

0493153 201MM130902 NB 3902

ARREST / NOTICE TO APPEAR

OBTS Number Agency ORI Number Agency Name Agency Report Number (N.T.A.'s only) 1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias 1 JUVENILE

0501700 Jupiter Police Department 5 4 17-005325 Charge Type: 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other If Weapon Seized Enter Type NONE Multiple Clearance Indicator 03

Location of Arrest (Including Name of Business) Location of Offense (Business Name, Address) CHEVRON, 3 N ALT AIA, JUPITER FL 3 N ALT AIA, JUPITER, FL 33477 Date of Arrest 11/07/2017 Time of Arrest 03:41 Booking Date 11/07/2017 Booking Time 03:51 Jail Date Jail Time Location of Vehicle ALL HOOKED UP TOWING

Name (Last, First, Middle) Alias: FREEMAN, CHARLOTTE DENISE Alias (Name, DOB, Soc. Sec. #, Etc.)

Race W - White 1 - American Indian B - Black O - Oriental/Asian W F Date of Birth 08/20/1969 Height 5'05 Weight 125 Eye Color BLUE Hair Color BLONDE / Complexion LIGHT Build Medium

Local Address (Street, Apt. Number) (City) (State) (Zip) Phone 79 HICKORY HILL RD, TEQUESTA, FL 33469 Permanent Address (Street, Apt. Number) (City) (State) (Zip) Phone 79 HICKORY HILL RD, TEQUESTA, FL 33469 Business Address (Name, Street) (City) (State) (Zip) Phone Occupation DL

D/L Number, State Soc. Sec. Number INS Number Place of Birth (City, State) Citizenship F655104698000 / FL CLEVELAND, OH

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

Parent Other: Name (Last, First, Middle) 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 School Attended Grade

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.

Drug Activity S. Sell R. Smuggle K. Disperse/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 Description DRUGS - POSSESS MARIJUANA NOT MORE THAN 20 GRAMS Statute Violation Number 893.13(6)(B) Violation of ORD #

Charge Description DUI - DRIVING WHILE UNDER INFLUENCE Statute Violation Number 316.193(1) Violation of ORD #

Charge Description DL - VEH OPER/REVOKED/SUSP LICENSE 1ST OFFENSE Statute Violation Number 322.34(2)(A) Violation of ORD #

Health / Apparent Physical Condition of Defendant Any knowledge of the following: Mental Escape Risk Medication Deformities Injuries

Check which applies: Released O.R. Released to Parent/Guardian T.O.T. County Jail PROPERTY - Received By Released By Released To

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) North County PALM BEACH GARD Court Date and Time 12/13/2017 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 (or Juvenile and Parent/Custodian) Date Signed 11/7/17

HOLD for Other Agency Signature of Arresting Officer Name Verification (Printed by Arrestee) Name of Arresting Officer (Print) I.D. # BORROWS, ANDREW 1138 Intake Deputy I.D. # Pouch # Transporting Officer I.D. # Agency PFC BORROWS 380 JPD

NOV 13 2017

# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 7th DAY OF November 20 17, AT 0312  AM  PM

SUBJECT: Freeman Charlotte D CASE NUMBER: 17-005325

AGENCY: JUPITER POLICE DEPARTMENT ARRESTING OFFICER: PFC A. Borrows 380 / 1138

## PERSONAL CONTACT

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

I was traveling east on West Indiantown Road, approaching the intersection with Alternate A1A. I observed a Jeep bearing Florida License Plate 344RBW traveling east in front of me. As the vehicle approached the stop light (which was red) and the railroad crossing just prior to the stop light, the vehicle changed lanes into the right hand left turn lane. The vehicle then stopped over the marked stop bar and in the crosswalk. I followed the vehicle and initiated a traffic stop of the vehicle as it turned into the Chevron Gas Station located at 3 North Alternate A1A. I observed the driver, later identified to me as Charlotte Freeman, begin to reach around in the vehicle towards the passenger side floorboard and the space directly behind the seats. As I exited my vehicle, I heard the distinct sound of glass clinking against glass coming from the interior of the Jeep.

### OBSERVATION OF DRIVER:

I observed that Freeman has glassy eyes. Freeman often answered questions in a rambling, non-sequitor manner.

### DRIVER'S STATEMENTS:

Freeman stated she'd had one drink while at work. Freeman later spontaneously uttered that she had a bottle of wine in the front passenger floorboard that was unopened. I later located an open bottle of wine on the front passenger floorboard, along with an open bottle of Fireball liquor and a glass upright with a small amount of unknown alcoholic beverage with small dots in it, which appeared similar to Fireball.

### ODORS:

Odor of unknown alcoholic beverage

## GENERAL OBSERVATIONS

SPEECH: Raspy, slurred

ATTITUDE: Cooperative, mood swings, became unpleasant and accusatory

CLOTHING: Multi color dress and sandals

MEDICAL/OTHER: Stated multiple problems, was generally non-specific when asked. Variously stated anxiety, whiplash, broken ankle, breast cancer, PTSD.

STATE OF FLORIDA  
COUNTY OF PALM BEACH

PFC A. Borrows 380 / 1138

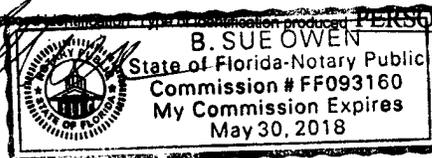
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 7th day of November 20 17 by PFC A. Borrows 380 / 1138

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced by PERSONALLY KNOWN

Sue Owen (#3184)

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



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NOV 13 2017

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

ADMINISTRATIVE	OBTG Number		Agency ORI Number <b>FL 0501700</b>		Agency Name <b>JUPITER POLICE DEPARTMENT</b>		Agency Report Number <b>5   4   17-005325</b>	
	Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes:		Name (Last, First, Middle) <b>FREEMAN, CHARLOTTE DENISE</b>		Race <b>W</b>	Sex <b>F</b>
CHARGES	Charge Description <b>893.13(6)(B)</b>		Charge Description		Charge Description		Charge Description	
	Victim's Name (Last, First, Middle)		Race	Sex	Date of Birth			
VICTIM	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 7 day of November, 2017 at 03:41 (Specifically include facts constituting cause for arrest.)

On the above date at approximately 0341 hours, I placed Charlotte Freeman under arrest for DUI at 3 North Alternate A1A, in the Town of Jupiter, Palm Beach County, Florida.

I conducted a search incident to arrest of Freeman's vehicle, a 2004 Jeep bearing Florida License Plate 344REW. In the center console cup holder, I located a white container with the lid off. There was a leafy green substance I immediately recognized as Marijuana in the container. I seized the container and contents.

I later field tested the marijuana, which reacted positively for the presence of THC, the main ingredient in marijuana. I find probable cause to additionally charge Freeman with Possession of less than 20 grams of Marijuana, per FSS 893.13(6)(B).

NOT A CERTIFIED COPY

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NOV 13 2017

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER	
	NOTARY PUBLIC / CLERK OF COURT OFFICER (B. SUE OWEN) State of Florida-Notary Public Commission # EF093160 My Commission Expires May 30, 2018 11/07/2017		BORROWS, ANDREW (1138) NAME OF OFFICER (PLEASE PRINT) 11/07/2017 DATE	
				PAGE 1 OF 1

**ROADSIDE TASKS**

**HORIZONTAL GAZE NYSTAGMUS:**

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT                           | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT                           |
| <input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input checked="" type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES          | <input checked="" type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES          |

**Other Observations:**

**WALK & TURN:**

Freeman missed heel to toe on every step. Freeman did not count out loud. Freeman stopped and asked what to do next after the first nine steps. Freeman turned improperly.

**ONE LEG STAND:**

Freeman started counting out loud but then stopped after a few. Freeman was swaying in an orbital manner during the task.

**FINGER TO NOSE:**

L1: Freeman used the pad of her finger to touch the bridge of her nose, near her eyebrows. I reminded Freeman to bring her finger back down to the side after touching her nose. R2: Freeman used the pad of her finger to touch the tip of her nose. L3: Freeman used the pad of her finger to touch the middle of the bridge of her nose. R4: Freeman used the pad of her finger to touched just above the tip on the bridge of her nose. R5: Freeman used the first knuckle of her finger to touch the tip of her nose. L6: Freeman used the pad of her finger to touch the tip of her nose.

**ROMBERG ALPHABET:**

Freeman stated the alphabet but did so in a rhythmic manner.

**BREATH TEST RESULTS: REFUSED**

STATE OF FLORIDA  
COUNTY OF PALM BEACH

**PFC A. Borrows 380 / 1138**

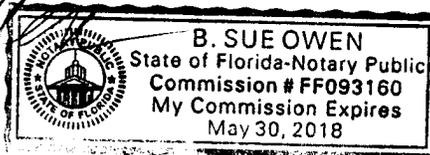
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 7th day of November 2017 by PFC A. Borrows 380 / 1138

(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced PERSONALLY KNOWN

**Sue Owen (#3184)**

Notary Public, Clerk of Court, Officer (F.S.S 117.10)



**SCANNED**

**NOV 13 2017**

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.

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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? \_\_\_\_\_

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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: PKC R. Bolland 380136

# TESTING FACILITY TASK REPORT

AGENCY: \_\_\_\_\_

SUBJECT: \_\_\_\_\_ CASE NUMBER: \_\_\_\_\_

DATE: \_\_\_\_\_ VIDEO TAPE NUMBER: \_\_\_\_\_

BEGINNING TIME: \_\_\_\_\_ ENDING TIME: \_\_\_\_\_

BREATH TESTS RESULTS: **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: \_\_\_\_\_

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**NOV 13 2017**