

ARREST / NOTICE TO APPEAR

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

1

JUVENILE

OBTS Number	Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 514 18-004816	
Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	If Weapon Seized Enter Type NONE		Multiple Clearance Indicator 01			
Location of Arrest (Including Name of Business) 6760 W INDIANTOWN RD, JUPITER FL 33458			Location of Offense (Business Name, Address) 6499 W INDIANTOWN RD, JUPITER, FL 33458			
Date of Arrest 09/30/2018	Time of Arrest 03:10	Booking Date 09/30/2018	Booking Time 03:20	Jail Date	Jail Time	Location of Vehicle LEFT ON SCENE
Name (Last, First, Middle) WOLFE, CAITLIN MARIE			Alias:			
Race W - White B - Black	Sex F	Date of Birth 08/17/1995	Height 5'10	Weight 170	Eye Color BLUE	Hair Color BLONDE /
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status S	Religion	Complexion LIGHT		Build Medium
Local Address (Street, Apt. Number) 18150 120TH TER N, JUPITER, FL 33478		(City)	(State)	(Zip)	Phone	Indication of Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>
Permanent Address (Street, Apt. Number) 18150 120TH TER N, JUPITER, FL 33478		(City)	(State)	(Zip)	Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State 2
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Address Source DL
D/L Number, State W410113957970 / FL		Soc. Sec. Number	INS Number		Place of Birth (City, State) JUPITER, FL	Citizenship US
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor
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 <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 checked="" type="checkbox"/> No:		Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property
Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Disperse/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine
Charge Description DUI - DRIVING WHILE UNDER INFLUENCE		Statute Violation Number 316.193(1)		Violation of ORD #		
Drug Activity	Drug Type N	Amount / Unit	Offense #	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number
Charge Description		Statute Violation Number		Violation of ORD #		
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number
Charge Description		Statute Violation Number		Violation of ORD #		
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number
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				
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond		<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health		<input type="checkbox"/> T.O.T. County Jail		PROPERTY - Received By
Transported By		Date Transported	Time Transported	Other		
<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) North County PALM BEACH GARD		Court Date and Time 10/31/2018 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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.		Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed 9/30/18		
HOLD for Other Agency		Signature of Arresting Officer		Name Verification (Printed by Arrestee)		
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Seizural <input type="checkbox"/> Other		Name of Arresting Officer (Print) BORROWS, ANDREW		(PRINT) SEP 30 AM 5:00		
Transporting Officer OFC A BORROWS		I.D. # 1138		Agency JPD		
Witness here if subject signed with an "X".						

0501975

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PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

OBTS Number	Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT	Agency Report Number 5 4 18-004816
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Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	Special Notes:
	<input type="checkbox"/> 2. Traffic Felony	<input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other	

Name (Last, First, Middle) WOLFE, CAITLIN MARIE	Alias	Race W	Sex F	Date of Birth 08/17/1995
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Charge Description DUI 316.193(1)	Charge Description
Charge Description	Charge Description

Victim's Name (Last, First, Middle) State Of Florida	Race	Sex	Date of Birth
Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source	
Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation	

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 commit 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 30 day of September, 2018 at 02:56 (Specifically include facts constituting cause for arrest.)

On the above date at approximately 0256 hours, I was on routine patrol in the area of West Indiantown Road and Delaware Boulevard, in the Town of Jupiter, Palm Beach County, Florida.

I was traveling east. I was using my in car Stalker Dual SL radar (S/N DD005051) in opposite direction moving mode. I observed a vehicle, later identified as a 2003 Nissan bearing Florida License plate CZXC24 coming towards me. This is a posted 45 miles per hour zone. I visually estimated the speed of the vehicle at 55 miles per hour. I activated my radar. The patrol speed matched my vehicle's certified speedometer and the target speed indicated a speed of 58 miles per hour. I heard a steady audio Doppler tone. I stopped and waited for the vehicle to pass. I turned around and followed the vehicle. As I followed the vehicle, it sped up. I visually estimated the vehicle's speed at 60 miles per hour. I activated my radar in same direction moving mode. I heard a steady audio Doppler tone. The patrol speed matched my speedometer. The target speed indicated a speed of 63 miles per hour. I initiated a traffic stop of vehicle and it turned onto 68th Terrace North.

I made contact with the driver / sole occupant, Caitlin Wolfe. Wolfe had bloodshot glassy eyes. I could smell a strong odor of an unknown alcoholic beverage on Wolfe's breath. Wolfe was slurring her speech. I asked Wolfe how much she'd had to drink. Wolfe stated she'd had two or three drinks. Wolfe's coordination appeared to be poor and slow.

I asked Wolfe to exit her vehicle. When she walked around the back of her car, Wolfe's left leg struck the corner of her bumper and she used the car for balance. I asked Wolfe to complete SFSTs. Wolfe agreed. I subsequently conducted the full battery of SFSTs. I am a certified Drug Recognition Expert and experienced DUI investigator. Due to time requirements, the specifics of these exercises will be in a forthcoming SFST

SWORN AND SUBSCRIBED BEFORE ME	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
<i>[Signature]</i>	<i>[Signature]</i>
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 917.10) Expires Jul 25, 2020	BORROWS, ANDREW (1138)
09/30/2018	NAME OF OFFICER (PLEASE PRINT)
DATE	09/30/2018
	DATE

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

1. Arrest
2. N.T.A.
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JUVENILE

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Name (Last, First, Middle) WOLFE, CAITLIN MARIE	Alias	Race W	Sex F	Date of Birth 08/17/1995
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affidavit. This affidavit is for the purposes of providing sufficient cause to book Wolfe into the Palm Beach County Jail. I observed multiple standardized clues of impairment during the roadsides including all six clues of HGN.

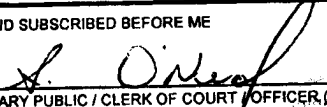
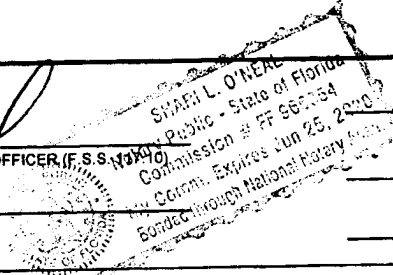

I then arrested Wolfe for DUI and advised her. I placed Wolfe in handcuffs which I checked for spacing and double locked. I then transported Wolfe to the Palm Beach County Breath Alcohol Testing Facility. I conducted a 20 minute observation and then requested a sample of breath. Wolfe declined. I read Implied Consent. Wolfe stated she understood and again declined to provide a sample of her breath. I then read Wolfe her Miranda Rights from a prepared text. Wolfe declined to answer any questions. I subsequently secured Wolfe in a holding cell and completed my paperwork. I then booked Wolfe into the Palm Beach County Jail where I charged her with DUI per FSS 316.193(1).

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SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT OFFICER (F.S.S. 117.01) 09/30/2018 DATE	 SHAWN L. O'NEAL Notary Public - State of Florida Commission # FF 957154 Bordered through National Notary System Expires Jun 25, 2020	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER BORROWS, ANDREW (1138) NAME OF OFFICER (PLEASE PRINT) 09/30/2018 DATE	PAGE 2 OF 2
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SUBJECT: Carl W. Wolfe CASE NUMBER: 18-04816

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) Keen on Case

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) Keen on Case

WITNESS LIST

CASE NUMBER: 18-004816

ARRESTING OFFICER: Ofc. A. Borrows 380 / 1138

ADDRESS: 210 Military Trail, Jupiter Fl 33458

PHONE NUMBERS (HOME): _____ (WORK) 561 746 6201

CAN TESTIFY TO: PC

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) () _____ (WORK) () _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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TESTING FACILITY TASK REPORT

2

AGENCY: JPD Off. Barron #330

SUBJECT: Watts, Willie D. CASE NUMBER: 13-127701

DATE: 04-30-13 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 040212 ENDING TIME: 040412

BREATH TESTS RESULTS: 1) Refused TIME 0404 (A.M./P.M.) 2) _____ TIME _____ A.M./P.M.
TIME _____ A.M./P.M. 4) _____ TIME _____ A.M./P.M.

BREATH OPERATOR: S. Neal #6212

MAINTENANCE TECHNICIAN: Cpl. Muckey #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Low

ATTITUDE: Calm, Quiet

CLOTHING: Shirt - Navy Blue Shorts - Navy Blue

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER: Eyes: Renny Eye Make-up, Red, Glossy

COMMENTS: 20 min. observation. JPD AIO Barron #330

AIO requested the breath test.

D refused the breath request.

AIO read the implied consent on camera.

D understood the IIC.

D still refused after the IIC was read.

C/W read on camera.

Q+A refused.

NOT A CERTIFIED COPY

SUBJECT: Carth. Walle CASE NUMBER: 18-004816

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: Of A. Borrows



Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2018032764	Date: 10/01/2018
	Specialist Name/ID: AM/31562