

0488349 Palm Beach Police Dept. 1602

Check if Supplement is Attached

| | | | | | | | | | | | |
|---|---|--|---|--|--|---|--|---|---|--|------------------------|
| ADMINISTRATIVE | OBTS Number | ARREST NOTICE TO APPEAR Juvenile Referral Report | | | 1. Arrest 2. N.T.A. | 3. Request for Warrant 4. Request for Capias | 1 | Juvenile | | | |
| | Agency ORI Number FLO 5 0 0 0 0 0 0 | Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE | Agency Report Number (N.T.A.'s only) 0 6 1 1 7 1 0 0 7 8 8 (1 1 1) | | | | | | | | |
| 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 | If Weapon Seized Enter Type | | Multiple Clearance Indicator 16K | | | | |
| Location of Arrest (including Name of Business) 300 Block Royal Palm way | | | Location of Offense (Business Name, Address) 300 Block Royal Palm way | | | | | | | | |
| Date of Arrest 05/26/17 | | Time of Arrest 02:11:21 | Booking Date | Booking Time | Jail Date | Jail Time | Location of Vehicle | | | | |
| Name (Last, First, Middle) Ashley II, Guy L. | | | | | | | | | | | |
| Race W - White I - American Indian W Sex B - Black O - Oriental/Asian M Date of Birth 11/24/71 Height 5'5" Weight 200 Eye Color Blue Hair Color BR Complexion Light Build Avg. | | | | | | | | | | | |
| Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description) | | | | | Marital Status | Religion | Indication of: Y N Unk Alcohol Influence Drug Influence | | | | |
| Local Address (Street, Apt. Number) | | | (City) | (State) | (Zip) | Phone () | Residence Type: 1. City 2. County 3. Florida 4. Out of State | | | | |
| Permanent Address (Street, Apt. Number) 1501 S. Flagler DR Apt 5D | | | (City) | (State) | (Zip) | Phone (561) 543-6805 | Address Source DC | | | | |
| Business Address (Name, Street) | | | (City) | (State) | (Zip) | Phone () | Occupation Assistant | | | | |
| D/L Number, State A240 29274240 | | Soc. Sec. Number | INS Number | | Place of Birth (City, State) NY, NY | | Citizenship USA | | | | |
| Co-Defendant (Last, First, Middle) | | | | Race | Sex | Date of Birth | <input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large | | <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile | | |
| Co-Defendant (Last, First, Middle) | | | | Race | Sex | Date of Birth | <input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large | | <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile | | |
| Parent Name (Last) (First) (Middle) | | | | | | | Residence Phone () | | | | |
| Legal Custodian | | | | | | | Business Phone () | | | | |
| Other | | | | | | | | | | | |
| Address (Street, Apt. Number) (1) OR | | | | (City) | (State) | (Zip) | | | | | |
| 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 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. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No (Reason) | | | | | | | School Attended | | Grade | | |
| Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Description of Property | | | | Value of Property | | | | | |
| CODE | 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. Synthetic | U. Unknown Z. Other |
| CHARGE | Charge Description Driving under the influence | | Counts | Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N | Statute Violation Number 311611931001 | | Violation of ORD # | | | | |
| CHARGE | Drug Activity Lunk | Drug Type | Amount / Unit | Offense # | Warrant / Capias Number | | Bond | | | | |
| CHARGE | Charge Description | | Counts | Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N | Statute Violation Number | | Violation of ORD # | | | | |
| CHARGE | Drug Activity | Drug Type | Amount / Unit | Offense # | Warrant / Capias Number | | Bond | | | | |
| CHARGE | Charge Description | | Counts | Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N | Statute Violation Number | | Violation of ORD # | | | | |
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| CHARGE | Charge Description | | Counts | Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N | Statute Violation Number | | Violation of ORD # | | | | |
| CHARGE | Drug Activity | Drug Type | Amount / Unit | Offense # | Warrant / Capias Number | | Bond | | | | |
| NOTICE TO APPEAR | Location (Court, Room Number, Address) 3208 Gun Club Rd WPB FL 33406 | | | | | | | | | 2017 MAY 21 | |
| NOTICE TO APPEAR | Court Date and Time Month 06 Day 15 Year 2017 Time 0830 A.M. | | | | | | | | | 2017 MAY 21 | |
| 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 | | | | | | | | | MAY 27 AM 1:15 2017 | | |
| ADMIN | Signature of Defendant (or Juvenile and Parent/Custodian) | | | | | | | Date Signed 11/17 | | | |
| ADMIN | HOLD for other agency | | Signature of Arresting Officer x OFC Santelli | | Name Verification (Printed by Arrestee) (PRINT) | | | | | | |
| ADMIN | <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal | | <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other: OFC Santelli | | I.D. # 0220 | SCANNED | | | | | |
| ADMIN | Intake Deputy DPS Wellington 7141 | | I.D. # KC Santelli 9230 | | Pouch # PB70 | PAGE 1 OF 1 | | | | | |
| Witness here if subject signed with an X MAY 31 2017 | | | | | | | | | | | |

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.
15

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? Royal Palm

DIRECTION OF TRAVEL? West WHERE DID YOU START? My client's house on my home

WHAT TIME DID YOU START? 7:30 AM WHAT TIME IS IT NOW? I don't know, 10 am

WHAT IS TODAY'S DATE? 26 May 2017 WHAT DAY OF THE WEEK IS IT? Friday

WHAT COUNTY AND CITY ARE YOU IN NOW? Palm Beach County, state of Florida

WHEN DID YOU LAST EAT? 2-3 o'clock WHAT DID YOU EAT? Sandwich

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? I went home, and stayed home until now

HOW MUCH DO YOU WEIGH? 160 lbs HAVE YOU BEEN DRINKING? Yes WHAT? A drink 3 hours ago

HOW MUCH? 1 cocktail WHERE? Home WITH WHOM? No one

WHEN DID YOU HAVE YOUR FIRST DRINK? Not sure AND YOUR LAST DRINK? Same time

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? I didn't have two drinks

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? No ARE YOU UNDER THE INFLUENCE? I don't believe

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? No HOW MUCH? None

WHAT? None WHERE? None WHEN? None

WHAT LINE OF WORK ARE YOU IN? Personal Assistant WHEN DID YOU LAST WORK? Today

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? No WHAT? None

ARE YOU SICK OR INJURED? Not today WHAT'S WRONG? None

DO YOU LIMP? No DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? I fall recently

WERE YOU IN AN ACCIDENT TODAY? No

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN? None

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? No WHO? None WHY? None

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? No WHAT? None WHEN? None

DO YOU HAVE: EPILEPSY?

No

GLASS EYE?

None

FALSE TEETH?

None

EAR INFECTION?

None

INNER EAR TROUBLE?

None

DIABETES?

None

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? None

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? No WHERE? PA, NY, FL

INTERVIEWER: OFC Sam L. M.

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MAY 31 2017

WITNESS LIST

CASE NUMBER: 17-000788

ARRESTING OFFICER OFC Santelli

ADDRESS 345 S. County Rd. Palm Beach, FL 33458

PHONE NUMBERS (HOME) (WORK) 561-838-5454

CAN TESTIFY TO: Arrest

NAME: OFC Mazzarone

ADDRESS 345 S. County Rd. Palm Beach, FL 33458

PHONE NUMBERS (HOME) (WORK) 561-838-5454

CAN TESTIFY TO: DLT investigation

NAME: OFC Mazzarone

ADDRESS 345 S. County Rd. Palm Beach, FL 33458

PHONE NUMBERS (HOME) (WORK) 561-838-5454

CAN TESTIFY TO: DLT investigation

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) (WORK) _____

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: _____

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MAY 31 2017

TESTING FACILITY TASK REPORT

AGENCY: Palm Beach P.D.
SUBJECT: Ashley II, Guy Lamonte CASE NUMBER: 17-082582
DATE: 05/26/17 VIDEO TAPE NUMBER: 62689
BEGINNING TIME: 2205 ENDING TIME: 2225

BREATH TESTS RESULTS: 1) .320 TIME 2210 A.M./P.M. 2) .334 TIME 2213 A.M./P.M.
3) TIME A.M./P.M. 4) TIME A.M./P.M.

BREATH OPERATOR: S. Owen #3184

MAINTENANCE TECHNICIAN: J. Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slightly slurred

ATTITUDE: Co-operative, very nice, pleasant

CLOTHING: black shoes, Tan pants, black checkered shirt

MEDICAL CONDITIONS: depression, anxiety

MEDICATIONS: Xanax, 2 to 3 x day as needed, trazadone 1x day night

OTHER: Celebrexa - depression Xanax 4 hrs Fr24 hrs
1/2 hrs ago

COMMENTS: At 041 arrived at 2144 hrs

I/o observed 20 minutes

I/o requested breath test, disagreed

No problem with test, tech explained results

I/o read c/w, I understood rights

I answered Q & A. ate at 3pm (sandwich)

I admitted drinking 3 hrs ago single cocktail

1st drink he's had in 5 days. Couldn't feel effects

felt effects of his pills. Has mental issues he's been treated for.

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MAY 31 2017

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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MAY 31 2017

SUSPECT'S SIGNATURE: (X) _____

Read on Camera

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 26 DAY OF May 20 17, AT 21:12 AM PM

SUBJECT: Ashley II, Guy, Jr. CASE NUMBER: 17080788

AGENCY: PPD ARRESTING OFFICER: OFC Santeelli

PERSONAL CONTACT

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

On May 26th 2017 at approx. 2050 I observed a grey colored Audi four door driving Westbound on Royal Palm way. I observed the vehicle weave in it's lane of travel. The vehicle then stopped past the stop bar at a red light, and in a ~~cross~~ pedestrian cross walk. I activated my emergency lights and initiated a traffic stop based on my observations. Upon ~~my~~ walking up to driver's window of vehicle I observed a white male who was later identified by his Florida DLT A240292714040 as Guy L. Ashley (DOB 11/24/1971)

OBSERVATION OF DRIVER: Driver's eyes were glassy.

DRIVER'S STATEMENTS: Driver stated he was picking up food for a client.

ODORS: No odors observed

GENERAL OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Cooperative

CLOTHING:

MEDICAL/OTHER:

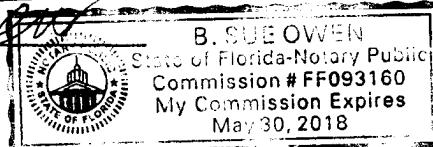
STATE OF FLORIDA
COUNTY OF PALM BEACH

OFC Santeelli
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 26th day of May 20 17 by OFC Santeelli

(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)



SCANNED
MAY 31 2017

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: Swayed from side to side, moved head.

WALK & TURN: Swayed, missed heel to toe, used arms for balance, stepped off line, improper turn.

ONE LEG STAND:

Dropped leg early, used arms for balance, lost balance.

FINGER TO NOSE:

Missed nose with index finger, did not return finger to side.

ROMBERG/ALPHABET:BREATH TEST RESULTS:

.320 .334

STATE OF FLORIDA
COUNTY OF PALM BEACH

Off. S. Gentilelli
(Signature of Arresting/Investigative Officer)

The foregoing instrument was notarized or sworn before me this 26th day of May, 2017 by Off. S. Gentilelli
who is personally known to me and/or produced identification. Type of identification produced



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MAY 31 2017