

ARREST / NOTICE TO APPEAR

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

1 N

OBTS Number	Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number (N.T.A.'s only) <b>06-18060155</b>	
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
Location of Arrest (Including Name of Business) <b>12608 LYONS RD, DELRAY BEACH, FL, 33446</b>				Location of Offense (Business Name, Address) <b>12608 LYONS RD DELRAY BEACH / FL / 33446</b>		
Date of Arrest <b>04/09/2018</b>	Time of Arrest <b>01:53</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle

Name (Last, First, Middle) <b>WEISS TULI J.</b>		Alias (Name, DOB, Soc. Sec. #, Etc.)						
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex <b>W F</b>	Date of Birth <b>11/8/91</b>	Height <b>5'7</b>	Weight <b>120</b>	Eye Color <b>BRN</b>	Hair Color <b>BLONDE</b>	Complexion <b>FAIR</b>	Build <b>THIN</b>
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status <b>Single</b>	Religion	Indication of Alcohol Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk.	Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk.	
Local Address (Street, Apt. Number) <b>19525 ESTUARY DR</b>		(City) <b>BOCA RATON/ FL/ 33498</b>	(State)	(Zip)	Phone <b>(561) 400-9909</b>	Residence Type: 1. City 2. County 3. Florida 4. Out of State <b>2</b>		
Permanent Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone	Address Source <b>FL DL</b>		
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation <b>WAITRESS</b>		
D/L Number, State <b>W-200-810-91-908-0</b>		Soc. Sec. Number		INS Number		Place of Birth (City, State) <b>HACKENSAC, NEW JERSEY</b>		Citizenship

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

<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> 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 <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 <b>APR 5 2018</b> 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/deriv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other
Charge Description <b>DUI (CRASH WITH INJURIES)</b>	Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number <b>316.193(3C1)</b>	Violation of ORD #		Warrant / Capias Number	Bond <b>OR</b>			
Charge Description <b>UNLAWFUL POSSESSION OF PRESCRIPTION DRUGS</b>	Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number <b>499.03(1)</b>	Violation of ORD #		Warrant / Capias Number	Bond <b>OR</b>			
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	Violation of ORD #		Warrant / Capias Number	Bond			
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	Violation of ORD #		Warrant / Capias Number	Bond			

Location (Court Room Number, Address) <b>3228 GUN CLUB RD WEST PALM BEACH FL 33406</b>	
Court Date and Time Month <b>5</b> Day <b>3</b> Year <b>2018</b> Time <b>0830</b> AM <input checked="" type="checkbox"/> PM	Signature of Defendant (or Juvenile and Parent /Custodian)

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 **04/09/2018**

HOLD for other Agency Name:	Signature of Arresting Officer <b>X</b>	Name Verification (Printed by Arresting Officer) <b>(PRINT) NP</b>
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:	<b>SCANNED</b> <b>APR 12 2018</b> PAGE
Intake Deputy <b>DAVID J. THOMAS</b> I.D. #	Pouch #	Transporting Officer <b>INV. G. LYNCH 8568</b> ID # <b>8568</b> Agency <b>PBSO</b>
Witness here if subject signed with an "X"		<b>1</b> OF <b>1</b>

PROBABLE CAUSE AFFIDAVIT

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

Juvenile  N

OBTS Number Agency ORI Number Agency Name Agency Report Number

FLO 50000 PALM BEACH COUNTY SHERIFF'S OFFICE 06- 18060155

Charge Type: 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other

Name (Last, First, Middle) WEISS, TULL, J. Race W Sex F Date of Birth 11/8/91

Charge Description DUI (CRASH WITH INJURIES) 316.193(3C1) Charge Description UNLAWFUL POSSESSION OF PRESCRIPTION DRUGS 499.03(1)

Charge Description

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. [X] was found to have committed the below acts, resulting from my (described) investigation. On the 9 day of APR 20 18 at 00:06 [X] A.M. [ ] P.M. (Specifically include facts constituting cause for arrest.)

While searching Weiss's purse and placing her items into her property I located a clear plastic baggie with multiple pills. Inside the baggie was half of an orange pill with the marking 2 on one side and a 9 on the other. Using the pill identifier I positively identified the pill to be Amphetamine and dextroamphetamine 20mg pill, a schedule 2 controlled prescription drug. Based on finding the pill in Weiss's purse, not in a pill bottle prescribed to her, I found probable cause to charge Weiss with unlawful possession of prescription drugs pursuant to Florida State Statue 499.03(1)

PROBABLE CAUSE STATEMENT

NOT A CERTIFIED COPY

STATE OF FLORIDA COUNTY OF PALM BEACH INV. G. LYNCH 8568 (Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me on this 9 APR 20 18 by INV. G. LYNCH 8568 KNOWN SCANNED

(Print name of Arresting/Investigative Officer), who is personally known to me and has produced identification. Notary Public, State of Florida Commission # GG 036116 My Comm. Expires Oct 5, 2020 Bonded through National Notary Assn. APR 12 2018

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY

PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

N

ADMIN	OBTS Number	Agency Name		Agency Report Number
	FLO 50000	PALM BEACH COUNTY SHERIFF'S OFFICE		06- 18060155
Charge Type: Check as many as apply.				
<input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other				

DEF	Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
	WEISS, TULLI, J.		W	F	11/8/91

CHARGES	Charge Description	Charge Description
	DUI (CRASH WITH INJURIES) 316.193(3C1)	

VICTIM	Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth	
	STATE OF FLORIDA, ,	/	/	/	
	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 9 day of APR 2018 at 00:06  A.M.  P.M. (Specifically include facts constituting cause for arrest.)

On 4/9/18 I responded to the 12600 block of Lyons Rd, in Palm Beach County, in reference to a vehicle crash (PBSO case 18060146). Upon arrival I observed a black BMW 4 door car, bearing FL tag INMI60, on the west side of the roadway, with rear passenger side damage. Another vehicle, a gray Toyota 4 door car bearing FL tag Y99RTU, was further north off the east side of the roadway, on the sidewalk, with front end damage. My crash investigation revealed the point of impact to be in the northbound lanes of Lyons Rd, just south of where the vehicles came to rest.

I spoke with Andrew Cassidy, who witnessed the crash, and provided a sworn written statement. Cassidy advised me that he was traveling south on Lyons Rd and the BMW was a little bit ahead of him. He saw the BMW start to make a U-turn, but stop horizontally in the north bound lanes. After passing the BMW he saw the Toyota traveling northbound. Cassidy watched in his rear view mirror and saw the lights from the car jerk suddenly and the emergency flashers come on and he knew the vehicle had collided. Cassidy immediately returned to the scene and made contact with the drivers. Cassidy made contact with the driver of the BMW, later identified as Tuli Weiss. Cassidy advised that Weiss appear "out of it" and smelled the odor of alcohol coming from her breath. Cassidy positively identified Weiss as the driver of the BMW.

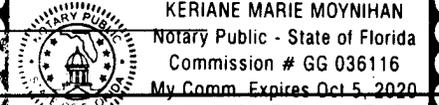
STATE OF FLORIDA  
COUNTY OF PALM BEACH

INV. G. LYNCH 8568

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 9 day of APR 2018 by INV G. LYNCH  
KNOWN **SCANNED**

(Print name of Arresting/Investigative Officer, who personally known \_\_\_\_\_)  
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



APR 12 2018

PAGE 1 OF 1

# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 9 DAY OF APR 20 18 AT 00:06  AM  PM  
SUBJECT: WEISS TULI J. CASE NUMBER: 18060155  
AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV. G. LYNCH 8568

## PERSONAL CONTACT

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

### OBSERVATION OF DRIVER:

Weiss's eyes were red and glassy. Weiss's movements were slow and uncoordinated. There was an odor of a unknown alcoholic beverage coming from her breath, which got stronger when she spoke. Weiss's speech was slow and slurred. Weiss had sudden mood changes from calm/cooperative to upset/uncooperative to crying. When Weiss stood up she was very unsteady and almost fell over.

### DRIVER'S STATEMENTS:

Was coming from "B&B Bar"  
Weiss stated that she didn't want to talk until she was given a "tictac".  
Weiss did not remember the crash but advised the other driver hit her.

### ODORS:

STRONG ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM SUBJECT'S BREATH.

## GENERAL OBSERVATIONS

SPEECH: slow and slurred

ATTITUDE: calm/cooperative to upset/uncooperative to crying

CLOTHING: \_\_\_\_\_

MEDICAL/OTHER: \_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF PALM BEACH

INV. G. LYNCH 8568

Signature of Arresting/Investigative Officer

The foregoing instrument was sworn to or affirmed and subscribed before me this 9 day of APR 20 18 by INV. G. LYNCH 8568

Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification: KNOWN

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



SCANNED

APR 12 2018

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:

NOT CONDUCTED DUE TO BEING AT THE HOSPITAL

WALK & TURN:

NOT CONDUCTED DUE TO BEING AT THE HOSPITAL

ONE LEG STAND:

NOT CONDUCTED DUE TO BEING AT THE HOSPITAL

FINGER TO NOSE:

NOT CONDUCTED DUE TO BEING AT THE HOSPITAL

ROMBERG ALPHABET:

NOT CONDUCTED DUE TO BEING AT THE HOSPITAL

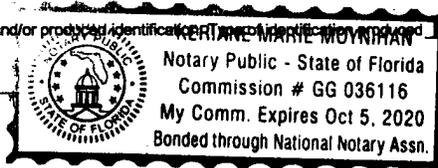
BREATH TEST RESULTS: 1) REFUSED 2) REFUSED 3) REFUSED 4) REFUSED

STATE OF FLORIDA  
COUNTY OF PALM BEACH  
**INV. G. LYNCH 8568**  
Signature of Arresting/Investigative Officer

The foregoing instrument was sworn to or affirmed and subscribed before me this 9 day of APR 2018 by INV. G. LYNCH 8568

Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification to me: KEVIN MARIE MOWBRAN KNOWN

*Kevin M. Mowbran*  
Notary Public, Clerk of Court, Officer (F.S.S 117.10)



SCANNED  
APR 12 2018

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 o chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST

I am INV. G. LYNCH 8568 of the PBSO

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:  WEISS, TULI, J.

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

You have the right to remain silent and not answer any questions.

Any statement must be freely and voluntarily given.

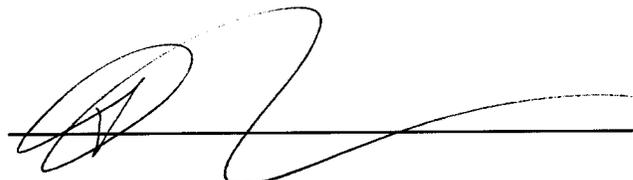
You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.

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.

If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.

I can make no threats or promises to induce you to make a statement. This must be of your own free will.

Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE:  WEISS, TULI, J.

SCANNED  
APR 12 2018

# WITNESS LIST

CASE NUMBER: 18060155

ARRESTING OFFICER: INV. G. LYNCH 8568

ADDRESS: HQ

PHONE NUMBERS (HOME): \_\_\_\_\_ (WORK) 561 688 3000

CAN TESTIFY TO: FACTS OF CASE

NAME: ANDREW CASSIDY

ADDRESS: 1670 SATIN LEAF CT, DELRAY BEACH, FL, 33445

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) 561 688 3000

CAN TESTIFY TO: WITNESS TO CRASH/ POSITIVELY IDENTIFY DRIVER

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

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: \_\_\_\_\_

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: \_\_\_\_\_

**SCANNED**

**APR 12 2018**

PALM BEACH COUNTY SHERIFF'S OFFICE – **SWORN STATEMENT**

Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.



WITNESS    VICTIM    OTHER

CASE #: <b>18-060155</b>	ZONE: <b>4-31</b>	SUSPECT: <b>Tuli Weiss</b>	DATE & TIME OF ORIGINAL EVENT/OFFENSE: <b>4/9/18 00:06</b>
EVENT TYPE: <b>DUI</b>	DEPUTY: <b>INV. G. Lynch</b>	ID#: <b>8568</b>	

COMPLETE EVERYTHING BELOW – PRINT LEGIBLY

LAST NAME: <b>Cassidy</b>	FIRST NAME: <b>Andrew</b>	MIDDLE INITIAL: <b>S</b>	RACE: <b>White</b>	SEX: <b>M</b>
DATE OF BIRTH: <b>10/23/1998</b>	YOUR HEIGHT: <b>5-5</b>	YOUR WEIGHT: <b>135</b>	YOUR HAIR COLOR: <b>brown</b>	YOUR EYE COLOR: <b>blue</b>
YOUR HOME ADDRESS: <b>1670 Satin Leaf Ct</b>	<input type="checkbox"/> CHECK IF HOMELESS	CITY: <b>Delray Beach</b>	STATE: <b>FL</b>	ZIP: <b>33445</b>
YOUR WORK NAME & ADDRESS: <b>The Girls Strawberry Patch</b>	<input type="checkbox"/> CHECK IF UNEMPLOYED OR RETIRED	CITY: <b>Delray Beach</b>	STATE: <b>FL</b>	ZIP: <b>33445</b>
WORK PHONE: <input type="checkbox"/> CHECK IF NONE	CELL PHONE: <b>(561) 886-7888</b>	HOME PHONE: <input type="checkbox"/> CHECK IF NONE	EMAIL: <b>andrewscassidy@yahoo.com</b>	<input type="checkbox"/> CHECK IF NONE

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL – PRINT LEGIBLY

YOUR NAME: <b>Andrew Cassidy</b>	DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...
<p>I was going south on Lyons road. A car was a bit ahead of me and I saw their brake lights. As I got closer, I saw she was attempting a U-turn. she was horizontal in the other lane while I passed and it seemed like she just stopped moving. I continued on and right away saw a northbound car. There was time for the U-turn to be done but the car stayed stopped and the north car was coming. I watched in my rear view mirror to see if anything happened and I thought I saw lights jerk and hazards so I knew right away they hit. I turned around at the school and headed back towards it. One car (north one) was in a ditch and the other was just pulled over there was some debris in road. I pulled into side dirt road and <del>noticed</del> the car in ditch lady was yelling for help. I ran over, called 911 and asked if she was okay. She was outside car and seemed physically fine but</p>	
PAGE <u>1</u> OF <u>2</u>	

READ AND SIGN

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:	<input checked="" type="checkbox"/> DEPUTY SHERIFF <input type="checkbox"/> NOTARY PUBLIC   FSS: 117.10 SWORN TO AND SUBSCRIBED BEFORE ME TODAY: DATE: <b>4/9/18</b> TIME: <b>0030</b> SIGNATURE: <i>[Signature]</i> ID: <b>8568</b>
YOUR SIGNATURE: <b>X Andrew Cassidy</b>	

IF YOU DO NOT WISH TO PROSECUTE, COMPLETE THE ABOVE STATEMENT, READ THIS DISCLAIMER AND INITIAL BELOW: I AM OF LEGAL AGE AND I AM THE REPORTED VICTIM OF A CRIME UNDER FLORIDA LAW. I HEREBY STATE THAT I WILL NOT COOPERATE ANY FURTHER WITH THE INVESTIGATION OF THE ALLEGED CRIME. I FURTHER RELEASE THE PALM BEACH COUNTY SHERIFF'S OFFICE OF ANY PRESENT OR FUTURE RESPONSIBILITY AS TO MY CASE. I ACKNOWLEDGE THAT I UNDERSTAND MY RIGHTS AS A CRIME VICTIM, PARTICULARLY REGARDING VICTIM COMPENSATION ELIGIBILITY, WHICH INCLUDES SUCH BENEFITS AS REIMBURSEMENT FOR: DISABILITY; LOST WAGES; LOSS OF SUPPORT; MEDICAL, DENTAL, MENTAL HEALTH COUNSELING AND FUNERAL EXPENSES. I AM AWARE OF MY RIGHTS FOR MY FAMILY AND MYSELF BY INITIALLING BELOW. I AM TAKING THIS POSITION OF MY OWN FREE WILL KNOWING THAT THE CASE CAN ONLY BE FURTHER INVESTIGATED AND PROSECUTED WITH MY COOPERATION.  DO NOT WISH TO PROSECUTE (INITIAL)

PALM BEACH COUNTY SHERIFF'S OFFICE – **SWORN STATEMENT**

Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.



WITNESS  VICTIM  OTHER

CASE #:	18-060155	ZONE:	4-31	SUSPECT:	Tuli Weiss	DATE & TIME OF ORIGINAL EVENT/OFFENSE:	4/9/18 00:06
EVENT TYPE:	DVI	DEPUTY:	INV. G. Lynch	ID#:	8568		

COMPLETE EVERYTHING BELOW – PRINT LEGIBLY

LAST NAME:	Cassidy	FIRST NAME:	Andrew	MIDDLE INITIAL:	S	RACE:	White	SEX:	M
DATE OF BIRTH:	(MM/DD/YYYY) 10/23/98	YOUR HEIGHT:	5-5	YOUR WEIGHT:	135	YOUR HAIR COLOR:	Brown	YOUR EYE COLOR:	Blue
YOUR HOME ADDRESS:	1670 Satin Leaf Ct.	<input type="checkbox"/> CHECK IF HOMELESS		CITY:	Delray Beach	STATE:	FL	ZIP:	33445
YOUR WORK NAME & ADDRESS:	The Girls Strawberry Patch	<input type="checkbox"/> CHECK IF UNEMPLOYED OR RETIRED		CITY:	Delray Beach	STATE:	FL	ZIP:	33445
WORK PHONE:	<input type="checkbox"/> CHECK IF NONE	CELL PHONE:	<input type="checkbox"/> CHECK IF NONE (561) 886-7888	HOME PHONE:	<input type="checkbox"/> CHECK IF NONE	EMAIL:	andrewscassidy@yahoo.com	<input type="checkbox"/> CHECK IF NONE	

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL – PRINT LEGIBLY

YOUR NAME:	1 Andrew Cassidy	DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...
<p>was saying her back was hurting a lot and she had heart surgery recently. She was yelling a lot and wouldn't really answer when I asked if ambulance was necessary. I was then asked to check on the other driver so I went across the road and asked if she was okay. She was really out of it and but seemed not injured at all. She thought everything was okay and didn't know why I was on the phone with 911. She seemed intoxicated because she didn't understand what the urgency was and <del>was</del> saw no problem. The cops arrived right then and took over with everything. I think I smelled <del>alcohol</del> alcohol in her breath when I was talking to her. She was around 25, blond, white. The lady in the ditch was older <sup>and</sup> hispanic</p>		
		PAGE <u>2</u> OF <u>2</u>

READ AND SIGN

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:	<input checked="" type="checkbox"/> DEPUTY SHERIFF <input type="checkbox"/> NOTARY PUBLIC FSS: 117.10
YOUR SIGNATURE: X <u>Andrew Cassidy</u>	SWORN TO AND SUBSCRIBED BEFORE ME TODAY: DATE: <u>4/9/18</u> TIME: <u>0030</u> SIGNATURE: <u>[Signature]</u> ID: <u>8568</u>

IF YOU DO NOT WISH TO PROSECUTE, COMPLETE THE ABOVE STATEMENT, READ THIS DISCLAIMER AND INITIAL BELOW: I AM OF LEGAL AGE AND I AM THE REPORTED VICTIM OF A CRIME UNDER FLORIDA LAW. I HEREBY STATE THAT I WILL NOT COOPERATE ANY FURTHER WITH THE INVESTIGATION OF THE ALLEGED CRIME. I FURTHER RELEASE THE PALM BEACH COUNTY SHERIFF'S OFFICE OF ANY PRESENT OR FUTURE RESPONSIBILITY AS TO MY CASE. I ACKNOWLEDGE THAT I UNDERSTAND MY RIGHTS AS A CRIME VICTIM, PARTICULARLY REGARDING VICTIM COMPENSATION ELIGIBILITY, WHICH INCLUDES SUCH BENEFITS AS REIMBURSEMENT FOR: DISABILITY; LOST WAGES; LOSS OF SUPPORT; MEDICAL, DENTAL, MENTAL HEALTH COUNSELING AND FUNERAL EXPENSES. I AM AWARE I MAY BE GIVING UP THESE RIGHTS FOR MY FAMILY AND MYSELF BY INITIALLING BELOW. I AM TAKING THIS POSITION OF MY OWN FREE WILL KNOWING THAT THE CASE CAN ONLY BE FURTHER INVESTIGATED AND PROSECUTED WITH MY COOPERATION.  DO NOT WISH TO PROSECUTE INITIAL SCANNED

*The Sunshine State*

DRIVER LICENSE CLASS E

W200-810-91-908-0

TULI J

WEISS

1000 ESTUARY DR

DADE COUNTY, FL 33148-0002

DOB: 11-05-1981 SEX: F



Operation of a motor vehicle constitutes consent to any sobriety test required by law.

NOT A CERTIFIED COPY

SCANNED  
APR 12 2018