

0495319

2018 CF 0008912

3448 (V)

OBTS Number				ARREST / NOTICE TO APPEAR Juvenile Referral Report				1. Arrest 3. Request For Warrant 2. N.T.A. 4. Request For Capias				1		N							
Agency ORI Number <b>FLO 5 0 0 0 0</b>				Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>				Agency Report Number <b>06 18032469</b>													
Charge Type <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other				If Weapon Seized				Multiple Clearance Indicator				0		3							
Location of Arrest (Including Name of Business) <b>9897 Lake Worth</b>				Location of Offense (Including Name of Business) <b>Lake Worth, FL, 33467</b>				<b>9897 Lake Worth</b>				<b>Lake Worth, FL, 33467</b>									
Date of Arrest <b>Jan 29, 2018</b>		Time of Arrest <b>2238</b>		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle									
Name (Last, First, Middle) <b>Sowers Patricia M</b>								Alias (Name, DOB, Soc. Sec. #, Etc.)													
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian		Sex <b>F</b>		Date of Birth <b>12/27/1959</b>		Height <b>5'8</b>		Weight <b>150</b>		Eye Color <b>Brown</b>		Hair Color <b>Brown</b>		Complexion <b>Light</b>		Build <b>Thin</b>					
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>None</b>				Marital Status <b>Married</b>		Religion <b>Catholic</b>		Indication of Alcohol Influence <input type="checkbox"/>		Indication of Drug Influence <input type="checkbox"/>		Y <input type="checkbox"/>		N <input type="checkbox"/>		Unit <input checked="" type="checkbox"/>					
Local Address (Street, Apt. Number) <b>8269 ELEUTHERA LN</b>				City <b>Wellington</b>		State <b>FL</b>		Zip <b>33413</b>		Phone <b>612-964-5634</b>		Residence Type 1. City 3. Florida 2. County 4. Out of State		2							
Permanent Address (Street, Apt. Number) <b>8269 ELEUTHERA LN</b>				City <b>Wellington</b>		State <b>FL</b>		Zip <b>33413</b>		Phone <b>612-964-5634</b>		Address Source <b>Verbal</b>									
Business Address (Street, Apt. Number)				City		State		Zip		Phone		Occupation <b>Retired</b>									
DL Number, State <b>S-620-693-59-967-0</b>				Social Security Number				INS Number				Place of Birth <b>Minnesota, Minneapolis</b>		Citizenship <b>U.S.A</b>							
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		1. Arrested <input type="checkbox"/>		2. At Large <input type="checkbox"/>		3. Felony <input type="checkbox"/>		4. Misdemeanor <input type="checkbox"/>					
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		1. Arrested <input type="checkbox"/>		2. At Large <input type="checkbox"/>		3. Felony <input type="checkbox"/>		4. Misdemeanor <input type="checkbox"/>					
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other		Name (Last, First, Middle)				Address (Street, Apt. No.)				City		State		Zip		Business Phone					
Notified By (Name)				Date		Time		Juvenile Deposition 1. Handled/Processed within Dept. and Released		2. TOT HR&DAYS		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 561 355-2526) informed of any address change <input type="checkbox"/> Yes, by (Name) <input type="checkbox"/> No (Reason)				School Attended				Grade													
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 C, Cultivate		Z, Other		Drug Type N, N/A A, Amphetamine		B, Barbiturate C, Cocaine E, Heroin		H, Hallucinogen M, Marijuana		P, Paraphernalia/ Equipment		U, Unknown Z, Other	
Charge Description <b>Battery on a Law enforcement Officer</b>				Counts <b>2</b>		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number <b>784.07(2)R (26)</b>		Violation or ORD. #											
Drug Activity <b>N</b>		Drug Type <b>N</b>		Amount/Unit		Offense # <b>18032469</b>		Warrant/Capias Number		Bond											
Charge Description <b>Disorderly Intoxication</b>				Counts <b>01</b>		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number <b>856.01(1)</b>		Violation or ORD. #											
Drug Activity <b>N</b>		Drug Type <b>N</b>		Amount/Unit		Offense # <b>18032469</b>		Warrant/Capias Number		Bond											
Charge Description				Counts		Domestic Violence		Statute Violation Number		Violation or ORD. #											
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond											
Charge Description				Counts		Domestic Violence		Statute Violation Number		Violation or ORD. #											
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond											
Location (Court, Address, Room Number)																					
Court Date and Time Month _____ Day _____ Year _____ Time _____ AM <input type="checkbox"/> PM <input type="checkbox"/>																					
I AGREE TO APPEAR AT THE ABOVE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT I SHOULD 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									
HOLD FOR Other Agency				Signature of Arresting Officer				Name Verification (Printed by Arrestee)													
Name <input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other				Name of Arresting Officer <b>D/S Laughniger</b>				(PRINT) <b>#241813</b> <b>29813</b>													
Inmate Deputy <b>On Hoxent 2204</b>				ID # Pouch #		Transporting Officer ID # <b>D/S Laughniger 29813</b>		Agency <b>PBSO</b>		Page <b>1</b> of <b>1</b>											

(113000 + 2)  
(2) OF

2018 JAN 30 AM 6:12  
SHERIFF'S OFFICE  
PALM BEACH COUNTY  
JAN 30 2018

SCANNED

JAN 30 2018

OBTS Number		<b>PROBABLE CAUSE AFFIDAVIT</b>		1. Arrest 2. N.T.A.	3. Request For Warrant 4. Request For Capias	1	Juvenile <input type="checkbox"/>
Agency ORI Number <b>FLO 5 0 0 0 0 0</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number <b>06</b>		<b>18032469</b>	
Charge Type Check as many as apply		Special Notes					
<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 _____							
Defendant Name (Last, First, Middle) <b>Sowers Patricia M</b>				Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>12/27/1959</b>	
Charge <b>Battery on a Law enforcement Officer</b>				Charge <b>Disorderly Intoxication</b>			
Victim Name (Last, First, Middle)				Race	Sex	Date of Birth	
Local Address (Street, Apt. Number)		City	State	Zip	Phone	Address Source	
Business Address (Street, Apt. Number)		City	State	Zip	Phone	Occupation	
The undersign 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 that he/she saw the arrested person commit the below acts.			
<input type="checkbox"/> confessed to admitting to the below facts.				<input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.			
On the <b>Jan</b> day of <b>29</b> 20 <b>18</b> at <b>10:38</b> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM							

On 1/29/18 at approximately 2238 hours, I responded to 9897 Lake Worth Rd, in unincorporated Lake Worth, Florida, 33467 in reference to a disturbance.

Upon my arrival, I observed a white male later identified as Bill Bruce laying on the ground in the parking lot of Bone Fish Grill who was accompanied by the defendant Patricia Sowers. While speaking to Bill, I observed Patricia to have a strong odor of an alcoholic beverage emitting from her breath and slurring her speech. While EMS was attending to her husband, Patricia was interfering with their check on Bill by grabbing him and preventing him from being examined on the stretcher by EMS. I advised Patricia to let them help her husband because he was highly intoxicated and needed to be examined by EMS. Patricia then replied "FUCK You, you cant tell me what to do". I then advised Patricia once again to let EMS attend to her husband in which she screamed "Fuck You, You cant do shit". I then placed handcuffs over the wrist of Patricia to detain her because she was becoming hostile to myself, D/S Wells and EMS. Once I detained Patricia and escorting her to the back seat of my marked PBSD patrol vehicle she then kicked me in my left shin with her left foot. While trying to place Patricia in the backseat of my patrol vehicle she then kicked D/S Wells in his upper groin area as well.

Based upon my investigation, I find probable cause exist where the defendant Patricia Sowers battered myself and D/S Wells while performing our duties as law enforcement officers contrary to F.S.S 784.07 (c)(1) also find probable exist where the defendant Patricia Sowers was intoxicated and endangered the safety of another person or property, and no person in the state shall be intoxicated or drink any alcoholic beverage in a public place or in or upon any public conveyance and cause a public disturbance contrary to F.S.S 856.011(1).

The foregoing instrument was sworn to and affirmed before me this <u>JAN</u> day of <u>29</u> 20 <u>18</u> , by:	
<u>O/S Wells</u> Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	<u>D/S Laughinger</u> 29813 Name of Arresting/Investigating Officer
<u>[Signature]</u> Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	<u>[Signature]</u> 029813 Signature of Arresting/Investigating Officer
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