ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
FL 502600	Palm Beach Gardens Police Department	78 - 18006679

Charge Type: Check as many as apply. 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor (☑) 5. Ordinance 6. Other | Weapon Seized / Type: 1 Yes 2. No | Multiple Clearance Indicator

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
NORTHLAKE BLVD/HIATT DR	NORTHLAKE BLVD/N JOG RD

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
10/31/2018	2247					

DEFENDANT

Name (Last, First, Middle): BARBER, TAMMI, R | 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	03/17/1969	5'4	120	BLUE	BLDE	FAIR	SML

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description)	Marital Status	Religion	Indication of:	Y	N	Unk
LEFT COLLARBONE-SCAR	S	CHRISTIAN	Alcohol Influence	☑	☐	☐
			Drug Influence	☐	☐	☑

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Residence Type (1. City 2 County 3. Florida 4. Out of State)
17 CAMBRIA RD E PALM BEACH GARDENS FL 33418	(606) 571-6032	1

Permanent Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
17 CAMBRIA RD E PALM BEACH GARDENS FL 33418	( )	NCIC/FCIC

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
B616816695970 FL	[redacted]		HARVEY IL	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: | 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/Derv | P. Paraphernalia/ Equipment S Synthetics | U Unknown Z Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DUI-DRIVING UNDER INFLUENCE	1	☐Y ☑N	316.193(1)	

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

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

Court Date and Time: Month 12 Day 05 Year 18 Time 10:00 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

X Tammi Barber — Signature of Defendant (or Juvenile and Parent /Custodian) | Date Signed: 10/31/2018

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. Sam Warren | I.D. #: 463

Intake Deputy	I.D. #	Pouch #	Transporting Officer	ID #	Agency	Witness here if subject signed with an "X"
SPANN	8101	3473	Ofc. S. Warren	463	PBGPD	

PAGE 1 OF 1

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

0495476 / 3473

SCANNED NOV - 5 2018

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D.U.I PROBABLE CAUSE AFFIDAVIT

ON THE 31 DAY OF OCTOBER 2018, AT 2247 ☐ AM ☑ PM

SUBJECT: BARBER, TAMMI, R CASE NUMBER: 18006679

AGENCY: PALM BEACH GARDENS PD ARRESTING OFFICER: Ofc. Sam Warren 463

PERSONAL CONTACT

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

I observed the vehicle to be driving around in a lost manner. The vehicle was making wide turns and driving slow. The vehicle failed to obey a solid red light at Northlake Blvd/N Jog RD making a right turn. The vehicle made the right turn wide, entering the center lane. Upon pulling the vehicle over she began to roll away due to not putting the vehicle in park.

OBSERVATION OF DRIVER:

When I made contact with the driver the drivers eyes were glossy and watery. The driver was not able to concentrate on retrieving the documents I requested. The driver was moving slowly and not able to multi-task.

DRIVER STATEMENTS:

The driver did not answer any questions and was avoiding answering any questions about drinking.

ODORS: Perfume

GENERAL OBSERVATIONS

SPEECH: Quiet, slow, country accent

ATTITUDE: Rude

CLOTHING: Black/White dress

MEDICAL/OTHER: Surgeries

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigating Officer)

The forgoing instrument was sworn to or affirmed and subscribed before me this 31 day of October 2018 by Ofc. Sam Warren who is personally known to me and/or personally known to me and/or produced identification. Type of identification produced _____

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

Notary Public State of Florida
Samantha Palmer
My Commission GG 233762
Expires 10/28/2022

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SUBJECT: BARBER, TAMMI, R CASE NUMBER: 18006679

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

☑ LT EYE-LACK OF SMOOTH PURSUIT

☑ RT EYE-LACK OF SMOOTH PURSUIT

☑ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION

☑ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION

☑ LT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

☑ RT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

The driver complained of past surgies affecting her performance during the tasks. The driver continued to stretch and kick her legs around showing no issues with the surgies.

WALK & TURN:

The driver had issues getting into the instructional position. The driver did not remain in the instructional position as instructed. I observed the driver to sway while the instructions were being given, miss heel to toe and step off the line during the task. The driver raised her arms for balance, turned incorrectly (dancing motion) and took the incorrect number of steps. The driver did not make heel to toe contact during the task. The driver failed to return to the original position by not taking 9 steps back.

ONE LEG STAND:

I observed the driver to sway while in the instructional position. The driver failed to remain in the instructional position. The driver put her foot down during the task and raised her arms for balance. The driver failed to raise her foot six inches from the ground during the task but actually raising it higher.

FINGER TO NOSE:

The driver failed to get into the instructional position and had issues maintaining the instructional position. The driver had to be reminded to tilt her head back and close her eyes. The driver failed to touch the tip of her finger to the tip of her nose. All attempts the fingers touched the area above the tip of the nose or next to it. The driver failed to use to correct finger once during the task. The driver failed to bring her finger down to her side after as per instructed.

RHOMBERG/ALPHABET:

The driver had issues getting in the instructional position as instructed. The driver was instructed to recite the alphabet from the letter C. The driver started from the letter E. The driver paused before beginning, reciting in her head until "C". The driver recited the alphabet incorrectly.

BREATH TEST RESULTS: VNM/.243 VNM/.261

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigating Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 31 day of October 20 18 by Ofc. Sam Warren

who is personally known to me and/or personally known to me and/or produced identification. Type of identification produced _____

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

Notary Public State of Florida
Samantha Palmer
My Commission GG 233762
Expires 10/28/2022

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WITNESS LIST

CASE NUMBER: 18006679

ARRESTING OFFICER: Ofc. Sam Warren 463

ADDRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410

PHONE NUMBERS (HOME): _____ (WORK) (561) 799-4445

CAN TESTIFY TO: Facts of the Case

NAME: Ofc. C. Carver (471)

ADDRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410

PHONE NUMBERS (HOME) 561-799-4445 (WORK) 561-799-4445

CAN TESTIFY TO: Facts of case

NAME: Ofc. K. Slaughter (500)

ADDRESS 10500 N. Military Trail, Palm Beach Gardens, FL 33410

PHONE NUMBERS (HOME) 561-799-4445 (WORK) 561-700-4445

CAN TESTIFY TO: Facts of case

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: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) 561-799-4445

CAN TESTIFY TO: Facts of case

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: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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TESTING FACILITY TASK REPORT

AGENCY: PBGPD-WARREN

SUBJECT: BARBER, TAMMI R

CASE NUMBER: 18-139573

DATE: Oct 31, 2018

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 2336

ENDING TIME: 2351

BREATH TESTS RESULTS: 1) V/.243 TIME 2343 A.M.☐ P.M.☒ 2) V/.261 TIME 2349 A.M.☐ P.M.☒

3) REF TIME 2349 A.M.☐ P.M.☒ 4) XX TIME XX A.M.☐ P.M.☐

BREATH OPERATOR: J Biggs# 7607

MAINTENANCE TECHNICAN: D/S J Karklecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED, DELAYED, MUMBLING AT TIMES

ATTITUDE: COOPERATIVE, THEN UPSET

CLOTHING: BLK/WHI DRESS, BLK JACKET

MEDICAL CONDITIONS: NERVE DAMAGE, HBP

MEDICATIONS: HBP MED, NUERONTIN, PERCOCET

OTHER:

EYES GLASSY, RED
STRONG ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE ON SUBJECT

COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 2315
SUBJECT ADVISED SHE WOULD SUBMIT TO THE BREATH TEST
SUBJECT WAS GIVEN THE INSTRUCTIONS FOR THE TEST
SUBJECT WAS NOT FOLLOWING INSTRUCTIONS, HOLDING HER BREATH BACK AND NOT BLOWING CORRECTLY.
SUBJECT WAS READ IMPLIED CONSENT
SUBJECT TRIED ONCE AGAIN AND WAS UNABLE TO PROVIDE A SAMPLE
REFUSAL WAS CALLED
MIRANDA WAS READ
SUBJECT REFUSED QUESTIONS

NOTE: SUBJECT WAS COMPLAINING ABOUT HANDCUFFS AND PRIOR INJURY. SUBJECTS HANDCUFFS WERE EXTREMLY LOOSE AND SUBJECT COULD TURN WRIST AROUND AS MUCH AS NEEDED

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SUBJECT: _____ CASE NUMBER: _____

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)_____

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SUBJECT: _____ CASE NUMBER: _____

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? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

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

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

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? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ 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? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? (T.S.) _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE:
- EPILEPSY? _____
- GLASS EYE? _____
- FALSE TEETH? _____
- EAR INFECTION? _____
- INNER EAR TROUBLE? _____
- DIABETES? _____

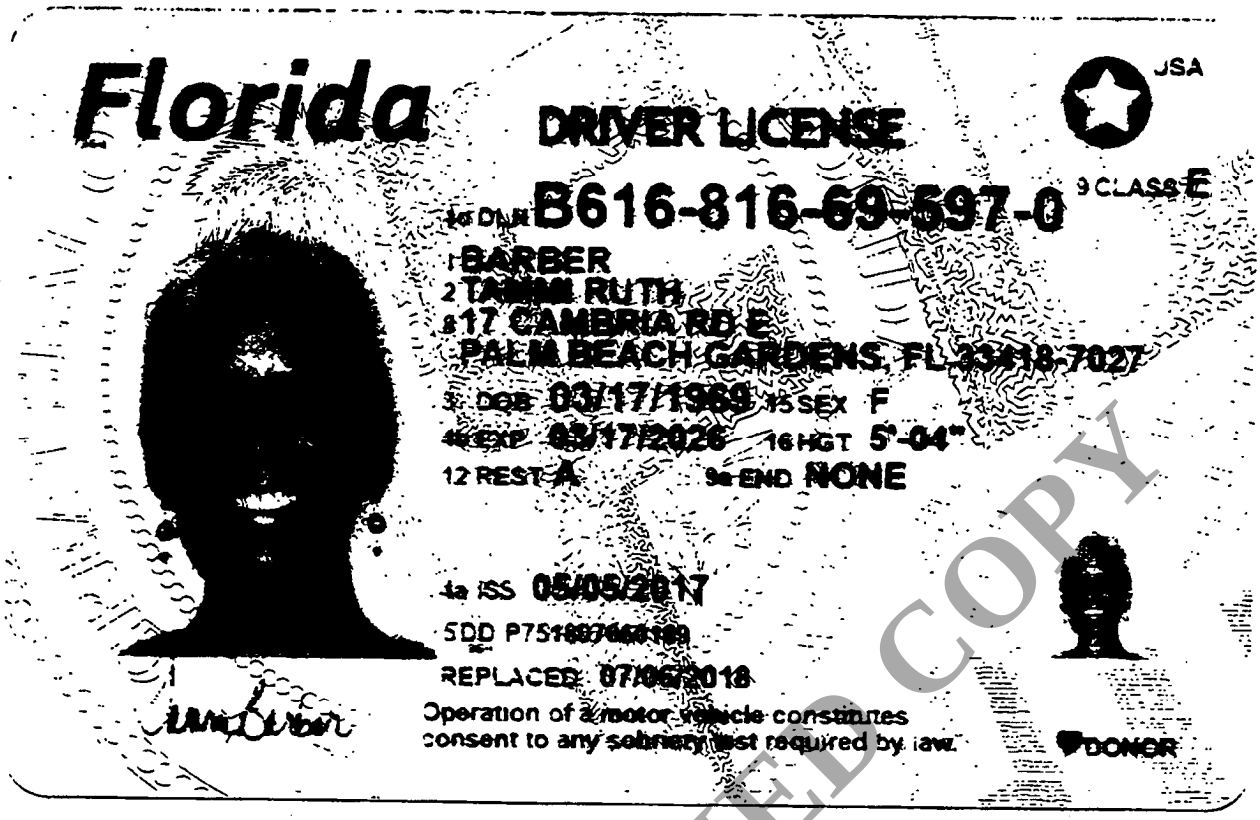
DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

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

INTERVIEWER: _____

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Florida
DRIVER LICENSE
USA
4d DLN B616-816-69-597-0
9 CLASS E
1 BARBER
2 TAMMI RUTH
8 17 CAMBRIA RD E
PALM BEACH GARDENS, FL 33418-7027
3 DOB 03/17/1969 15 SEX F
4b EXP 03/17/2026 16 HGT 5'-04"
12 REST A 9a END NONE
4a ISS 05/05/2017
5DD P751607668189
REPLACED 07/06/2018
Operation of a motor vehicle constitutes consent to any sobriety test required by law.
DONOR
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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	☐	539.001, F.S., 539.003, F.S.	Other: Pawn Broker Information	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2018036479	**Date:** 11/01/2018
	Specialist Name/ID: M. Tooks #8557