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ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

1 Juvenile
N

OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-17-132194	
Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 2 <input type="checkbox"/> 1. Yes <input checked="" type="checkbox"/> 2. No N/A	
Location of Arrest (Including Name of Business) NORTHLAKE BLVD / SILVERTHORNE DR PBC				Location of Offense (Business Name, Address) NORTHLAKE BLVD / SILVERTHORNE DR PBC			
Date of Arrest 9/26/2017		Time of Arrest 2116		Booking Date		Booking Time	
Jail Date		Jail Time		Location of Vehicle SHEEHANS TOWING LOT			
Name (Last, First, Middle) PULIATTI, THEA				Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White I - American Indian B - Black O - Oriental/Asian W		Sex F		Date of Birth 11/24/1987		Height 5'09	
Weight 150		Eye Color BROWN		Hair Color BLONDE		Complexion LIGHT	
Build LIGHT		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) N/A		Marital Status N/A		Religion NONE	
Indication of Alcohol Influence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk.		Indication of Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk.		Local Address (Street, Apt. Number) (City) (State) (Zip) 9331 SUNRISE DRIVE, LAKE PARK, FL, 33403		Phone (561) 577-0631	
Residence Type: 1. City 2. County 3. Florida 4. Out of State		Permanent Address (Street, Apt. Number) (City) (State) (Zip) 9331 SUNRISE DRIVE, LAKE PARK, FL, 33403		Phone (561) 577-0631		Address Source VERBAL	
Business Address (Name, Street) (City) (State) (Zip)		Phone		Occupation CRIMINAL			
D/L Number, State P430-800-87-924-0, FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) HUNTSVILLE, AL	
Citizenship US		Co-Defendant Name (Last, First, Middle)		Race		Sex	
Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile			
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile					
Parent Name (Last) (First) (Middle)		Residence Phone		Legal Custodian		Other	
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 <input type="checkbox"/> defendant and/or <input type="checkbox"/> defendant's parents The child and/or parent was told to keep the Juvenile Court Clerk (Phone 355-2528) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)		School Attended	
Grade		Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property		Value of Property	
Drug Activity S. Sell N. N/A P. Possess		R. Smuggle D. Deliver E. Use		K. Dispense/Distribute		M. Manufacture/Produce/Cultivate	
Z. Other		Drug Type 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 Description DRIVING UNDER THE INFLUENCE		Counts 1	
Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 316.193(1)		Violation of ORD #		Warrant / Capias Number	
Bond		Charge Description POSSESSION OF COCAINE		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
Statute Violation Number 893.13(6A)		Violation of ORD #		Warrant / Capias Number		Bond	
Charge Description DRUG PARAPHERNALIA		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 893.147(1)	
Violation of ORD #		Warrant / Capias Number		Bond		Charge Description POSSESSION OF MARIJUANA UNDER 20 GRAMS	
Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 893.13(6B)		Violation of ORD #	
Warrant / Capias Number		Bond		Location (Court, Room Number, Address) NORTH COUNTY COURTHOUSE / 3188 PGA BLVD, PALM BEACH GARDENS, FL 33410		Court Date and Time Month OCTOBER Day 18TH Year 2017 Time 0830 AM <input checked="" type="checkbox"/> 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		HOLD for other Agency Name: <input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:	
Signature of Arresting Officer [Signature]		Name of Arresting Officer (Print) D/S SCARTOZZI #21289		I.D. # 21289		Name Verification (Printed by Arrestee) [Signature]	
Transporting Officer SAME		ID #		Agency PBSO		PAGE 1 OF 2	

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY (ONLY DEFENDANT ATTORNEYS ONLY)

54:54 AM 5:45
27 SEP 27
SCANNED
OCT 01 2017

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-17-132194	
Charge Type: Check as many as apply.			1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input checked="" type="checkbox"/> 6. Other <input type="checkbox"/>		Weapon Seized / Type 2. <input type="checkbox"/> 1. Yes <input type="checkbox"/> N/A 2. No <input type="checkbox"/>	
Location of Arrest (Including Name of Business) NORTHLAKE BLVD / SILVERTHORNE DR PBC				Location of Offense (Business Name, Address) NORTHLAKE BLVD / SILVERTHORNE DR PBC		
Date of Arrest 9/26/2017	Time of Arrest 2116	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle SHEEHANS TOWING LOT

Name (Last, First, Middle) PULIATTI, THEA				Alias (Name, DOB, Soc. Sec. #, Etc.)		
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex F	Date of Birth 11/24/1987	Height 5'09	Weight 150	Eye Color BROWN	Hair Color BLONDE
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) N/A			Marital Status N/A	Religion NONE	Indication of: Alcohol Influence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/> Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>	

Local Address (Street, Apt. Number) (City) (State) (Zip) 9331 SUNRISE DRIVE, LAKE PARK, FL, 33403		Phone (561) 577-0631	Residence Type: 1. City <input type="checkbox"/> 3. Florida <input type="checkbox"/> 2. County <input type="checkbox"/> 4. Out of State <input type="checkbox"/>
Permanent Address (Street, Apt. Number) (City) (State) (Zip) 9331 SUNRISE DRIVE, LAKE PARK, FL, 33403		Phone (561) 577-0631	Address Source VERBAL
Business Address (Name, Street) (City) (State) (Zip)		Phone ()	Occupation CRIMINAL
D/L Number, State P430-800-87-924-0, FL	Soc. Sec. Number	INS Number	Place of Birth (City, State) Citizenship HUNTSVILLE, AL US

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile

<input type="checkbox"/> Parent Name (Last) (First) (Middle)	Residence Phone ()
<input type="checkbox"/> Legal Custodian	
<input type="checkbox"/> Other	
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 <input type="checkbox"/> defendant and / or <input type="checkbox"/> 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. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)		School Attended	Grade
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No	Description of Property	Value of Property	

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/Deviv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other
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Charge Description DUI REFUAL TO SUBMIT	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.1939	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit	Offense # 17-132194	Warrant / Capias Number
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number

Location (Court, Room Number, Address) NORTH COUNTY COURTHOUSE / 3188 PGA BLVD, PALM BEACH GARDENS, FL 33410
Court Date and Time Month OCTOBER Day 18TH Year 2017 Time 0830 AM <input checked="" type="checkbox"/> 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
HOLD for other Agency Name:	Signature of Arresting Officer X [Signature] 21289	Name Verification (Printed by Arrestee)
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:	Name of Arresting Officer (Print) I.D. # D/S P SCARFOTZI #21289 21289	(PRINT)
Intake Deputy I.D. # Pouch #	Transporting Officer ID # Agency SAME PBSO	WITNESS here if subject signed with an "X" PAGE

PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

ADMIN	OBTS Number	Agency ORI Number FLO 50000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06- 17132194
	Charge Type: Check as many as apply.	<input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input checked="" type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	Special Notes: ***SUP PC***

DEF	Name (Last, First, Middle) Puliatti, Thea Delian.	Alias	Race W	Sex F	Date of Birth 11/24/1987
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CHARGES	Charge Description DUI	Charge Description POSSESSION OF COCAINE
	Charge Description POSSESSION OF MARIJUANA LESS THAN 20G	Charge Description POSSESSION OF DRUG PARAPHERNALIA

VICTIM	Victim's Name (Last, First, Middle) STATE OF FLORIDA, ,	Race	Sex	Date of Birth
	Local Address (Street, Apt. Number) (City) (State) (zip) Phone () ()	Address Source		
	Business Address (Name, Street) (City) (State) (zip) Phone () ()	Occupation		

The undersigned certifies and swears that he/she has just and reasonable 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. was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.

confessed to _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.

On the **26th** day of **September** 20**17** at **8:30** A.M. P.M. (Specifically include facts constituting cause for arrest.)

*****Supplemental PC*****

On September 26th, 2017 at approximately 2030 hours, I was parked at the red light facing south on Congress Avenue at Northlake Blvd in unincorporated Palm Beach Gardens, FL. I noticed that all of the lights for southbound traffic were solid red including the right hand turn lane. I then noticed a black Lexus 4-D bearing FL tag EFQD49 driving north on south on Congress Avenue coming up behind me. The vehicle then went into the right turn lane (while the light was still solid red) passing the painted white stop bar and causing the passenger side tires to go up onto the curb which is apart of the sidewalk paved for pedestrian use. The vehicle then continued westbound on Northlake Blvd where I conducted a traffic stop on the vehicle at Northlake Blvd and Silverthorn Drive.

I made contact with the driver who was identified by her FL driver's license as Thea Puliatti. While speaking with Thea, I noticed her speech was slurred and delayed, her eyes were red and glossy, and I could smell the distinct odor of an unknown alcoholic beverage emanating from her as she spoke to me. She then reached into her purse to grab her driver's license which was on the passenger seat. I also noticed the distinct odor of raw marijuana which I recognized through my training and experience as a Deputy Sheriff.

I asked her where she was coming from this evening to which she stated that she was heading home. I then advised her that I was not asking where she was going, but where she was coming from. She again stated she was heading home. I asked a third time to which she stated she was coming from the beach. I then asked her if she came out of the mobile home park (Hilltop Park). She then stated she was coming from a friends house in Hilltop Park, contradicting what she originally said. She denied drinking any alcohol this evening and insisted on having me arrange a ride for her to get home. I asked her why she would want me to do this if she was okay to drive, to which she stated that she just wanted to go home. I advised her to give me the keys to the vehicle to prevent her from leaving as I was now conducting a criminal DUI investigation. She then stated that she wanted to speak to an attorney first and would not give me the keys. I then clarified that I was giving her a lawful order to give me her keys to which she then complied. I had D/S Scartozzi 21289 come to the scene to conduct a DUI investigation where she was subsequently arrested. I issued her a citation for the red light violation and driving on a sidewalk.

I then went back to her car for the purpose of inventorying the vehicle for tow, as well as to search it based on the smell of raw marijuana coming from it. I noticed a plastic bag sticking out of Thea's purse. I searched the purse and found that the bag contained several small pieces of a green leafy substance. The substance field tested positive for marijuana on scene using an agency issued Sirchie Duquenois test kit. I also found wedged between the passenger seat and the center console was a small clear plastic bag with a small amount of white powder in it. I field tested the powder with an agency issued Sirchie Cobalt test kit which showed positive results for cocaine. Also found in Thea's purse was a red straw approximately three inches long which had white powder coating the inside of it. I field tested a small amount of the powder within the straw with another Cobalt test kit which also showed positive results for cocaine. The marijuana, cocaine, and plastic straw with cocaine residue were all placed into evidence for chemistry testing and court presentation if necessary.

Based on the findings of my involvement in this case, I find probable cause exists to charge Thea with possession of cocaine FSS 893.13 (6A), possession of marijuana less than 20 grams FSS 893.13(6B), and possession of drug paraphernalia FSS 893.147(1). See D/S Scartozzi's probable cause affidavit regarding the DUI portion of this investigation.

ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH		D/S HOLE 18340
	(Signature of Arresting/Investigative Officer)		
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>26</u> day of <u>SEPTEMBER</u> 20 <u>17</u> by <u>D/S HOLE 18340</u>		
	(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced		
	<u>D/S SCARTOZZI 21289</u>		
	Notary Public, Clerk of Court, Officer (F.S.S. 117.10)		

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH AND/OR URINE TEST

I, D/S P. Scartozzi 21289, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of PALM BEACH COUNTY SHERIFF'S OFFICE, and I do swear
(Name of law enforcement agency)

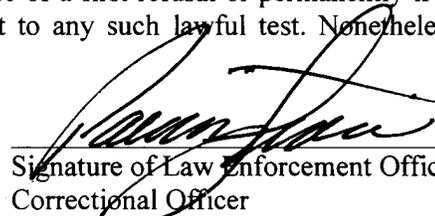
or affirm that on or about the 26TH day of SEPTEMBER, 20 17, at 09:16 P.M. A.M.

DRIVER THEA DELIAN PULIATTI
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# P430-800-87-924-0, state of FLORIDA, was placed under lawful arrest for
the offense of DUI by D/S P. Scartozzi 21289 and
(Name of Arresting Officer)
issued Citation # A2FUIGP.

That on or about the 26TH day of SEPTEMBER, 20 17, at 10:04 P.M. A.M.
in PALM BEACH County,

I requested that the driver submit to a **breath and/or** **urine** test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended for refusing to submit to a breath, urine or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.



Signature of Law Enforcement Officer or
Correctional Officer



THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title _____

Date _____

The foregoing instrument was sworn and subscribed before
me this 26 day of Sept., 20 17,
by D/S P. Scartozzi 21289,

who is personally known to me or who has produced
PERSONALLY KNOWN as identification

Notary Public Jeannette Cain

HSMV-BAR1001 (REV. 10/2016)

Note: Mail or hand deliver to the designated Bureau of Administrative Reviews office, Department of Highway Safety and Motor Vehicles, with the driver's license, the appropriate copy of the UTC, and the probable cause affidavit.

SCANNED

OCT 01 2017

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 26TH DAY OF SEPTEMBER 20 17, AT 2038 AM PM

SUBJECT: PULIATTI, THEA CASE NUMBER: 17-132194

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S P SCARTOZZI #21289

PERSONAL CONTACT

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

On 9/26/2017 at approximately 2038 hours I was dispatched to backup D/S Hole 18340 who conducted a traffic stop in the area of Northlake Blvd & Silverthorne drive Palm Beach Gardens, FL, 33418 in unincorporated Palm Beach County. I was driving my marked patrol vehicle asset number 68559 and wearing my Palm Beach County Sheriff's office issued dress uniform. Upon my arrival I noticed a black Lexus sedan bearing Florida license plate number EFQD49 parked just north of Northlake blvd on Silverthorne Drive. I made contact with D/S Hole 18340 who was parked directly behind this black Lexus with his emergency blue lights activated. D/S Hole gave me a brief description of what he observed, he would later provide me with a supplemental probable cause affidavit which was attached to this packet. I then approached the drivers side of the sedan to make contact with the driver. Immediately upon making contact with the driver, identified by Florida drivers license as Thea Puliatti I could smell the strong odor of an unknown alcoholic beverage emitting from her breath. Her eyes were blood shot and watery, her speech was slow, thick and slurred. She was smoking a cigarette and playing with her cell phone, I asked her to put the cigarette out and step out of the vehicle. When she stepped out she asked me what was I doing and I explained to her that I was conducting a criminal DUI investigation. I then asked her to walk toward the front of my patrol vehicle was approximately 35 feet south of the traffic stop location.

OBSERVATION OF DRIVER:

When she started walking she would sway and stumble slightly. I chose a smooth level portion of the as fault roadway, free of debris and obstructions in order to perform roadside tasks. When she reached the front of my patrol vehicle I asked her to stand with her heels and toes together with her arms at her sides. While standing here she would sway in a side to side back to front manner. She would step out of the stance and had to be reminded how to stand. I asked her how much she had to drink and she said she just wants to go home. I asked her again and she repeated the same answer, I then informed her that I could see several signs of impairment in her. I asked her if she had any medical conditions and she advised no, I asked her if she had any medical conditions which would cause her breath to display the odor of an unknown alcoholic beverage and she advised no. I asked her if she had any glasses or contacts and she advised she had soft contacts in her eyes at this time. I asked her if she had any physical or mental disabilities and she advised no. I then moved to the lighted pen task. She was asked to stand with her heels and toes together with her arms at her sides. While standing here she would sway in a side to side front to back manner more than 2 inches.

DRIVER'S STATEMENTS:

During the horizontal gaze Nystagmus (HGN) task the drivers eyes displayed equal pupil size and equal tracking. The driver's eyes displayed lack of smooth pursuit, distinct and sustained Nystagmus at maximum deviation and distinct and sustained Nystagmus prior to 45 degrees. During the Vertical gaze Nystagmus (VGN) task the drivers eyes displayed equal pupil size and equal tracking. The driver's eyes displayed lack of smooth pursuit, distinct Nystagmus when looking all the way up. The driver's eyes also displayed onset of Nystagmus prior to 45 degrees when looking all the way up. While standing here the odor of an unknown alcoholic beverage was strong and consistent.

ODORS:

A strong and obvious odor of an unknown alcoholic beverage was emitting from her person and face area. This odor intensified as she spoke with me.

GENERAL OBSERVATIONS

SPEECH: SLOW, THICK, SLURRED

ATTITUDE: COOPORATIVE / UNCOOPROATIVE MOOD SWINGS

CLOTHING: GREY SHIRT, BLACK PANTS, BLACK SHOES.

MEDICAL/OTHER: The driver denied any medical conditions, physical disabilities, injuries and medication use and or use of recreational drugs.

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S P SCARTOZZI #21289

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 26TH day of SEPTEMBER 20 17 by D/S P SCARTOZZI #21289

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

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



SCANNED

OCT 01 2017

SUBJECT: PULIATTI, THEA

CASE NUMBER 17-132194

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:

WALK & TURN:

She was asked to place her left foot on the ground with her right foot directly in front of it, then place her arms at her sides and stay in this position while I demonstrated this task. She would sway roughly, in a side to side, front to back pattern throughout the demonstration phase. She could not maintain her balance while listening to instructions and stepped out of the stance during the demonstration to catch her balance. She started the task before being instructed. She would stop walking to steady herself with pauses to regain her balance. On the first set of heel to toe steps she missed steps one through nine and stepped off the line, using her arms for balance by raising them more than six inches. On the second set of heel to toe steps she missed steps one through nine and stepped off the line, using her arms for balance by raising them more than six inches. She performed the incorrect number of steps. She performed the turn other than the way it was demonstrated.

ONE LEG STAND:

She was asked to stand with her feet and toes together with her arms at his sides and stay in this position while I demonstrate this task. She would sway roughly, in a side to side, front to back pattern throughout the demonstration phase. She could not maintain her balance while listening to instructions and stepped out of the stance during the demonstration to catch her balance. She started the task before being instructed. She continued to sway while balancing on one leg. She used his arms for balance by raising them more than six inches from her sides. She started hopping in an attempt to maintain her balance. She put his foot down to regain her balance at numerous times before the thirty seconds had elapsed. She put his foot down three times all before counting to thirty seconds, thusly not being able to complete the task.

FINGER TO NOSE:

She was asked to stand with her feet and toes together. She was then instructed to make a fist with both hands and extend both her index fingers. She was then asked to placed her hands down to her sides and remain in this position while I demonstrated this task. I demonstrated the proper instruction position. She would sway roughly in a side to side, front to back pattern throughout the demonstration phase. She did not keep his eyes closed and had to be reminded numerous times to do so. She failed to return her arms down to her sides as instructed after touching her nose. Her index finger did not touch her nose. She used the hand other than that which was called. The sequence used for this task was L, R, L, R, R, L. She was unable to perform the task.

ROMBERG ALPHABET:

She was asked to stand with her feet and toes together with his arms at her sides and stay in this position while I demonstrated this task. She chose to recite the alphabet. She would sway roughly in a side to side, front to back pattern throughout the demonstration phase. She would not keep her eyes closed and had to be reminded numerous times to do so. She would sway more than 2 inches. She would use her arms for balance by raising them more than six inches. She recited the alphabet with no noticeable mistakes.

BREATH TEST RESULTS: 1) REFUSED 2) REFUSED 3) N/A 4) N/A

STATE OF FLORIDA
COUNTY OF PALM BEACH

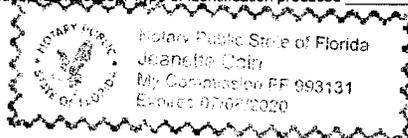
D/S P SCARTOZZI #21289

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 26TH day of SEPTEMBER, 2017 by D/S P SCARTOZZI #21289

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

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



SCANNED
OCT 01 2017

WITNESS LIST

CASE NUMBER: 17-132194

ARRESTING OFFICER: D/S P SCARTOZZI #21289

ADDRESS: 3228 Gun Club Road, West Palm Beach, FL, 33406

PHONE NUMBERS (HOME): 561-688-3000 (WORK) (561)688-4900

CAN TESTIFY TO: DUI INVESTIGATION

NAME: D/S HOLE 18340

ADDRESS: 3228 Gun Club Road, West Palm Beach, FL, 33406

PHONE NUMBERS (HOME) 561-688-300 (WORK) 561-688-3000

CAN TESTIFY TO: SUPP PC

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

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ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NOT A CERTIFIED COPY

SCANNED
OCT 01 2017