0506162 9C14725 311

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias | 01 | Juvenile: N

ADMINISTRATIVE

OBTS Number:

Agency ORI Number: FLO 500000

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number (N.T.A.'s only): 06- 19-047385

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

Weapon Seized / Type: 02 (1. Yes 2. No)

Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): Hypoluxo Rd EB / Smith Farms Blvd

Location of Offense (Business Name, Address): 6700 Block of Hypoluxo Rd, Lake Worth FL 33467

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
03/12/2019	20:58	03/13/2019				

DEFENDANT

Name (Last, First, Middle): Crosser, Shannon, Cordia

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	04/28/1978	5'06	140	Hazel	Brown	Light	Medium

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description): Scar on left wrist

Marital Status: Married | Religion: CHRISTIAN | Indication of: Alcohol Influence Y ☐ N ☐ Unk. ☐ / Drug Influence Y ☐ N ☐ Unk. ☐

Local Address (Street, Apt. Number) (City) (State) (Zip): 6248 Branchwood Drive, Lake Worth, FL 33467 | Phone: (704) 501-7077 | Residence Type: 1. City 2. County 3. Florida 4. Out of State: 02

Permanent Address (Street, Apt. Number) (City) (State) (Zip): , | Phone: ( ) | Address Source: Arrestee

Business Address (Name, Street) (City) (State) (Zip): | Phone: ( ) | Occupation:

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
C626783786480, FL	[redacted]		Austell, GA	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: | 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 D. Deliver E. Use R. Smuggle 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 #
DUI w/ Property Damage	01	☐Y ☒N	316.193(3)(C)(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		19-047385		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
BAC of .15 or Higher or Person Under 18 in Vehicle	2	☐Y ☒N	316.193(4)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		19-047385		

CHARGE

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

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

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

NOTICE TO APPEAR

Location (Court, Room Number, Address): South County Courthouse - 200 W. Atlantic Ave, Delray Beach FL 33444

Court Date and Time: Month April Day 8th Year 2019 Time 8:30 AM X 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: 03/12/2019

ADMIN

HOLD for other Agency Name: | Signature of Arresting Officer: X [signature] | Name Verification (Printed by Arrestee) (PRINT):

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other: | Name of Arresting Officer (Print): D/S Ryan Dalton #32421 | I.D. #: 32421

Intake Deputy: [signature] | I.D. # | Pouch # | Transporting Officer: R. Dalton | ID #: 32421 | Agency: PBSO | Witness here if subject signed with an "X"

PAGE 01 OF 01

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PBSO 0148 REV. 8/97

MAR 13 AM 1:07

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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 12 DAY OF March 20 19 AT 19:50 AM ✓ PM

SUBJECT: Crosser, Shannon, Cordia CASE NUMBER: 19-047385

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S Ryan Dalton #32421

PERSONAL CONTACT

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

On the above date and time I responded to a vehicle crash at the intersection of Hypoluxo Rd and Smith Farms Blvd (PBSO Crash Case # 19-047370). Involved in crash was a white Range Rover bearing Florida tag CWBA64. The airbags had deployed within the vehicle. The occupants of the vehicle were Ms. Shannon Cordia Crosser along with her two children; Kalee Crosser DOB 11/16/2007 and Cash Crosser 6/11/2013. Ms. The occupants of the other vehicles involved indicated that they had not seen anyone else in the Range Rover at the time of the crash other than the adult female and two children. Ms. Crosser had fresh abrasions to the inside of her forearms, consistent with airbag deployment burns. She also appeared to have a red seatbelt mark across her left clavical, consistent with having been sitting on the drivers side and wearing a seatbelt at the time of the collision.

OBSERVATION OF DRIVER:

Ms. Crosser was identified via her Florida DL photo. During my interaction with Ms. Crosser, she had the strong odor of alcoholic beverage coming from her breath as she spoke to me. Her speech was slurred and her eyes were bloodshot and watery. She made numerous spontaneous utterances that she "only had one drink." She appeared unsteady on her feet, she continued to repeat herself, and she exhibited mood swings (hyper-emotional). Ms. Crossers movements, speech and mannerisms appeared labored and lethargic. D/S Carbone had also indicated that she had a difficult time locating her license and other paperwork. Once D/S Carbone's crash investigation had been completed, I began a criminal investigation for DUI, based on the indicators of impairment that I had observed. Ms. Crosser was informed that the crash investigation was complete, and that I was going to be conducting a criminal investigation for DUI. I then asked if she would perform field sobriety exercises, to which she said that she would.

DRIVER'S STATEMENTS:

Slurred speech. Kept repeating that she was sorry and that she was very embarrassed. She made numerous spontaneous utterances that she only had one drink.

ODORS:

Strong odor of alcoholic beverage coming from her breath/mouth area.

GENERAL OBSERVATIONS

SPEECH: **Slurred, Mumbled**

ATTITUDE: **Very polite**

CLOTHING: **Red striped shirt blue jeans, sandals**

MEDICAL/OTHER: **None**

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S Ryan Dalton #32421
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of March 20 19 by D/S Ryan Dalton #32421

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

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

BEVERLY SUE OWEN
MY COMMISSION # GG 188278
EXPIRES: May 30, 2022
Bonded Thru Notary Public Underwriters

SCANNED
MAR 13 2019

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SUBJECT: Crosser, Shannon, Cordia CASE NUMBER 19-047385

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- [x] RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Ms. Crosser swayed while standing in front of me. I could smell the strong odor of alcoholic beverage coming from her breath/mouth as she stood in front of me. She repeatedly moved her head and had to be reminded not to. On several occasions, she looked past the light and not focus on it.

WALK & TURN:

The area where the exercise was conducted was clear of debris, level, and I used a clearly marked yellow line (tape) that I had placed down. I explained and demonstrated the exercise to Ms. Crosser who confirmed that she understood my instructions. During the course of the exercise I observed the following clues of impairment: Ms. Crosser could not keep her balance while listening to the instructions; she attempted to start too soon (multiple times); she paused on the line while walking to steady herself; she missed heel-to-toe several times; she stepped off the line; she used her arms for balance; and she incorrectly performed the turn-around as I had instructed. Ms. Crosser appeared unsteady on her feet and kept doing the exercise (incorrectly) back and forth. I had to keep trying to gain her attention, but she was not paying attention to me.

ONE LEG STAND:

The next exercise I asked Ms. Crosser to perform was the One-leg Stand. I explained and demonstrated the exercise to Ms. Crosser, to which she confirmed that she understood. Ms. Crosser had confirmed that she did not have any medical problems, no recent surgeries (only one to her wrist in the past). Once Ms. Crosser began the exercise, I observed the following clues of impairment: swayed while balancing; she used her arms for balance, and she put her foot down numerous times. She made multiple spontaneous utterances that she couldn't even do this exercise if she was sober. She also kept interrupting me to start the exercise then would stop, then would start again without me telling her to begin.

FINGER TO NOSE:

The next exercise I asked Ms. Crosser to perform was the Finger-to-Nose exercise. I explained and demonstrated the exercise to her; she confirmed that she understood my instructions. During the exercise I observed the following: She failed to return her arms to the side on several occasions and she did not touch the tip of her finger to the tip of her nose. She was repeatedly instructed as to how to perform the exercise and bring her hand back down after touching her nose. She swayed while standing and she brought her head forward during the exercise.

ROMBERG ALPHABET:

Not conducted.

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BREATH TEST RESULTS: .222 .213

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S Ryan Dalton #32421
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of March 20 19 by D/S Ryan Dalton #32421

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

Notary Public/Clerk of Court, Officer (F.S.S 117.10)

BEVERLY SUE OWEN
MY COMMISSION # GG 188278
EXPIRES: May 30, 2022
Bonded Thru Notary Public Underwriters

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: Crosser, Shannon Cordia CASE NUMBER: 19-047385

DATE: 3/12/19 ~~VIDEO TAPE NUMBER:~~ N/A

BEGINNING TIME: 2152 ENDING TIME: 2209

BREATH TESTS RESULTS: 1) .222 TIME 2156 ~~A.M./~~P.M. 2) .213 TIME 2159 ~~A.M./~~P.M.

~~3)~~ _____ TIME _____ ~~A.M./P.M.~~ ~~4)~~ _____ TIME _____ ~~A.M./P.M.~~

BREATH OPERATOR: S. Owen #3184

MAINTENANCE TECHNICIAN: J. Karleeke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: _____

ATTITUDE: Crying, upset, Co-operative

CLOTHING: Flip Flops, jeans, red/white shirt

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER: Cuffs Adjusted during observation
D/L #C 626-783 78-648-0 FL (not carried.)
Δ in crash at around 19:50 hrs

COMMENTS: A/o & Δ arrived at 2131 hrs
A/o observed 20 minutes
A/o requested breath test, Δ agreed
No problem with test tech explained results
A/o read c/w, Δ understood rights
Δ answered Q's A Admitted drinking at home Smoked marijuana yesterday xanex last night.

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SUBJECT: Crosser, Shannon Cordia CASE NUMBER: 19-047385

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) Read on Camera

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SUBJECT: Crosser, Shannon Cordia CASE NUMBER: 19-047385

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

WHAT STREET OR HIGHWAY WERE YOU ON? Hypoluxo Rd

DIRECTION OF TRAVEL? Unknown WHERE DID YOU START? Softball field

WHAT TIME DID YOU START? 7:30p WHAT TIME IS IT NOW? No

WHAT IS TODAY'S DATE? 3/12/19 WHAT DAY OF THE WEEK IS IT? Tuesday

WHAT COUNTY AND CITY ARE YOU IN NOW? Palm Beach county

WHEN DID YOU LAST EAT? Way earlier WHAT DID YOU EAT? Hardly anything

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? Softball game

HOW MUCH DO YOU WEIGH? 140 HAVE YOU BEEN DRINKING? Obviously WHAT? Tito's Cranberry

HOW MUCH? 2-3 drinks WHERE? home WITH WHOM? No one

WHEN DID YOU HAVE YOUR FIRST DRINK? 5pm AND YOUR LAST DRINK? Before leaving softball

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? N/A

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? I'm good ARE YOU UNDER THE INFLUENCE? No

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? No HOW MUCH? N/A

WHAT? N/A WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? Stay at home mom WHEN DID YOU LAST WORK? N/A

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? No WHAT? _____

ARE YOU SICK OR INJURED? No WHAT'S WRONG? _____

DO YOU LIMP? No DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? No

WERE YOU IN AN ACCIDENT TODAY? Yes

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? No WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? No WHAT? _____ WHEN? _____

DO YOU HAVE:

EPILEPSY?	No
GLASS EYE?	No
FALSE TEETH?	No
EAR INFECTION?	No
INNER EAR TROUBLE?	No
DIABETES?	No

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? Contacts

DO YOU TAKE INSULIN? No IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? GA / NC WHERE? _____

INTERVIEWER: _____

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WITNESS LIST

CASE NUMBER: 19-047385

ARRESTING OFFICER: D/S Ryan Dalton #32421
ADDRESS: PBSO District 6 - 7894 S. Jog Road, Lake Worth FL 33467
PHONE NUMBERS (HOME): _____ (WORK) (561) 688-4860
CAN TESTIFY TO: Indicators of impairment, field sobriety exercises, breath test, medical clearance

NAME: D/S D. Carbone #24088
ADDRESS: PBSO District 6 - 7894 S. Jog Road, Lake Worth FL 33467
PHONE NUMBERS (HOME) _____ (WORK) (561) 688-4860
CAN TESTIFY TO: Crash investigation, indicators of impairment

NAME: D/S P. Lennertz # 7166
ADDRESS PBSO District 6 - 7894 S. Jog Road, Lake Worth FL 33467
PHONE NUMBERS (HOME) _____ (WORK) (561) 688-4860
CAN TESTIFY TO: Assisted with vehicle tow. Was on scene on crash shortly after. Observed indicators of impairment

NAME: _____
ADDRESS _____
PHONE NUMBERS (HOME) 0 (WORK) 0
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: _____
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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: _____

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SCANNED MAR 13 2019

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: 2019008571	**Date:** 13Mar19
	Specialist Name/ID: R Ehrenberg/6104