

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

19CT6325

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

1

Juvenile

N

OBTS Number			Agency ORI Number FLO 502600						Agency Name Palm Beach Gardens Police Department			Agency Report Number (N.T.A.'s only) 78- 19-002113			
ADMINISTRATIVE	Charge Type: Check as many as apply. 1. Felony 2. Traffic Felony			3. Misdemeanor 4. Traffic Misdemeanor			5. Ordinance 6. Other			Weapon Seized / Type 2 1. Yes 2. No		Multiple Clearance Indicator			
	Location of Arrest (Including Name of Business) Northlake Blvd/Hiatt Dr						Location of Offense (Business Name, Address) Northlake Blvd/Hiatt Dr								
Date of Arrest 04/05/2019		Time of Arrest 2145		Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle Kauff's Towing							
Name (Last, First, Middle) FLORIO, JASON															
Alias (Name, DOB, Soc. Sec. #, Etc.)															
DEFENDANT	Rece W - White 1 - American Indian B - Black 0 - Oriental/Asian	Sex W	Sex M	Date of Birth 05/31/1973	Height 600	Weight 255	Eye Color HAZEL	Hair Color GRY	Complexion LIGHT	Build MED	Unk.				
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status MARRIED	Religion None	Indication of: Alcohol Influence Drug Influence Y <input checked="" type="checkbox"/> N <input type="checkbox"/>						
Local Address (Street, Apt. Number) 1003 PINE LAKE CIR		(City) PALM BEACH GDNS	(State) FL	(Zip) 33418	Phone (954) 663-7609			Residence Type: 1. City 2. County 3. Florida 4. Out of State 1							
Permanent Address (Street, Apt. Number) 1003 PINE LAKE CIR		(City) PALM BEACH GDNS	(State) FL	(Zip) 33418	Phone ()			Address Source FL DL							
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone ()			Occupation							
D/L Number, State F460420731910		Soc. Sec. Number [REDACTED]		INS Number			Place of Birth (City, State) PORT JEFFERSON, NY		Citizenship US						
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					
CO-DEF	Name (Last) Parent Legal Custodian Other:		(First)	(Middle)		Residence Phone ()									
	Address (Street, Apt. Number)		(City)	(State)	(Zip)	Business Phone ()									
JUVENILE	Notified by: (Name)		Date	Time	Juvenile Disposition 1. Handled/processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated			Date				Time			
	Released To: (Name)		Relationship												
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 355-2528) 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. Dispenser Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine	B. Barbiturates C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphenels/ Equipment S. Synthetics	U. Unknown Z. Other	Violation of ORD #			
	Charge Description DUI with Property damage or Injury					Counts 1	Domestic Violence [] Y [] N	Statute Violation Number 316.193(3)(C)(1)							
CHARGE	Drug Activity N	Drug Type N	Amount / Unit N/A	Offense # 1	Warrant / Capias Number			Bond OR							
	Charge Description				Counts	Domestic Violence [] Y [] N	Statute Violation Number								
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number			Bond							
	Charge Description				Counts	Domestic Violence [] Y [] N	Statute Violation Number								
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number			Bond							
	Charge Description				Counts	Domestic Violence [] Y [] N	Statute Violation Number								
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number			Bond							
	Charge Description				Counts	Domestic Violence [] Y [] N	Statute Violation Number								
NOTICE TO APPEAR	Location (Court, Room Number, Address) North County Courthouse 3188 PGA Blvd, Palm Beach Gardens, FL 33410														
	Court Date and Time Month 5 Day 1 Year 19 Time 8:30 AM ✓ 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)															
Signature of Arresting Officer				Date Signed []											
HOLD for other Agency Name: [Signature] #454				Name Verification (Printed by Arrestee) APR 6 2019 10:08 AM (PRINT)											
Dangerous Suicidal Resisted Arrest Other:				Name of Arresting Officer (Print) OFC. JUNG #454 I.D. # 454											
Transliteration Officer JUN 17 454 PBPD															
PAGE #0257988															

SCANNED
APR 06 2019

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

<input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT	<input type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT
<input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION	<input type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
<input checked="" type="checkbox"/> LT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES	<input type="checkbox"/> RT EYE- ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:WALK & TURN:

HGN: Had trouble keeping head still.

WAT: Demonstrated and explained; subject had trouble keeping balance and repeatedly moved from the instructional position. Subject had to move hands away from sides to maintain balance during the exercise. Subject took 8 steps forward stopped and took 4 more steps, then and 11 steps back; none heel to toe.

ONE LEG STAND:

OLS: Demonstrated and explained; subject swayed while balancing, subject used arms for balance, Subject was unable to keep foot raised and keep putting the leg down.

FINGER TO NOSE:

was not conducted. no standardized.

ROMBERG/ALPHABET:

was not conducted. no standardized.

BREATH TEST RESULTS:

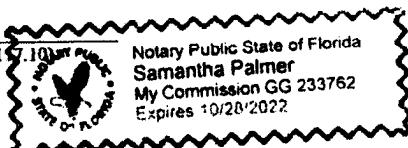
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was notarized or sworn before me this 5 day of April, 20 19 by Jung

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

Notary Public, Clerk of Court, Officer (F.S.S. 157.10) #454



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APR 06 2019

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 5th DAY OF April 20 19, AT 8:45 AM PM
SUBJECT: FLORIO, JASON CASE NUMBER: 19-002113
AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: OFC. JUNG #454
PERSONAL CONTACT

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

OBSERVATION OF DRIVER:

Florio smelled a strong odor of an unknown intoxicating beverage. Florio's eyes appeared to be glassy. Florio appeared to be unsteady on his feet. Florio had a hard time keeping his balance and his motor skills appeared to be slow.

DRIVER'S STATEMENTS:

Florio stated that he was coming from Iron horse Golf Course.

ODORS:

Strong odor of an unknown intoxicating beverage as he spoke.

GENERAL OBSERVATIONS

SPEECH: slurred, slow

ATTITUDE: calm

CLOTHING: blue shirt, black shorts, flip flops

MEDICAL/OTHER: None

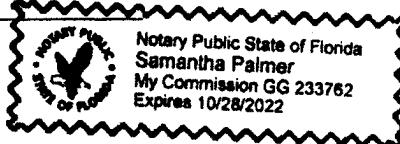
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 5 day of April 1 2019 by Jung

(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)



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APR 06 2019



Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
Other	<input type="checkbox"/>			
	<input type="checkbox"/>	Other:		
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2019011411	Date: 4/6/2019
	Specialist Name/ID: M. Took #8557

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APR 06 2019