

0485191

ARREST / NOTICE TO APPEAR

778

JUVENILE

A D M I N I S T R A T I O N		ARREST / NOTICE TO APPEAR						1		JUVENILE					
OBTS Number		West Palm Beach Police Department						Agency Report Number (N.T.A.'s only)							
Agency ORI Number		9 4 2017-0007382						1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias					
Charge Type: Check as many as apply.		<input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other						If Weapon Seized		Multiple Clearance Indicator					
Location of Arrest (Including Name of Business) AUSTRALIAN AVE / PALM BEACH LAKES BLVD								Location of Offense (Business Name, Address) 1199 N CONGRESS AVE/PALM BEACH LAKES BLVD, WEST							
Date of Arrest 04/17/2017		Time of Arrest 01:37		Booking Date		Booking Time		Jail Date		Jail Time					
Name (Last, First, Middle) ALDRICH, BARBARA JEAN								Alias (Name, DOB, Soc. Sec. #, Etc.)							
Race W - White B - Black		Sex W - American Indian F - Oriental/Asian		Date of Birth 02/25/1972		Height 5'06		Weight 140		Eye Color BRD					
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)								Marital Status		Religion					
Local Address (Street, Apt. Number) 532 N WINTER PARK DR, CASSELBERRY, FL 32707								Phone (407) 219-1404		Indication of: Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>					
Permanent Address (Street, Apt. Number) 532 N WINTER PARK DR, CASSELBERRY, FL 32707								Phone (407) 219-1404		Residence Type: 1. City 2. County 3. Florida 4. Out of State					
Business Address (Name, Street)								Phone (407) 219-1404		Address Source					
D/L Number, State A436070725650 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) Orlando FL USA		Citizenship							
Co-Defendant Name (Last, First, Middle)								Race		Sex					
Co-Defendant Name (Last, First, Middle)								Race		Sex					
JUVENILE Name (Last, First, Middle) OR X2								Date of Birth							
Parent <input type="checkbox"/> Other <input type="checkbox"/> Legal Custodian								Date of Birth							
Address (Street, Apt. Number) (City) 4500 (State) FL (Zip) 33552								Residence Phone							
Notified by: (Name) 4500								Date		Time					
Released To: (Name) Relationship								Date		Time					
The above address was provided by <input type="checkbox"/> defendant and/or <input type="checkbox"/> 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.								School Attended		Grade					
<input type="checkbox"/> Yes, by: <input type="checkbox"/> No:								Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property			
C O D E		Drug Activity N. N/A B. Buy P. Possess		S. Sell D. Deliver T. Traffic		R. Smuggle E. Use		K. Dispenses/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other			
C H A R G E		Drug Type N		Amount / Unit /		Offense # 2017-0007381		Counts 2		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number			
C H A R G E		Charge Description DUI-DAMAGE TO PERSON/PROPERTY								Statute Violation Number 316.193(3)(C)(1)		Violation of ORD #			
C H A R G E		Drug Activity N		Drug Type /		Amount / Unit 2017-0007381		Counts 2		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number			
C H A R G E		Charge Description CRASH - LEAVING SCENE W/O RENDERING AID (INJURY)								Statute Violation Number 316.027(2)(a)		Violation of ORD #			
C H A R G E		Drug Activity N		Drug Type /		Amount / Unit 2017-0007382		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number			
C H A R G E		Charge Description								Statute Violation Number		Violation of ORD #			
C H A R G E		Drug Activity N		Drug Type /		Amount / Unit 2017-0007382		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number			
I N T A K E		Health / Apparent Physical Condition of Defendant								Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries Explain:					
I N T A K E		Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health								PROPERTY - Received By		Released By		Released To	
I N T A K E		Transported By								Date Transported		Time Transported		Other	
N O T I C E C T O A P P E R A R		<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.								Location (Court, Room) Criminal Justice CRIMINAL JUSTICE COMPLEX				2017 APR 17	
										Court Date and Time 05/25/2017 08:30:00					
I A G R E E T O A P P E R A R		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 (or Juvenile and Parent/Custodian) Barbara Jean Aldrich								Date Signed 05/25/2017					
A D M I N		HOLD for Other Agency				Signature of Arresting Officer Barbara Jean Aldrich				Name Verification (Printed by Arrestee) Barbara Jean Aldrich					
		<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal				<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other				Name of Arresting Officer (Print) DONDE, JAY					
		Intake Deputy Goldhardt		I.D. # 476		Pouch #		Transporter/Officer BRANDT		I.D. # 1584 WRCB		Agency West Palm Beach Police Department			
										PAGE 1 OF 1					
										Witness here if subject signed with an "X".					

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

Erhardt

SCANNED

APR 17 2017 PM 5:40

DUI PROBABLE CAUSE AFFIDAVIT

On the 16th Day of April at 2344 A.M. P.M.
Subject: Aldrich, Barbara Case Number: 17-7382
Agency: West Palm Beach Police Department Arresting Officer: Donde 1530

Personal Contact

Driving Pattern Actual physical control (physical evidence putting the driver behind the wheel)

Def was involved in a crash at Okeechobee Blvd and Congress Ave. The Def was driving 2014 Toy FI HPII19 and hit the rear of a 1995 Chev 2d truck. The def said she was scared for an unknown reason and did not know the crash was bad though the air bags in her car full front /side were deployed.

Officer Imbesi saw the defendants vehicle with damage driving north on Congress Ave and the victims vehicle behind it. The suspect vehicle comes to a stop at Congress Ave and Palm Beach Lakes Blvd and the defendant places the vehicle in reverse and backs into Officer Imbesi car. She continues east bound on Palm Beach Lakes Blvd. Until stopping at Australian Blvd and Palm Beach Lakes.

Observation of Driver

Was lying in back seat of Officer Hardimans patrol vehicle. Upon exiting she was very uneasy on her feet, lost balance and fell to ground (not injured) said she just woke up and this is why. I had her lean on the patrol car for several moments before moving several feet to my patrol vehicle. continued with verbal reasons why things happened the back injury her knees. her being cold and scared.

Drivers Statements:

Was scared after the crash had no reason to be. Was COLD was giving a jacket prior to tasks. "Did not sleep Thursday and Friday". Had been at a Detox unit

Odors:

distinct unknown odor of an alcoholic beverage

General Observations

Speech: slurred ,mumble VERY talkative e

Attitude: cove operative though talkative and interruptive

Clothing: sneakers blue jeans brown shirt

Medical Problems/Medications: Back knee issues

Other:

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APR 17 2017

DUI PROBABLE CAUSE AFFIDAVIT

Subject: Aldrich, Barbara

Case Number:

17-7382

Roadside Tasks

Horizontal Gaze Nystagmus

- Left Eye Does Not Follow Smoothly
- Left Eye Jerks at 45 Degree Angle or Less
- Distinct Jerking Left Eye at Maximum Deviation

- Right Eye Does Not Follow Smoothly
- Right Eye Jerks at 45 Degree Angle or Less
- Distinct Jerking Right Eye at Maximum Deviation

Hazel eyes

Subject had slight nystagmus at 45 was leaning against patrol vehicle due to defendant unable to stand still. extremely uneasy in her feet up to almost losing balance when just standing

Walk and Turn Task

- I instructed the driver to stand with her left on the line with her right foot directly in front of the left touching heel to toe with her hands down by his sides. The line a solid white line of a parking spot. The driver was told to remain in that position until told to begin the task. I explained and demonstrated the exercise and she said she understood the instructions. " I would not be able to do it" because her knees, elbows, breasts and a knot on her head. wished to change direction on line because of "wind" This was allowed. Left leg and sciatic nerve. questioned turn was explained. Wanted her MRI read. attempt was made only one step loose balance.

One Leg Stand

Due to defendants continued mentioning of her previous injuries, that she was tired had not slept in two days though said she slept on Saturday. this test was NOT instructed or performed.

Finger To Nose

The defendant was asked to sit on the bumper of my patrol vehicle to help her balance I explained and demonstrated the exercise and she stated she understood the instructions. I asked the driver to tilt her head back and close her eyes. Did not think keeping eyes closed and head back was fair. On the first left slow movement pad to tip, first right tip to right nostril, 2nd left pad to tip of nose. 2nd right touched left nostril 3rd right tip of nose on third left slow to tip. I observed the driver swaying.

Romberg Alphabet

Was asked to recite the alphabet A-Z. had college education AA degree. Driver said she sings it to her grand kids. 1st attempt "q,s t r,v," 2nd attempt "L.M- L,M,N,O,P",. "Hard for me to due because I sing it to them"

Breath Results from Instrument

1st Result

VNM

2nd Result

VNM

3rd Result

If Applicable

.054

State of Florida

County of Palm Beach

The Following Instrument was notarized or sworn before me this

Personally Known

Produced Identification

Notary Public

(DATE)

Officer

Notary / Clerk of Courts / Officer (FSS: 117.10)

Signature of Arresting Officer

SCANNED

Page 2 of 2

APR 17 2017

SUBJECT: _____

Aldrich, Barbara

CASE NUMBER: _____

17-7382

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 its alcohol content.

OR

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of determining its alcohol content.

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

I am **Donde** _____ of the West Palm Beach Police Department. 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.

SUBJECTS SIGNATURE: _____

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 can not 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.

SUBJECTS SIGNATURE: _____

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APR 17 2017

West Palm Beach Police Department
Breath Testing Facility Report



Defendant: Aldrich, Barbara Case #: 17-7382
Arresting Officer: Donde 1530 Date: 04/17/2017

Breath Test Results: VNM g/210L 0233 Time .054 g/210L 0238 Time VNM g/210L 0228 Time .050 g/210L 0241 Time

Note: Times are in Military Time

Breath Operator: Donde
Maintenance Technician Ofc. R. Secord #1639

Testing Officer Observations:

Speech: Slurred at times and continued about medical issues
Attitude: cooperative
Clothing: blue jeans brown shirt
Medical Conditions: back injury neck injury from crash 2004 maybe
Medications: welrutrin Lorazepam Morphine
Other:

Arrival Time at Facility/ Time Twenty (20) Minute Observation Started: 0140 / 0150

Comments:

Had to explain what may happen if she does not submit to a breath test was read implied consent.

Told me of at least two other DUI type arrests

Had two volumes not met 0223 hours / 0228 hours.

2nd test sample provided

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APR 17 2017

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

Instrument Type: Intoxilyzer 8000

Instrument Registered To: WEST PALM BEACH PD
Instrument Serial Number: 80-001235 Software: 8100.27
Date of Test: 04/17/2017

Date of Last Agency Inspection: 03/31/2017
Observation Period Began: 01:50
Subject's Name: BARBARA J ALDRICH

DOB: 02/25/1972 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	02:35
	Air Blank	0.000	02:35
	Control Test	0.081	02:36
	Air Blank	0.000	02:36
	Subject Sample #1	0.054	02:38
	Air Blank	0.000	02:38
	Air Blank	0.000	02:40
	Subject Sample #2	0.050	02:41
	Air Blank	0.000	02:42
	Control Test	0.081	02:42
	Air Blank	0.000	02:43
	Diagnostics Check	OK	02:43

Cylinder Lot: 152169
Exp: 10/30/2018

State of Florida, County of P.B.

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

Breath Test Operator: _____ Signature _____ Date: 9/11/11

Sworn to or affirmed before me this 17 day of November, 2017
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida
J. F. Schmidt 1584

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.

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

Instrument Type: Intoxilyzer 8000

Instrument Registered To: WEST PALM BEACH PD

Instrument Serial Number: 80-001235 Software: 8100.27

Date of Test: 04/17/2017

Date of Last Agency Inspection: 03/31/2017

Observation Period Began: 01:50

Subject's Name: BARBARA J ALDRICH

DOB: 02/25/1972 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	02:18
	Air Blank	0.000	02:19
	Control Test	0.080	02:19
	Air Blank	0.000	02:19
	Subject Sample #1	VNM*	02:23
	Air Blank	0.000	02:23
	Air Blank	0.000	02:25
	Subject Sample #2	VNM**	02:28
	Air Blank	0.000	02:29
	Control Test	0.080	02:29
	Air Blank	0.000	02:30
	Diagnostics Check	OK	02:30

*Volume Not Met (0.049 - Breath Sample Not Reliable to Determine Breath Alcohol Level)

**Volume Not Met (0.056 - Breath Sample Not Reliable to Determine Breath Alcohol Level)

Cylinder Lot: 152169
Exp: 10/30/2018

State of Florida, County of P.B.,

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 J. DONDE, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, 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: Barb

Date: 4/17/17

Sworn to (or affirmed) before me this 17 day of APRIL, 2017

J. DONDE Signature

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.