0548018 24mm2469 244

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: FL0500300 | Agency Name: BOYNTON BEACH POLICE DEPT. | Agency Report Number: 34-24-004740

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): 100 E GATEWAY BLVD, BOYNTOB BEACH, FL, 33435 | Location of Offense (Business Name, Address): 100 E GATEWAY BLVD, BOYNTOB BEACH, FL, 33435

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
03/23/2024	00:45					BECK'S TOWING

DEFENDANT

Name (Last, First, Middle): WHITE, KELLY ANN | Alias (Name, DOB, Soc. Sec. #, Etc)

Race (W - White, B - Black, I – American Indian, O – Oriental / Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	02/02/1992	5'00	125	GREEN	BLACK	FAIR	MEDIUM

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) | Marital Status: SINGLE | Religion: UNK | Indication of: Alcohol Influence ☒ N ☐ Unk ☐; Drug Influence ☐ N ☒ Unk ☐

Local Address (Street, Apt. Number) (City) (State) (Zip): 1100 LAKE DR, LANTANA, FL, 33462 | Phone: (561)889-2238 | Residence Type: 1. City 3. Florida 2. County 4. Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip) | Phone: ( ) - | Address Source: VERBAL

Business Address (Street, Apt. Number) (City) (State) (Zip) | Phone: ( ) - | Occupation: UNK

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth	Citizenship
W300501925420 / FL	[redacted]		OAKLAND PARK, FL	YES

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 561-358-2526) 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	1	☐Yes ☒No	316.193.1a	

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
-	-	-	24-004740		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
RESIST W/O VIOLENCE	1	☐Yes ☒No	843.02	

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
-	-	-	24-004740		

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
					SHILLED PBC - GUN CLUB

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 | '24 MAR 23 AM 7:53

Court Date and Time: Month APRIL | Day 22 | Year 2024 | Time 08:30 ☒ 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): Refused | Date Signed

ADMIN.

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): ALEXIS | I.D. #: 1105 | BU#

Intake Deputy | I.D. # | Pouch # | Transporting Officer: ALEXIS | I.D. #: 1105 | Agency: BBPD | Witness here is subject Signed with an "X".

Page 1 OF 1

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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 23 **DAY OF** March **2024 AT** 00:30 ☒ **A.M** ☐ **P.M.**

CASE #: 24-004740 **DEFENDANT:** WHITE, KELLY ANN

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATION OF DRIVER:

On the above date, at approximately 00:30 hrs., I was traveling southbound on I-95, passing exit 63. The roadway was wet since it had been running all night.

While traveling in the HOV lane, a vehicle (a Blue Subaru Crosstrek, bearing FL tag IS00UM, also traveling southbound, swerved into my lane of travel, forcing me to break to avoid being involved in a crash. The vehicle accelerated to approximately 85 MPH, at which time I observed it swerving multiple times between the left shoulder, both left side tires crossing over, and the HOV lane. I followed the vehicle, which then entered Boynton Beach City Limits, where the vehicle continued to swerve in the within the HOV lane . The vehicle then changes lanes, cutting across three lanes of traffic, without signaling, to exit at Gateway Blvd City of Boynton Beach.

While on the southbound Gateway Exit Ramp, the vehicle swerved again to the left, towards the left shoulder/wall). The vehicle finally came to a stop for a red light at the intersection of Gateway Blvd and the I-95 exit Ramp. However, the driver stopped well passed the white line, crossing over and blocking the pedestrian crosswalk.

Based on my observations (driving pattern and infractions), I conducted a traffic stop on the vehicle at the 100 Block of E Gateway Blvd, City of Boynton Beach, Palm Beach County, FL, 33435.

Contact was made with the female driver, identified via her FL DL as KELLY ANN WHITE, who was the sole occupant. I immediately noticed White's red bloodshot, and glassy eyes and smelled the odor of alcoholic beverage emanating from the vehicle. I introduced myself to White and asked for her driver's license, then informed her of my observations and the reason for the traffic stop.

White stated she was coming from downtown West Palm Beach and was driving home to Hypoluxo. She was slurring her words and believed that she was on Boynton Beach Boulevard, not Gateway Boulevard. When asked, White said she had one glass of wine while having dinner in West Palm Beach.

I asked White if she would like to do the Standardized Field Sobriety exercise (SFST) to dispel my suspicion that she was intoxicated, and she refused. I informed White of the Taylor Warnings and asked her again, and she said no to the SFSTs.

Based on my observation of White's driving pattern, and indicators that she had been drinking alcoholic beverages, I informed her that she was under arrest for DUI. I asked White to exit her vehicle, and she refused by saying, " I Do not consent." I asked White several times to exit the vehicle and even attempted to open the driver's door, at which time White rolled up the window with my arm in between. I was able to open the driver's door and asked White to exit the vehicle, but she refused and kept saying, "I do not consent."

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White was eventually placed in handcuffs (D/L and checked for spacing) and placed in my vehicle (905). White was transported to the Boynton Beach PD booking/BAT room, where I conducted a 20-minute observation from 00:56 to 01:16 hrs.

Once completed, White was asked to determine the alcohol content, and she refused. Implied Consent was read and explained to White multiple times. White was asked a second time to provide a breath sample and refused. Refusal time was marked at 01:26 hrs. Q/A's not completed. White asked for her lawyer.

KELLY ANN WHITE was charged with DUI according to FSS 316.193.1a. She was also charged with resisting an officer without violence, according to FSS 843.02. White was processed and booked at the Palm Beach County Jail.

SFST REFUSED

HORIZONTAL GAZE NYSTAGMUS:

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

WALK AND TURN:

ONE LEG STAND:

FINGER TO NOSE:

ROMBERG/ALPHABET:

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The following instrument was sworn to before me this 23 day of March 2024

By: OFC ALEXIS

I. [illegible] 1137

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

Signature of Arresting Officer

TESTING FACILITY TASK REPORT

CASE #: 24-004740 **DEFENDANT:** WHITE, KELLY ANN

Date: 3/23/24 **Video Tape #:** _____

BREATH TEST RESULTS: REFUSED

1. ____ g/210L Time _____ ☐ a.m. ☐ p.m. 3. ____ g/210L Time _____ ☐ a.m. ☐ p.m.
2. ____ g/210L Time _____ ☐ a.m. ☐ p.m. 4. ____ g/210L Time _____ ☐ a.m. ☐ p.m.

BREATH OPERATOR: OFC VLADIMIR ALEXIS

MAINTENANCE TECHNICIAN: DET. B DRURY

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: ARGUMENTATIVE AT TIME, RESIST

CLOTHING: BLACK SHIRT, BLUE JEANS

MEDICAL CONDITIONS: N/A

MEDICATIONS: N/A

OTHER: _____

COMMENTS:

DEFENDANT REFUSED SFST
DEFENDANT REFUSED BREATH TEST
IMPLIED CONSENT READ, DEF. UNDERSTOOD
DEFENDANT ASKED FOR LAWYER

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: BOYNTON BEACH PD
Instrument Serial Number: 80-001190 Software: 8100.27
Date of Test: 03/23/2024

Date of Last Agency Inspection: 02/28/2024
Observation Period Began: 00:56
Subject's Name: KELLY A WHITE DOB: 02/02/1992 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	01:28
Air Blank	0.000	01:29
Control Test	0.082	01:29
Air Blank	0.000	01:30
Subject Sample #1	REF*	01:30
Air Blank	0.000	01:31
Control Test	0.082	01:31
Air Blank	0.000	01:32
Diagnostics Check	OK	01:32

*Subject Test Refused

Cylinder Lot: 402357111
Exp: 02/10/2025

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 VLADIMIR ALEXIS, 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: _____ Date: 3/23/24
Signature

Sworn to (or affirmed) before me this 23 day of March, 2024

I. [signature] 1137
Signature of Notary Public-State of Florida

OFC. Coppini 1137
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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STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST

I, Officer VLADIMIR ALEXIS (Person reading Implied Consent Warning), a duly certified Law Enforcement Officer or Correctional Officer, am a member of Boynton Beach Police Department (Name of enforcement agency), and I do swear or affirm that on or about the TWENTY-THRID day of March, 2024, at 1:09 AM

DRIVER (Type or Print) KELLY (FIRST) ANN (MIDDLE OR MAIDEN) WHITE (LAST),

DL # W300501925420, state of FL, was placed under lawful arrest for the offense of DUI by Officer VLADIMIR ALEXIS (Name of Arresting Officer) and issued Citation # AHPW9ZE.

That on or about the TWENTY-THRID day of March, 2024, at 1:26 AM 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.

1105

Signature of Law Enforcement Officer or Corrctional Officer

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

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this ____ day of _____, 20____, by _____ who is personally known to me or who has produced _____ as identification.

Notary Public _____

The foregoing instrument was sworn and subscribed before me:

L. [illegible] 1137

Signature of Attesting Officer

Title OFC. Coppini 1137

Date 3/23/24

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.

****EFFECTIVE OCTOBER 1, 2021****

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SUBJECT: _____ CASE NUMBER: 24-004740

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 detecting 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

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CASE #: 24-004740 **DEFENDANT:** WHITE, KELLY ANN

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.

Where you operating a motor vehicle at the time of the stop/Accident? _____
Where were you going? _____
What Street or Highway were you on? _____
What was you direction of travel? _____
Where did you start from? _____
What time did you start? _____
What time is it now? _____
What is today's date? _____
What day of the week is it? _____
What City and County 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 have you been drinking? _____
How much? _____
With whom? _____
When did you have your first drink? _____
When did you have your last drink? _____
Can you feel the effects of the alcohol? _____
Are you under the influence? _____
Have you consumed any alcohol since the stop/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? _____
Where 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 you eyes that are not corrected by glasses? _____
Do you take insulin? _____ If so, when was your last injection? _____
Have you ever gad a driver's license in any other state? _____
Where? _____
Interviewer: _____

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CASE #: 24-004740 **DEFENDANT:** WHITE, KELLY ANN

Arresting Officer: OFC ALEXIS, 1105
Address: 2100 HIGH RIDGE ROAD, BOYNTON BEACH, FL 33426
Phone Numbers: Home: _____ **Work:** (561) 742-6100

Name: _____
Address: _____
Phone Numbers: Home: _____ **Work:** _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ **Work:** _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ **Work:** _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ **Work:** _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ **Work:** _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ **Work:** _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ **Work:** _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ **Work:** _____
Can testify to: _____

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Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☐	119.071(2)(e)	Confession	
Public Info. Exemptions	☐	FL Const. Art. I, s. 16(b)(5)	Marsy's Law – victim information shall be redacted. The term "victim" also includes the victim's lawful representative, the parent or guardian of a minor, or the next of kin of a homicide victim. The term "victim" does not include the accused (ref. page 99 of the CRTM for additional information)	
	☐	119.071(2)(j)	Home/employment telephone number, home/employment address, or personal assets of a person who has been the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence	
	☐	119.0712(2)	Personal information contained in a motor vehicle record	
	☐	316.650(11)	Driver information contained in a uniform traffic citation	
	☐	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
Florida Rules of Judicial Administration 2.420	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	☐	(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	☐			
	☐			
	☐			
	☐			

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REVIEW COMPLETED BY

Booking Number: 2024007806	**Date:** 3/23/2024
	Specialist Name/ID#: C. Daniels/ 30347