0493464 2964

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
	FLO 500400	DELRAY BEACH POLICE DEPARTMENT	

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

Weapon Seized / Type (1. Yes 2. No): 2 | Multiple Clearance Indicator: 01

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
2500 Florida Blvd, Delray Beach,FL 33483	3199 S Federal Hwy, Delray Beach,Fl

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
11/18/17	2204					WestWay Towing

DEFENDANT

Name (Last, First, Middle): Retzer, Alexis D | Alias (Name, DOB, Soc. Sec. #, Etc.):

Race (W - White I - American Indian B - Black 0- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	08/29/1984	504	150	Green	Blond	Fair	Medium

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description):
Marital Status: Single | Religion: Unknown | Indication of: Alcohol Influence Y ☒ N ☐ Unk. ☐; Drug Influence Y ☐ N ☐ Unk. ☒

	Address	(City)	(State)	(Zip)	Phone
Local Address (Street, Apt. Number)	2312 SPANISH TRAIL	Delray Beach	FL	33483	(330) 715-8406
Permanent Address (Street, Apt. Number)	2312 SPANISH TRAIL	Delray Beach	FL	33483	(330) 715-8406
Business Address (Name, Street)	Mizner County Club	Delray Beach	FL	33446	( )

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2
Address Source: FL/DL
Occupation: Golf Instructor

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
R-326-004-84-809-0	[redacted]		SummerLake,OH	USA

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth		
NONE				☐ 1. Arrested ☐ 2. At Large	☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
				☐ 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 Dispsition: 1. Handled/ processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated

Released To: (Name) | Relationship | Date | Time

The above address provided by ☐ defendant and / or ☐ defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 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. Barbiturate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/ Equipment S. Synthetics U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DRIVING UNDER THE INFLUENCE	1	☐Y ☒N	316.193(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	N	17-018061		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

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 instructions on Reverse Side.

Location (Court, Room Number, Address): SOUTH COUNTY COURT 200 WEST ATLANTIC AVE DELRAY BEACH, FL 33444

Court Date and Time: Month 12 Day 04 Year 2017 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

X [signature] | 11/18/17
Signature of Defendant (or Juvenile and Parent/Custodian) | Date Signed

ADMIN

HOLD for other Agency Name: | Signature of Arresting Officer: [signature] | Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Name of Arresting Officer (Print): COLLARETTI | I.D. #: 962

Intake Deputy	I.D. #	Pouch #	Transporting Officer	ID #	Agency	Witness here if subject signed with an -X"
Spano 810			COLLARETTI	962	DBPD	

PAGE 1 OF 1

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 18 DAY OF November 2017, AT 9:36 AM (PM)

SUBJECT: Retzer, Alexis D CASE NUMBER: 17-018061

AGENCY: DELRAY BEACH ARRESTING OFFICER: COLLARETTI

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

On 11-18-17 at 9:35PM, Sergeant Ferreri was on patrol in the 2500 blk of Florida Blvd. While on patrol Sergeant Ferreri was driving northbound when he observed what was later identified as a black Kia Rio bearing FL Tag 001KVE driving southbound with just its driving lights on, no headlights. As the Kia approached Sergeant Ferreri's marked police SUV the driver who was later identified as Alexis Retzer turned her headlights on and accelerated at a high rate of speed heading southbound through a residential community. It should be noted, this residential road was poorly lit and the streets were wet as it had just rained. Sergeant Ferreri made a U-turn and attempted to catch up to the vehicle which was several blocks ahead of him due to the excessive speed. The vehicle continued to southbound towards Avenue L where it slowed down at the stop sign of Florida Blvd. and Avenue L (failed to come to a complete stop) and made a right turn to head westbound on Avenue L. The vehicle then continued towards S. Federal Highway and turned into the Mobil gas station located at 3199 S. Federal Highway where the vehicle came to a complete stop at pump #6. The driver and only occupant, Alexis Retzer exited the vehicle and asked what the problem was and stated she had to buy cigarettes. Sergeant Ferreri stated that it was immediately apparent to him that Retzer appeared under the influence of alcohol and possibly narcotics. Sergeant Ferreri stated that after Retzer stepped out of the vehicle he could smell the strong odor of an unknown alcoholic beverage emulating from her breath as she spoke. Sergeant Ferreri also stated that Retzer leaned on her car to maintain her balance, was emotional and apologetic for her actions.

OBSERVATION OF DRIVER:

The defendant appeared to be impaired. The defendant had red glassy eyes, very slurred and mumbled speech, slow blinking, slow dexterity and I could smell the odor of an unknown alcoholic beverage coming from her breath. The defendant used her vehicle for balance while speaking with Sgt. Ferreri and was unstead on her feet during some of the Road Side Tasks. The defendant had a distinct sway as she stood still. The defendant often would forget simple instructions that I would explain to her more than once. The defendant had different mood swings while I was in contact with her.

DRIVER'S STATEMENTS:

The defendant stated that she only had two drinks at the "Last Resort Bar" while playing Bingo. The defendant would not answer what kind of drinks she had.

ODORS:

DEFENDANT HAD THE ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM HER BREATH.

GENERAL OBSERVATIONS

SPEECH: **SLOW, SLURRED, MUMBLED**

ATTITUDE: **POLITE, UPSET, ANGRY, CRYING**

CLOTHING: **BLUE SHIRT, BLUE JEANS, BLUE SHOES**

MEDICAL PROBLEMS:
KNEE INJURY (DID NOT COMPLAIN OF THIS DURING MY INVESTIGATION)

MEDICATIONS: **NONE**

OTHER:
BREATH TESTING REQUEST IS VIDEO RECORDED, IN CAR VIDEO AND BODY CAMERA VIDEO.

SUBJECT: Retzer, Alexis D CASE NUMBER: 17-018061

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

☒ LEFT EYE DOES NOT FOLLOW SMOOTHLY

☒ LEFT EYE JERKS AT 45 DEGREE ANGLE OR LESS

☒ DISTINCT JERKING LEFT EYE MAXIMUM DEVIATION

☒ RIGHT EYE DOES NOT FOLLOW SMOOTHLY

☒ RIGHT EYE JERKS AT 45 DEGREE ANGLE OR LESS

☒ DISTINCT JERKING RIGHT EYE MAXIMUM DEVIATION

CAN NOT DO, WHY? _____

WALK AND TURN:

The defendant started to complete this task but then stated she did not want to perform any tasks. The defendant was unsteady on her feet and could not stand in position when instructed to do so. The defendant became very upset during this task.

CAN NOT DO, WHY? **REFUSED TO PERFORM**

ONE LEG STAND:

REFUSED

CAN NOT DO, WHY? **REFUSED TO PERFORM**

FINGER TO NOSE:

REFUSED

CAN NOT DO, WHY? **REFUSED TO PERFORM**

ROMBERG/ALPHABET:

REFUSED

CAN NOT DO, WHY? **REFUSED TO PERFORM**

BREATH TEST RESULTS: **REFUSED**

STATE OF FLORIDA
COUNTY OF PALM BEACH
THE FOLLOWING INSTRUMENT WAS NOTARIZED OR SWORN BEFORE ME THIS 11/18/17 (DATE)

BY. ofc Collaretti

B. SUE OWEN
Notary Public State of Florida
Commission # FF093160
My Commission Expires
May 30, 2018

NOTARY/CLERK OF COURT OFFICER ID: 117101 SIGNATURE OF ARRESTING OFFICER

2 of 2

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH AND/OR URINE TEST

I, ofc. Collaretti (Name of Officer reading Implied Consent Warning), a duly certified Law Enforcement Officer or Correctional Officer, am a member of Delray Beach PD (Name of law enforcement agency), and I do swear or affirm that on or about the 18th day of Nov, 20 17, at 9:36 ☒ P.M ☐ A.M.

DRIVER (Type or Print) Alexis (FIRST NAME) D (MIDDLE OR MAIDEN NAME) Retzer (LAST NAME),

DL# R326004848090, state of FL, was placed under lawful arrest for the offense of DUI by ofc. Collaretti (Name of Arresting Officer) and issued Citation # A1UQZLF.

That on or about the 18th day of Nov, 20 17, at 11:15 ☒ P.M ☐ A.M.

in Palm Beach County,

I requested that the driver submit to a ☒ **breath and/or** ☐ **urine** test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) 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 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 for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.

Signature of Law Enforcement Officer or Correctional Officer

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

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title

Date

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this 18th day of Nov, 20 17, by ofc Collaretti, who is personally known to me or who has produced as identification.

Notary Public

B. SUE OWEN
State of Florida-Notary Public
Commission # FF093160
My Commission Expires
May 30, 2018

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.

HSMV-BAR1001 (REV. 10/2016)

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 detecting the presence of chemical or controlled substances.

-OR-

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and 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 fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S 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)_____

SUBJECT: _____ 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: _____

TESTING FACILITY TASK REPORT

AGENCY: _____

SUBJECT: _____ CASE NUMBER: _____

DATE: 11/15/17 VIDEO TAPE NUMBER: _____

BEGINNING TIME: _____ ENDING TIME: _____

BREATH TESTS RESULTS: 1) REFUSED TIME _____ A.M./P.M. 2) _____ TIME _____ A.M./P.M.

3) _____ TIME _____ A.M./P.M. 4) _____ TIME _____ A.M./P.M.

BREATH OPERATOR: _____

MAINTENANCE TECHNICIAN: _____

TESTING OFFICER'S OBSERVATIONS

SPEECH: _____

ATTITUDE: _____

CLOTHING: _____

MEDICAL CONDITIONS: _____

MEDICATIONS: _____

OTHER: _____

_____

_____

COMMENTS: _____

WITNESS LIST

CASE NUMBER: 17-018061

ARRESTING OFFICER: COLLARETTI

ADDRESS: 300 WEST ATLANTIC AVE DELRAY BEACH, FL. 33444

PHONE NUMBERS (HOME): 561-243-7832 (WORK) 561-243-7832

CAN TESTIFY TO: DUI

NAME: Sgt. Ferreri

ADDRESS: 300 W Atlantic Ave, Delray Beach, FL 33444

PHONE NUMBERS (HOME) (WORK) 561-243-7800

CAN TESTIFY TO: Driving pattern and defendants actions and statements

NAME: Ofc. Kyotikki

ADDRESS 300 W Atlantic Ave, Delray Beach, FL 33444

PHONE NUMBERS (HOME) (WORK) 561-243-7800

CAN TESTIFY TO: Defendants actions and statements

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: