DSLX725

19CT1092783746

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE

OBTS Number:

Agency ORI Number: FL0 5 0 2 6 0 0
Agency Name: PALM BEACH GARDENS POLICE DEPT.
Agency Report Number (N.T.A.'s only): 7 8 - 1 1 9 1 0 0 3 6 2 7

Charge Type (Check as many as apply): ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other
If Weapon Seized Enter Type:
Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): 11570 US Highway 1, PBG, 33410
Location of Offense (Business Name, Address): 11570 US Highway 1, PBG Fl 33410
Date of Arrest: 0 6 1 6 1 9
Time of Arrest: 0 1 5 6
Booking Date:
Booking Time:
Jail Date:
Jail Time:
Location of Vehicle: 4301 East Ave, WPB 33405

DEFENDANT

Name (Last, First, Middle): Crawford, Hadley, Leah
Alias (Name, DOB, Soc. Sec. #, Etc.):
Race (W - White, B - Black, I - American Indian, O - Oriental): W
Sex: F
Date of Birth: 0 7 2 9 9 0
Height: 5 3
Weight: 110
Eye Color: Bro
Hair Color: Brow
Complexion: light
Build: thin
Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description): Arm (left) sleeve, right Ankle
Marital Status: S
Religion: Cath
Indication of: Alcohol Influence Y ☒ / Drug Influence
Local Address (Street, Apt. Number) (City) (State) (Zip): 1800 Embassy Dr Apt 103, WPB, Fl 33401
Phone: 561 514 3458
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: Server
D/L Number, State: C616332907690
Soc. Sec. Number: [redacted]
INS Number:
Place of Birth (City, State): PBG, Fl
Citizenship: USA

CO-DEF.

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

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 DCF 3. Incarcerated
Released To: (Name) — Relationship — Date — Time
The above address was provided by ☐ defendant and / or ☐ defendant's parent. The child and / or parent was told to keep the Juvenile Court Clerk's Office (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

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, F. Heroin, H. Hallucinogen, M. Marijuana, O. Opium/Deriv., P. Paraphernalia/Equipment, S. Synthetic, U. Unknown, Z. Other

CHARGE

Charge Description: Driving under influence
Counts: 1
Domestic Violence: ☐Y ☒N
Statute Violation Number: 316.193(4)
Violation of ORD #:
Drug Activity: N/A
Drug Type: N/A
Amount / Unit:
Offense #:
Warrant / Capias Number:
Bond:

CHARGE

Charge Description: | Counts: | Domestic Violence ☐Y ☐N | Statute Violation Number: | Violation of ORD #:
Drug Activity: | Drug Type: | Amount / Unit: | Offense #: | Warrant / Capias Number: | Bond:

CHARGE

Charge Description: | Counts: | Domestic Violence ☐Y ☐N | Statute Violation Number: | Violation of ORD #:
Drug Activity: | Drug Type: | Amount / Unit: | Offense #: | Warrant / Capias Number: | Bond:

CHARGE

Charge Description: | Counts: | Domestic Violence ☐Y ☐N | Statute Violation Number: | Violation of ORD #:
Drug Activity: | Drug Type: | Amount / Unit: | Offense #: | Warrant / Capias Number: | Bond:

NOTICE TO APPEAR

☐ Instruction No. 1 Mandatory Appearance in Court
☐ Instruction No. 2 You need not appear in Court but must comply with instructions on Reverse Side.
Location (Court, Room Number, Address): 3188 PGA Blvd (North County)
Court Date and Time: Month 07 Day 19 Year 19 Time 10 A.M. (circled) P.M.

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

ADMIN.

HOLD for other Agency Name:
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:
Signature of Arresting Officer: x [signature] 506
Name of Arresting Officer (Print): Sgt. Kalish 506 — I.D. #: PBG
Name Verification (Printed by Arrestee): (PRINT)
Intake Deputy: Cpl Honea 7206 — I.D. # — Pouch #
Transporting Officer: [signature] — I.D. #: 506 — Agency: PBG
Witness here if subject signed with "X"
PAGE 1 OF 1

SCANNED JUN 17 2019

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - JAIL GOLD - DEFENDANT

PBGPD FORM-023

J. KALISH #506

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 16 DAY OF June 20 2019, AT 0129 ✓ AM PM

SUBJECT: Crawford, Hadley, Leah CASE NUMBER: 19003627

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: Ofc. J. Kalish #506

PERSONAL CONTACT

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

While on patrol of the area of 11570 US Highway 1, I noticed a vehicle that had one tire blown out turn into Oakbrook Plaza and then notice my patrol vehicle and turn around. I noticed the vehicle go into the north entrance of the plaza and stop into a parking spot. I noticed the female driver crying behind the wheel.

OBSERVATION OF DRIVER:

Crawford was crying and very apologetic, her eyes were blood shot red, and appeared to be confused.

DRIVER'S STATEMENTS:

The Crawford stated that she was tipsy and she came from Clematis street. Driver stated she thought she was on Palm Beach Lakes in West Palm Beach. Crawford stated that she did not know how her tire blew out or what she hit.

ODORS:

Smell of unknown alcoholic beverage

GENERAL OBSERVATIONS

SPEECH: **slurred**

ATTITUDE: **upset and apologetic**

CLOTHING: **Orange Dress**

MEDICAL/OTHER: **none**

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 16 day of June 20 19 by Ofc. J. Kalish

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

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

SUBJECT: Crawford, Hadley, Leah CASE NUMBER 19003627

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

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

Other Observations:

Crawford kept moving her head multiple times.

WALK & TURN:

Crawford did 13 steps on the first try and did not do the walk and turn with her heels touching. During this time Crawford did not remember the instructions and I had to repeat them. Crawford did kept trying to use her arms for balance.

ONE LEG STAND:

Crawford attempted to do the one-leg stand and due to the safety of Crawford I concluded the task because Crawford was unable to keep her balance and was going to fall.

ROMBERG ALPHABET:

Due to Crawford unable to finish the one-leg stand I concluded the field sobriety tasks due to Crawfords safety and well being.

FINGER TO NOSE:

Due to Crawford unable to finish the one-leg stand I concluded the field sobriety tasks due to Crawfords safety and well being.

BREATH TEST RESULTS: 1) 2) 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 16 day of June 2019 by Ofc. J. Kalish

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

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

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: 80-006029 Software: 8100.27
Date of Test: 06/16/2019

Date of Last Agency Inspection: 06/13/2019
Observation Period Began: 02:25
Subject's Name: HADLEY L CRAWFORD DOB: 07/29/1990 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	02:56
Air Blank	0.000	02:56
Control Test	0.081	02:57
Air Blank	0.000	02:57
Subject Sample #1	0.210	02:57
Air Blank	0.000	02:58
Air Blank	0.000	03:00
Subject Sample #2	0.207	03:00
Air Blank	0.000	03:01
Control Test	0.080	03:01
Air Blank	0.000	03:02
Diagnostics Check	OK	03:02

Cylinder Lot: 00919080A3
Exp: 03/05/2021

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 PARIS D POUND, 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: _____ Date: 06/16/19
Signature

Sworn to (or affirmed) before me this 16th day of June, 2019

_____ OFC. J. KALISH
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.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 19-082919 PBSO ZONE 3-13

AGENCY CASE # 19003627 CRASH CASE #

TIME OF STOP/CRASH 0129 DATE 06/16/19 DAY Sunday

SUBJECT'S NAME Crawford, Hadley Leah RACE W SEX F

HGT 5'3 WGT 110 DOB 07/29/1990

LOCATION 11510 US Highway 1

ARRESTING OFFICER'S NAME & ID J. Kalish #506 AGENCY PBG RD

DIVISION: Patrol

NOTIFIED BY COMMO Y

ARRIVAL AT FACILITY 0225

ARREST TIME 0156

BREATH RESULTS:

1. .210
2. .207
3. N/A
4. N/A

TESTING OFFICER'S ID 24639 PBSO VIDEOTAPE # N/A

WITNESS LIST

CASE NUMBER: 19003627

ARRESTING OFFICER: Ofc. J. Kalish
ADDRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410
PHONE NUMBERS (HOME): N/A (WORK) (561) 799-4445
CAN TESTIFY TO: Facts of Case

NAME: Michael Koegel
ADDRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410
PHONE NUMBERS (HOME) N/A (WORK) (561) 799-4445
CAN TESTIFY TO:

NAME:
ADDRESS 10500 N. Military Trail, Palm Beach Gardens, FL 33410
PHONE NUMBERS (HOME) N/A (WORK) (561) 799-4445
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
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NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

SUBJECT: CRAWFORD, HADLEY L 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.

SUSPECT'S SIGNATURE: (X) Read and Consented

SUBJECT: CRAWFORD, HADLEY L 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? N

WHERE WERE YOU GOING? Help a friend, don't know location

WHAT STREET OR HIGHWAY WERE YOU ON? PGA Blvd/Prosp

DIRECTION OF TRAVEL? N WHERE DID YOU START? Clematis, WPB

WHAT TIME DID YOU START? 7:30 WHAT TIME IS IT NOW? 1:00

WHAT IS TODAY'S DATE? 06/15/19 WHAT DAY OF THE WEEK IS IT? Saturday

WHAT COUNTY AND CITY ARE YOU IN NOW? PBC, WPB

WHEN DID YOU LAST EAT? 5:00pm WHAT DID YOU EAT? Chicken Fingers

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? Driving

HOW MUCH DO YOU WEIGH? 110 HAVE YOU BEEN DRINKING? Y WHAT? Beer

HOW MUCH? 3 WHERE? Loss weekend WITH WHOM? Friend

WHEN DID YOU HAVE YOUR FIRST DRINK? 9:00pm AND YOUR LAST DRINK? Unk

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? Sip with beer

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? N ARE YOU UNDER THE INFLUENCE? Yes

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? Service industry WHEN DID YOU LAST WORK? 4Pm

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? NO WHAT? _____

ARE YOU SICK OR INJURED? N WHAT'S WRONG? _____

DO YOU LIMP? N DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? N

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? N WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? N WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? N WHAT? _____ WHEN? _____

DO YOU HAVE:
- EPILEPSY? N
- GLASS EYE? N
- FALSE TEETH? N
- EAR INFECTION? N
- INNER EAR TROUBLE? N
- DIABETES? N

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? N

DO YOU TAKE INSULIN? N IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? N WHERE? _____

INTERVIEWER: J. Kallan #506

TESTING FACILITY TASK REPORT

AGENCY: PBGPD

SUBJECT: CRAWFORD, HADLEY L CASE NUMBER: 19-082919

DATE: 06/16/19 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 02:53 ENDING TIME: 03:12

BREATH TESTS RESULTS: 1) .210 TIME 02:57 A.M./P.M. 2) .207 TIME 03:00 A.M./P.M.

3) N/A TIME — A.M./P.M. 4) N/A TIME — A.M./P.M.

BREATH OPERATOR: P. POUND # 2467

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: LOW

ATTITUDE: CRYING, UPSET

CLOTHING: BROWN DRESS, [redacted] BLUE JAIVDACS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER: EYES GLASSY AND BLOODSHOT

Δ. STATED SHE HAD "3" BEERS IN Q+A

COMMENTS: ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 02:25 HRS.

Δ. AGREED TO TAKE TEST.

A/O. READ RIGHTS

Δ. STATED SHE UNDERSTOOD RIGHTS

TECH. READ RESULTS

Δ. STATED SHE UNDERSTOOD TEST RESULTS

A/O. CONDUCTED Q+A

Δ. ANSWERS QUESTIONS.

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: 2019019774	**Date:** 06/17/2019
	Specialist Name/ID: AM/31562