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ARREST / NOTICE TO APPEAR

OBTS Number	Agency ORI Number 0501700		Agency Name Jupiter Police Department	Agency Report Number (N.T.A.'s only) 514 17-005254	1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
Charge Type: Check as many as apply	<input 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	If Weapon Seized	Enter Type NONE	Multiple Clearance Indicator		
Location of Arrest (Including Name of Business) 6299 W INDIANTOWN RD/PALM RD				Location of Offense (Business Name, Address) 6299 W INDIANTOWN RD/PALM RD, JUPITER, FL 33458				
Date of Arrest 11/03/2017	Time of Arrest 21:32	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle		

Name (Last, First, Middle) REILLY, NATALIE		Alias:		Alias (Name, DOB, Soc. Sec. #, Etc.)						
Race W - White B - Black	I - American Indian O - Oriental/Asian	Sex W	F F	Date of Birth 01/26/1969	Height 5'00	Weight 156	Eye Color GREEN	Hair Color BLONDE /	Complexion FAIR	Build Medium
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT R FOOT / ALEXANDER				Marital Status S	Religion OTHER	Indication of: Alcohol Influence Drug Influence		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>		
Local Address (Street, Apt. Number) (City) (State) (Zip) 9208 166 WAY N, JUPITER, FL 33478				Phone (561) 307-1407		Residence Type: 1. City 3. Florida 2. County 4. Out of State		2		
Permanent Address (Street, Apt. Number) (City) (State) (Zip) 9208 166 WAY N, JUPITER, FL 33478				Phone (561) 307-1407		Address Source FL DL				
Business Address (Name, Street) (City) (State) (Zip)				Phone		Occupation Nurse				
D/L Number, State R400620695260 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) MIAMI, FL, United		Citizenship US		

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	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 Department and Released 2. TOT JAC 3. Incarcerated		
Released To: (Name)		Date	Time			

The above address was provided by defendant and/or 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.

Yes, by: No:

Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Dispenses/ 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. Synthetic	U. Unknown Z. Other
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Charge Description BATTERY - ON OFFICER, FIREFIGHTER, EMT ETC.						Statute Violation Number 784.07(2)(B)	Violation of ORD #
Drug Activity N	Drug Type N	Amount / Unit /	Offense # 17-005254	Counts I	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number	Bond
Charge Description DUI - DRIVING WHILE UNDER INFLUENCE						Statute Violation Number 316.193(1)	Violation of ORD #
Drug Activity N	Drug Type N	Amount / Unit /	Offense # 17-005254	Counts I	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number	Bond
Charge Description REFUSE TO ACCEPT SIGN CITATION OR POST BOND						Statute Violation Number 318.14(3)	Violation of ORD #
Drug Activity N	Drug Type N	Amount / Unit /	Offense # 17-005254	Counts I	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number	Bond

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			
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health				PROPERTY - Received By		Released By	
Transported By				Date Transported	Time Transported	Other NOV 4 AM 2:19	

<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court	Location (Court, Room)
<input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.	Court Date and Time
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.	
Refused	No Photo Available
Signature of Defendant (or Juvenile and Parent/Custodian)	Date Signed

HOLD for Other Agency	Signature of Arresting Officer Christy 340	Name Verification (Printed by Arrestee)
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input checked="" type="checkbox"/> Suicidal <input type="checkbox"/> Other	Name of Arresting Officer (Print) FANDREY, CHRISTOPHER	(PRINT)
Intake/Deputy Spann 8101	Transporting Officer Christy	Agency 340 JPD
Witness here if subject signed with an "X"		PAGE 1 OF 1

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

A D M I N	OBTs Number		Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 5 4 17-005254	
	Charge Type: Check as many as apply.		<input checked="" type="checkbox"/> 1. Felony		<input checked="" 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	

D E F	Name (Last, First, Middle) REILLY, NATALIE				Alias	Race W	Sex F	Date of Birth 01/26/1969
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C H A R G E S	Charge Description 784.07(2)(B) BATTERY - ON OFFICER, FIREFIGHTER, EMT ETC.				Charge Description 316.193(1) DUI - DRIVING WHILE UNDER INFLUENCE			
	Charge Description 318.14(3) REFUSE TO ACCEPT SIGN CITATION OR POST B				Charge Description			

V I C T I M	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 . . .

committed the below acts in my presence. was observed by _____ who told _____ that he/she saw the arrested person committ 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 3 day of November, 2017 at 20:36 (Specifically include facts constituting cause for arrest.)

On 11/3/17 at approximately 2027hrs I was dispatched as a backup officer for a traffic stop at W. Indiantown Rd/Palm Rd Jupiter Florida. Upon arrival I made contact with Ofc. Zesut #312 who advised that he conducted a traffic stop on a white Toyota bearing FL Tag HWEP72 for straddling the middle and inside lanes and driving with no headlights. Ofc. Zesut stated that he observed the driver and sole occupant, who was later identified as W/F Natalie Reilly (1/26/69), slurring her speech and had the odor of an unknown alcoholic beverage coming from her person. Ofc. Zesut also stated that Reilly had admitted to drinking at the Dive Bar.

I then made contact with Reilly and began to speak with her. I immediately noticed the odor of an unknown alcoholic beverage coming from her person. Reilly had red bloodshot glassy eyes and was slurring her speech as she spoke to me. Reilly stated that she had one beer and two martinis earlier in the night at the Dive Bar (which is a bar on S US Highway 1 in Jupiter Florida). Reilly stated that she was at a 2-3 on a scale from 1-10 with 1 being completely sober and 10 being the most intoxicated in her life. Reilly also stated she felt comfortable driving. Based on my observations of Reilly I asked her to step out of the vehicle to which she complied. While exiting the vehicle Reilly had to use her arms to balance as she exited the vehicle. Reilly was swaying while she walked to the front of my patrol car. Reilly stated that she had a traumatic brain injury and got severe headaches from the flashing lights. I had Reilly face away from all flashing lights while speaking with her. Reilly again stated that she had a beer and a couple of drinks earlier in the night. At this point I asked Reilly to conduct Standardized Field Sobriety Tasks (SFSTs) to ensure that she was ok to be driving. Reilly stated that she did not wish to complete SFSTs. I informed Reilly of her Taylor Warnings informing her that her refusal to complete SFSTs can be used against her in court and that she would be forcing me to make a decision based on the investigation up to that point on if I would be arresting her or not. Reilly again refused SFSTs stating that her lawyer has always told her to refuse SFSTs. Based on the totality of the circumstances I developed

A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER	
	<u>MATONTI, JOHN</u> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		<u>FANDREY, CHRISTOPHER (1182)</u> NAME OF OFFICER (PLEASE PRINT)	
	<u>11/03/2017</u> DATE		<u>11/03/2017</u> DATE	
			PAGE 1 OF 3	

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

1. Arrest
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JUVENILE

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		<input type="checkbox"/> 2. Traffic Felony		<input checked="" type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 6. Other			
D E F		Name (Last, First, Middle) REILLY, NATALIE					Race W	Sex F	Date of Birth 01/26/1969

probable cause to arrest and charge Reilly with DUI pursuant to Florida State Statutes. Reilly was advised that she was being arrested and was placed into handcuffs which were double locked and checked for spacing. Reilly was then placed into the back seat of my patrol car until Ofc. Raleigh #308 responded and conducted a female search. While conducting the search Ofc. Raleigh removed a necklace from Reilly and then Reilly immediately started crying and getting extremely upset. Reilly was later placed into the back seat of my patrol car and secured by the seatbelt. While I completed a search of Reilly's vehicle to check for any personal property Ofc. Raleigh stood by with Reilly. Upon walking back to my patrol car an unknown W/F approached the traffic stop and stated that she was a friend of Reilly's and wanted to help park her vehicle if possible. At this point Ofc. Raleigh stated that Reilly had made statements about wanting to die and had passed out. We immediately checked for a pulse which was located however Reilly was not conscious. Attempts to awaken Reilly were made several times with negative results. Palm Beach County Fire Rescue responded (Run #17-118862) and advised that they would transport Reilly to Jupiter Medical Center (JMC).

I then responded to JMC and while at the hospital one of the Nurses W/M Tracy Radewitz (10/20/1970) was attempting to provide medical treatment when I observed Reilly swing her lower body and attempt to kick the nurse with her left foot in his head. Reilly's left foot made contact with Radewitz's right shoulder. Reilly also grabbed Radewitz and dug her nails into his arm. A photo of his injuries was later submitted into Jupiter Police Evidence. Several officers and nurses immediately responded and Reilly was further restrained to the hospital bed. Reilly was being extremely combative and verbally abusive towards officers and medical staff throughout the entire encounter. Radewitz stated he wished to prosecute Reilly for battery on a nurse and completed a sworn written statement.

Based on the unknown length of time waiting for medical clearance for jail it was impractical to wait to request a breath test that would give an accurate result of her BAC at the time of the traffic stop. Therefore I asked Reilly to provide a blood sample for the purpose of determining the alcohol content. Reilly said no. I then read implied consent and Reilly again refused at approximately 2210hrs.

Reilly was later medically cleared and after completion of the proper paperwork was transported to the Palm Beach County Jail. PBCJ staff was notified of her suicidal statements. This incident was captured on my Jupiter Police Department Issued Vehicle Dashcam and a copy was later placed into Jupiter Police Evidence.

W/F Natalie Reilly did drive or was in actual physical control of a vehicle, while under the influence of alcoholic beverages or chemical substances as set forth in Florida Statute 877.111, or a controlled substance as set forth in Florida Statute 893 or any combination thereof, and was affected to the extent that his/her normal faculties were

A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER	
	MATONTI, JOHN		<i>Christopher 348</i>	
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		FANDREY, CHRISTOPHER (1182)	
	11/03/2017		NAME OF OFFICER (PLEASE PRINT)	
DATE		11/03/2017		
		DATE		

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	FL 0501700		JUPITER POLICE DEPARTMENT		5 4 17-005254	
Charge Type: Check as many as apply.					Special Notes:	
<input checked="" type="checkbox"/> 1. Felony <input checked="" 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						

D E F	Name (Last, First, Middle)				Race	Sex	Date of Birth
	REILLY, NATALIE				W	F	01/26/1969

impaired; or while having a blood or breath alcohol level of .08 or higher, contrary to Florida Statute 316.193(1).

W/F Natalie Reilly (1/26/69) did actually and intentionally touch or strike *(Tracy Radewitz) against the will of *(Tracy Radewitz) {or} did intentionally cause bodily harm to *(Tracy Radewitz), an emergency medical care provider, while *(Tracy Radewitz) was engaged in the lawful performance of a duty and when *(Natalie Reilly) knew or had reason to know the identity or employment of *(Tracy Radewitz), contrary to Florida Statutes 784.03(1) and 784.07(1)(c) and (2)(b)

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	MATONTI, JOHN NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		 FANDREY, CHRISTOPHER (1182)	
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