

0482064 NH 16CF 1073886

ARREST / NOTICE TO APPEAR Juvenile Referral Report													
ADMINISTRATIVE	OBTS Number			1. Arrest 2. N.T.A.			3. Request for Warrant 4. Request for Capias			1	Juvenile N		
	Agency ORI Number FLO - 500000			Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number (N.T.A.'s only) 06-16142475						
<p>ChargeType: <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other</p> <p>Weapon Seized / Type 2. 1. Yes 2. No</p> <p>Multiple Clearance Indicator 02</p>													
<p>Location of Arrest (Including Name of Business) 14680 Park of Commerce Blvd, Jupiter FL 33478</p> <p>Location of Offense (Business Name, Address) 14680 Park of Commerce Blvd, Jupiter FL 33478</p>													
Date of Arrest 10/22/2016		Time of Arrest 1845		Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle Parked at Gas station per owner request					
<p>Name (Last, First, Middle) Burnett, Kathryn Michele</p> <p>Alias (Name, DOB, Soc. Sec. #, Etc.)</p>													
DEFENDANT	Race W - White I - American Indian B - Black O - Oriental/Asian		Sex W	Date of Birth 09/13/1968	Height 5'4"	Weight 117	Eye Color Brown	Hair Color Brown	Complexion Fair	Build Small			
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) None visible						Marital Status Divorced	Religion NONE	Indication of Alcohol Influence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N Drug Influence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Unk.				
	Local Address (Street, Apt. Number) 14465 86th Road N, Loxahatchee FL 33470						Phone (561) 6286998	Residence Type: 1. City 2. County 3. Florida 4. Out of State 2					
	Permanent Address (Street, Apt. Number) Same as above						Phone ()	Address Source Verbal					
	Business Address (Name, Street) (City) (State) (Zip)						Phone ()	Occupation At home mom					
	DL Number, State B653513688330, FL			Soc. Sec. Number [REDACTED]			INS Number [REDACTED]	Place of Birth (City, State) Dallas, Texas		Citizenship USA			
	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 1 - OR 2 - 3,000						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				
<p>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.</p> <p><input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)</p>													
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. Synthetics	U. Unknown Z. Other		
	Charge Description DUI				Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)						
CHARGE	Drug Activity N	Drug Type N	Amount / Unit	Offense # 16142475	Violation of ORD #								
	Warrant / Capias Number				Bond								
CHARGE	Charge Description Child Neglect				Counts 1	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 827.03(2)(D)						
	Warrant / Capias Number				Violation of ORD #								
CHARGE	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number						
	Warrant / Capias Number				Violation of ORD #								
CHARGE	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number						
	Warrant / Capias Number				Violation of ORD #								
CHARGE	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number						
	Warrant / Capias Number				Violation of ORD #								
NOTICE TO APPEAR	Location (Court, Room Number, Address) TO BE SET												
	Court Date and Time Month Day Year Time 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													
<p><i>[Signature]</i></p> <p>Signature of Defendant (or Juvenile and Parent / Custodian)</p> <p>Date Signed: 2016-10-22 11:13</p>													
ADMIN	HOLD for <input type="checkbox"/> Agency 76237			Signature of Arresting Officer [Signature]			Name Verification (Printed by Arrestee)						
	Name: [Signature]			Name of Arresting Officer (Print) Inv. Christopher Ficarra 8368			(PRINT)						
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal			<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:			I.D. # 8368						
	Intake Deputy 76237			J.D. # [Signature]			Pouch # [Signature]			Transporting Officer Inv. Christopher Ficarra 8368			Agency PBSO
PAGE 1 OF 1													
Witness here if subject signed with an -X"													

OBTs Number

PROBABLE CAUSE AFFIDAVIT

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

Juvenile

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Agency ORI Number FLO 5 0 0 0 0 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06	16-142475		
Charge Type: Check as many as apply	1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other	Special Notes			
Defendant Name (Last, First, Middle)	<i>Burnett, Kathryn M</i>	Race W	Sex F		
Charge <i>DUI</i>	Charge <i>CHILD NEGLECT</i>	Date of Birth <i>9/13/68</i>			
Charge	Charge				
Victim Name (Last, First, Middle) <i>STATE of FLORIDA</i>		Race	Sex		
Local Address (Street, Apt. Number)	City	State	Zip	Phone	Address Source
Business Address (Street, Apt. Number)	City	State	Zip	Phone	Occupation
<p>The undersigned 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...</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence.</p> <p><input type="checkbox"/> confessed to admitting to the below facts.</p> <p><input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.</p>					
On the <u>22</u> day of <u>OCTOBER</u> 20 <u>16</u> at <u>5:44</u>	<input type="checkbox"/> AM		<input checked="" type="checkbox"/> PM		

This is a supplemental Probable Cause to case number 16-142475. On 10/22/16 at approximately 5:43 PM, I was advised by PBSO dispatch that a citizen was following a black vehicle that was driving in a reckless manor. PBSO dispatch was advising me of the location of the reckless driving vehicle that was being reported by the citizen who was following it. At approximately 5:52 PM, I caught up and observed a black vehicle traveling south on Pratt Whitney Rd. north of SR 710, Beeline Hwy., Jupiter, unincorporated Palm Beach County. The reporting citizen was following with its four way flashers on. This section of Pratt Whitney Rd. is two lanes. The vehicle was bearing Florida tag 188KQD. I followed the black vehicle and observed it swerving within its lane. The black vehicle approached the intersection of SR 710, Beeline Hwy. The traffic light was red. The black vehicle stopped and when the traffic light turned green it turned left, using its left turn signal, and traveled east on SR 710, Beeline Hwy., outside lane. I observed the black vehicle swerve across the center line and ride it momentarily. The black vehicle then swerved back into its lane, outside lane, and swerved into the inside lane. There were no other vehicles around at this time. The black vehicle then turned left onto Park of Commerce Blvd. and pulled into the Shell Gas Station parking lot. The black vehicle properly parked in a marked parking space in front of the Shell Gas Station store.

I initiated a traffic stop with my PBSO marked patrol vehicle with over head red, blue lights and siren. I approached the black vehicle, while wearing my full duty PBSO green uniform. I observed a white female behind the wheel. I saw a small child in the right rear passenger seat, in a child car seat, seat belted in. I saw a large German Shepard dog in the right front passenger seat. I asked the driver for her driver license, registration and insurance. She provided all documents to me. She was identified by her Florida driver license as Kathryn Burnett.

I could smell an order of an unknown alcoholic beverage coming from her breath. Her speech appeared slow. She had red bloodshot glassy eyes and a flushed face.

DUI Investigator Ficarra responded to the scene and took over the investigation.

SUSPENDED

The foregoing instrument was sworn to and affirmed before me this 22 day of OCTOBER 20 16, by:
DS M. Cain **6880**

Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)
J. S. Lopez HAYES

Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)

Name of Arresting/Investigating Officer
J. S. Lopez HAYES

Signature of Arresting/Investigating Officer

OBTS Number		PROBABLE CAUSE AFFIDAVIT				1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile N
ADMIN	Agency ORI Number FLO 500000	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06-16142475						
	Charge Type: Check as many as apply: <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	Special Notes:							
DEF	Name (Last, First, Middle) Burnett, Kathryn Michele		Alias		Race W	Sex F	Date of Birth 09/13/1968		
CHARGES	Charge Description DUI		Charge Description 316.193(1)		Charge Description Child Neglect		Charge Description 827.03(2)(D)		
VICTIM	Victim's Name (Last, First, Middle) State of Florida				Race	Sex	Date of Birth		
	Local Address (Street, Apt. Number)		(City)	(State)	(zip)	Phone	Address Source		
	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 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"/> was found to have committed the below acts, resulting from my (described) investigation.									
On the <u>22nd</u> day of <u>October</u> <u>20 16</u> at <u>1753</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)									
<p>Kathryn stated that she had nothing to drink that day but did have a beer with Tom at his house. She had the beer at approximately 1600 hours and at bruschetta. Kathryn stated that she runs 3 to 5 miles a day so she drinks a lot in the morning but the beer was the only alcoholic beverage. Based on my above observations I asked Kathryn to submit to standardized field sobriety tasks so that I could see if she could safely operate her vehicle. Kathryn consented to the tasks. Kathryn walked back toward her vehicle stating she wanted to check on [REDACTED] I advised [REDACTED] was already out of the vehicle. Kathryn took off her sandals for the tasks.</p> <p>Due to the fact that Kathryn had [REDACTED] in the vehicle at the time she was arrested for DUI she was also charged with child neglect because Kathryn did fail or omit to provide [REDACTED] (white male, DOB: 11/15/10), a child with the care, supervision, and services necessary to maintain the child's physical and mental health, including, but not limited to, food, nutrition, clothing, shelter, supervision, medicine, and medical services that a prudent person would consider essential for the well-being of the child, and Kathryn was [REDACTED], an adult household member, or other person responsible for the child's welfare, contrary to Florida Statute 827.03(1)(e) and (2)(d).</p> <p>When searching for Kathryn's cell phone and purse a blue dixie cup which smelled of an unknown alcoholic beverage and a clear polka dot cup with red wine was located in the center console cup holder. Also located on the floor board was a half empty Sutter Home Pino Grigio 187 ml bottle with wine still inside. Two cold closed cans of Coors Light along with a closed Pino Grigio 750 ml bottle was also located in the vehicle. The Sutter Home bottle and clear polka dot cup showed a positive reading on a portable breath testing unit for the presence of an alcoholic beverage.</p>									
PROBABLE CAUSE STATEMENT									
ADMINISTRATIVE	<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p><i>Inv. Christopher Ficarra</i> (Signature of Arresting/Investigative Officer)</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>22nd</u> day of <u>October</u> <u>2016</u>.</p> <p>(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification _____ of identification produced _____.</p> <p>Notary Public, Clerk of Court, Officer (F.S. 117.10)</p> <p>PAMELA F. DORR, Notary Public, State of Florida My Comm. Expires Apr. 11, 2017 Commission # FF 7211 Bonded Through National Notary Assn</p>								
DISTRIBUTION	WHITE - COURT COPY	GREEN - STATE ATTORNEY	AGENCY	PINK - AGENCY	PAGE 1 OF 1				