0417683 18CT019015 2824

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number | 1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias | Juvenile: 1 | N

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
	PALM BEACH POLICE DEPARTMENT	18-001387

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☑ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Weapon Seized / Type: 1. Yes 2. No

Multiple Clearance Indicator: UK

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
300 BLK S OCEAN BLVD, PALM BEACH, FL 33480	300 BLK S OCEAN BLVD, PALM BEACH, FL 33480

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
10/19/18	0400					

DEFENDANT

Name (Last, First, Middle): WINKELS, MARY, E

Alias (Name, DOB, Soc. Sec. #, Etc.)

Race (W - White I - American Indian B - Black O- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	08/18/84	411	105	BRO	BRO	LIGHT	SMALL

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): NONE

Marital Status: S | Religion: NONE

Indication of: Alcohol Influence Y ☑ N ☐ Unk. ☐ | Drug Influence Y ☐ N ☐ Unk. ☑

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type: 1 City 2. County 3. Florida 4. Out of State
301 N O ST	LAKE WORTH	FL	33460	(561) 294-4292	2

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
301 N O ST	LAKE WORTH	FL	33460	( )	VERBAL

Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation
TOOJAYS				( )	SERVER

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
W524585847980	[redacted]		ROCHESTER, MN	US

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	1. Arrested 2. At Large	3. Felony 4. Misdemeanor 5. Juvenile
				☐ ☐	☐ ☐ ☐
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	1. Arrested 2. At Large	3. Felony 4. Misdemeanor 5. Juvenile
				☐ ☐	☐ ☐ ☐

JUVENILE

☐ Parent ☐ Legal Custodian ☐ 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 ☐ defendant and / or ☐ 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. ☐ 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. 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

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Driving Under the Influence	1	☐Y ☑N	316.193(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		18-001387		OR

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

FILED
OCT 20 2018
SHARON R. BOCK
Clerk & Comptroller

NOTICE TO APPEAR

Location (Court, Room Number, Address): CRIMINAL JUSTICE COMPLEX, 3228 GUN CLUB RD, WEST PALM BEACH FL 33411

Court Date and Time: Month November Day 8TH Year 2018 Time 0830 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) | Date Signed

ADMIN

HOLD for other Agency Name | Signature of Arresting Officer: X Dean Morea

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Name of Arresting Officer (Print): Dean Morea I.D. #: 9130 9130

Name Verification (Printed by Arrestee) (PRINT) | OCT 19 PM 8:15

Intake Deputy	I.D. #	Pouch #	Transporting Officer	ID #	Agency
			Dean Morea	9130	PBPD

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)

PBSO 6148 REV. 6/07

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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 19TH DAY OF OCTOBER 20 18, AT 0400 ✓ AM PM

SUBJECT: WINKELS, MARY, E CASE NUMBER: 18-001387

AGENCY: PALM BEACH POLICE DEPARTMENT ARRESTING OFFICER: Dean Morea

PERSONAL CONTACT

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

I observed a vehicle traveling at a high rate of speed eastbound in the 200 block of Royal Palm Way with no lights on. I got behind the vehicle, a Honda SUV bearing FL Tag: 444PAN. I initiated a traffic stop on this vehicle in the 300 block of S Ocean Blvd, Palm Beach, FL 33480. I made contact with the driver, identified to me verbally as Mary E Winkels (W/F, DOB: 08/18/84).

OBSERVATION OF DRIVER:

Upon contact with the driver, I immediately smelled an odor of alcohol emanating from Winkels breath. Winkels speech was slurred and her eyes were very red. Winkels lost her balance when I had her exit the vehicle and walk to me.

DRIVER'S STATEMENTS:

Winkels stated that she did not realize she was driving with no lights on. Winkels stated that she was out in downtown West Palm Beach at O'Shays Bar. Winkels stated she had a shot of fireball, some beer and a drink with patron in it. When I asked Winkels to step out of the vehicle she stated that she can just get an Uber home.

ODORS:

Smell of alcohol.

GENERAL OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Very talkative, disruptive

CLOTHING: Black shirt, Blue Jeans, Black sneakers

MEDICAL/OTHER: None

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STATE OF FLORIDA
COUNTY OF PALM BEACH

Dean Morea
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 19 day of October 20 18 by OFC. MOREA

(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)

Notary Public State of Florida
Samantha Palmer
My Commission GG 233782
Expires 10/28/2022

SUBJECT: WINKELS, MARY, E CASE NUMBER 18-001387

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:

Winkels was swaying during the task, moving her head and making facial expressions and smiling.

WALK & TURN

Winkels was swaying, used her arms for balance, did not stay in the proper position during the instruction phase, did not touch heel to toe, made an improper turn, took more than 9 steps and did not count her steps out loud. Winkels also grabbed onto a pole to help her balance.

ONE LEG STAND:

Winkels was swaying and used her arms for balance, counted fast.

FINGER TO NOSE:

Winkels was swaying

ROMBERG ALPHABET:

Winkels was swaying and at first attempted to verbalize the alphabet very quietly and very fast. Winkels also switched the letters "M" AND "N".

BREATH TEST RESULTS: 0.188 / 0.165 / 0.166

STATE OF FLORIDA
COUNTY OF PALM BEACH

Dean Morea
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 19 day of October 20 18 by OFC. MOREA

(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)

Notary Public State of Florida
Samantha Palmer
My Commission GG 233782
Expires 10/28/2022

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FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006240 Software: 8100.27
Date of Test: 10/19/2018

Date of Last Agency Inspection: 09/07/2018
Observation Period Began: 04:20
Subject's Name: MARY E WINKELS DOB: 08/18/1984 Sex: F

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	04:47
Air Blank	0.000	04:47
Control Test	0.080	04:48
Air Blank	0.000	04:48
Subject Sample #1	0.188	04:49
Air Blank	0.000	04:49
Air Blank	0.000	04:51
Subject Sample #2	0.165	04:53
Air Blank	0.000	04:53
Air Blank	0.000	04:55
Subject Sample #3	0.166	04:56
Air Blank	0.000	04:56
Control Test	0.079	04:57
Air Blank	0.000	04:57
Diagnostics Check	OK	04:57

Cylinder Lot: 05218080A3
Exp: 05/05/2020

State of Florida, County of Palm Beach.

Personally appeared before me the undersigned authority, who (✓) is personally known to me or (__) produced _____ as identification, and who after being placed under oath, states:

I SAMANTHA M PALMER, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____ Date: 10/19/18
Signature

Sworn to (or affirmed) before me this 19 day of October, 2018

_____ OFC. MOREA # 9138
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 18-134782 PBSO ZONE 3-22

AGENCY CASE # 18-001387 CRASH CASE # N/A

TIME OF STOP/CRASH 0324 DATE 10/19/18 DAY Fri

SUBJECT'S NAME Mary Winkels RACE W SEX F

HGT 501 WGT 105 DOB 08 / 18 / 84

LOCATION 300 blk S Ocean Blvd, Palm Beach, FL 33480

ARRESTING OFFICER'S NAME & ID Moren 9130 AGENCY PBPD

DIVISION: Patrol

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 4:20 am

ARREST TIME 0400

BREATH RESULTS:

1. .188
2. .165
3. .166
4. N/A

TESTING OFFICER'S ID 24520 PBSO VIDEOTAPE # N/A

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TESTING FACILITY TASK REPORT

AGENCY: PBPD/MOREA

SUBJECT: WINKELS, MARY

CASE NUMBER: 18-134782

DATE: Oct 19, 2018

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0445

ENDING TIME: 0505

BREATH TESTS RESULTS: 1) .188 TIME 0449 A.M. ☒ P.M. ☐ 2) .165 TIME 0453 A.M. ☒ P.M. ☐

3) .166 TIME 0456 A.M. ☒ P.M. ☐ 4) XX TIME XX A.M. ☐ P.M. ☐

BREATH OPERATOR: S. PALMER #24520

MAINTENANCE TECHNICAN: J Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: TALKATIVE, RAMBLING, CAREFREE

CLOTHING: BLACK SHIRT, BLUE JEANS, BLACK SHOES

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES GLASSY AND BLOODSHOT, ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH, ADMITTED TO DRINKING BEER AND TAKING A SHOT (Q&A)

COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0420
SUBJECT AGREED TO TAKE A BREATH TEST
AND PROVIDED TWO ADEQUATE BREATH SAMPLES SUCCESSFULLY
TECH READ TEST RESULTS
SUBJECT STATED SHE UNDERSTOOD RESULTS
A/O READ RIGHTS
SUBJECT STATED SHE UNDERSTOOD RIGHTS
A/O CONDUCTED Q&A
SUBJECT ANSWERED QUESTIONS

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WITNESS LIST

CASE NUMBER: 18-001387

ARRESTING OFFICER: Dean Morea

ADDRESS: 345 South County Rd. Palm Beach, Fl 33480

PHONE NUMBERS (HOME): (561)838-5454 (WORK) _____

CAN TESTIFY TO: Arrest and Traffic Stop and SFST's

NAME: Officer Maccarone

ADDRESS: 345 South County Rd. Palm Beach, Fl 33480

PHONE NUMBERS (HOME) (561) 838-5454 (WORK) _____

CAN TESTIFY TO: Arrest and Traffic Stop and SFST's

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: _____

NOT A CERTIFIED COPY

SUBJECT: _____ CASE NUMBER: _____

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? _____

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: _____

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SUBJECT: _____ CASE NUMBER: _____

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.

SUSPECT'S SIGNATURE: (X)_____

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PALM BEACH COUNTY
SHERIFF'S OFFICE

Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐	539.001, F.S., 539.003, F.S.	Other: Pawn Broker Information	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2018034966	**Date:** 10/20/2018
	Specialist Name/ID: M. Tooks #8557