23CT11721ASB

05416462

1895

ARREST / NOTICE TO APPEAR

1. Arrest (No Warrant) 3. Request for Warrant
6. Arrest (Warrant) 4. Request for Capias
2. N.T.A. 5. Juvenile Referral

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
0500200	Boca Raton Police Department	3 | 2 | 2023-008440

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: UNARMED

Multiple Clearance Indicator

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
, 10 S OCEAN BLVD, BOCA RATON, FL 33432	10 S OCEAN BLVD, BOCA RATON, FL 33432

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
07/05/2023	00:01	07/05/2023	00:11	07/05/2023	01:29	WESTWAY

DEFENDANT

Name (Last, First, Middle): PALMER, LYNDA LOUISE — Alias: — 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	07/14/1946	5'08	140	BLUE	BLONDE	LIGHT	M

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): NONE

Marital Status: O — Religion — Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. ☐ Drug Influence

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type
6990 NW 26TH WAY, BOCA RATON, FL 33496				(561) 288-1156	1. City 3. Florida 2. County 4. Out of State — 3

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
6990 NW 26TH WAY, BOCA RATON, FL 33496				(561) 288-1156	

Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
P456532467540 / FL	[redacted]		COMPTON, CA	US

CO-DEF

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

JUVENILE

☐ Parent ☐ Other: ☐ Legal Custodian — 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 Department and Released 2. TOT JAC 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 355-2526) informed of any change of address.
☐ Yes, by: ☐ No:

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. Disperses/Distribute M. Manufacture/Produce/Cultivate Z. Other

Drug 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

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
DUI- PROPERTY DAMAGE/ INJURY TO PROPERTY OR PERSON ENHANCED	316.193(3C1)	

Drug Activity	Drug Type	Amount	Unit	Offense #	Counts	Domestic Violence	Warrant Capias Number	Bond
	N		/		1	☐ Y ☒ N		

(1)

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount	Unit	Offense #	Counts	Domestic Violence	Warrant Capias Number	Bond
			/			☐ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount	Unit	Offense #	Counts	Domestic Violence	Warrant Capias Number	Bond
			/			☐ Y ☐ N		

INTAKE

Health: Apparent Physical Condition of Defendant: GOOD

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries — Explain

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By	Released By	Released To
868	868	PBCJ

Transported By	Date Transported	Time Transported	Other
868	07/05/2023	01:29	

NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court
☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): South County 200 W Atlantic Ave Delray Beach, FL 33444

Court Date and Time: 07/31/2023 08:30:00

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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (for Juvenile and Parent/Custodian) — Date Signed

No Photo Available

ADMIN

HOLD for Other Agency — Signature of Arresting Officer

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Name of Arresting Officer (Print): WILLIAMS, D. — I.D. #: 868

Name Verification (Printed by Arrestee) (PRINT)

Intake Deputy: Barrile — I.D. #: 1854 — Pouch #

Transporting Officer: WILLIAMS Dwirka — I.D. #: ~~868~~ 806 — Agency: BOCA

Witness here if subject signed with an "X".

PAGE 1 OF 1

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JUL 06 2023

FILED PBC - GUN CLUB
'23 JUL 5 AM8:00

PROBABLE CAUSE AFFIDAVIT

OBTS Number:

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

JUVENILE:

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2023-008440

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
PALMER, LYNDA LOUISE		W	F	07/14/1946

CHARGES

Charge Description	Charge Description
316.193(3C1) DUI/CRASH	

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
STATE OF FLORIDA,		U	

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
100 NW 2ND AVE, BOCA RATON, FL 33432	(561) 338-1234	

Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation
	(561) -	

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.

The Person taken into custody . . .

☐ committed the below acts in my presence.

☐ was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.

☐ confessed to _____ admitting to the below facts.

☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 5 day of July, 2023 at 00:01 (Specifically include facts constituting cause for arrest.)

On 7/4/2023, at 2303 hours, I was dispatched to the intersection of Ocean and E Palmetto Park Rd in reference to a crash. A BSO deputy observed a white Porsche (FL QISY59) that was traveling northbound on Ocean approaching Palmetto Park Rd suddenly swerve right and crash into a curb. The deputy notified BRPD and I arrived shortly after. Upon my arrival, I observed the vehicle still running with a W/F later identified as Lynda Palmer asleep behind the wheel. Once BRPD Fire/Rescue arrived on the scene they placed blocks on the tires and woke Lynda up. BRPD Fire/Rescue determined that she had no apparent medical needs and presented with normal vitals, however, due to her altered state they would be transporting Lynda to Boca Regional Hospital. Now in the rear of the ambulance, I began to question Lynda as to the circumstances surrounding the crash. Lynda advised she had no idea she was involved in a crash and was driving home from "A friend`s house". In speaking with Lynda I observed her eyes to be Bloodshot and watery as well as the odor of alcohol emanating from her breath.

Officer Walker arrived on the scene to assist me and rode with Lynda to Boca Regional Hospital keeping visual the entire time. Once I finished my crash and ensured the safe removal of her vehicle, I drove over to Boca Regional Hospital to conclude my investigation. I confirmed with Lynda once again that she had no information to provide to me with respect to the crash and then informed her I was concluding my crash investigation. I then advised Lynda that I would now be conducting a criminal investigation into DUI. Lynda confirmed she understood. I explained to Lynda that I believed her to be under the influence of alcohol to the extent her normal faculties were impaired to which she spontaneously utter "I might be" and continued on explained she consumed 3 glasses of wine with her friend prior to the crash.

Due to the totality of the circumstances and my training/experience, I felt the defendant is too impaired to operate a motor vehicle safely and was so at the time of the crash. The defendant was placed under arrest at approximately 0001 hours, for

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

Todd Godby #746
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

07/05/2023
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

WILLIAMS, DAVID (868)
NAME OF OFFICER (PLEASE PRINT)

07/05/2023
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2023-008440

Charge Type: Check as many as apply.
☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
PALMER, LYNDA LOUISE		W	F	07/14/1946

PROBABLE CAUSE STATEMENT

driving under the influence. Due to the fact Lynda was transported to a hospital for the purposes of receiving medical treatment Breath/Urine collection as well as Field Sobriety Exercises were made impractical. I read Lynda her Implied Consent Warnings and requested a lawful sample of her blood to which she complied. The Blood sample was collected by Nurse Tiffany Washington at 0008 hours, and submitted to BRPD evidence for testing by me. At no point prior to the collection of the blood was Lynda provide any medication or IV injections.

The vehicle was towed by Westway Towing. The tow log was completed and submitted by me.

Lynda was transported to Palm Beach County Jail.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

Todd Codling R760
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

07/05/2023
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

WILLIAMS, DAVID (868)
NAME OF OFFICER (PLEASE PRINT)

07/05/2023
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

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	☐	FL CONSTITUTION ARTICLE 1,16(b)	Other: MARSY'S LAW	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2023017436	**Date:** 7/5/2023
	Specialist Name/ID: Pinkneya/7796