

**ARREST / NOTICE TO APPEAR**  
Juvenile Referral Report

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

1 N Jvenile

OBTS Number	<b>Agency ORI Number</b> FLO 502600	<b>Agency Name</b> Palm Beach Gardens Police Department	<b>Agency Report Number (N.T.A.'s only)</b> 78- 18-001967
<b>Charge Type:</b> Check as many as apply.	<input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 2. Traffic Felony	<input checked="" type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other
<b>Location of Arrest (Including Name of Business)</b> CENTRAL BLVD/GRANDIFLORA RD		<b>Location of Offense (Business Name, Address)</b> Same as Arrest - Central Blvd / Grandiflora Rd	
<b>Date of Arrest</b> 03/28/18	<b>Time of Arrest</b> 23:57	<b>Booking Date</b>	<b>Booking Time</b>
<b>Jail Date</b>	<b>Jail Time</b>	<b>Location of Vehicle</b> KAUFFS	

<b>Name (Last, First, Middle)</b> HAMMOND, ELIZABETH ANN		<b>Alias (Name, DOB, Soc. Sec. #, Etc.)</b>	
<b>Race</b> W - White I - American Indian B - Black O - Oriental/Asian	<b>Sex</b> W F	<b>Date of Birth</b> 09/12/1969	<b>Height</b> 5' 9"
<b>Weight</b> 135	<b>Eye Color</b> BRO	<b>Hair Color</b> BRO	<b>Complexion</b> MEDIUM
<b>Build</b> THIN	<b>Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)</b> MUSIC NOTE ON LEFT FOOT, CHILDRENS NAMES ON WRISTS	<b>Marital Status</b> MARRIED	<b>Religion</b> BAPTIST
<b>Local Address (Street, Apt. Number)</b>	<b>(City)</b>	<b>(State)</b>	<b>(Zip)</b>
3313 MAPLE VALLEY LN	KNOXVILLE	TN	37931
<b>Permanent Address (Street, Apt. Number)</b>	<b>(City)</b>	<b>(State)</b>	<b>(Zip)</b>
3313 MAPLE VALLEY LN	KNOXVILLE	TN	37931
<b>Business Address (Name, Street)</b>	<b>(City)</b>	<b>(State)</b>	<b>(Zip)</b>

<b>D/L Number, State</b> 109407496 TN	<b>Soc. Sec. Number</b>	<b>INS Number</b>	<b>Place of Birth (City, State)</b> PORTSMOUTH, VA	<b>Citizenship</b> US
<b>Co-Defendant Name (Last, First, Middle)</b>	<b>Race</b>	<b>Sex</b>	<b>Date of Birth</b>	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large
<b>Co-Defendant Name (Last, First, Middle)</b>	<b>Race</b>	<b>Sex</b>	<b>Date of Birth</b>	<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
<b>Parent Legal Custodian Other:</b>	<b>Name (Last)</b>	<b>(F-I-N)</b>	<b>(Blood)</b>	<b>Residence Phone</b>
<b>Address (Street, Apt. Number)</b>	<b>(City)</b>	<b>(State)</b>	<b>(Zip)</b>	<b>Business Phone</b>
<b>Notified by: (Name)</b>	<b>Date</b>	<b>Time</b>	<b>Juvenile Disposition</b> 1. Handled/processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated	<b>Date</b>
<b>Released To: (Name)</b>	<b>Relationship</b>	<b>Date</b>	<b>Time</b>	<b>Grade</b>

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)

**Property Crime?**  Yes  No

**Description of Property** **Value of Property**

Drug Activity	S. Sell	K. Snuggle	K. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type	B. Marijuana	H. Hallucinogen	P. Paraphernalia/ Equipment	U. Unknown
N. N/A	B. Buy	D. Deliver	E. Use			A. Amphetamines	C. Cocaine	O. Opium/Heroin	S. Synthetic	Z. Other
P. Possess	T. Traffic									
<b>Charge Description</b> DUI	<b>Counts</b> 1	<b>Domestic Violence</b> Y <input type="checkbox"/> N <input type="checkbox"/>	<b>Statute Violation Number</b> 316.193(1)	<b>Violation of ORD #</b>						
<b>Drug Activity</b>	<b>Drug Type</b>	<b>Amount / Unit</b>	<b>Offense #</b> 18-001967	<b>Warrant / Capias Number</b>	<b>Bond</b>					
<b>Charge Description</b>	<b>Counts</b>	<b>Domestic Violence</b> Y <input type="checkbox"/> N <input type="checkbox"/>	<b>Statute Violation Number</b>	<b>Violation of ORD #</b>						
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**Location (Court, Room Number, Address)**  
North County Courthouse 3188 PGA Blvd, Palm Beach Gardens, FL 33410

**Court Date and Time**  
Month MAY Day 02 Year 2018 Time 10:00 AM  PM

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: \_\_\_\_\_

<b>HOLD for other Agency</b>	<b>Signature of Arresting Officer</b> <i>[Signature]</i>	<b>Name Verification (Printed by Arrestee)</b>
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Restricted Arrest <input type="checkbox"/> Other	<b>Name of Arresting Officer (Print)</b> R. SMITH #489
<b>Intake Deputy</b>	<b>Transporting Officer</b> R. SMITH	<b>ID #</b> 489
<b>I.D. #</b>	<b>Pouch #</b>	<b>Agency</b> PBG
Witness here if subject signed with an 'X'		<b>PAGE</b> 1 of 1

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

SCANNED  
APR - 2 2018

# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 28 DAY OF MARCH 20 18 , AT 23:36 AM PM  
SUBJECT: HAMMOND, ELIZABETH ANN CASE NUMBER: 18-001967

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: R. SMITH #489  
**PERSONAL CONTACT**

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

Witness observed a black four door Hyundai sedan with a Tennessee tag. The Hyundai was first observed driving against traffic on the wrong side of the road with its high-beams on. The Hyundai jumped the median to get back into the correct lanes of travel. The Hyundai was driving erratically and having difficulty maintaining a single lane. The Hyundai struck the curb on the right side of the roadway numerous times. PBG Officer Colletti witnessed the vehicle traveling on the right side of the roadway then drifted over the line with both left side tires and then back to the right into the grass with both right tires. Officer Colletti initiated a traffic stop and made contact with the driver and sole occupant, Elizabeth Hammond.

OBSERVATION OF DRIVER:

Inside of the vehicle: Elizabeth Hammond was fumbling with items in her glove box and when I asked her a question it had to be repeated in order to get an answer. Hammond seemed to be sole focused on finding her insurance card and was oblivious to outside stimuli.

Outside the vehicle: Hammond seemed unsteady on her feet

DRIVER'S STATEMENTS:

Hammond stated was coming from West Palm Beach to go to Lake Worth. Hammond stated she had left U-Tiki after having two margaritas at approximately 10 pm. She later stated she had been coming from Jupiter and last had a drink at 8 pm.

ODORS:

Hammond smelled mostly of perfume which masked any other scents.

## GENERAL OBSERVATIONS

SPEECH: Slightly slurred, deliberate

ATTITUDE: Confused, unsure of her surroundings

CLOTHING: Dress

MEDICAL/OTHER: Thyroid issues

STATE OF FLORIDA  
COUNTY OF PALM BEACH

[Signature] 489  
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 29<sup>th</sup> day of March 20 18 by Ofc. Smith

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

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



**Samantha Palmer**  
Commission # FF 172377  
Expires: OCT 28, 2018  
BONDED THRU  
1ST FLORIDA NOTARY, LLC

SCANNED

APR - 2 2018

**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:**

**WALK & TURN:**

Hammond was having issues standing in the starting position while instructions were being given and had to be reminded to go back into the starting position multiple times. While performing the tasks, Hammond missed heel to toe on all steps. Hammond took more steps than directed and did not count out loud as she performed the tasks. Hammond seemed to have issues balancing during the task and raised her arms outward to balance herself.

**ONE LEG STAND:**

Hammond did not raise her foot six inches off the ground and was having issues balancing during this tasks and moving her foot to different positions other than what was instructed. Hammond had issues counting as instructed and when she put her foot down, did not resume where she left off but instead started over. Hammond also raised her arms outward to balance herself. Towards the end of the task, Hammond almost falls. I terminated the task at that point.

**FINGER TO NOSE:**

Hammond did not remove her finger from her nose the first time. When I instructed right, Hammond started to raise her left hand to her nose.

**ROMBERG/ALPHABET:**

Hammond followed instructions and did not seem to have issues reciting the alphabet.

**BREATH TEST RESULTS: .167/.150**

STATE OF FLORIDA  
COUNTY OF PALM BEACH

*[Signature]* 489  
(Signature of Arresting/Investigative Officer)

The foregoing instrument was notarized or sworn before me this 29<sup>th</sup> day of March, 20 18 by OFC. Smith

who is personally known to me and/or produced identification. Type of identification produced \_\_\_\_\_

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



**Samantha Palmer**  
Commission # FF172377  
Expires: OCT 28, 2018  
BONDED THRU  
1ST FLORIDA NOTARY, LLC

SCANNED  
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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: 80-006477 Software: 8100.27  
Date of Test: 03/29/2018

Date of Last Agency Inspection: 03/09/2018  
Observation Period Began: 00:40  
Subject's Name: ELIZABETH A HAMMOND

DOB: 09/12/1969 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	01:08
	Air Blank	0.000	01:09
	Control Test	0.080	01:09
	Air Blank	0.000	01:09
	Subject Sample #1	0.167	01:10
	Air Blank	0.000	01:11
	Air Blank	0.000	01:12
	Subject Sample #2	0.150	01:13
	Air Blank	0.000	01:14
	Control Test	0.080	01:14
	Air Blank	0.000	01:15
	Diagnostics Check	OK	01:15

Cylinder Lot: 22817080A5  
Exp: 10/05/2019

State of Florida, County of Palm Beach

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 SAMANTHA M PALMER, 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: \_\_\_\_\_

Signature

Date: 3/29/18

Sworn to (or affirmed) before me this 29<sup>th</sup> day of MARCH, 2018

Signature of Notary Public-State of Florida

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.