

0501712

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1. Arrest
2. N.T.A.

3. Request for Warrant
4. Request for Capias

146 Juvenile N

Agency ORI Number
FLO 500000

Agency Name
PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number (N.T.A.'s only)
06-18-125283

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

Weapon Seized / Type
☒ 1. Yes
☐ 2. No

Multiple Clearance Indicator
01

Location of Arrest (Including Name of Business)
Camino Del Mar / Palm D'Oro, Boca Raton, FL 33433

Location of Offense (Business Name, Address)
Camino Del Mar / Palm D'Oro, Boca Raton, FL 33433

Date of Arrest
09/23/2018

Time of Arrest
20:05

Booking Date
09/23/2018

Booking Time

Jail Date

Jail Time

Location of Vehicle
Atlantic Towing, 880 NW 1st Ave., Boca Raton, FL 33432, (561) 350-1260

Name (Last, First, Middle)
Troni, Dena,

Alias (Name, DOB, Soc. Sec. #, Etc.)

Race
W - White 1 - American Indian

Sex
F

Date of Birth
1/23/1981

Height
5'03

Weight
115

Eye Color
hazel

Hair Color
brown

Complexion
light

Build
small

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)
right shoulder, back

Marital Status
Married

Religion
NONE

Indication of:
Alcohol Influence
Drug Influence
☐ Y ☐ N ☐ Unk.

Local Address (Street, Apt. Number) (City) (State) (Zip)
5645 Pacific Blvd Apt 2803, Boca Raton, FL 33433

Phone
(954) 688 6903

Residence Type:
1. City
2. County
3. Florida
4. Out of State
2

Permanent Address (Street, Apt. Number) (City) (State) (Zip)

Phone

Address Source
DL

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

Phone

Occupation
para legal

D/L Number, State
T650160815230, FL

Soc. Sec. Number

INS Number

Place of Birth (City, State)
Fort Lauderdale, FL

Citizenship
US

Co-Defendant Name (Last, First, Middle)

Race

Sex

Date of Birth

☐ 1. Arrested
☐ 2. At Large
☐ 3. Felony
☐ 4. Misdemeanor
☐ 5. Juvenile

Co-Defendant Name (Last, First, Middle)

Race

Sex

Date of Birth

☐ 1. Arrested
☐ 2. At Large
☐ 3. Felony
☐ 4. Misdemeanor
☐ 5. 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 Disposition
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

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 Description
Driving Under the Influence

Counts
1

Domestic Violence
☐ Y ☒ N

Statute Violation Number
316.193(1)

Violation of ORD #

Drug Activity
N

Drug Type
N

Amount / Unit

Offense #
18-125283

Warrant / Capias Number

Bond

Charge Description

Counts

Domestic Violence
☐ Y ☒ N

Statute Violation Number

Violation of ORD #

Drug Activity
N

Drug Type
N

Amount / Unit

Offense #

Warrant / Capias Number

Bond

Charge Description

Counts

Domestic Violence
☐ Y ☒ N

Statute Violation Number

Violation of ORD #

Drug Activity
N

Drug Type
N

Amount / Unit

Offense #

Warrant / Capias Number

Bond

Location (Court, Room Number, Address)
South County Courthouse, Courtroom #1, 200 W. Atlantic Ave., Delray Beach, FL 33444 - Ph: (561) 355-2996

Court Date and Time
Month October Day 22 Year 2018 Time 08:30 AM X PM

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)
D. Troni

Date Signed
09/23/2018

HOLD for other Agency
Name:

Signature of Arresting Officer
X

Name Verification (Printed by Arrestee)
(PRINT) Dena Troni

Name of Arresting Officer (Print)
D/S POINTU P.

I.D. #
16032

Intake Date
09/23/2018

I.D. #

Pouch #

Transporting Officer
D/S POINTU P.

ID #
16032

Agency
PBSO

Witness here if subject signed with an "X"

PAGE
1 OF **1**

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PSO 8143 REV. 8/97

2018CT17336 SB



SCANNED

Received WB

SEP 24 2018



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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006240 Software: 8100.27
Date of Test: 09/23/2018

Date of Last Agency Inspection: 09/07/2018
Observation Period Began: 20:54
Subject's Name: DENA TRONI

DOB: 01/23/1981 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	21:18
	Air Blank	0.000	21:18
	Control Test	0.080	21:19
	Air Blank	0.000	21:19
	Subject Sample #1	0.197	21:20
	Air Blank	0.000	21:21
	Air Blank	0.000	21:23
	Subject Sample #2	0.190	21:23
	Air Blank	0.000	21:24
	Control Test	0.079	21:24
	Air Blank	0.000	21:24
	Diagnostics Check	OK	21:24

Cylinder Lot: 05218080A3
Exp: 05/05/2020

State of Florida, County of Palm Beach

Personally appeared before me the undersigned authority, who (X) is personally known to me or () produced as identification, and who after being placed under oath, states:

I SUE OWEN, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I 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: Sue Owen Date: 9/23/18
Signature

Sworn to (or affirmed) before me this 23rd day of September, 2018

Signature of Notary Public-State of Florida D/S P. Pointu 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.

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 23rd DAY OF September 20 18, AT 19:46 AM ☒ PM

SUBJECT: Troni, Dena, CASE NUMBER: 18-125283

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S POINTU P.

PERSONAL CONTACT

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

Made contact with the defendant a few minutes earlier during a domestic incident. Defendant appeared impaired and admitted having been drinking. Gave her a warning not to drive her car. She acknowledged. I stayed next to the car for some time, and saw the defendant walking near the car. Warned her again not to drive her car, she acknowledged and walked away. Ten minutes later she came back, enter into the car and start driving away. I initiated the traffic stop and she was the driver and only occupant of the vehicle bearing Florida tag IB64KT.

OBSERVATION OF DRIVER:

Glassy eyes, unsteady on her feet.

DRIVER'S STATEMENTS:

Post Miranda, admitted having been drinking 3 shots of Vodka earlier. Denied being impaired.

ODORS:

Strong odor of unknown alcohol beverage, becoming stronger when she talked.

GENERAL OBSERVATIONS

SPEECH: slurred

ATTITUDE: cooperative, talkative, crying, pleading

CLOTHING: yellow tank top, gray panties, white flip flops

MEDICAL/OTHER: no medical conditions reported.

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S POINTU P.

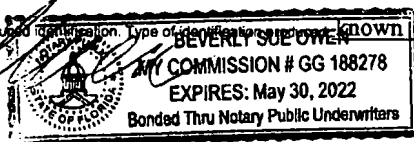
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 23rd day of September 20 18 by D/S POINTU P.

(Print name of Arresting/Investigative Officer), who is personally known to me and of good reputation. Type of identification received: KNOWN

Sue Owen (#3184)

Notary Public, Clerk of Court, Officer (F.S.S. 117.40)



SUBJECT: Troni, Dena,

CASE NUMBER 18-125283

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|---|
| ☒ LT EYE-LACK OF SMOOTH PURSUIT | ☒ RT EYE-LACK OF SMOOTH PURSUIT |
| ☒ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | ☒ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| ☒ LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | ☒ RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

Glassy bloodshot eyes. No resting nystamus. No LOC. No VGN.

WALK & TURN:

Started before being told. Improper turn.

ONE LEG STAND:

Lowered her leg. Slight sway.

FINGER TO NOSE:

Touched the side of her nose during two steps. Touched the bottom of her nose on one. Slight sway.

ROMBERG ALPHABET:

**Sang the alphabet despite being reminded not to twice. Slight sway.
Stopped the 30s count at 25s. Slight sway**

BREATH TEST RESULTS: 0.197 0.190

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S POINTU P.

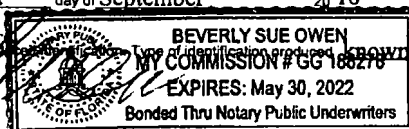
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 23rd day of September, 2018 by D/S POINTU P.

(Print name of Arresting/Investigative Officer), who is personally known to me and/or whose identity has been authenticated by me.

Sue Owen (#3184)

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



TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: Troni, Dena

CASE NUMBER: 18-125283

DATE: 9/23/18

VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 2116

ENDING TIME: 2132

BREATH TESTS RESULTS: 1) .197 TIME 2120 A.M. (P.M.) 2) .190 TIME 2123 A.M. (P.M.)
3) TIME A.M./P.M. 4) TIME A.M./P.M.

BREATH OPERATOR: J. Owen #3184

MAINTENANCE TECHNICIAN: J. Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE: Crying, upset, scarred, Afraid of husband

CLOTHING: Flip Flops, grey tights, yellow tank top

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER: 37 yoa A a paralegal

COMMENTS: A/O arrived at 2054 hrs

A/O observed 20 minutes

A/O requested breath test, A agreed

a doc of Unknown Alcoholic beverage
detected during test

No problem with test, tech explained results

A/O read c/w Reed on scene & video

A answered Q & A 3 shots of vodka

Couldn't feel effects.

SUBJECT: Troni Dena CASE NUMBER: 18-125283

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) Reed on Camera

SUBJECT: Troni, Dena CASE NUMBER: 18-125283

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? yes

WHERE WERE YOU GOING? home

WHAT STREET OR HIGHWAY WERE YOU ON? Camino real

DIRECTION OF TRAVEL? in ~~WHERE DID YOU START?~~

WHAT TIME DID YOU START? 5 pm WHAT TIME IS IT NOW? 6 pm

WHAT IS TODAY'S DATE? 23 sept 18 WHAT DAY OF THE WEEK IS IT? Sunday

WHAT COUNTY AND CITY ARE YOU IN NOW? WRB

WHEN DID YOU LAST EAT? 7am WHAT DID YOU EAT? Shake, protein

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? home, cleaning

HOW MUCH DO YOU WEIGH? 115-120 HAVE YOU BEEN DRINKING? yes WHAT? Vodka

HOW MUCH? 3 shots WHERE? home WITH WHOM? husband

WHEN DID YOU HAVE YOUR FIRST DRINK? 2 pm AND YOUR LAST DRINK? 4:30 pm

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? shot

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? no ARE YOU UNDER THE INFLUENCE? the head bobble

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? no HOW MUCH? no

WHAT? no WHERE? no WHEN? no

WHAT LINE OF WORK ARE YOU IN? paralegal WHEN DID YOU LAST WORK? Thursday

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? no WHAT? no

ARE YOU SICK OR INJURED? no WHAT'S WRONG? no

DO YOU LIMP? no DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? no

WERE YOU IN AN ACCIDENT TODAY? no

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? no WHEN? no

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? no WHO? no WHY? no

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? no WHAT? birth control WHEN? no

DO YOU HAVE:

EPILEPSY?	<u>no</u>
GLASS EYE?	<u>no</u>
FALSE TEETH?	<u>no</u>
EAR INFECTION?	<u>no</u>
INNER EAR TROUBLE?	<u>no</u>
DIABETES?	<u>no</u>

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? no

DO YOU TAKE INSULIN? no IF SO, WHEN WAS YOUR LAST INJECTION? no

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? no WHERE? no

INTERVIEWER: DL, POINTV P 16032

WITNESS LIST

CASE NUMBER: 18-125283

ARRESTING OFFICER: D/S POINTU P.

ADDRESS: Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) (561) 688 3000

CAN TESTIFY TO: see report

NAME: D/S Powell D.

ADDRESS: Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

PHONE NUMBERS (HOME) () (WORK) (561) 688 3000

CAN TESTIFY TO: contact with defendant before the traffic stop, warning her not to drive as she appeared impaired.

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 _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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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: _____



**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	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2018031931	Date: 09/24/2018
	Specialist Name/ID: AM/31562