

0483886

2156

ARREST / NOTICE TO APPEAR				Juvenile Referral Report								
ADMINISTRATIVE	OBTS Number		ARREST / NOTICE TO APPEAR		1. Arrest	3. Request for Warrant	1					
	Agency ORI Number		Agency Name		2. N.T.A.	4. Request for Capias	N					
	FLO 500000		PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only)		16168816					
	Charge Type: Check as many as apply. 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other				Weapon Seized / Type 2 1. Yes 2. No	Multiple Clearance Indicator						
	Location of Arrest (Including Name of Business) SUNSET BLVD/130TH AVE N WEST PALM BEACH FL 33411				Location of Offense (Business Name, Address) SUNSET BLVD/130TH AVE N WEST PALM BEACH FL 33411							
	Date of Arrest 12/24/16		Time of Arrest 0230		Booking Date	Booking Time	Jail Date	Jail Time				
							Location of Vehicle SUNSET BLVD/130TH AVE N PBC					
	Name (Last, First, Middle) WEINDORF, TYLER S.				Alias (Name, DOB, Soc. Sec. #, Etc.)							
	Race W - White 1 - American Indian B - Black 0- Oriental/Asian				Sex W	Date of Birth 01/26/89	Height 5'7	Weight 150				
	Eye Color BRO				Hair Color BRO	Complexion LIGHT	Build MED					
DEFENDANT	Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description) N/A				Marital Status SINGLE	Religion NONE	Indication of: Alcohol Influence Drug Influence					
	Local Address (Street, Apt. Number) 2502 NORTH DIXIE HWY UNIT 42 LAKE WORTH FL 33460				Phone (561) 719-6726		Residence Type: 1. City 2. County 3. Florida 4. Out of State					
	Permanent Address (Street, Apt. Number)				Phone ()		Address Source VERBAL					
	Business Address (Name, Street)				Phone ()		Occupation					
	D/L Number, State W-536-817-89-026-0		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) PALM BEACH GARDENS FL	Citizenship U.S.				
	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 <input type="checkbox"/> Legal Custodian <input type="checkbox"/> 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 <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				
CODE	Drug Activity 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 DUI				Counts 1	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 316.193(1)		Violation of ORD #			
	Drug Activity N	Drug Type N	Amount / Unit	Offense # 16168816			Warrant / Capias Number		Bond			
	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		Bond			
	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		Bond			
	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		Bond			
	Location (Court, Room Number, Address) 3228 Gun Club Rd west Palm Beach FL 33406											
Court Date and Time Month January Day 19 Year 2017 Time 01:30 AM PM												
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I 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) 12/29/16												
Signature of Arresting Officer				Name Verification (Printed by Arrestee)				Date Signed				
Name: X				(PRINT)								
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) A. SINNOTT		I.D. # 23163						
Initial Deputy P. Hontel 706		I.D. # Pouch #		Transporting Officer A. SINNOTT		ID # PBSO		PAGE 1 OF 1				
Witness here if subject signed with an "X" PINK - AGENCY GOLD - DEFENDANT (N.T.A. ONLY)												

OBTS Number		PROBABLE CAUSE AFFIDAVIT			1. Arrest	3. Request for Warrant	1	Juvenile
ADMIN	Agency ORI Number FLO 5 0 0 0 0 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 0 6 - 161168816	2. N.T.A.	4. Request for Capias			
DEF.	Charge Type: Check as many as apply	1. Felony 2. Traffic Felony	3. Misdemeanor 4. Traffic Misdemeanor	5. Ordinance 6. Other	Special Notes:			
CHARGES	Name (Last, First, Middle) WEINDORF TYLER		Alias DUI		Race	Sex	Date of Birth W M O 1 26 89	
	Charge Description DUI		Charge Description					
VICTIM	Charge Description		Charge Description					
	Victim's Name (Last, First, Middle) State of Fla				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	
<p>The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above Defendant committed the following violation of law.</p> <p>The person taken into custody...</p> <p><input type="checkbox"/> committed the below acts in my presence.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts.</p> <p><input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p>								
PROBABLE CAUSE STATEMENT	<p>On the <u>24</u> day of <u>Dec</u> 2016 at <u>07:20</u> <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p><i>I was on patrol in the area of 126th and Chapel Grove Blvd in West Palm Beach FL, when I observed a blue in color Vehicle take off at a high rate of speed. I then began to follow said Vehicle north of 126th street, at over 60 miles per hour in a 30 mph zone. I was able to catch up with the Vehicle and conduct a traffic stop just south of the intersection of 130th Rd North and Sunset Dr West Palm Beach FL. I then make contact with the driver who was identified by his Fla driver license as w/m Tyler Weindorf. While speaking with Mr. Weindorf I notice that his speech was slurred, and his eyes were red and he had a strong odor of an alcoholic beverage coming from his person. I asked Mr. Weindorf to exit the vehicle and notice he was very weak on his feet and then requested that I conduct a DUI investigation. Mr. Weindorf was issued a written warning for the speeding violation.</i></p>							
ADMINISTRATIVE	<p>STATE OF FLORIDA COUNTY OF PALM BEACH <i>John Deere Savage</i> (Signature of Arresting/Investigative Officer)</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>24</u> day of <u>Dec</u> 2016 by <u>John Deere Savage</u> #13579 (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>16</u> by <u>John Deere Savage</u> PERSON</p> <p><i>A. Sinnot 23167</i></p> <p>Notary Public, Clerk of Court, Office (F.S.S. 117.107)</p>				<p>SCANNED DEC 26 2016</p>			
	<p>PAGE <u>1</u> OF <u>1</u></p>							

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 24 DAY OF DECEMBER 20 16 AT 0230

AM PM

SUBJECT: WEINDORF, TYLER S.

CASE NUMBER: 16168816

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: A. SINNOTT

PERSONAL CONTACT

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

While responding to a noise complaint at 4468 126TH DR N in unincorporated West Palm Beach FL 33411 I met with Sergeant Savage who stated he had just witnessed a blue Jaguar driving away from the party at a high rate of speed. Sergeant Savage and I followed the vehicle and caught up to the vehicle, a blue Jaguar 4door bearing FL tag DWEG99 and conducted a traffic stop at the intersection of 130th Ave N and Sunset Blvd. Sergeant Savage Stated he paced the vehicle at 60 in a 30 mph zone.

OBSERVATION OF DRIVER:

Sergeant Savage stated when he approached the vehicle and spoke with the driver who Identified himself by his Florida DL as Tyler Weindorf, he immediately noticed a strong smell of an unknown alcoholic beverage coming from his breath. Sergeant Savage stated that he noticed Mr Weindorf's eyes were bloodshot and glassy. Sergeant Savage then instructed Mr Weindorf to step out of the vehicle and speak with me.

I then aproached Mr Weindorf, I noticed the smell of an unknown alcoholic beverage coming from his breath. I noticed that Mr Weindorf's eyes were glassy, and extremely bloodshot. Mr Weindorf was unstable on his feet and was swaying back and forth.

DRIVER'S STATEMENTS:

Mr Weindorf stated that he had three beers earlier in the night.

ODORS:

Mr Weindorf's breath had the odor of an unknown alcoholic beverage.

GENERAL OBSERVATIONS

SPEECH: Mr Weindorf's speech was slow

ATTITUDE: Mr Weindorf was quiet and cooperative.

CLOTHING: Mr Weindorf was wearing a white shirt and blue jean pants.

MEDICAL/OTHER: N/A

STATE OF FLORIDA
COUNTY OF PALM BEACH

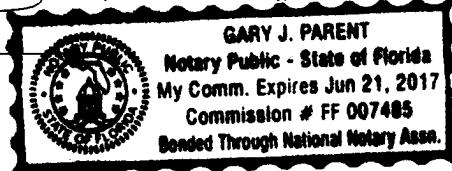
A. SINNOTT

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 24 day of December 20 16 by A. Sinnot

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

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



SCANNED
DEC 26 2016
SCANNED
DEC 26 2016
DEC 26 2016

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- LT EYE-LACK OF SMOOTH PURSUIT
 LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
 LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

- RT EYE-LACK OF SMOOTH PURSUIT
 RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
 RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Mr Weindorf had bloodshot glassy eyes, was unstable on his feet, and had the odor of an unknown alcoholic beverage coming from his breath.

WALK & TURN:

Refused

ONE LEG STAND:

Refused

FINGER TO NOSE:

Refused

ROMBERG ALPHABET:

Refused

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

STATE OF FLORIDA
 COUNTY OF PALM BEACH

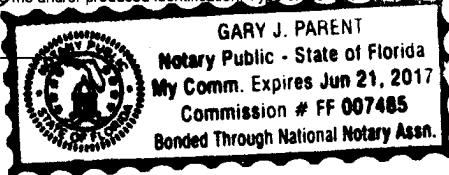
A. SINNOTT

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 24 day of December 2016 by

(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)



KNOLW
 SCANNED
 DEC 26 2016

WITNESS LIST

16168816

CASE NUMBER:

A. SINNOTT

ARRESTING OFFICER: A. SINNOTT

ADDRESS: 3228 Gun Club Rd West Palm Beach FL 33406

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

CAN TESTIFY TO: Initial stop and arrest procedures

NAME: D. Savage

ADDRESS: 3228 Gun Club Rd West Palm Beach FL 33406

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

CAN TESTIFY TO: Initial stop, and arrest

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: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

SCANNED
DEC 26 2016

TESTING FACILITY TASK REPORT

AGENCY: PBSO
SUBJECT: WENMORE, Tracy S. CASE NUMBER: 16-168816
DATE: 12/24/16 VIDEO TAPE NUMBER: 61875
BEGINNING TIME: 0357 ENDING TIME: 0400
BREATH TESTS RESULTS: 1) R TIME 0359 A.M./P.M. 2) n/a TIME — A.M./P.M.
3) n/a TIME — A.M./P.M. 4) n/a TIME — A.M./P.M.
BREATH OPERATOR: C. jones #7204
MAINTENANCE TECHNICIAN: K. mclennan #6167

TESTING OFFICER'S OBSERVATIONS

SPEECH: Normal, clear, no slurred words

ATTITUDE: Calm, quiet, no or no noise

CLOTHING: Dark shirt, light pants, no jacket, no hat, no glasses

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER: EYES GLASSY AND PUFFED, SLIGHT ORBITAL SWAYING,

REFUSED

COMMENTS: REFUSED A- CANT, 100 RECD THE 20 MINUTE
OBSERVATION PERIOD AT 0323 hrs.

A STATED NO HE WOULD NOT TAKE TEST

ALSO RECD REC

A STATED HE UNDERSTOOD IRIC AND RECD TEST

ALSO RECD REC

REFUSED

A STATED HE UNDERSTOOD REC

ALSO ATTENDED Q+A

SCANNED
DEC 26 2016

A INVOKED RIGHT TO COUNSEL

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL

SUBJECT: Westmore, Tracy S. CASE NUMBER: 16-108816

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) Rosa on Cancer

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) Rosa on Cancer

SCANNED

DEC 26 2016

SUBJECT: WEEDMORE, TINA S CASE NUMBER: 16-168816

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? _____

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:

SCANNED

DEC 26 2016