

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

1
Juv
1

OBTS Number	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-18-072585	
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	Weapon Seized / Type 1. Yes 2. No		Multiple Clearance Indicator 01
Location of Arrest (Including Name of Business) 1248 S MILITARY TRL WPB, FL 33406				Location of Offense (Business Name, Address) 1248 S MILITARY TRL WPB, FL 33406		
Date of Arrest 05/10/2018	Time of Arrest 0114	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle PRIORITY TOWING
Name (Last, First, Middle) POWERS JAMES M				Alias (Name, DOB, Soc. Sec. #, Etc.)		
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex W M	Date of Birth 04/25/1997	Height 5-08	Weight 190	Eye Color BLU	Hair Color BRN
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TT- RIGHT SHOULDER			Marital Status SINGLE	Religion NONE	Indication of Alcohol Influence Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>	
Local Address (Street, Apt. Number) 899 SW 3RD AVE			City BOCA RATON, FL	State FL	Zip 33432	Phone (774) 644-8154
Permanent Address (Street, Apt. Number)			City	State	Zip	Residence Type: 1. City 2. County 3. Florida 4. Out of State
Business Address (Name, Street)			City	State	Zip	Phone
D/L Number, State FL/ P620-453-97-145-0			Soc. Sec. Number		INS Number	Place of Birth (City, State) PROVIDENCE, RI
Co-Defendant Name (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 Name (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 / Legal Custodian / Other:			Address (Street, Apt. Number)		City	State
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 <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 (Phone 355-2526) informed of any change of address.				School Attended		Grade
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> 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
Charge Description DUI			Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)	
Charge Description			Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	
Charge Description			Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	
Charge Description			Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	
Charge Description			Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	
Location (Court Room Number, Address) PALM BEACH COUNTY COURTHOUSE CRIMINAL JUSTICE COMPLEX, 3228 GUN CLUB RD, WEST PALM BEACH, FL 33406 - PH (561) 355-2996						Violation of ORD #
Court Date and Time Month 05 Day 31 Year 2018 Time 8:30 AM X PM						Bond
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) <i>James M Powers</i>
Signature of Arresting Officer <i>Thomas Walton</i>						Date Signed 05/10/2018
HOLD for other Agency			Name of Arresting Officer (Print) Cpl. Thomas Walton #6942		Name Verification (Printed by Arrestee) 7:59	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Intake Deputy			<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		ID # 6942	
ID #			Pouch #		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 NEEDED DEFENDANT (N.T.A.'s ONLY)

MAY 10 2018

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 10 DAY OF MAY 20 18 AT 0024 AM PM
SUBJECT: POWERS JAMES M CASE NUMBER: 18-072585

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Cpl. Thomas Walton #6942

PERSONAL CONTACT

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

On the above date and time I responded to 1248 S. Military Trl in reference to a possible impaired driver. Upon arrival I met with Inv. J. Schneider who stated the following. Inv. Schneider was traveling north on Military Trail south of Forest Hill Blvd when I observed a red Kia in front of me remain stationary despite traffic moving forward. As it did so it veered to the right and mounted the curb before correcting back to the roadway to travel north. After passing the intersection of Forest Hill Blvd the passenger of the vehicle projected a Powerade bottle out of the window which struck my patrol car. At this time I activated my emergency lights and the vehicle moved to the right mounting the sidewalk with its right tires before coming to a stop. I instructed the vehicle via my public address system to enter the parking lot of 1248 S Military Trail where it came to rest.

Arriving at the drivers side window I made contact. I observed the driver's movements were lethargic and his dexterity poor. Removing his license from his wallet he fumbled about and dropped his wallet to the drivers side floorboard. Looking at him I found his eyes were very bloodshot and watery. As we continued to speak I smelled the odor of a unknown alcoholic beverage coming from his breath and person. Due to these observations I contacted Inv. Walton to assess the driver for impairment

OBSERVATION OF DRIVER:

I made contact with the def who was standing outside of his vehicle and pacing. The def I noticed without turning on my flashlight at first had red bloodshot eyes. I activated my flashlight and confirmed that the def had red glassy bloodshot eyes. I asked the def where he was coming from and he stated that he went out to dinner with a couple of girls and was heading home. I didn't notice the odor of an unk alcoholic beverage at first due to the wind direction but when I moved the odor of an unk alcoholic beverage was then noticeable. I asked the def if he had anything to drink and he stated "No". I asked the def why am I smelling the odor of alcohol and he stated that he did not have anything to drink. The def's speech was slurred.

DRIVER'S STATEMENTS:

I notified the def that I was conducting a DUI Investigation and asked him to submit to SFST's and he stated sure. I asked the def if he had any medical problems and he stated a knee surgery two years ago but was fully recovered from it. The def stated that he wears contacts and has no other medical problems.

ODORS:

Odor of an Unk Alcoholic beverage coming from his person

GENERAL OBSERVATIONS

SPEECH: Slurred speech

ATTITUDE: Cooperative, then arrogant and disrespectful

CLOTHING: White shorts, Blue shirt, blk sneakers

MEDICAL/OTHER: Knee surgery two years ago.
ALL ROADSIDES CAPTURED ON IN-CAR VIDEO

STATE OF FLORIDA
COUNTY OF PALM BEACH

Cpl. Thomas Walton #6942 *Thomas Walton*

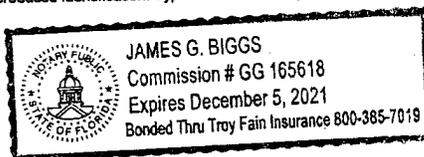
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 10 day of May 20 18 by Cpl. Thomas Walton #6942

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

James Biggs (#7607)

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



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MAY 10 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:

VGN was detected. Swaying during the task.

WALK & TURN:

THE DEF WAS PLACED INTO THE INSTRUCTIONAL STANCE FOR THE WALK AND TURN AND GIVEN INSTRUCTIONS. THE DEF STATED THAT HE UNDERSTOOD THE INSTRUCTIONS. THE DEF STOPPED TWICE TO BALANCE HIMSELF. THE DEF MISSED HEEL TO TOE TWICE DURING THE TASK. THE DEF USED HIS ARMS FOR BALANCE DURING THE TASK. THE DEF TOOK CORRECT NUMBER OF STEPS AND DID NOT TO SOON.

ONE LEG STAND:

THE DEF WAS PLACED INTO THE INSTRUCTIONAL STANCE FOR THE ONE LEG STAND AND GIVEN INSTRUCTIONS. THE DEF STATED THAT HE UNDERSTOOD THE INSTRUCTIONS. THE DEF WAS SWAYING DURING THE TASK AND FAILED TO LOOK AT HIS FOOT WHILE COUNTING.

FINGER TO NOSE:

THE DEF WAS PLACED INTO THE INSTRUCTIONAL STANCE FOR THE FINGER TO NOSE AND GIVEN INSTRUCTIONS. THE DEF STATED THAT HE UNDERSTOOD THE INSTRUCTIONS. THE DEF MISSED THE TIP OF HIS NOSE 3 TIMES. THE DEF FAILED TO RETURN HIS ARM TO THE SIDE ON ALL ATTEMPTS. THE DEF WAS WAS SWAYING DURING THE TASK.

ROMBERG ALPHABET:

THE DEF WAS PLACED INTO THE INSTRUCTIONAL STANCE FOR THE ROMBERG ALPHABET AND GIVEN INSTRUCTIONS. THE DEF STATED THAT HE UNDERSTOOD THE INSTRUCTIONS. THE DEF WAS SWAYING DURING THE TASK AND CORRECTLY RECITED THE ALPHABET.

BREATH TEST RESULTS: 1) .079 2) .085 3) 4)

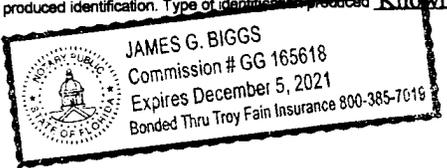
STATE OF FLORIDA
COUNTY OF PALM BEACH

Cpl. Thomas Walton #6942 *[Signature]*
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 10 day of May 20 18 by Cpl. Thomas Walton #6942

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

James Biggs (#7607)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)



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MAY 10 2018

OBTS Number		PROBABLE CAUSE AFFIDAVIT			1	Juvenile
Agency ORI Number FLO 5 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06 - 18072585		
Charge Type: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance Check as many <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other as apply.				Special Notes:		
Defendant's Name (Last, First, Middle) Powers, James M.				Race W	Sex M	Date of Birth 04/25/1997
Charge Description DUI		Charge Description				
Charge Description		Charge Description				
Victim's Name (Last, First, Middle) State Of Florida				Race	Sex	Date of Birth
Victim's Local Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone	Address Source
Victim's 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...						
<input checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ <input type="checkbox"/> confessed to _____ that he/she saw the arrested person commit the below acts. <input type="checkbox"/> admitting to the below facts. <input type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.						
On the 10 day of May, 2018 at 00:24 <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest).						

NARRATIVE:

I was traveling north on Military Trail south of Forest Hill Blvd when I observed a red Kia in front of me remain stationary despite traffic moving forward. As it did so it veered to the right and mounted the curb before correcting back to the roadway to travel north. After passing the intersection of Forest Hill Blvd the passenger of the vehicle projected a Powerade bottle out of the window which struck my patrol car. At this time I activated my emergency lights and the vehicle moved to the right mounting the sidewalk with its right tires before coming to a stop. I instructed the vehicle via my public address system to enter the parking lot of 1248 S Military Trail where it came to rest.

Arriving at the drivers side window I made contact. I observed the driver's movements were lethargic and his dexterity poor. Removing his license from his wallet he fumbled about and dropped his wallet to the drivers side floorboard. Looking at him I found his eyes were very bloodshot and watery. As we continued to speak I smelled the odor of a unknown alcoholic beverage coming from his breath and person. Due to these observations I contacted Inv. Walton to assess the driver for impairment.

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MAY 10 2018

Sworn and Subscribed before me		Signature of Arresting / Investigating Officer	
<i>T. Walton</i> Inv. T. Walton #6942		<i>J. Schneider</i> Inv. J. Schneider #8501	

NARRATIVE CONTINUATION

Name of Notary Public / Clerk of Court / Officer (F.S.S 117.10)	Name of Officer (Please Print)
05/10/2018	05/10/2018
Date	Date

NOT A CERTIFIED COPY

SCANNED
MAY 10 2018

Florida

DRIVER LICENSE



P620-453-97-145-0

CLASS E



**POWERS
JAMES MICHAEL
1800 SW 17TH AVE
BOCA RATON FL 33432**

**1 DOB 04251957 15SEX M 16EYES B 17HAIR BRN 18EYES DRIVER
12 REST NONE 13END NONE**

14ISS 04/30/2018

15DD R05180430018



James Powers

Operation of a motor vehicle constitutes consent to any Sobriety test required by law.

POWERS

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MAY 10 2018

TESTING FACILITY TASK REPORT

AGENCY: PBSO-WALTON

SUBJECT: POWERS, JAMES M CASE NUMBER: 18-072585

DATE: May 10, 2018 VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0145 ENDING TIME: 0156

BREATH TESTS RESULTS: 1) .079 TIME 0148 A.M. P.M. 2) .085 TIME 0152 A.M. P.M.

3) XX TIME XX A.M. P.M. 4) XX TIME XX A.M. P.M.

BREATH OPERATOR: J Biggs# 7607

MAINTENANCE TECHNICIAN: D/S J Karklecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SOMEWHAT SLURRED

ATTITUDE: UNCOOPERATIVE, UPSET, SARCASTIC, SHORT

CLOTHING: BLUE SHIRT, WHITE SHORTS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES RED, GLASSY, BLOODSHOT
ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE ON SUBJECT

COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0125
SUBJECT ADVISED HE WOULD SUBMIT TO THE BREATH TEST
SUBJECT WAS GIVEN THE INSTRUCTIONS FOR THE TEST
SUBJECT COMPLETED BOTH SAMPLES SUCCESSFULLY
RESULTS WERE GIVEN TO THE SUBJECT, SUBJECT ARGUED THE RESULTS BUT UNDERSTOOD
MIRANDA WAS READ
SUBJECT REFUSED QUESTIONS

SCANNED
MAY 10 2018

SUBJECT: Powers, James M

CASE NUMBER: 18-072585

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 10 2018

SUSPECT'S SIGNATURE: (X) Read on Camery

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

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? _____

SCANNED
MAY 10 2018

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: CPL L. Walt #6942