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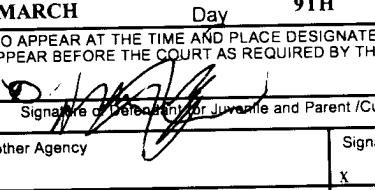
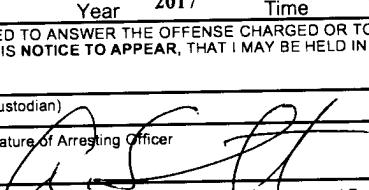
ARREST / NOTICE TO APPEAR

Juvenile Referral Report

1. Arrest
2. N.T.A.

- 3. Request for Warrant
- 4. Request for Capias

Juvenile

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 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-17-036098									
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 NONE				Multiple Clearance Indicator 01					
Location of Arrest (Including Name of Business) LAKE WORTH RD & FOUNTAINS DR, GREENACRES, FL 33463				Location of Offense (Business Name, Address) LAKE WORTH RD & FOUNTAINS DR, GREENACRES, FL 33463									
Date of Arrest 02/06/2017		Time of Arrest 04:31		Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle D&D TOWING				Alias (Name, DOB, Soc. Sec. #, Etc.)	
Name (Last, First, Middle) CRISTELL, JENA-MARIA, KAY													
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex W	Date of Birth 11/10/1996	Height 5'04"	Weight 150	Eye Color GREEN	Hair Color BLONDE	Complexion FAIR	Build MEDIUM				
Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description) NONE						Marital Status SINGLE	Religion CHRISTIAN	Indication of: Alcohol Influence <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Drug Influence <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>					
Local Address (Street, Apt. Number) 3851 WOODS WALK BLVD, LAKE WORTH, FL 33467				(City)	(State)	(Zip)	Phone 954 552-3754	Residence Type: 1. City 2. County				3. Florida 4. Out of State	2
Permanent Address (Street, Apt. Number) 3851 WOODS WALK BLVD, LAKE WORTH, FL 33467				(City)	(State)	(Zip)	Phone ()	Address Source DEFENDANT - FL D/L					
Business Address (Name, Street)				(City)	(State)	(Zip)	Phone ()	Occupation WAITRESS					
D/L Number, State C623431969100			Soc. Sec. Number		INS Number			Place of Birth (City, State) CORAL SPRINGS, FL			Citizenship U.S.		
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		
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> 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 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. <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					
Drug Activity S. Sell B. Buy P. Possess				R. Smuggle D. Deliver T. Traffic	K. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A	B. Barbiturate C. Cocaine A. Amphetamine	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other	
Charge Description D.U.I.				Counts 01	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)				Violation of ORD #			
Drug Activity N	Drug Type N	Amount / Unit N/A	Offense # 17-036098				Warrant / Capias Number				Bond		
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number				Violation of ORD #			
Drug Activity	Drug Type	Amount / Unit	Offense #				Warrant / Capias Number				Bond		
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number				Violation of ORD #			
Drug Activity	Drug Type	Amount / Unit	Offense #				Warrant / Capias Number				Bond		
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number				Violation of ORD #			
Drug Activity	Drug Type	Amount / Unit	Offense #				Warrant / Capias Number				Bond		
Location (Court, Room Number, Address) CRIMINAL JUSTICE COMPLEX 3228 GUN CLUB ROAD, WEST PALM BEACH, FL													
Court Date and Time Month MARCH Day 9TH Year 2017 Time 8:30				AM <input checked="" type="checkbox"/>								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 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.													
												Date Signed	
HOLD for other Agency Name:				Signature of Arresting Officer 				Name Verification (Printed by Arrestee) FEB 6 AM 6:33					
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal				Resisted Arrest <input type="checkbox"/> Other				Name of Arresting Officer (Print) D/S A. SENTMANAT				I.D. # 24968	
Intake Deputy DET. HONEST JR				D# 24968				Transporting Officer A. SENTMANAT				ID # PBSO	
												PAGE 1	
												OF 1	

Signature of Department or Juvenile and Parent (Custodian)

Date Signed

FEB 6 AM 6:33

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PAGE

DISTRIBUTION: WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - AGENCY

OLD - DEFENDANT (N.T.A.'S ONLY)

FEB 08 2017

FEB 08 2017

ADMIN	OBTS Number		PROBABLE CAUSE AFFIDAVIT				1 Arrest 2 NTA	3 Request for Warrant 4 Request for Capias	1	Juvenile	
	Agency ORI Number	Agency Name	PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number		06-17-036098		
Check as many as apply	Charge Type	1 Felony	2 Traffic Felony	3 Misdemeanor	4 Traffic Misdemeanor	5 Ordinance	6 Other	Special Notes			
DEF	Name (Last, First, Middle)	Alias				Race	Sex	Date of Birth			
CHARGES	DUI	Charge Description				Charge Description					
VICTIM	Victim's Name (Last, First, Middle) STATE OF FLORIDA					Race	Sex	Date of Birth			
	Local Address (Street, Apt Number) 3228 Gun Club Rd	(City) West Palm Beach	(State) FL	(Zip) 33406	Phone (561) 688-3000	Address Source					
	Business Address (Name, Street)	(City)	(State)	(Zip)	Phone ()	Occupation					
<p>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.</p> <p>The Person taken into custody</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence.</p> <p><input type="checkbox"/> confessed to _____</p> <p>admitting to the below facts.</p> <p><input type="checkbox"/> was observed by _____ who told _____</p> <p><input type="checkbox"/> that he/she saw the arrested person commit the below acts.</p> <p>was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>6th</u> day of <u>February</u> <u>20 17</u> at <u>4:04</u> <input checked="" type="checkbox"/> A.M <input type="checkbox"/> P.M (Specifically include facts constituting cause for arrest.)</p>											
<p>On Monday, 2/4/2017 at approximately 4:04AM I was traveling westbound in the 5000 Block of Lake Worth Rd in my marked Palm Beach County Sheriff's Office Patrol vehicle. At this time I observed blue Mazda 4 door bearing FL tag EWKT28 traveling at a high rate of speed approaching from my rear. As the vehicle came closer it came into my lane nearly colliding with my vehicle causing me to maneuver to the right to avoid a crash. As the vehicle passed I attempted to catch up to it. I was able to finally catch up to the vehicle and pace its speed at approximately 77mph near the intersection of Lake Worth Rd and Sherwood Forest Blvd. (It should be noted that my vehicle Unit: 72795 has certified speedometer which was calibrated using a wheeled dynamometer on 9/8/2016 by Florida Mobile Speed Testing LLC.)</p> <p>I then activated my emergency lights. The vehicle then proceeded to travel westbound towards S Jog Rd and seemed to pay no attention to my emergency lights. Then vehicle then stopped at a red signal and proceeded to drive when the light turned green. After multiple uses of the siren the vehicle then slowed to approximately 25mph. I continued to chirp the siren and the vehicle finally came to a stop near the intersection of Lake Worth Rd and Via Poinciana Dr.</p> <p>I then approached the vehicle and identified the driver by her Florida Driver's license to be W/F Jena-Maria Kay Cristell DOB: 11/10/1996. When speaking to Jena-Maria I could smell a strong odor of an alcoholic beverage coming from her breathe and person. She further displayed a blank stare and was making slow and deliberate movements inside the vehicle.</p> <p>D/S Sentmanat #24968 then responded to the scene to conduct a DUI Investigation which resulted in the arrest of Jena-Maria Cristell. This concludes my involvement in this case.</p>											
PROBABLE CAUSE STATEMENT	<p>STATE OF FLORIDA COUNTY OF PALM BEACH <u>25004</u> (Signature of Arresting/Investigative Officer)</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>4th</u> day of <u>February</u> <u>20 17</u> by <u>D/S B. Lembo #25004</u></p> <p>(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced _____ known _____</p> <p><u>24968</u> Notary Public, Clerk of Court Officer (F.S.S. 117.10)</p>										
ADMINISTRATIVE	<p>DISTRIBUTION WHITE - Court Copy GREEN - State Attorney YELLOW - Clerk of Court PINK - Agency</p> <p>SCANNED FEB 08 2017</p> <p>PAGE <u>1</u> OF <u>1</u></p>										

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 6TH DAY OF FEBRUARY 20 17, AT 04:05

AM PM

SUBJECT: CRISTELL, JENA-MARIA, KAY CASE NUMBER: 17-036098

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: A. SENTMANAT
PERSONAL CONTACT

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

On Monday February 6, 2017 at approximately 0406hrs I responded to Lake Worth Road and Fountains Drive, Greenacres, FL 33463 in reference to a D.U.I. investigation from a traffic stop performed by D/S B. Lembo #25004. See D/S Lembo's attached Supplemental Probable Cause Affidavit.

OBSERVATION OF DRIVER:

Upon arrival to the traffic stop I observed the driver W/F Jena-Maria Kay Cristell (11/10/96) had glassy eyes and her speech was slightly slurred. When she exited the vehicle she staggered forward and she said it was cause of her sandals. When Cristell exited the vehicle she appeared to be a little unsteady on her feet. She began to lace up her sandals and when she bent forward she was swaying forward and back. While enroute to the B.A.T. Cristell asked several times the same questions and even though I provided her the answers she continued to ask. Each time Cristell heard the response to her question it was as if it was the first time she was hearing it.

DRIVER'S STATEMENTS:

Cristell first said that she did not drink any alcohol and that she was on her way to hr boyfriend's house.

ODORS:

Cristell had a strong odor of an unknown alcoholic beverage coming from her breath/person.

GENERAL OBSERVATIONS

SPEECH: Slightly slurred

ATTITUDE: Cooperative

CLOTHING: Black dress

MEDICAL/OTHER: None

STATE OF FLORIDA
COUNTY OF PALM BEACH

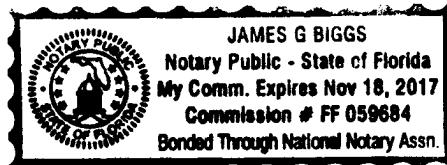
A. SENTMANAT

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 6th day of February 20 17 by A. Sentmanat

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

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



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FEB 08 2017

WITNESS LIST

17-036098

CASE NUMBER: _____

A. SENTMANAT

ARRESTING OFFICER: _____

ADDRESS: 2995 S. JOG ROAD, GREENACRES, FL 33467

PHONE NUMBERS (HOME): _____ (WORK) 561-688-3400

CAN TESTIFY TO: ROADSIDES AND THE B.A.T.

NAME: D/S B. LEMBO

ADDRESS: 2995 S. JOG ROAD, GREENACRES, FL 33467

PHONE NUMBERS (HOME): _____ (WORK) 561-688-3400

CAN TESTIFY TO: DRIVING PATTERN AND TRAFFIC STOP

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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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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FEB 08 2017

TESTING FACILITY TASK REPORT

SUBJECT: CRISTELL, JENA-MARIE K .	AGENCY: PBSO-SENTMANAT
DATE: Feb 6, 2017	CASE NUMBER: 17-036098
BEGINNING TIME: 0516	VIDEO DVD NUMBER: 62096
ENDING TIME: 0532	
BREATH TESTS RESULTS: 1) REF TIME 0523 A.M. <input checked="" type="checkbox"/> P.M. <input type="checkbox"/> 2) XX TIME XX A.M. <input type="checkbox"/> P.M. <input type="checkbox"/>	
3) XX TIME XX A.M. <input type="checkbox"/> P.M. <input type="checkbox"/> 4) XX TIME XX A.M. <input type="checkbox"/> P.M. <input type="checkbox"/>	
BREATH OPERATOR: J Biggs# 7607	
MAINTENANCE TECHNICAN: D/S J Karklecke #6467	

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED AT TIMES, DELIBERATE
ATTITUDE: COOPERATIVE
CLOTHING: BLACK DRESS
MEDICAL CONDITIONS: NONE
MEDICATIONS: NONE

OTHER:

EYES GLASSY, WATERY
ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE ON SUBJECT

COMMENTS:

THE ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0455
SUBJECT REFUSED THE TEST INITIALLY
SUBJECT WAS READ IMPLIED CONSENT
SUBJECT WAS ALSO EXPLAINED IMPLIED CONSENT AND READ IT SEVERAL TIMES
SUBJECT ULTIMATELY REFUSED ONCE AGAIN
MIRANDA WAS READ AND UNDERSTOOD
SUBJECT SUBMITTED TO THE QUESTIONS

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FEB 08 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 DJS Sentmanat

of the PBSO

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) Read on Camera

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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SUSPECT'S SIGNATURE: (X) Read on Camera

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? Yes

WHERE WERE YOU GOING? boyfriend's house

WHAT STREET OR HIGHWAY WERE YOU ON? Right after Lake Worth and Jog

DIRECTION OF TRAVEL? Don't know WHERE DID YOU START? from friend's house next to City Place

WHAT TIME DID YOU START? Don't know WHAT TIME IS IT NOW? No

WHAT IS TODAY'S DATE? 2/6 WHAT DAY OF THE WEEK IS IT? Monday

WHAT COUNTY AND CITY ARE YOU IN NOW? West Palm Beach

WHEN DID YOU LAST EAT? 7pm WHAT DID YOU EAT? Cesar Salad

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? Hanging out w/ friend talked on phone

HOW MUCH DO YOU WEIGH? 145-150 HAVE YOU BEEN DRINKING? Yes WHAT? Coronas

HOW MUCH? 2 WHERE? Pawn Shop WITH WHOM? w/ Stacey & Meagan

WHEN DID YOU HAVE YOUR FIRST DRINK? 10 or 10:30 AND YOUR LAST DRINK? 12 Am

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? —

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? NO ARE YOU UNDER THE INFLUENCE? NO

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

WHAT? — WHERE? — WHEN? —

WHAT LINE OF WORK ARE YOU IN? Serving WHEN DID YOU LAST WORK? Yesterday

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

ARE YOU SICK OR INJURED? NO WHAT'S WRONG? —

DO YOU LIMP? NO DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? NO

WERE YOU IN AN ACCIDENT TODAY? NO

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? NO WHEN? —

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? NO WHO? — WHY? —

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? NO WHAT? — WHEN? —

DO YOU HAVE: EPILEPSY? NO

GLASS EYE? NO

FALSE TEETH? Yes

EAR INFECTION? NO

INNER EAR TROUBLE? NO

DIABETES? NO

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? —

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? NO WHERE? —

INTERVIEWER: DJS A. Sentmanat #24968

SCANNED

FEB 08 2017

NOT A

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FEB 08 2017