ARREST / NOTICE TO APPEAR

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias 5. Juvenile Referral

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500200

Agency Name: Boca Raton Police Department

Agency Report Number (N.T.A.'s only): 3 2 2019-001999

Charge Type: Check as many as apply. [X] 1. Felony [ ] 2. Traffic Felony [X] 3. Misdemeanor [ ] 4. Traffic Misdemeanor [ ] 5. Ordinance [ ] 6. Other

If Weapon Seized: Enter Type: None/not Applicable

Multiple Clearance Indicator: N

Location of Arrest (Including Name of Business): 4000 N MILITARY TRL, BOCA RATON FL

Location of Offense (Business Name, Address): 4000 N MILITARY TRL, BOCA RATON, FL 33431

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
02/09/2019	01:16	02/09/2019	01:26			WESTWAY

DEFENDANT

Name (Last, First, Middle): BERTOLOZZI, RACHEL KATHRYN

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

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	06/09/1994	5'07	125	BROWN	BROWN	LIGHT	thin

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description):

Marital Status: S

Religion: CHRISTIAN

Indication of: Alcohol Influence [X] Yes [ ] No [X] Unk. [ ] Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 852 NW BROKEN SOUND PKWY 203, BOCA RATON, FL 33487

Phone: (561) 373-0096

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 1

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 852 NW BROKEN SOUND PKWY 203, BOCA RATON, FL 33487

Phone: (561) 373-0096

Address Source: SUBJECT

Business Address (Name, Street) (City) (State) (Zip):

Phone:

Occupation:

DL Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
B634731947090 / FL	[redacted]		CHICAGO, IL, United	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 [ ] Other: [ ] 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) Relationship | 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:

School Attended | Grade

Property Crime? [ ] Yes [X] 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. Disperse/ 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

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
DUI	316.193(1)			N	/		1	[ ] Y [X] N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
POSSESSION OF SCHEDULE II (DEXMETHYLPHENIDATE HYDROCHLORIDE)	893.13(6A)			N	/		1	[ ] Y [X] N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
					/			[ ] Y [ ] N		

INTAKE

Health / Apparent Physical Condition of Defendant: INTOXICATED

Any knowledge of the following: [ ] Mental [ ] Escape Risk [ ] Medication [ ] Deformities [ ] Injuries
Explain: NONE

Check which applies: [ ] Released O.R. [ ] Released to Parent/Guardian [X] T.O.T. County Jail [ ] Posted Bond [ ] South County Mental Health

PROPERTY - Received By | Released By | Released To

Transported By | Date Transported / / : : | Time Transported | Other

NOTICE TO APPEAR

[X] INSTRUCTION NO. 1 - Mandatory appearance in court
[ ] INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): South County 200 W Atlantic Ave Delray Beach, FL 33444

Court Date and Time: 03/11/2019 08:30:00

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.

x [signature] 2-9-19

Signature of Defendant (or Juvenile and Parent/Custodian) Date Signed

No Photo Available

2019 FEB 10 AM 10:

ADMIN

HOLD for Other Agency

[ ] Dangerous [ ] Resisted Arrest [ ] Suicidal [ ] Other

Intake Deputy I.D. # Pouch #

Signature of Arresting Officer: [signature]

Name of Arresting Officer (Print): MURPHY, B. J. I.D. # 751

Transporting Officer: LEONARD I.D. # 739 Agency: BRPD

Name Verification (Printed by Arrestee) (PRINT): Rachel Bertolozzi

Witness here if subject signed with an "X".

PAGE 1 OF 1

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PROBABLE CAUSE AFFIDAVIT

OBTS Number:

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

JUVENILE:

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FL 0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2019-001999

Charge Type: Check as many as apply.
- [X] 1. Felony
- [ ] 2. Traffic Felony
- [X] 3. Misdemeanor
- [ ] 4. Traffic Misdemeanor
- [ ] 5. Ordinance
- [ ] 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
BERTOLOZZI, RACHEL KATHRYN		W	F	06/09/1994

CHARGES

Charge Description	Charge Description
316.193(1) DUI	893.13(6A) POSS OF SCHEDULE II-DEXMETHYLPHENIDATE
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
STATE OF FLORIDA,			

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
100 NW 2ND AVE, BOCA RATON, FL 33432	(561) -	
Business Address (Name, Street) (City) (State) (Zip)	**Phone**	**Occupation**
	(56) -	

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable 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.
- [ ] confessed to _____ admitting to the below facts.
- [ ] was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.
- [X] was found to have committed the below acts, resulting from my (described) investigation.

On the 9 day of February, 2019 at 01:16 (Specifically include facts constituting cause for arrest.)

On 2/9/2019 at approximately 0044 hours, I responded to 4000 N Military Trail in reference to a traffic accident. Officer D Graham advised that a white Honda vehicle, bearing FL Tag#RACHELB, had just rear ended his marked Boca Raton Police Department vehicle, FL Tag#XD3522.

I arrived on scene and made contact with Officer D Graham and the W/F driver, later identified as Rachel Bertolozzi. As I began speaking to Bertolozzi, I was able to smell a strong odor of an alcohol beverage emitting from her person. Bertolozzi`s eyes were red and glassy and her speech was slurred. I then asked Bertolozzi to step out of the vehicle so I could speak to her. It should be noted that as she stepped out of the, Bertolozzi was unsteady on her feet and almost fell into her driver side door. I then had Bertolozzi step to the side of the road; during so, she was unsteady on her feet while walking. I asked Bertolozzi where she was coming from and she stated Rocco`s Tacos and that she had three drinks. See my accident investigation report for further on the accident.

After I completed my accident investigation, I explained to Bertolozzi that I was done with my accident investigation and was not going to be conducting a DUI investigation. I then read Bertolozzi her Constitutional Warnings from a pre-printed BRPD issued card and she stated she understood. Bertolozzi did not really answer my questions; however, when I restated the information she told me before, she agreed. I then asked Bertolozzi if she would submit to some road side exercises to dispel my alarm that she was driving under the influence. Bertolozzi began asking questions about the process and what would happen if she refused. I then explained to Bertolozzi my observations and her Taylor Warnings. I then requested Bertolozzi again to submit to some road side exercises to dispel my alarm that she was driving under the influence and she stated she would. I had Bertolozzi step in front of my marked unit and she did.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

WOLI SCHLAGER, ANTHONY J
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

02/09/2019
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

MURPHY, BRITTANIE JEAN (751)
NAME OF OFFICER (PLEASE PRINT)

02/09/2019
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL 0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2019-001999

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

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
BERTOLOZZI, RACHEL KATHRYN		W	F	06/09/1994

PROBABLE CAUSE STATEMENT

The first task was the horizontal gaze nystagmus. I explained the instructions and she stated she understood. She then began to complete the exercise. While observing her eyes I noticed, a lack of smooth pursuit that was present in both eyes, each eye had a constant jerking while at maximum deviation, and onset prior to 45 degrees was present in both eyes.

The second task was the walk and turn. I explained the instructions, demonstrated it, and she stated she understood. It should be noted that she started the exercise prior to being told. She did not maintain the starting position throughout the instructions. She did not keep her hands by her side the full time throughout the exercise. She didn't touch heel to toe on multiple steps. Bertolozzi lost her balance throughout the exercise and was unsteady on her feet. She did not take a series of small steps after her first nine steps, prior to completing her second set of nine steps. Bertolozzi did not watch her feet during the entire duration of the exercise.

The third task was the one leg stand. I explained the instructions, demonstrated it, and she stated she understood. She then began the task. She lifted her foot and began counting out loud. She counted 5, 6, 6, 7. She then counted 12, 8, 13. Bertolozzi was unsteady throughout the exercise and did not look at her foot throughout the exercise.

The fourth task was the finger to nose. I explained the instructions and she stated she understood. She then began the task (L-R-L-R-R-L). The first L, she touched under her nose. The first R, she touched under her nose. The third R, she picked up her left hand half way and then switched her to right hand. Bertolozzi was unsteady on her feet throughout the exercise.

The fifth task was the Romberg alphabet. I explained the instructions and she stated she understood. She then saying the alphabet. She said A-M, F, O, P and so on. She was unsteady on her feet and opened her eyes during the exercise.

The sixth task I instructed her to put her feet together and arms at her side. I explained to place her head back and eyes shut and count to 30 seconds in her head. When she shut her eyes, I would begin my timer and when she opened her eyes or stated "30", I would end the timer. She counted to 30 seconds in about 39 seconds. She was unsteady on her feet throughout the exercise.

Bertolozzi was then placed under arrest for DUI under FSS 316.193(1). Prior to leaving the scene, during an inventory of her vehicle, I located a clear plastic bag that contained two white circle pills with "A3" printed on them. I looked the pills up on drugs.com and they were identified as Dexmethylphenidate Hydrochloride (10 mg, Schedule II substance). Bertolozzi stated that she had a prescription, but was unable to provide one. She was additionally charged with possession of a schedule II substance under FSS

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

WOLLSCHLAGER, ANTHONY J
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

02/09/2019
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

MURPHY, BRITTANIE JEAN (751)
NAME OF OFFICER (PLEASE PRINT)

02/09/2019
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

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JUVENILE

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

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
BERTOLOZZI, RACHEL KATHRYN		W	F	06/09/1994

PROBABLE CAUSE STATEMENT

893.13(6A).

I then transported Bertolozzi to BRPD booking for processing. Once inside booking, I conducted the observation period. Officer Deen conducted the intoxilyzer 8000. I asked Bertolozzi to submit to a breath test and she stated yes. She then asked what would happen if she refused and I read her implied consent. I then asked Bertolozzi a second time to submit to a breath test and she agreed. Bertolozzi provided two breath samples of .201 and .198. She was then TOT CJ.

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ADMINISTRATIVE

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02/09/2019
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02/09/2019
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COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: BOCA RATON PD
Instrument Serial Number: 80-006622 Software: 8100.27
Date of Test: 02/09/2019

Date of Last Agency Inspection: 01/23/2019
Observation Period Began: 01:40
Subject's Name: RACHEL KATHRYN BERTOLOZZI DOB: 06/09/1994 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	02:03
Air Blank	0.000	02:03
Control Test	0.079	02:03
Air Blank	0.000	02:04
Subject Sample #1	0.201	02:05
Air Blank	0.000	02:06
Air Blank	0.000	02:07
Subject Sample #2	0.198	02:08
Air Blank	0.000	02:09
Control Test	0.078	02:09
Air Blank	0.000	02:09
Diagnostics Check	OK	02:09

Cylinder Lot: 13518080A5
Exp: 08/05/2020

State of Florida, County of Palm Beach,

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

I ALYIA S DEEN, 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: 2/9/19
Signature

Sworn to (or affirmed) before me this 9 day of 9, 19

_____ Murphy
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
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	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2019004612	**Date:** 02/10/2019
	Specialist Name/ID: AM/31562