximately 2122 hours, BBPD responded to the intersection of W Gateway Blvd and Knight Rd, in reference to a two vehicle accident. Upon arrival I observed a red Dodge Nitro bearing FL tag QCIC18. The Nitro was on the eastbound lanes of W Gateway Blvd and the front facing northbound while it was on the southbound sidewalk. Other officers checked on the other vehicle involved and I made contact with the driver, who was still in the driver seat of the vehicle, W/F Jessica Johnson. Johnson stated that she was not injured. I asked Johnson for her driver license, and she was not able to find it. Johnson was slow to react and fumbling paperwork. I then asked Johnson to step out of the vehicle to speak to me. It should be mentioned that while Johnson spoke to me from within the vehicle, I could smell a strong odor of an unknown alcoholic beverage coming from her mouth and within the vehicle.

I then asked Johnson to step out of the vehicle, while outside of the vehicle, Johnson was unsteady on her feet and using the vehicle for her balance. Johnson stated that she was traveling westbound on W Gateway Blvd, but was pointing eastbound with her fingers. Crash investigation revealed that she was traveling westbound on Gateway Blvd at the intersection of Knight Rd, Johnson set her vehicle to make a U-turn at Knight Rd to then travel eastbound on W Gateway Blvd. Johnson conducted the U-turn in front of another vehicle and was involved in an accident. BBFD was on scene, and I overhead Johnson telling them that she had been "drinking". BBFD checked her out and advised that all vitals were normal enough for her to not need transport. Johnson also refused transport. Johnson stated that she was not injured, had no medical illness and did not have a head injury.

Johnson was unsteady on her feet and had glassy eyes. Johnson's speech was also slurred when she spoke to me. While she remained outside of the vehicle, Johnson's mouth area still released a strong odor of an unknown alcoholic beverage, which intensified the more she spoke. I then advised Johnson that the crash investigation was concluded and I was conducting a DUI investigation. I advised Johnson of her Miranda Rights which she stated that she understood. I asked Johnson where she was going and she said she was trying to get to Military Trail to buy something from the store. Johnson said she got off work at around 1730 and had been drinking alcoholic beverages, since. Johnson stated she consumed a White Claw and two Fireball shots. I then asked Johnson if she would submit to Standardized Field Sobriety Exercises'; which she stated that she would. I asked Johnson once again if she was injured, under any medication, had any medical issues, or had eyesight issues, and she replied no to all of the questions.

Pen Task: Johnson was advised of the instructions which she advised that she understood. Johnson kept on moving her arms behind her back. Johnson was swaying. Johnson moved her head several times. Johnson would not follow the tip of the pen like instructed. Task was completed.

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HORIZONTAL GAZE NYSTAGMUS:

☒ Left eye does not follow smoothly
☒ Left eye prior to 45 degrees
☒ Right eye does not follow smoothly
☒ Right eye prior to 45 degrees

☒ Distinct jerking in left eye at maximum deviation
☐ Vertical Nystagmus in left eye

☒ Distinct jerking in right eye at maximum deviation
☐ Vertical Nystagmus in right eye

WALK AND TURN:
Johnson was advised of the instructions which she stated that she understood. Johnson started the task early. Johnson had issued with balance during the instructional phase. Johnson took 14 steps forward. Johnson did not count. Johnson did not conduct heel to toe steps on any of the steps. Johnson conducted an improper turn. Johnson did not complete the exercise like instructed.

ONE LEG STAND:
Johnson was advised of the instructions which she stated that she understood. Johnson was swaying while in the starting position. Johnson put her foot down several times. Johnson did not count. Johnson was off balance while on the line.

FINGER TO NOSE:
Johnson was advised of the instructions which she stated that she understood. Johnson used the wrong finger every time. Johnson opened her eyes during the exercise.

ROMBERG/ALPHABET:
Johnson was advised of the instructions which she stated that she understood. Johnson was swaying while in the instructional phase.

Based on my investigation, I placed Johnson under arrest for DUI Property Damage pursuant to F.S.S316.193(3)C(1). Johnson was transported to the BAT where a 20 minute observation was conducted. Johnson provided a breath sample of .218 and .219. Johnson was then advised of her Constitutional Warning, which she then refused to partake in Questions and Answers. Johnson was medically cleared at Good Samaritan and then TOT PBCJ without incident. Johnsons' vehicle was towed by Becks towing. Crash report completed by Ofc. Doninno.

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The following instrument was sworn to before me this 8t day of April 2023

By: Ofc.Nalerio

Notary/Police Officer (F.S.S. 117.10)

Signature of Arresting Officer

THOMASINA MILLER
Notary Public - State of Florida
Commission # HH 339641
My Comm. Expires Dec 7, 2026
Bonded through National Notary Assn.

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006240 Software: 8100.27
Date of Test: 04/08/2023

Date of Last Agency Inspection: 03/10/2023
Observation Period Began: 22:29
Subject's Name: JESSICA M JOHNSON DOB: 06/04/1973 Sex: F

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	22:55
Air Blank	0.000	22:56
Control Test	0.080	22:56
Air Blank	0.000	22:57
Subject Sample #1	0.218	22:57
Air Blank	0.000	22:58
Air Blank	0.000	23:00
Subject Sample #2	0.219	23:00
Air Blank	0.000	23:01
Control Test	0.080	23:01
Air Blank	0.000	23:02
Diagnostics Check	OK	23:02

Cylinder Lot: 08622080A1
Exp: 06/05/2024

State of Florida, County of Palm Beach,

Personally appeared before me the undersigned authority, who (✓) is personally known to me or (__) produced _____ as identification, and who after being placed under oath, states:

I THOMASINA E MILLER, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: Thomasina Miller Date: 04/08/23
Signature

Sworn to (or affirmed) before me this 8 day of April, 2023

Signature of Notary Public-State of Florida

Otc. L. Nalevio
Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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TESTING FACILITY TASK REPORT

AGENCY: BBPD

SUBJECT: JOHNSON, JESSICA .M.

CASE NUMBER: 23-055391

DATE: Apr 8, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 22:52

ENDING TIME: 23:04

BREATH TESTS RESULTS: 1) .218 TIME 22:57 A.M.☐ P.M.☒ 2) .219 TIME 23:00 A.M.☐ P.M.☒

3) N/A TIME N/A A.M.☐ P.M.☐ 4) N/A TIME N/A A.M.☐ P.M.☐

BREATH OPERATOR: T. MILLER #41017

MAINTENANCE TECHNICAN: J. KARLECKE# 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: CALM, QUIET

CLOTHING: WHITE SHIRT, BLUE SHORTS, MULTICOLOR SANDALS

MEDICAL CONDITIONS: HIGH BLOOD PRESSURE, ANXIETY, DEPRESSION

MEDICATIONS: PROZAC , QUINIDINE

OTHER:

Note: Ending time stated on video is incorrect. Correct ending time is 23:04 HRS.

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 22:29 HRS.

Subject: AGREED TO TAKE TEST.

A/O: READ RIGHTS.
SUBJECT: STATED SHE UNDERSTOOD RIGHTS.

TECH: READ TEST RESULTS.
SUBJECT: STATED SHE UNDERSTOOD TEST RESULTS.

A/O: ATTEMPTED Q & A.
SUBJECT: REFUSED QUESTIONS AND INVOKED HER RIGHTS TO COUNSEL.

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

PBSO CASE # 23-055391 PBSO ZONE 6-11

AGENCY CASE # 23-011987 CRASH CASE #

TIME OF STOP/CRASH 2201 DATE 04-08-23 DAY Saturday

SUBJECT'S NAME Johnson, Jessica, Michelle RACE W SEX F

HGT 5-6 WGT 190 DOB 6-4-1973

LOCATION Knight RD & Gateway Blvd, Boynton Beach, FL 33426

ARRESTING OFFICER'S NAME & ID Nalerio 982 AGENCY BBPD

DIVISION: PATROL

NOTIFIED BY COMMO Y

ARRIVAL AT FACILITY 2229

Arrest Time 2201

BREATH RESULTS:

1. .218
2. .219
3. N/A
4. N/A

TESTING OFFICER'S ID 41017

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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)_____

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SUBJECT: _____ CASE NUMBER: 2[illegible]

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: _____

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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:	

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REVIEW COMPLETED BY

Booking Number: 2023009189	**Date:** 4/9/2023
	Specialist Name/ID: Chantel Daniels/30347