

0497065

ARREST / NOTICE TO APPEAR

N/P

1310

1805800

A D M I N I S T R A T I O N	OBTS Number		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 5 4 18-001804		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias		JUVENILE			
	Agency ORI Number 0501700		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		If Weapon Seized Enter Type NONE		Multiple Clearance Indicator					
D E F E N D A N T	Location of Arrest (Including Name of Business) 17443 S CENTRAL BLVD, JUPITER FL, 33458				Location of Offense (Business Name, Address) 17443 S CENTRAL BLVD, JUPITER, FL 33458							
	Date of Arrest 03/31/2018	Time of Arrest 19:03	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle		Alias (Name, DOB, Soc. Sec. #, Etc.)			
D E F E N D A N T	Name (Last, First, Middle) WAJDA, NANCY MARGARET		Sex F		Date of Birth 06/21/1941	Height 5'04	Weight 134	Eye Color BLUE	Hair Color BLONDE /	Complexion LIGHT	Build Thin	
	Race W - White B - Black W		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status O	Religion CATHOLIC	Indication of: Alcohol Influence Drug Influence <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>		Residence Type: 1. City 2. County 3. Florida 4. Out of State 1			
	Local Address (Street, Apt. Number) 2062 KEYSTONE DR S A, JUPITER, FL 33458		(City) (State) (Zip)		Phone (561) 301-6223		Address Source FL DL		Occupation Retail Assc			
	Permanent Address (Street, Apt. Number) 2062 KEYSTONE DR S A, JUPITER, FL 33458		(City) (State) (Zip)		Phone (561) 301-6223							
	Business Address (Name, Street) PALM BEACH GOLF CENTER, MILITARY TRL		(City) (State) (Zip)		Phone							
	D/L Number, State W230633417210 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) WINCAGNDON, MA,		Citizenship			
C O D E F	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		
J U V E N I L E	Parent <input type="checkbox"/> Other <input type="checkbox"/>		Name (Last, First, Middle)		Residence Phone		Business Phone					
	Legal Custodian <input type="checkbox"/>		Address (Street, Apt. Number)		(City) (State) (Zip)							
	Notified by: (Name)		Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated							
	Released To: (Name)		Relationship	Date	Time							
The above address was 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's Office (Phone 355-2526) informed of any change of address.		School Attended		Grade		Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property		
C O D E	Drug Activity S. Sell N. N/A P. Possess		R. Smuggle D. Deliver E. Use		K. Disperses/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other		Drug Type N. N/A A. Amphetamine	
	B. Buy T. Traffic		H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetic		U. Unknown Z. Other					
C H A R G E	Charge Description DUI - PERSONAL INJURY/PROPERTY DAMAGE		Statute Violation Number 316.193(3)(4)(B)(C)(1)		Violation of ORD #							
	Drug Activity	Drug Type N	Amount / Unit /	Offense # 18-001804	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number		Bond			
	Charge Description		Statute Violation Number		Violation of ORD #							
C H A R G E	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number		Bond			
	Charge Description		Statute Violation Number		Violation of ORD #							
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number		Bond			
I N T A K E	Health / Apparent Physical Condition of Defendant		Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries Explain:		PROPERTY - Received By		Released By		Released To			
	Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond		<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health		<input type="checkbox"/> T.O.T. County Jail		Date Transported		Time Transported		Other	
N O T I C E T O A P P E A R	<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.		Location (Court, Room) North County PALM BEACH GARD		Court Date and Time 05/02/2018 08:30:00						No Photo Available	
	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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.		Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed							
A D M I N	HOLD for Other Agency		Signature of Arresting Officer L. Rocha 322/1177		Name Verification (Printed by Arrestee) MAR 31 2018 10:10 AM						# 38	
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) ROCHA, LUIS		I.D. # 1177		Agency JPD		PAGE 1 OF 1	
D/S B. SHATARA #7623		Transporting Officer L. Rocha		I.D. # 327		Agency JPD		Witness here if subject signed with an "X"				

AGENCY CENTRAL RECORDS JAIL CRIME ANALYSIS

SCANNED APR 02 2018

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 31 DAY OF March 20 18, AT 1739 AM PM

SUBJECT: WAJDA NANCY M CASE NUMBER: 18-001804

AGENCY: JUPITER POLICE DEPARTMENT ARRESTING OFFICER: Luis Rocha
PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)
Wajda was involved in a minor traffic accident where she was found at fault. Wajda was cited for following too closely.

OBSERVATION OF DRIVER:

I observed Wajda to be unsteady on her feet. Wajda would lean to the left and right while I was speaking with her and would appear to trip slightly over her own feet. Wajda appeared to have droopy/sleepy eyes. Wajda was slow with her hand coordination when handling documents.

DRIVER'S STATEMENTS:

Wajda stated that she was at dinner in Tequesta. Wajda could not recall the name of the restaurant only that it was located on US Highway 1. Wajda told me that she had one glass of wine with dinner. Wajda said that she was on her way home from the restaurant.

ODORS:

I could smell an odor of an unknown alcoholic beverage coming from her person.

GENERAL OBSERVATIONS

SPEECH: Slow, mumbled

ATTITUDE: Cooperative, non-confrontational

CLOTHING: teal pants, teal/yellow blouse, and yellow sandals.

MEDICAL/OTHER: Later at the BAT Wajda stated that she was recently told by her doctor that she had a problem with her head and needed follow up exams. Wajda could not explain symptoms or effects it was causing.

STATE OF FLORIDA
COUNTY OF PALM BEACH

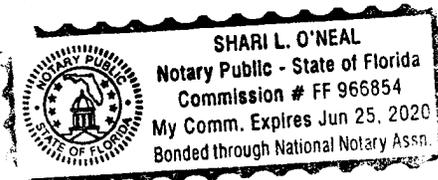
Luis Rocha

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 31 day of March 20 18 by Luis Rocha

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

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



SCANNED
APR 02 2018

SUBJECT: WAJDA

NANCY

CASE NUMBER 18-001804

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

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

Other Observations:

During the HGN Wajda swayed while standing in place. Wajda at times would not be looking where instructed and had to repeatedly told to keep her head still.

WALK & TURN:

Wajda was asked several times if the sandals she was wearing would hinder her from walking, she first chose to leave them on but later would take them off. Wajda could not stay in the position she was instructed to stay in while I explained the task. Step 2 Wajda stepped off the line. Wajda did not start to count out loud until step 5 where she said "6". Wajda counted 9 steps but only took 8. Wajda did not touch heel to toe on steps 2 and 8. Wajda turned as instructed. Wajda raised her arms and kept them up for most of the task. Wajda did not touch heel to toe on the return steps 2, 3 and 9.

ONE LEG STAND:

Wajda swayed slightly back and forth while I was giving her instructions. Wajda placed her foot on the ground when she counted "1009". Wajda was not able to keep her foot at 6 inches from the ground. Wajda placed her foot and raised her left arm into the air when she counted to "1017". Wajda lost balance when she counted to "1023" and placed her foot on the ground at "1024".

FINGER TO NOSE:

Wajda had to repeatedly told to put her head back and close her eyes for the task. L1, she completely missed her face, she then touched the bridge of her nose, and lastly touched the pad of her finger to the front of her nose. R1, she touched the pad of her finger to the side of her nose. L2, she touched the pad of her finger to the front of her nose. Wajda was unable to keep her head back for the remainder of the task. R2, she lifted her left hand slightly before switching to her right and touched the pad of her finger to the front of her nose. R3, she touched the pad of her finger to the front of her nose. L3, she touched the pad of her finger to the side of her nose.

ROMBERG ALPHABET:

Wajda was swaying slightly while standing in the instructed position. Wajda stated the following A, B, C, D, E, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z. Wajda could keep her head back during the task.

BREATH TEST RESULTS: 1) .040 2) .038 3) 4)

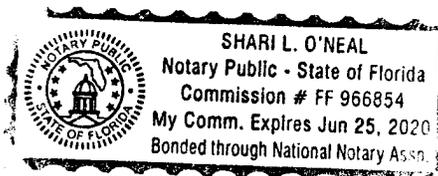
STATE OF FLORIDA
COUNTY OF PALM BEACH

Luis Rocha
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 31 day of March 20 18 by Luis Rocha

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

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



SCANNED
APR 02 2018

WITNESS LIST

CASE NUMBER: 18-001804

ARRESTING OFFICER: Luis Rocha

ADDRESS: 210 MILITARY TRL, JUPITER FL 33458

PHONE NUMBERS (HOME): 561-746-6201 (WORK) _____

CAN TESTIFY TO: Statements made on scene, roadside tasks and driver observations

NAME: _____

ADDRESS: 210 MILITARY TRL, JUPITER FL 33458

PHONE NUMBERS (HOME) 561-746-6201 (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: _____

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: _____

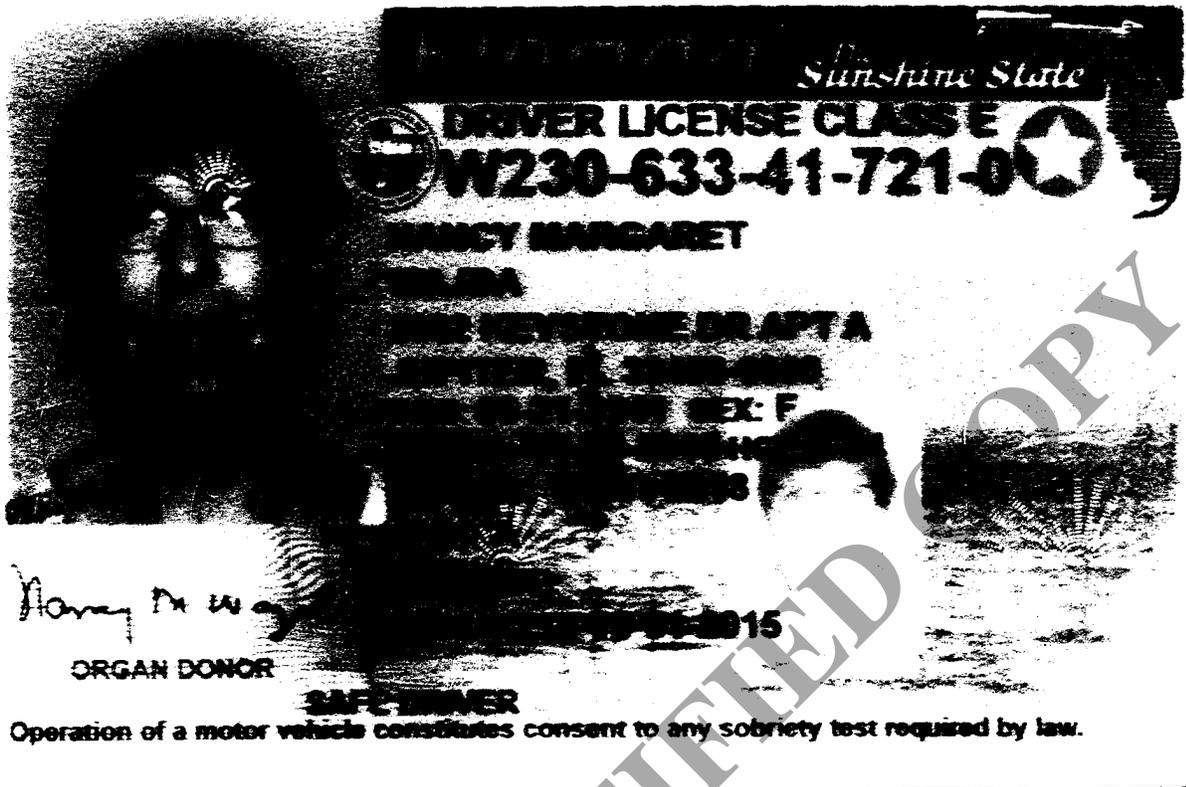
ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NOT A CERTIFIED COPY

SCANNED
APR 02 2018



Sunshine State

DRIVER LICENSE CLASS E

W230-633-41-721-0

NANCY MARGARET

WRAY

DOB: 07-05-1953

SEX: F

Nancy M Wray

ORGAN DONOR

SAFE DRIVER

Operation of a motor vehicle constitutes consent to any sobriety test required by law.

NOT A CERTIFIED COPY

SCANNED

APR 02 2018

SUBJECT: WASDA, Nancy M. 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? yes

WHERE WERE YOU GOING? Home, 2062 A Keystone

WHAT STREET OR HIGHWAY WERE YOU ON? Indiantown

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? Saturday

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? Dinner, 5-530pm WHAT DID YOU EAT? Mashed Potatoes, collie beans, lamb

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? 1 glass wine WHERE? Truck on US1 WITH WHOM? alone

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? No ARE YOU UNDER THE INFLUENCE? Yes

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? _____

SCANNED
APR 02 2018

INTERVIEWER: _____

SUBJECT: WASDA, NANCY M. 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 refuse 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.

SUSPECT'S SIGNATURE: (X) _____

READ ON CAMERA

SCANNED
APR 02 2018

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

TESTING FACILITY TASK REPORT

AGENCY: JPD
 SUBJECT: WASDA, Nancy M CASE NUMBER: 18-056887
 DATE: 03/31/18 VIDEO TAPE NUMBER: N/A
 BEGINNING TIME: 2000 ENDING TIME: 2018
 BREATH TESTS RESULTS: 1) .040 TIME 2005 A.M. (PM) 2) .038 TIME 2008 A.M. (PM)
 3) N/A TIME --- A.M./P.M. 4) N/A TIME --- A.M./P.M.

BREATH OPERATOR: G PARENT #7909
 MAINTENANCE TECHNICIAN: KARLUKKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: PRONOUNCED
 ATTITUDE: CALM, QUIET, CO OPERATIVE
 CLOTHING: TEAL PANTS, TEAL + YELLOW BLOUSE, GOLD SANDALS
 MEDICAL CONDITIONS:
 OTHER: EYES GLASSY,

A ADMITTED TO DRINKING A GLASS OF WINE (Q+A)
RIGHTS ADVISED AT CENTER A/O BEGAN THE 20 MINUTE
RESTRICTION PERIOD AT 1936 HRS.

A AGREED TO TAKE TEST
TECH READ BREATH TEST - RESULTS A STATED SHE
UNDERSTOOD TEST RESULTS
A/O ASKED A TO PROVIDE A URINE SAMPLE
A AGREED TO PROVIDE A URINE SAMPLE AT 2011 HRS
A/O READ I/C A STATED SHE UNDERSTOOD AND AGREED TO PROVIDE
A URINE SAMPLE
A/O READ RIGHTS
A STATED SHE UNDERSTOOD RIGHTS

A/O CONDUCTED Q+A

SCANNED
 APR 02 2018

A ANSWERED QUESTIONS
DRE EVAL DONE BY OFFICER BORROWS JPD
 WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL