ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE

OBTS Number

Agency ORI Number | Agency Name | Agency Report Number (N.T.A.'s only): 54- 16-004286

ChargeType: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☑ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Weapon Seized / Type: 2 (1. Yes 2. No) | Multiple Clearance Indicator

Location of Arrest (Including Name of Business): 815 W Indiantown Rd, Jupiter, FL 33458

Location of Offense (Business Name, Address): 815 W Indiantown Rd, Jupiter, FL 33458

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
08/31/16	0410					

DEFENDANT

Name (Last, First, Middle): Leitch, Sheri, Lynn

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

Race (W - White I - American Indian B - Black 0- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	08/06/68	504	110	Green	Brown	Far	Small

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description)

Marital Status: D | Religion: Unknown | Indication of: Alcohol Influence ☑ Y ☐ N ☐ Unk. / Drug Influence ☐ Y ☐ N ☑ Unk.

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type (1. City 2. County 3. Florida 4. Out of State)
501 SE 6th Ave	Okeechobee	FL	34974	(772) 204-6647	3

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
501 SE 6th Ave	Okeechobee	FL	34974	(772) 204-6647	FL DL

Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation
				( )	US Postal Carrier

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
L320792687861	[redacted]		Hollywood, FL	USA

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: | 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 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 R. Smuggle D. Deliver E. Use 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	1	☐Y ☑N	316.193 (1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant I Capias Number	Bond
N	N	N	16-004286	N/A	

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 I 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): North County Courthouse, 3188 PGA Blvd, Palm Beach Gardens, FL 33410

Court Date and Time: Month October Day 5 Year 2016 Time 8:30 AM ✓ 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

ADMIN

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

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Name of Arresting Officer (Print): Ofc. M. Salvemini #335 I.D. #

Intake Deputy I.D. # Pouch # | Transporting Officer: Ofc. M. Salvemini ID #: 335 Agency: Jupiter PD | Witness here if subject signed with an "X"

SCANNED

PAGE 1 OF 1

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

PBSO #148 REV. 8/97

AUG 3 1 2016

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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 31 DAY OF August 20 16, AT 0350 ✓ AM PM

SUBJECT: Leitch, Sheri, Lynn CASE NUMBER: 16-004286

AGENCY: JUPITER POLICE DEPARTMENT ARRESTING OFFICER: Ofc. M. Salvemini #335

PERSONAL CONTACT

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

I observed Leitch driving a 1992 white Ford pickup truck bearing FL tag JG5BY west in the outside straight lane on W Indiantown Rd, approaching S Whitney Dr. The vehicle came to an abrupt and sudden stop on the roadway and then made a right turn into the parking lot of Circle K (815 W Indiantown Rd). The vehicle did not utilize the right turn signal and made the turn from a straight lane of travel. Leitch appeared to be texting on a cell phone during this driving pattern. The vehicle drove into a parking space in front of 815 W Indiantown Rd. The vehicle began slowly drifting backwards and Leitch did not seem to notice. I had to get out of my patrol vehicle to get Leitch's attention to stop the vehicle. Once her attention was obtained, she put the vehicle in park and threw the keys on the vehicle floorboard.

OBSERVATION OF DRIVER:

Leitch had bloodshot and glassy eyes. Her pupils were extremely large. Her speech was slurred and difficult to understand. She swayed back and forth while standing upright. She stumbled while walking and trouble keeping her balance.

DRIVER'S STATEMENTS:

Leitch said she drank two glasses of Pinot Grigio wine while at a friends house in Jupiter. She stated she began drinking her first glass at 7pm and then she was unsure of what time for her last drink. When asked what time she thought it was currently, she said 10pm (it was 4am). She kept saying she rarely drinks and she should not be over the limit after drinking only 2 glasses of wine. She repeated her questions regularly.

ODORS:

Odor of an unknown alcoholic beverage coming from her person, which became stronger as she spoke to me.

GENERAL OBSERVATIONS

SPEECH: Slurred and difficult to understand

ATTITUDE:

CLOTHING: White tank-top, blue jean shorts, brown shoes

MEDICAL/OTHER: None

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 31 day of August 20 2016 by Ofc. M. Salvemini #335

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

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

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AUG 3 1 2016

SUBJECT: Leitch, Sheri, Lynn CASE NUMBER 16-004286

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:

WALK & TURN

She could not maintain the position during the instruction and demonstration. On the 3rd and 5th steps forward she did not touch heel to toe. On every step back, she did not heel to toe. She did not count out loud, until her last step. She took 11 steps forward and 8 steps back. She turned improperly, losing her balance, and swayed severely backward. She stumbled off the line twice, almost falling on the ground.

ONE LEG STAND:

She could not maintain the position during the instruction and demonstration. She chose her right foot for the task. She looked straight ahead while counting. She used her arms for balance by removing them off her sides and raised them for balance support. She lost her balance after a few seconds and put her foot down. She said, "Is that right, I'm sorry." She attempted two more times, each time losing her balance and putting her foot down on the ground.

FINGER TO NOSE:

Left- lifted her right arm, then put it down, then lifted left arm. She touched the right side of her nostril. Right- She touched her upper lip. Left- No Complications. Right- She touched her upper lip. Left- She touched the right side of her nostril. Left- She lifted her right arm, then put it back down. She lifted her left arm. Right- No complications

ROMBERG ALPHABET:

No complications

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BREATH TEST RESULTS: .194 .190

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 31 day of August 20 2016 by Ofc. M. Salvemini #335

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

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

SCANNED
AUG 3 1 2016

WITNESS LIST

CASE NUMBER: 16-004286

ARRESTING OFFICER: Ofc. M. Salvemini #335
ADDRESS: 210 Military Trail, Jupiter, FL 33458
PHONE NUMBERS (HOME): _____ (WORK) 561-746-6201
CAN TESTIFY TO: PC

NAME: Ofc. B. Lopez #325
ADDRESS: 210 Military Trail, Jupiter, FL 33458
PHONE NUMBERS (HOME) _____ (WORK) 561-746-6201
CAN TESTIFY TO: PC

NAME: Ofc. C. Connor #350
ADDRESS 210 Military Trail, Jupiter, FL 33458
PHONE NUMBERS (HOME) _____ (WORK) 561-746-6201
CAN TESTIFY TO: PC

NAME: Ofc. L. Rocha #327
ADDRESS 210 Military Trail, Jupiter, FL 33458
PHONE NUMBERS (HOME) _____ (WORK) 561-746-6201
CAN TESTIFY TO: PC

NAME: _____
ADDRESS _____
PHONE NUMBERS (HOME) _____ (WORK) _____
CAN TESTIFY TO: _____

NAME: _____
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CAN TESTIFY TO: _____

NAME: _____
ADDRESS _____
PHONE NUMBERS (HOME) _____ (WORK) _____
CAN TESTIFY TO: _____

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AUG 3 1 2016

TESTING FACILITY TASK REPORT

AGENCY: JPD

SUBJECT: LEITCH, SHERI L. CASE NUMBER: 16-121097

DATE: 08/31/16 VIDEO TAPE NUMBER: 61311

BEGINNING TIME: 0520 ENDING TIME: 0534

BREATH TESTS RESULTS: 1) .194 TIME 0525 (A.M.)/P.M. 2) .190 TIME 0528 (A.M.)/P.M.

3) N/A TIME — A.M./P.M. 4) N/A TIME — A.M./P.M.

BREATH OPERATOR: G. PARENT #2909

MAINTENANCE TECHNICIAN: KARLICKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED, RAPID

ATTITUDE: CALM, TALKATIVE, INQUISITIVE, RESTIVE, CO OPERATIVE

CLOTHING: JEAN SHORTS, WHITE BLOUSE, TAN SANDALS

MEDICAL CONDITIONS: DEPRESSION

MEDICATIONS: XANEX, CELEXA

OTHER: EYES GLASSY AND BLOODSHOT, SWAYING, ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE ON BREATH

Δ ADMITTED TO DRINKING 2 GLASSES OF WINE (Q+A)

COMMENTS: ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 0451 HRS.

Δ AGREED TO TAKE TEST

A/O READ RIGHTS

Δ STATED SHE UNDERSTOOD RIGHTS

TECH. READ BREATH TEST RESULTS Δ STATED SHE UNDERSTOOD TEST RESULTS

A/O CONDUCTED Q+A

Δ ANSWERED QUESTIONS

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SCANNED
AUG 31 2016

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

SUBJECT: LEITCH, SHERI L. CASE NUMBER: 16-004286

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.

SCANNED
AUG 3 1 2016

SUSPECT'S SIGNATURE: (X) Read on Camera

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SUBJECT: LEITCH, SHERI L. CASE NUMBER: 16-004286

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? drink of water

WHAT STREET OR HIGHWAY WERE YOU ON? Martin county Martin Rd

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? 31st WHAT DAY OF THE WEEK IS IT? Wednesday

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

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

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

HOW MUCH? 2 glasses WHERE? friend George's house WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? 9pm AND YOUR LAST DRINK? 11pm

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? no ARE YOU UNDER THE INFLUENCE? _____

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? no WHAT'S WRONG? _____

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

WERE YOU IN AN ACCIDENT TODAY? no

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? yes WHAT? Celexa WHEN? Today

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? No

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

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? No WHERE? Maybe TX

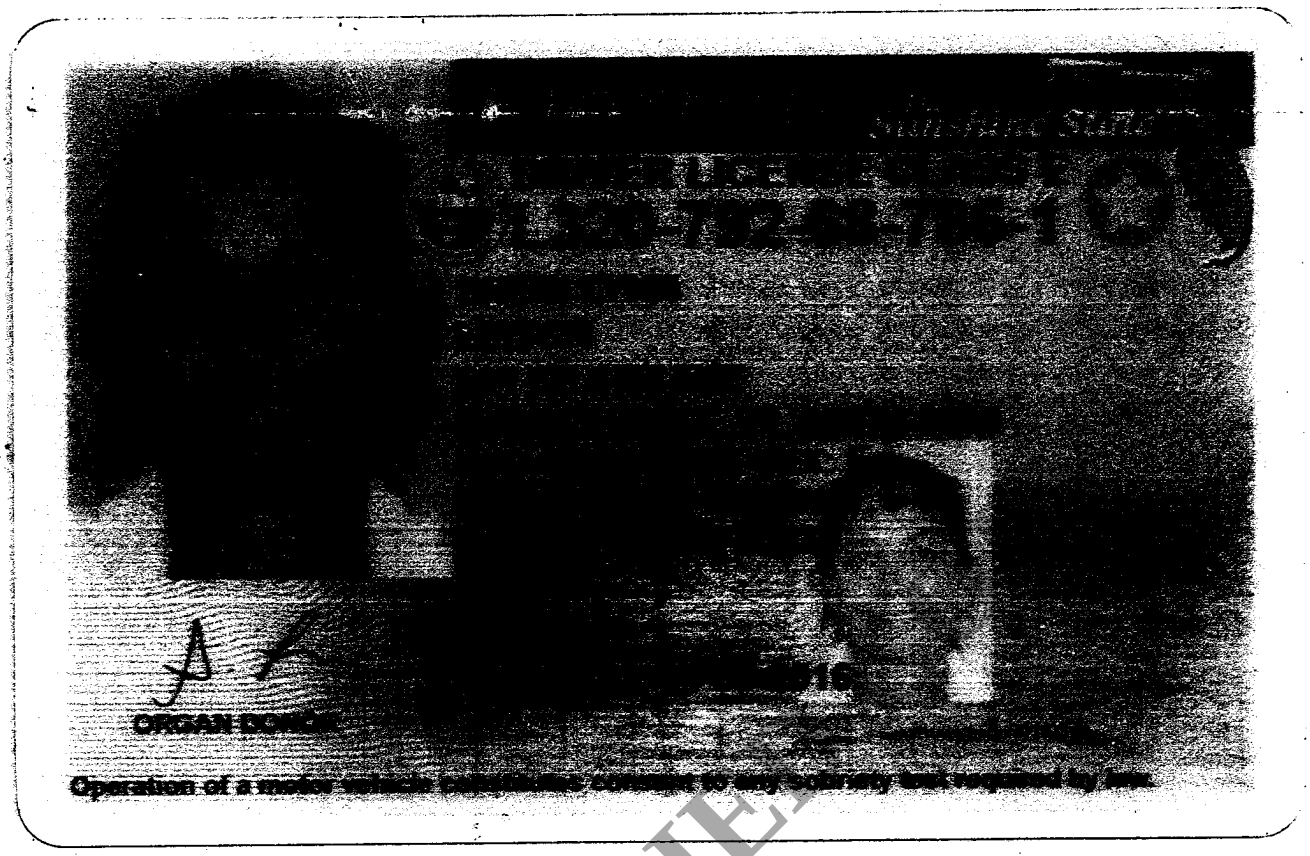
INTERVIEWER: SALVEMINI 335

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AUG 3 1 2016

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

PBSO #0129C REV. 9/93



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AUG 3 1 2016

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006029 Software: 8100.27
Date of Test: 08/31/2016

Date of Last Agency Inspection: 08/05/2016
Observation Period Began: 04:51
Subject's Name: SHERI L LEITCH DOB: 08/06/1968 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	05:23
Air Blank	0.000	05:23
Control Test	0.083	05:23
Air Blank	0.000	05:24
Subject Sample #1	0.194	05:25
Air Blank	0.000	05:25
Air Blank	0.000	05:27
Subject Sample #2	0.190	05:28
Air Blank	0.000	05:29
Control Test	0.082	05:29
Air Blank	0.000	05:30
Diagnostics Check	OK	05:30

Cylinder Lot: 279870
Exp: 02/04/2019

State of Florida, County of PALM BEACH,

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

I GARY J PARENT, 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: 08/31/16
Signature

Sworn to (or affirmed) before me this 31 day of AUGUST, 2016

_____ OFC. M. SALVEMINE
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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AUG 3 1 2016

PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 16-121097 PBSO ZONE 3-14

AGENCY CASE # 16-004286 CRASH CASE # N/A

TIME OF STOP/CRASH 0350 DATE 08/31/16 DAY Wednesday

SUBJECT'S NAME Sheri Lynn Leitch RACE W SEX F

HGT 504 WGT 110 DOB 08/06/68

LOCATION 815 W Indiantown Rd, Jupiter, FL 33458

ARRESTING OFFICER'S NAME & ID Ofc. M. Salvemini #335 AGENCY Jupiter PD

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0451

ARREST TIME 0410

BREATH RESULTS:

1. .194
2. .190
3. N/A
4. N/A

TESTING OFFICER'S ID 7909 PBSO VIDEOTAPE # 61311

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AUG 3 1 2016