

0493265

17MM013851

NH 882

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-17150622	
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 2 1. Yes 2. No	
Location of Arrest (Including Name of Business) North Haverhill Road at Willow Pond Road, West Palm Beach FL 33417				Location of Offense (Business Name, Address) North Haverhill Road at Willow Pond Road West Palm Beach FL 33417			
Date of Arrest 11/12/2017	Time of Arrest 0047	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle Towed by All Florida Towing	

Name (Last, First, Middle) Cross Leslie Diane		Alias (Name, DOB, Soc. Sec. #, Etc.)						
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex F	Date of Birth 05/15/1965	Height 5'4"	Weight 150	Eye Color Green	Hair Color Brown	Complexion Fair	Build Medium
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) Tattoos on shoulders				Marital Status Divorced	Religion Catholic	Indication of: Alcohol Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk. Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk.		
Local Address (Street, Apt. Number) 5984 Monterra Club Drive		(City) Lake Worth, FL	(State) 33463	(Zip)	Phone (561) 5432868	Residence Type: 1. City 2. County 3. Florida 4. Out of State 2		
Permanent Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone	Address Source FL DL		
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation Registered Nurse		
D/L Number, State C620524656750, FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) Joplin, Missouri		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
Parent Legal Custodian Other		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
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	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 Crash with property damage		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(3)(c)(1)		Violation of ORD #				
Drug Activity N	Drug Type N	Amount / Unit	Offense # 17150622	Warrant / Capias Number		Bond				
Charge Description Leaving scene crash with property damage		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.061(1)		Violation of ORD #				
Drug Activity N	Drug Type N	Amount / Unit	Offense # 17150622	Warrant / Capias Number		Bond				
Charge Description Resist officer with out violence		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 843.02		Violation of ORD #				
Drug Activity N	Drug Type N	Amount / Unit	Offense # 17150622	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" 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) PALM BEACH COUNTY COURTHOUSE CRIMINAL JUSTICE COMPLEX, 3228 GUN CLUB RD, WEST PALM BEACH, FL 33406 - PH: (561) 355-2996	
Court Date and Time Month December Day 14th Year 2017 Time 0830 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 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>Leslie Cross</i>	Date Signed 11/12/2017

HOLD for other Agency Name:		Signature of Arresting Officer <i>INV C 8368</i>	Name Verification (Printed by Arrestee)	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:	Name of Arresting Officer (Print) Inv. Christopher Ficarra	I.D. # 8368	(PRINT)
Intake Deputy <i>Mary Boy</i>	I.D. #	Transporting Officer Inv. C, Ficarra	ID # 8368	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 GOLD - DEFENDANT (N.T.A.'s ONLY)

SCANNED
NOV 16 2017

PROBABLE CAUSE AFFIDAVIT

1 Arrest
2 NTA
3 Request for Warrant
4 Request for Capias

1

Juvenile

OBTS Number _____

Agency ORI Number _____ Agency Name **PALM BEACH COUNTY SHERIFF'S OFFICE** Agency Report Number **17-150622**

Charge Type: 1 Felony 2 Traffic Felony 3 Misdemeanor 4 Traffic Misdemeanor 5 Ordinance 6 Other

Name (Last, First, Middle) **Cross, Leslie D** Alias _____ Race **W** Sex **F** Date of Birth **05/15/1965**

Charge Description **D.U.I.** Charge Description _____

Charge Description _____ Charge Description _____

Victim's Name (Last, First, Middle) _____ 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 committed the below acts in my presence. was observed by _____ who told _____

confessed to _____ that he/she saw the arrested person commit the below acts. was found to have committed the below acts, resulting from my (described) investigation.

admitting to the below facts.

On the 12th day of November 2017 at 12:18 A.M P.M (Specifically include facts constituting cause for arrest.)

On the above date and time I was sitting at the red light of N. Haverhill Rd and Okeechobee Blvd when I heard someone blowing the horn on there car. I began to look for it in the area but could not find it. I pulled into the parking lot on the Northwest corner and thats when I observed a small black suv speeding north bound and a silver 4 door car chasing it. I was able to make contact with the driver of the silver car who stated that the suv had hit his car, (I saw visible damage to the right front of his car) and fled the seen. I was able to catch up to the suv which was traveling at a high rate of speed. I conducted a traffic stop on the suv bearing florida tag N75-8YH in the area of Willow Pond and N. Haverhill Rd's. As I approached the vehicle I observed that it had a good amount of damage on the drivers side of it. D/S Jaques and I made contact with the driver (the registered owner) and sole occupant. As D/S Jaques was talking to driver i could smell the odor of an unknown alcoholic beverage coming from inside the vehicle. I also observed he face to be flush with her eyes being blood shot and glassy. I believed her to be impaired and had a DUI respond to investigate the possible violation.

PROBABLE CAUSE STATEMENT

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 12th day of November 2017 by P. Heckler

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

Notary Public, Clerk of Court, Officer (F.S.S. 112.10) _____

PROBABLE CAUSE AFFIDAVIT

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

Juvenile 1 N

ODTS Number	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06- 17150622
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	Special Notes:
	<input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other	

Name (Last, First, Middle) Cross, Leslie, Diane	Alias	Race W	Sex F	Date of Birth 05/15/1965
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Charge Description DUI Crash with property damage	316.193(3)(c)(1)	Charge Description Leaving scene crash with property damage	316.061(1)
Charge Description Resist officer with out violence	843.02	Charge Description	

Victim's Name (Last, First, Middle) State of Florida, ,	Race	Sex	Date of Birth
Local Address (Street, Apt. Number)	(City)	(State)	(zip)
Business Address (Name, Street)	(City)	(State)	(zip)

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
 committed the below acts in my presence. was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
 confessed to _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.
 On the 12th day of November 2017 at 0017 A.M. P.M. (Specifically include facts constituting cause for arrest.)

Leslie's speech was very slowed and mumbled even unclear as she spoke. I then asked Leslie to step out of the vehicle so we could speak about the crash. Leslie still did not believe she was in a crash. She attempted to get out of the driver's side door but she was unable to. I explained that she would not be able to due to the damage but she continued to try. Leslie had to go out of the passenger side front door and in doing so I observed that she had defecated her self. She had feces on the rear of her pants which she attempted to hide with a sweater. When she exited her vehicle I showed Leslie her damage on the vehicle. As Leslie stood close to me I smelled the odor of an unknown alcoholic beverage more clearly. Leslie stated that she had no idea what happened in the crash but she then stated she was driving and was hit. I confirmed that she did not need fire rescue again which she stated she did not. As Leslie stood still I observed that she had a circular sway. I spoke with Deputy Frank about the crash statements then spoke with Leslie again. The overhead lights had been turned off at that time. I explained to Leslie that the crash investigation was completed and I was then conducting a DUI investigation. I read and explained to her her Constitutional Warnings which she stated she understood. I asked her again if she needed Fire Rescue at which time she stated she was "invoking her 5th amendment."

I again identified myself to her and explained to her my observations of her. Based on my observations I asked her to submit to standardized field sobriety tasks which she stated she did not want to do them. I then explained to her Taylor Warnings at which time Leslie stated that I was "killing her." I explained that the tasks were not protected by her Constitutional Warnings but her statements were. Leslie stated again that she did not want to do the tasks at which time I advised her she was being placed under arrest for DUI. She then stated she would do the tasks. I began to grab her left wrist to place her into handcuffs. Leslie attempted to pull her arm away and break my grip to prevent herself from being handcuffed. I continued to apply handcuffs and gain control over her. She was then placed in the rear of my patrol vehicle.

STATE OF FLORIDA
 COUNTY OF PALM BEACH
 Inv. Christopher Ficarra
 (Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12th day of November 2017 by Inv. Christopher Ficarra

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced: Known
 Sue Owen (#3184)
 Notary Public, Clerk of Court, Officer (F.S. 117.10)
 State of Florida-Notary Public
 Commission # FF093160
 My Commission Expires May 30, 2018

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 12th DAY OF November 20 17, AT 0017 AM PM

SUBJECT: Cross Leslie Diane CASE NUMBER: 17150622

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. Christopher Ficarra

PERSONAL CONTACT

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

On 11/12/2017 at approximately 0029 hours I responded to the intersection North Haverhill Road and Willow Pond Road, in unincorporated Palm Beach County, in reference to a hit and run DUI crash investigation. Upon my arrival I observed a black Buick Encore bearing Florida tag N758YH stopped facing north bound on the east side of North Haverhill Road. I observed that there was damage done to the driver's side front and rear doors. There was also a silver Honda Accord bearing Florida tag Y91SFF stopped facing eastbound on Willow Pond Road. I then spoke with the original stopping deputy, Deputy P. Heckler ID: 6609 who stated to me the following: He was sitting in the area of Haverhill and Okeechobee when he hear a horn blowing. He drove through the Guitar Center parking lot to locate the horn. He observed the Buick coming out of the BP gas station on the north east corner of the roadway with the Honda following behind it. The Honda stopped Deputy Heckler and advised him that the Buick had hit his vehicle. The Buick then continued at a high rate of speed north on Haverhill Road without stopping at the crash scene. Deputy Heckler was able to stop the Buick at Willow Pond Road. Deputy Heckler stated that the driver of the Buick, verbally identified and later confirmed through her Florida issued driver's license as Leslie Diane Cross, appeared, "hammered." Deputy Jaques ID: 23160 stated that Leslie did not know she was in a crash. Deputy Heckler advised that Leslie was supposedly at Buffalo Wild Wings. Deputy Jaques stated that both vehicles were attempting to turn north onto Military Trail from Okeechobee. The Honda was on the inside lane while the Buick was in the outside lane. As they began to drive the Buick turned in front of the Honda causing him to impact her driver's side front and rear doors, which was consistent with the crash damage.

OBSERVATION OF DRIVER:

Deputy Jaques spoke with Leslie who stated that she was going home to Boynton Beach even though she was driving north on Haverhill Road. Leslie stated she had finished work at JFK north. She stated she was coming from Buffalo Wild Wings where she stated she had two large mixed drinks. She stated she was trying to find her way home. Leslie had offered up the information about her drink consumption on her own. Deputy Heckler stated that the crash damage was consistent with the damage on the Honda. Deputy Heckler stated that he could smell the odor of an alcoholic beverage on her breath, her speech appeared slurred, and her eyes were blood shot and glassy. Deputy Jaques stated that she had been repetitive and was forgetful when looking for her paperwork. (see D/s Heckler's supp pc for further) Deputy Frank ID:21296 conducted the crash investigation (reference crash number 17150620). I then observed the Honda which had passenger side front bumper damage which was consistent with the damage to the Buick. The driver of the Honda, Kerby Jeantinoble, gave a sworn written statement regarding the incident identifying the driver of the Buick.

DRIVER'S STATEMENTS:

Deputy Jaques stated that when he spoke with Leslie she was unaware she had been in a crash. She was also repetitive in stating that she was a nurse. I then made contact with Leslie who was still sitting in the driver's seat of the Buick. I observed that the damage done to her vehicle would not allow her to open the door to exit it. I identified myself to Leslie and asked her if she needed Fire rescue which she stated she did not. I asked her for her driver's license which she thought she had already provided which she did not. As she looked for her license I observed she fumbled with paperwork and could not locate her wallet which was on the passenger floorboard in plain view. Once locating her wallet she fumbled in her wallet for her driver's license. Her movements were slowed and delayed. Her eyes appeared red, watery, and droopy. Her face was flush and droopy as well. As she spoke I could smell the obvious odor of an unknown alcoholic beverage on her breath. She did not appear to have spilled anything on her person which would have given off that smell. (see attached PC for further).

ODORS:

Obvious odor of unknown alcoholic beverage on her breath as she spoke, obvious odor of feces

GENERAL OBSERVATIONS

SPEECH: Slurred, slowed, unclear

ATTITUDE: Calm, repetitive, forgetful

CLOTHING: Blue scrub top and bottoms, black clogs, black sweatshirt

MEDICAL/OTHER: N/A

STATE OF FLORIDA
COUNTY OF PALM BEACH

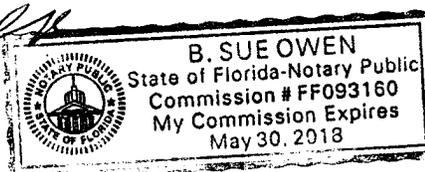
Inv. Christopher Ficarra
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12th day of November 20 17 by Inv. Christopher Ficarra

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

Sue Owen (#3184)

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



SCANNED
NOV 16 2017

SUBJECT: Cross

Leslie

CASE NUMBER 17150622

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:

Refused

WALK & TURN:

Refused

ONE LEG STAND:

Refused

FINGER TO NOSE:

Refused

ROMBERG ALPHABET:

Refused

BREATH TEST RESULTS:

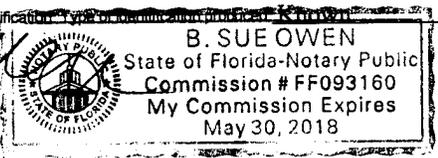
STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. Christopher Ficarra *mw C 2850*
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12th day of November 2017 by Inv. Christopher Ficarra

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

Sue Owen (#3184)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)



SCANNED
NOV 16 2017

WITNESS LIST

CASE NUMBER: 17150622

ARRESTING OFFICER: Inv. Christopher Ficarra

ADDRESS: 3228 Gun Club Road, West Palm Beach FL 33406

PHONE NUMBERS (HOME): _____ (WORK) 5616883000

CAN TESTIFY TO: Elements of DUI Crash

NAME: Deputy P. Heckler ID: 6609

ADDRESS: 3228 Gun Club Road, West Palm Beach FL 33406

PHONE NUMBERS (HOME) _____ (WORK) 5616883000

CAN TESTIFY TO: Elements of DUI Crash and leaving scene of crash

NAME: Deputy B. Frank ID: 21296

ADDRESS 3228 Gun Club Road, West Palm Beach FL 33406

PHONE NUMBERS (HOME) _____ (WORK) 5616883000

CAN TESTIFY TO: Conducted crash investigation

NAME: Deputy R. Jaques ID: 23160

ADDRESS 3228 Gun Club Road, West Palm Beach FL 33406 Work: 5616883000

PHONE NUMBERS (HOME) () (WORK) ()

CAN TESTIFY TO: Elements of DUI Crash

NAME: Kerby Jeantinoble

ADDRESS 802 South F Street, Lake Worth FL 33460

PHONE NUMBERS (HOME) 5619291724 (WORK) 5613697900

CAN TESTIFY TO: Elements of leaving scene of a crash

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: _____

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: _____

SCANNED
NOV 16 2017

Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.



WITNESS VICTIM OTHER

CASE #:	17150622	ZONE:	3-23	SUSPECT:	LESLIE CROSS	DATE & TIME OF ORIGINAL EVENT/OFFENSE:	11/12/17 0017
EVENT TYPE:	DUI CRASH		DEPUTY:	VICARRA		ID#:	2267

COMPLETE EVERYTHING BELOW – PRINT LEGIBLY

LAST NAME:	Jeantrouble	FIRST NAME:	Korby	MIDDLE INITIAL:	K	RACE:	Black	SEX:	M
DATE OF BIRTH:	12-21-1989	YOUR HEIGHT:		YOUR WEIGHT:	196	YOUR HAIR COLOR:	Black	YOUR EYE COLOR:	Black
YOUR HOME ADDRESS:	2020 S F Street		<input type="checkbox"/> CHECK IF HOMELESS	CITY:	Lake Worth	STATE:	FL	ZIP:	33460
YOUR WORK NAME & ADDRESS:	Public Warehouse Boynton		<input type="checkbox"/> CHECK IF UNEMPLOYED OR RETIRED	CITY:	Boynton B.	STATE:	FL	ZIP:	33426
WORK PHONE:	<input type="checkbox"/> CHECK IF NONE	CELL PHONE:	<input type="checkbox"/> CHECK IF NONE	HOME PHONE:	<input type="checkbox"/> CHECK IF NONE	EMAIL:	Jeantroublek2@outlook.com		
	(561) 351-7900	(561) 121-1724	()						

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL – PRINT LEGIBLY

YOUR NAME:	I	DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...
<p>On Okaloosa bl and military while im in the first ^{line} for turning to the left the other car was in the second line when the light to turn seen she's make a turn from the second line and she hit my car and leave. she's drive a small Black SUV he was a Female driver</p>		
		PAGE 1 OF 1

READ AND SIGN

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:

YOUR SIGNATURE: X Korby Jeantrouble

DEPUTY SHERIFF NOTARY PUBLIC FSS: 117.10

SWORN TO AND SUBSCRIBED BEFORE ME TODAY:

DATE: 11/12/17

TIME: 0057

SIGNATURE: mw c

ID: 2267

IF YOU DO NOT WISH TO PROSECUTE, COMPLETE THE ABOVE STATEMENT, READ THIS DISCLAIMER AND INITIAL BELOW: I AM OF LEGAL AGE AND I AM THE REPORTED VICTIM OF A CRIME UNDER FLORIDA LAW. I HEREBY STATE THAT I WILL NOT COOPERATE ANY FURTHER WITH THE INVESTIGATION OF THE ALLEGED CRIME. I FURTHER RELEASE THE PALM BEACH COUNTY SHERIFF'S OFFICE OF ANY PRESENT OR FUTURE RESPONSIBILITY AS TO MY CASE. I ACKNOWLEDGE THAT I UNDERSTAND MY RIGHTS AS A CRIME VICTIM, PARTICULARLY REGARDING VICTIM COMPENSATION ELIGIBILITY, WHICH INCLUDES SUCH BENEFITS AS REIMBURSEMENT FOR: DISABILITY; LOST WAGES; LOSS OF SUPPORT; MEDICAL, DENTAL, MENTAL HEALTH COUNSELING AND FUNERAL EXPENSES. I AM AWARE I MAY BE GIVING UP THESE RIGHTS FOR MY FAMILY AND MYSELF BY INITIALLING BELOW. I AM TAKING THIS POSITION OF MY OWN FREE WILL KNOWING THAT THE CASE CAN ONLY BE FURTHER INVESTIGATED AND PROSECUTED WITH MY COOPERATION. DO NOT WISH TO PROSECUTE WITH MY COOPERATION.

(PROSECUTION WAIVER NOT TO BE USED FOR CASES INVOLVING DOMESTIC OR DATING VIOLENCE PER G.O. 508.00)

WHITE - RECORDS COPY CANARY - STATE ATTORNEY COPY PINK - OFFICER'S COPY GOLD - WITNESS / NOV 16 2017

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: Cross, Leslie Diane CASE NUMBER: 17-150622

DATE: 11/12/17 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 0141 ENDING TIME: 0154

BREATH TESTS RESULTS: 1) .215 TIME 0149 A.M./P.M. 2) .208 TIME 0152 A.M./P.M.
3) TIME A.M./P.M. 4) TIME A.M./P.M.

BREATH OPERATOR: S. Owen #3184

MAINTENANCE TECHNICIAN: J. Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: _____

ATTITUDE: quiet, cooperative

CLOTHING: black shoes, black pants, top jacket, glasses

MEDICAL CONDITIONS: none

MEDICATIONS: none

OTHER: per A/O Δ defecated on self
52 yoa bloodshot eyes strong odor
of self (above)

COMMENTS: A/O Δ arrived at 0121 hr.
A/O observed 20 minutes
A/O requested breath test, Δ asked consequences
A/O read I.C., Δ didn't understand
A/O explained Δ understood, Δ agreed
tech demonstrated no problems w/test.
tech explained results Δ plead 5th
on scene so no Q&A

SCANNED
NOV 16 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 INV. FICARRA 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) Readon 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) Al 5th

SUBJECT: Cross, Leslie Diane CASE NUMBER: 17-150622

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? NOT

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? None

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? _____

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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: _____

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