

0486968

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FCIC CHECK: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		ARREST / NOTICE TO APPEAR JUVENILE REFERRAL 15TH JUDICIAL CIRCUIT				1. Arrest 2. Notice to Appear 3. Arrest Affidavit		4. Compl. Affidavit 5. Request Capias 6. Juvenile Ref.		
OBTS #						1		Juvenile		
Agency ORI Number FL0503000		Agency Name SOUTH PALM BEACH POLICE DEPARTMENT				Agency Case #		17-04-0051		
Check Type. Check as many as apply:		1. Felony	2. Traffic Felony	Weapon Seized?	Type	Agency Arrest # or Court Case #				
<input checked="" type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance	<input type="checkbox"/> 6. Other/Capias	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No					
Location of Arrest (Include Name of Business) 300-BLK EAST OCEAN AVE		City LANTANA		Business Name, Address 3500 A1A				City SOUTH PALM BEACH		
Date of Arrest 04/11/2017	Time of Arrest 12:31 PM	Date of Booking	Time of Booking	Jail Date		Jail Time		Fingerprinted By: <input type="checkbox"/> ID Only <input type="checkbox"/> AFIS <input type="checkbox"/> Criminal		
Booking #	SPN #	Other ID #		FCIC/NCIC #		DOC #		FBI #		
Name (Last, First, Middle, Suffix) GARTEN SUNCHERA RENE Alias/Maiden										
Race: W-White I-American Indian B-Black A-Oriental/Asian O-Other		<input checked="" type="checkbox"/> W	Sex F	Date Of Birth 10/25/1997	Height 5'03"	Weight 115 LBS	Eye Color BRO	Hair Color BRO	Complexion TAN	Build THIN
SCARS/MARKS/TATTOOS (Location/Describe) SCARS EYES										
Local Address 324 N K ST		City LAKE WORTH		State FL		Zip Code 33460		Phone # (561) 542-6146	1.City 2.County 3.FL 4.Out-of-State 2	
Permanent Address 324 N K ST		City LAKE WORTH		State FL		Zip Code 33460		Phone # (561) 542-6146	Address Source DEFENDANT	
Street Address 811 LUCERNE AVE		City LAKE WORTH		State FL		Zip Code 33460		Phone # (561) 508-9482	Occupation STUDENT	
DL # G635796978850		DL State FL		Soc. Sec. #		INS #		Place Of Birth FL	Country of Citizenship US	
Co-Defendant Name(Last, First, Middle) CLICK NICHOLEYES		<i>JAMES</i>		Race W	Sex M	Date Of Birth 3/31/1997	<input checked="" type="checkbox"/> Arrested <input type="checkbox"/> At Large	<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor		
Co-Defendant Name(Last, First, Middle)				Race	Sex	Date Of Birth	<input type="checkbox"/> Arrested <input type="checkbox"/> At Large	<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor		
CODE #	CHARGE # 1	Activity: S. Sell N. N/A B. Buy P. Possess T. Traffic		R. Smuggle D. Deliver E. Use Z. Other	K. Dispense/Distribute M. Manufacture/Product/Cultivate	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 Description MOVING TRAFFIC VIOL - OPERATE MOTOR VEHICLE WO VALID LICENSE						Counts 1	<input checked="" type="checkbox"/> F.S.S. <input type="checkbox"/> Ordinance	State Statute 322.03(1)		Ordinance #
Drug Activity P		Drug Type M		Drug Amount less then 20g		State Attorney Number		Court Number		Bond Amount
<input checked="" type="checkbox"/> PC <input type="checkbox"/> Capias		<input type="checkbox"/> AC <input type="checkbox"/> BW		<input type="checkbox"/> FW <input type="checkbox"/> PW		Juv. PU Citation #		Offense/Issued Date 04/11/2017		Writ. Att. <input type="checkbox"/> Injunction <input type="checkbox"/> Order of Arrest
Victim Name STATE OF FLORIDA		Address 3577 A1A 0690, FL 33480				Phone # (561) 586-2122		Arrest Notify: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N		Release Notify: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N
Charge Description MARIJUANA-POSSESS - NOT MORE THAN 20 GRAMS				Counts 1	<input checked="" type="checkbox"/> F.S.S. <input type="checkbox"/> Ordinance	State Statute 893.13(6b)		Ordinance #		
Drug Activity P		Drug Type M		Drug Amount less then 20g		State Attorney Number		Court Number		Bond Amount
<input checked="" type="checkbox"/> PC <input type="checkbox"/> Capias		<input type="checkbox"/> AC <input type="checkbox"/> BW		<input type="checkbox"/> FW <input type="checkbox"/> PW		Juv. PU Citation #		Offense/Issued Date 04/11/2017		Writ. Att. <input type="checkbox"/> Injunction <input type="checkbox"/> Order of Arrest
Victim Name STATE OF FLORIDA		Address 3577 A1A 0690, FL 33480				Phone # (561) 586-2122		Arrest Notify: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N		Release Notify: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N
Mandatory Appearance in Court. You need not appear in Court, but must comply with attached instructions.		Location		Date:		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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.										
Defendant/Juvenile Signature		Parent/Guardian Signature		Released To:				Date 5/11/17	Time 11:55	Time
<input type="checkbox"/> Miranda Warning		Hold For(Agency):		Verified By:		Bond Date		Bond Charge #		Bond Charge #
Adults <input type="checkbox"/> Hold for First Appearance Only <input type="checkbox"/> Do Not Bond Out		Reason:								
I swear/affirm the above and attached statements are true and correct.		Sworn and subscribed before me, the undersigned authority this 11 day of April , 20 17				Type: 1. ROR 2. Cash 3. Surely 4. Bail/Bond 5. Cert. 6. Other		Bond Type		Bond Type
Officer's / Complainant's Signature DAVID A HUL		ID NO. 1946		Signature of Person Administering Oath Chad R. Rizzotto		Name(Printed)		Title		
Name(Printed)		ID NO.		Signature of Person Administering Oath		Name(Printed)		Title		
BOND INFORMATION		Released by:								Page
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SCANNED
D/S T. BURNSIDE #5406 APR 13 2017

PROBABLE CAUSE CONTINUATION

Agency ORI Number FL0503000	Agency Name SOUTH PALM BEACH POLICE D	Agency Case # 17-04-0051	OBTS #
Name (Last, First, Middle, Suffix) GARTEN	SUNCHERA	RENE	Date Of Birth 10/25/1997

The undersigned certifies and swears that he/she has just and reasonable grounds to believe that the above named defendant committed the following violation of law:

On **04/11/2017**, at **11:29** (Specifically include facts constituting cause for arrest.)

On 04-11-2017 at approximately 1129 hours I was on patrol in my fully marked patrol vehicle, equipped with red and blue emergency lights and siren in the 3500 block of A1A, (South Ocean Blvd, South Palm Beach, Palm Beach County, FL 33480), a posted 35mph zone. When I observed a blue Mitsubishi traveling south bound at a visually estimated speed of 45mph. I pulled into traffic and paced the vehicle in Unit 116 at 40mph I activated my emergency equipment and attempted to stop the vehicle at the intersection of East Ocean Ave and North Atlantic Drive. The vehicle continued to head west on East Ocean Ave finally stopping on the Intercoastal Bridge, during this time I observed the back passenger (on the driver's side) moving around appearing to be placing or retrieving something from the floorboard and moving it to the passenger side of the vehicle.

I had to instruct the driver to proceed over the intercoastal bridge and attempted to have them pull into Bicentennial Park or the west side, however the driver pulled into the cut-out on the bridge used for bridge tender parking.

I approached the vehicle and informed the driver she has been stopped for speeding, I then asked her for her identification, and the vehicle documents. The driver stated she did not have any identification with her; the two males were also asked for identification. The back passenger stated he did not have his wallet with him, I had him write down his name and date of birth, the front male passenger provided a school ID card and his date of birth. The female driver was identified by name and date of birth. All three were queried through dispatch and the driver and rear passenger were verified in DAVID.

The driver was identified as Sunchera Rene Garten, DOB 10-25-1997, the front passenger was identified as Jose Molina, DOB 05-02-2000, and the rear passenger was identified as Nicholeyes Click, DOB 03-31-1997.

Dispatch returned an identification card only for Garten, and an active warrant for Click. The warrant for Click was confirmed and upon the arrival of Ofc Guarin (LPD 866) Click was taken into custody without incident. Click was handcuffed (checked for tightness and double locked) and searched incident to arrest, no contraband was found on his person but his wallet with a Florida identification card. I secured Click in the back seat of patrol vehicle 116. I then returned to the car and had Garten exit, she was then placed in handcuffs (Checked for tightness and double locked), searched incident to arrest and placed in the back seat of patrol vehicle 116. Garten requested I retrieve her cellphone and place it in her property so it could accompany her to jail.

Dispatch attempted to contact the registered owner with a number provided by Garten without any success. A tow-by rotation was then requested since no licensed driver was available. While conducting a vehicle inventory for the tow I moved a black and white composition notebook on the back seat of the vehicle and a cell phone slide out along with pieces of a green leafy substance, consistent in appearance to marijuana. Additional pieces of the green leafy substance was located in the cellphone case, a sample was field tested using a Duquenois reagent which returned a positive result for THC.

NOTARIZED



Officer's / Complainant's Signature

DAVID A HUL
Name/Initials
SCANNED

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ID NO.

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PROBABLE CAUSE CONTINUATION

Agency ORI Number FL0503000		Agency Name SOUTH PALM BEACH POLICE D		Agency Case # 17-04-0051		OBTS #	
Name (Last, First, Middle, Suffix) GARTEN SUNCHERA RENE						Date Of Birth 10/25/1997	
WITNESS	First Name	Middle	Last Name			Suffix	Phone #1
	Street Address		City	State	Zip Code	Phone #2	
WITNESS	First Name	Middle	Last Name			Suffix	Phone #1
	Street Address		City	State	Zip Code	Phone #2	
DEFENDANT	Marital Status	# of Dependents	Length in County	Porperty Owner	Address of Property		
	Place of Employment(Name and Address)		Length of Employment	Previous Employment(if current less than 2 years)			
<p>The Defendant named on the Arrest Notice to Appear document came before me for Advisory and Solvency hearing on the _____ day of _____, 20_____, at _____ am/pm, and was advised by me on the charge against him, his right to remain silent, that any statements by him may be used against him, his right to counsel, and, if he is financially unable to afford counsel, that counsel forthwith will be appointed: of his right to communicate with his counsel, family or friends, and that reasonable implementation will be afforded him to contact the foregoing.</p>							
I FURTHER CERTIFY THAT:							
ADVISORY AND SOLVENCY HEARING	<input type="checkbox"/> Defendant has advised the court that he has retained counsel, or will retain counsel.	<input type="checkbox"/> The Defendant waived right to counsel at the first appearance only.					
	<input type="checkbox"/> The court investigated the Defendant's solvency and found the Defendant solvent and financially able to secure counsel.	<input type="checkbox"/> The Court reviewed the Advisory and finds (there is / there is not) probable cause to hold the bind over the Defendant for trial.					
	<input type="checkbox"/> The court investigated the Defendant's solvency and appointed the Public Defender to represent Defendant.	<input type="checkbox"/> The probable cause determination is hereby passed 72 hours.					
		<input type="checkbox"/> Order of No Imprisonment(ONI)					
BOND ACTION TAKEN, if an _____				JUDGE: _____			
<p><input type="checkbox"/> I, having been found solvent and financially able to secure counsel, hereby waive counsel until my attorney files and appearance in this case or until I file a written request for a review of my solvency and ability to secure counsel.</p> <p><input type="checkbox"/> I hereby waive right to counsel at the first appearance only. Defendant's Signature _____</p> <p><input type="checkbox"/> I hereby acknowledge receipt of a cop of the foregoing complaint and advisory</p>							
<p>Defendant's Signature _____</p> <p style="text-align: center;">Defendant's Attorney Signature _____</p>							
WAIVER	I have been advised of my rights to a Preliminary Hearing in Case Number(s) _____ in which I am the defendant, and I desire to waive and do hereby waive my right to such Preliminary Hearing concerning all of the charges against me in said case(s).						
	Defendant's Signature _____						
FIRST APPEARANCE	ARRAIGNMENT, JUDGMENT, SENTENCE, AND ORDER						
	<p>Said Defendant was arraigned for trial on _____ and entered a plea of _____ to the charge(s) as set forth herein. After hearing the evidence and duly considering the same, the Court finds you, the defendant _____ of said charge(s); AND IT IS ORDERED AND ADJUDGED that you, the Defendant, are _____ as charged of said offense(s) and set forth herein.</p> <p>IT IS, THEREFORE, the judgement, Order, and Sentence of the court that you, the Defendant, be imprisoned in the county jail of _____ County, FL, for the term of _____ days, and pay a fine of \$_____ and \$_____ the cost herein; and in default of such payment that you, the Defendant, stand committed to the County Jail of _____ County, FL, for a term of _____ days.</p> <p>DONE, ORDERED, AND ADJUDGED in open Court at _____ County, FL, on _____.</p>						
JUDGE _____		COUNTY COURT in and for _____ County, Florida.					
FIRST APPEARANCE	Charge	Action			Date		
	_____	_____	_____	_____	_____	_____	
Bond Amount \$ _____		Cash/Surety: Receipt # _____					
ESTREATED BY(Judge): _____ Date: _____							

DAVID
Officer's / Complainant's Signature

DAVID A HUL

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Name(Printed)
SCANNED

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PROBABLE CAUSE CONTINUATION

Agency ORI Number FL0503000	Agency Name SOUTH PALM BEACH POLICE DEPA	Agency Case # 17-04-0051	OBTS #				
Name (Last, First, Middle, Suffix) GARTEN		Date Of Birth 10/25/1997					
CHARGE #	Charge Description		Counts <input type="checkbox"/> F.S.S. <input type="checkbox"/> Ordinance	State Statute		Ordinance #	
	Drug Activity	Drug Type	Drug Amount	State Attorney Number		Court Number	Bond Amount
	<input type="checkbox"/> PC <input type="checkbox"/> Capias	<input type="checkbox"/> AC <input type="checkbox"/> BW	<input type="checkbox"/> FW <input type="checkbox"/> PW	Juv. PU Citation #	Offense/Issued Date	<input type="checkbox"/> Writ. Att. <input type="checkbox"/> Order of Arrest	Injunction #
Victim Name		Address			Phone #	Arrest Notify: <input type="checkbox"/> Yes <input type="checkbox"/> N	
						Release Notify: <input type="checkbox"/> Yes <input type="checkbox"/> N	
CHARGE #	Charge Description		Counts <input type="checkbox"/> F.S.S. <input type="checkbox"/> Ordinance	State Statute		Ordinance #	
	Drug Activity	Drug Type	Drug Amount	State Attorney Number		Court Number	Bond Amount
	<input type="checkbox"/> PC <input type="checkbox"/> Capias	<input type="checkbox"/> AC <input type="checkbox"/> BW	<input type="checkbox"/> FW <input type="checkbox"/> PW	Juv. PU Citation #	Offense/Issued Date	<input type="checkbox"/> Writ. Att. <input type="checkbox"/> Order of Arrest	Injunction #
Victim Name		Address			Phone #	Arrest Notify: <input type="checkbox"/> Yes <input type="checkbox"/> N	
						Release Notify: <input type="checkbox"/> Yes <input type="checkbox"/> N	
WITNESS	First Name		Middle	Last Name		Suffix	Phone #1
	Street Address			City	State	Zip Code	Phone #2
<p>The undersigned certifies and swears that he/she has just and reasonable grounds to believe that the above named defendant committed the following violation of law:</p> <p>On 04/11/2017 , at 11:29 (Specifically include facts constituting cause for arrest.)</p> <p>I ask the subjects in my patrol car who each phone belonged to in order to avoid giving the wrong cell phone to the subjects. Garten stated the black iPhone on the front seat was hers and Click stated the cell phone on the back seat was his and it could be left with Molina.</p> <p>The cell phone on the back seat, phone case, and marijuana were seized as evidence; due to the loose nature of the marijuana it was not weighed roadside.</p> <p>While awaiting the arrival of the tow truck, Garten and Click began to tell me about the ownership of the marijuana. Garten stated it was her's and she was just letting Click smell it. Click stated the same but could not explain were the original bag containing the marijuana was; Garten later stated it had been in a cookie wrapper from Burger King. A Burger King bag was located in the back seat on the drivers side by I did not locate a cookie bag.</p> <p>Garten is charged with vioalations of FSS 322.03(1) and FSS 893.13(6b). She was issued two Uniform Traffic Citations A6V2TTE, and A6V2TUE, and a Written Warning (SPB00390).</p> <p>Click is charged with violations of FSS 843.15(1a), and FSS 893.13(6b).</p>							
PROBABLE CAUSE STATEMENT							
2							

SEK
Officer's / Complainant's Signature

SCANNED A
APR 13 2017

Name (Printed)

HUL

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ID NO.

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