17CT16893

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE

OBTS Number:

Agency ORI Number: FLO 502600 | Agency Name: Palm Beach Gardens Police Department | Agency Report Number (N.T.A.'s only): 78- 17-005456

ChargeType: 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): 2 | Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): 4379 Northlake Blvd, PBG, FL, 33410

Location of Offense (Business Name, Address): 4379 Northlake Blvd, PBG, FL, 33410

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
09/15/2017	22:13					Kauff's Towing

DEFENDANT

Name (Last, First, Middle): WREN, VIRGINIA STARR | Alias (Name, DOB, Soc. Sec. #, Etc.):

Race (W - White I - American Indian B - Black 0- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	01/03/1957	508	130	BLU	BRO	LGT	LGT

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description):

Marital Status: Married | Religion: Christian

Indication of: Alcohol Influence: Y ☑ N ☐ Unk. ☐ | Drug Influence: Y ☐ N ☐ Unk. ☑

Local Address (Street, Apt. Number): 716 KITTYHAWK WAY | (City) North Palm Beach | (State) FL | (Zip) 33408 | Phone (561) 514-6951

Residence Type (1. City 2. County 3. Florida 4. Out of State): 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip) | Phone ( ) | Address Source: FL DL

Business Address (Name, Street) (City) (State) (Zip) | Phone ( ) | Occupation: Bag designer

D/L Number, State: W650877575030 | Soc. Sec. Number: [redacted] | INS Number: | Place of Birth (City, State): WPB, FL | Citizenship: 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/Deriv. P. Paraphernalia/ Equipment S. Synthetics U. Unknown Z. Other

CHARGE

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

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	N/A	1		

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

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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 10 Day 18 Year 17 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

Signature of Defendant (or Juvenile and Parent /Custodian) | Date Signed

ADMIN

HOLD for other Agency Name: | Signature of Arresting Officer: x [signature] | Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Name of Arresting Officer (Print): A. Huba | I.D. #: 425

Intake Deputy | I.D. # | Pouch # | Transporting Officer: A. Huba | ID #: 425 | Agency: PBGPD | Witness here if subject signed with an -X" | PAGE 1 OF 1

SCANNED SEP 18 2017

2017 SEP 18 AM 7:03

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

PBSO #148 REV. 8/97

NOT A CERTIFIED COPY

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:

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
FLO 502600	Palm Beach Gardens Police Department	78- 17-005456

ChargeType: 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): 2 Multiple Clearance Indicator:

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
4379 Northlake Blvd, PBG, FL, 33410	4379 Northlake Blvd, PBG, FL, 33410

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
09/15/2017	22:13					Kauff's Towing

DEFENDANT

Name (Last, First, Middle): WREN, VIRGINIA STARR
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	01/03/1957	508	130	BLU	BRO	LGT	LGT

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description):
Marital Status: Married Religion: Christian

Indication of:	Y	N	Unk.
Alcohol Influence	☑	☐	☐
Drug Influence	☐	☐	☑

	(Street, Apt. Number)	(City)	(State)	(Zip)	Phone
Local Address	716 KITTYHAWK WAY	North Palm Beach	FL	33408	(561) 514-6951
Permanent Address					( )
Business Address (Name, Street)					( )

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2
Address Source: FL DL
Occupation: Bag designer

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
W650877575030	[redacted]		WPB, FL	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
				☐ 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/Deriv. P. Paraphernalia/ Equipment S. Synthetics U. Unknown Z. Other

CHARGE

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

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	N/A	1		

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 10 Day 18 Year 17 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

Signature of Defendant (or Juvenile and Parent /Custodian) Date Signed

ADMIN

HOLD for other Agency Name:
Signature of Arresting Officer: x [signature]
Name Verification (Printed by Arrestee): SEP 16 AM 1:04
(PRINT)
☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other:
Name of Arresting Officer (Print): A. Huba I.D. #: 425
Intake Deputy I.D. # Pouch #
Transporting Officer: A. Huba ID #: 425 Agency: PBGPD
Witness here if subject signed with an "X"
PAGE 1 OF 1

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

PBSO #148 REV. 8/97

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* Amended *

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Juvenile: N

ADMINISTRATIVE

OBTS Number:

Agency ORI Number: FL0 5 0 2 6 0 0

Agency Name: PALM BEACH GARDENS POLICE DEPT.

Agency Report Number (N.T.A.'s only): 7 8 - 1 7 - 0 0 5 4 5 6

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

If Weapon Seized — Enter Type:

Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): 4579 Northlake Blvd, PBG, FL, 33410

Location of Offense (Business Name, Address): 4579 Northlake Blvd PBG, FL 33410

Date of arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
09/15/17	2313					Kauffs Towing

DEFENDANT

Name (Last, First, Middle): Wren, Virginia, Starr

Alias (Name, DOB, Soc. Sec. #, Etc.):

Race (W - White, B - Black, I - American Indian, O - Oriental)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	01/03/57	5'08"	130	BLU	BRO	LGT	LGT

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description):

Marital Status: Married — Religion: Christian — Indication of: Alcohol Influence ☐ Y ☐ N ☐ Unk; Drug Influence ☐ Y ☐ N ☒ Unk

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State
716 Kittyhawk Way	WPB	FL	33408	(561) 514-6951	2

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
				( )	FL DL

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

D/L Number, State	S[redacted]	INS Number	Place of Birth (City, State)	Citizenship
W650877575030 FL			WPB, FL	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 DCF 3. Incarcerated

Released To: (Name)	Relationship	Date	Time

The above address was provided by ☐ defendant and / or ☐ defendant's parent. The child and / or parent was told to keep the Juvenile Court Clerk's Office (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, F. Heroin, H. Hallucinogen, M. Marijuana, O. Opium/Deriv., P. Paraphernalia/Equipment, S. Synthetic, U. Unknown, Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DUI Crash with property damage	1	☐Y ☒N	316.193(3)(c)(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DUI Refusal with a prior refusal	1	☐Y ☒N	316.1939	

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

☐ Instruction No. 1 Mandatory Appearance in Court

☒ Instruction No. 2 You need not appear in Court but must comply with instructions on Reverse Side.

Location (Court, Room Number, Address): North County Courthouse 3188 PGA Blvd, PBG, FL 33410

Court Date and Time: Month October Day 18 Year 2017 Time 10:00 A.M. P.M.

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

ADMIN

HOLD for other Agency Name:

Signature of Arresting Officer: X [signature]

Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Name of Arresting Officer (Print): [illegible] I.D. # 403

Intake Deputy I.D. # Pouch #

Transporting Officer: [illegible] I.D. # 475 Agency PBGPD

Witness here if subject signed with an "X"

PAGE 1 OF 1

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PBGPD FORM-023

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17CT16893

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: FLO 502600
- Agency Name: Palm Beach Gardens Police Department
- Agency Report Number (N.T.A.'s only): 78- 17-005456
- ChargeType: 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): 2
- Multiple Clearance Indicator:
- Location of Arrest (Including Name of Business): 4379 Northlake Blvd, PBG, FL, 33410
- Location of Offense (Business Name, Address): 4379 Northlake Blvd, PBG, FL, 33410
- Date of Arrest: 09/15/2017
- Time of Arrest: 22:13
- Booking Date:
- Booking Time:
- Jail Date:
- Jail Time:
- Location of Vehicle: Kauff's Towing

DEFENDANT

- Name (Last, First, Middle): WREN, VIRGINIA STARR
- Alias (Name, DOB, Soc. Sec. #, Etc.):
- Race (W - White I - American Indian B - Black O- Oriental/Asian): W
- Sex: F
- Date of Birth: 01/03/1957
- Height: 508
- Weight: 130
- Eye Color: BLU
- Hair Color: BRO
- Complexion: LGT
- Build: LGT
- Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description):
- Marital Status: Married
- Religion: Christian
- Indication of: Alcohol Influence: Y ☑ N ☐ Unk. ☐; Drug Influence: Y ☐ N ☐ Unk. ☑
- Local Address (Street, Apt. Number): 716 KITTYHAWK WAY (City) North Palm Beach (State) FL (Zip) 33408
- Phone: (561) 514-6951
- Residence Type (1. City 2. County 3. Florida 4. Out of State): 2
- Permanent Address (Street, Apt. Number): (City) (State) (Zip)
- Phone: ( )
- Address Source: FL DL
- Business Address (Name, Street): (City) (State) (Zip)
- Phone: ( )
- Occupation: Bag designer
- D/L Number, State: W650877575030
- Soc. Sec. Number: [redacted]
- INS Number:
- Place of Birth (City, State): WPB, FL
- Citizenship: 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
				☐ 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 / OYS 3. Incarcerated

Released To: (Name) Relationship Date Time

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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/Deriv. P. Paraphernalia/ Equipment S. Synthetics U. Unknown Z. Other

CHARGE

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

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	N/A	1		

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

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Signature of Defendant (or Juvenile and Parent /Custodian) Date Signed

2017 SEP 16 AM 7:03

SCANNED SEP 18 2017

ADMIN

- HOLD for other Agency Name:
- ☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other:
- Signature of Arresting Officer: X [signature]
- Name of Arresting Officer (Print): A. Huba I.D. #: 425
- Name Verification (Printed by Arrestee): (PRINT)
- Intake Deputy I.D. # Pouch #
- Transporting Officer: A. Huba ID #: 425 Agency: PBGPD
- Witness here if subject signed with an -X"
- PAGE 1 OF 1

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

PBSO #148 REV. 8/97

NOT A CERTIFIED COPY

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE ☐

ADMIN

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number
	FL 0502600	PALM BEACH GARDENS POLICE	7 | 8 17-005456

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
WREN, VIRGINIA STARR		W	F	01/03/1957

CHARGES

Charge Description	Charge Description
316.193(3(C)(1) DUI - CRASH W/ PROPERTY DAMAGE	316.1939 DUI - REFUSAL TO SUBMIT TO DUI BREATH TES
Charge Description	Charge Description

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

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable 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.

☐ confessed to _____ admitting to the below facts.

☒ was observed by T. HENNACY who told E. BATISTA that he/she saw the arrested person committ the below acts.

☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 15 day of September, 2017 at 21:44 (Specifically include facts constituting cause for arrest.)

On 9/15/17 at 9:44pm, I responded to Buongiorno`s Pizza located at 4379 Northlake Blvd to assist with an accident investigation.

Upon arrival, I was informed by Ofc. Batista #439 that witness Tami Hennacy had observed a white female subject (identified by Florida Driver`s license as Virginia Wren) to have been the driver of a black Hyundai Veloster bearing FL tag HLRQ54 that parked in front of the restaurant. I was informed by Ofc. Carver #471 that the aforementioned vehicle was involved in a hit and run crash just a few minutes prior to this encounter, and that a witness had identified Wren as the driver during that crash (see 17-005454 for more information on the hit and run). I approached Wren and smelled the odor of an unknown intoxicating beverage, and observed her eyes to be glassy. Wren attempted to stand up from the bench she was sitting on, and fell back down. Wren`s shorts were wet and smelling of urine, consistent with her urinating on herself.

I advised Wren that I wanted to make sure she was ok to drive and asked her to submit to some sobriety tasks, of which she agreed to. I asked Wren if she had any medical issues, with her initially stating no, but subsequently stating (while at the Palm Beach County Jail) that her eyes "hurt"; Wren did not provide a further explanation of this issue. Wren performed HGN and the Walk and Turn. I then attempting to get Wren to participate in the One Leg Stand exercise, with her repeatedly failing to listen to instruction; Wren continued to attempt to talk to other officers at the scene, at which time the exercise was terminated. Wren performed poorly on the tasks that she performed (see DUI roadside tasks for results). Upon completion of the tasks, based upon the totality of the circumstances I placed Wren under arrest for DUI. Wren was handcuffed, with the handcuffs double locked and checked for fit. Wren was searched by Det. Brashear #288 and placed in the backseat of my patrol car. Wren`s vehicle was towed by Kauff`s Towing to their tow lot.

NOT A CERTIFIED COPY

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

CESARK, KIM 4290

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

09/16/2017

DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

HUBA, ALEXANDER (425)

NAME OF OFFICER (PLEASE PRINT)

09/16/2017

DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

ADMIN

OBTS Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL 0502600	PALM BEACH GARDENS POLICE	7 | 8 | 17-005456

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
WREN, VIRGINIA STARR		W	F	01/03/1957

PROBABLE CAUSE STATEMENT

I transported Wren to the Palm Beach County Breath Alcohol Testing Center (BAT) without incident. Upon arrival at the BAT, I conducted a twenty minute observation where Wren put nothing in her mouth and did not vomit. After the twenty minute observation I brought Wren on camera and asked her to submit to the breath test, to which she refused. I then read Wren implied consent with her stating that she could not believe she was under arrest for DUI; Wren again refused to submit to the breath test. I then read Wren her Miranda rights, with her indicating an understanding; Wren then answered several questions (see the Questions and Answers sheet for more information).

Wren did operate a motor vehicle on the streets of Palm Beach Gardens, in Palm Beach County to the extent that her normal faculties were impaired and caused a crash, contrary to F.S.S. 316.193(3)(c)(1); Wren refused a lawful test of her breath after a prior refusal, contrary to F.S.S. 316.1939(1). Additionally, a drivers license check on Wren revealed that her license was restricted to business use only; I issued Wren Uniformed Traffic Citations for the refusal (A7GEEIE) and violation of the motor vehicle restriction contrary to F.S.S. 322.16(1)(C) (A7GEEHE). I used a body worn camera during this investigation.

NOT A CERTIFIED COPY

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

#290

CESARK, KIM

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

09/16/2017

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DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

HUBA
(425)

17005456

FLORIDA DUI UNIFORM TRAFFIC CITATION A56GUJE

COUNTY OF: PALM BEACH 06
CITY (IF APPLICABLE): PALM BEACH GARDENS
☐ (1) F.H.P. ☒ (2) P.D. ☐ (3) S.O. ☐ (4) OTHER
AGENCY NAME: PALM BEACH GARDENS
AGENCY #: 78

COMPLAINT (RETAINED BY COURT)

IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON

DAY OF WEEK	MONTH	DAY	YEAR	TIME
FRIDAY	09	15	2017	10:37 ☐ A.M. ☒ P.M.

NAME (FIRST) FIRST: VIRGINIA | MIDDLE: STARR DEY | LAST: WREN
IF DIFFERENT THAN ONE ON DRIVER LICENSE "X" HERE ▶
STREET: 716 KITTYHAWK WAY
CITY: NORTH PALM BEACH | STATE: FL | ZIP CODE: 33408
TELEPHONE NUMBER | DATE OF BIRTH: 01 03 1957 | AGE: W | SEX: F | HGT: 508
DRIVER LICENSE NUMBER: W650877575030 | STATE: FL | CLASS: E | CDL LICENSE: ☐ Y ☒ N | YR LICENSE EXP.: 2021 | COMMERCIAL VEHICLE: ☐ YES ☒ NO
YR. VEHICLE: 2015 | MAKE: HYUN | STYLE: 3D | COLOR: BLK | PLACARDED HAZARDOUS MATERIAL: ☐ YES ☒ NO
VEHICLE LICENSE NO.: HLRO54 | TRAILER TAG NO. | STATE: FL | YEAR TAG EXPIRES: 2018 | > 15 PASSENGERS: ☐ YES ☒ NO
UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY: 4379 NORTHLAKE BLVD, PALM BEACH GARDENS | MOTORCYCLE: ☐ YES ☒ NO | COMPANION CITATION/#: ☐ YES ☒ NO
FT. ____ MILES ____ ☐ N ☐ S ☐ E ☐ W OF NODE ____

DID UNLAWFULLY COMMIT THE OFFENSE OF DRIVING UNDER THE INFLUENCE OF ALCOHOLIC BEVERAGES, CHEMICAL OR CONTROLLED SUBSTANCES; DID DRIVE, OR WAS IN ACTUAL PHYSICAL CONTROL OF A VEHICLE, WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE/CHEMICAL SUBSTANCE/CONTROLLED SUBSTANCE TO THE EXTENT NORMAL FACULTIES WERE IMPAIRED, OR WITH A BLOOD OR BREATH ALCOHOL LEVEL OF .08 OR ABOVE OF ____.

COMMENTS PERTAINING TO OFFENSE (Only one offense each citation)
DUI - DRIVING WHILE UNDER INFLUENCE | 17-00 | BIKE/CAR: ☐ YES ☒ NO

☐ AGGRESSIVE DRIVER | PASSENGER < 18 YEARS: ☐ YES ☒ NO | STATE STATUTE | SECTION: 316.193 | SUB-SECTION: (1)
TRAIN: ☐ YES ☒ NO | DAMAGE TO OTHER PROPERTY: ☐ YES $ ____ ☒ NO | INJURY TO ANOTHER: ☐ YES ☒ NO | SERIOUS BODILY INJURY TO ANOTHER: ☐ YES ☒ NO | FATAL: ☐ YES ☒ NO

THIS IS A CRIMINAL VIOLATION, COURT APPEARANCE REQUIRED, AS INDICATED BELOW.

COURT DATE: 10/18/2017 | TIME: 10:00 AM | A56GUJE
COURT AND LOCATION: NORTH COUNTY GOVERNMENT CENTER
3188 PGA Boulevard PBG, FL 33410

ARREST DELIVERED TO: PBSO JAIL | DATE: 09/15/2017

I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION. WILLFUL REFUSAL TO ACCEPT AND SIGN THE CITATION MAY RESULT IN ARREST. I UNDERSTAND BY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF THE COURT.

X SIGNATURE OF VIOLATOR

EFFECTIVE IMMEDIATELY, YOUR DRIVING PRIVILEGE IS SUSPENDED/DISQUALIFIED FOR:

☐ DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. THIS SUSPENSION IS FOR A PERIOD OF SIX MONTHS IF THIS IS THE FIRST VIOLATION OR ONE YEAR IF PREVIOUSLY SUSPENDED FOR DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR ONE YEAR FOR THE FIRST OFFENSE OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT OFFENSE.

☒ REFUSAL TO SUBMIT TO LAWFUL BREATH, BLOOD OR URINE TEST SECTION 322.2615, F.S. THIS SUSPENSION IS FOR A PERIOD OF ONE YEAR IF THIS IS A FIRST REFUSAL OR 18 MONTHS IF PREVIOUSLY SUSPENDED FOR THIS OFFENSE. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR A PERIOD OF ONE YEAR FOR A FIRST REFUSAL OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT REFUSAL.

LICENSE SURRENDERED? ☒ YES ☐ NO REASON DUI ARREST
ELIGIBLE FOR PERMIT? ☐ YES ☒ NO REASON ____

UNLESS INELIGIBLE, THIS CITATION SHALL SERVE AS A TEMPORARY DRIVER LICENSE AND WILL EXPIRE AT MIDNIGHT ON THE 10TH DAY FOLLOWING THE DATE OF SUSPENSION.

AT THE LANTANA 33462-1516 BUREAU OF ADMINISTRATIVE REVIEWS OFFICE, YOU MAY REQUEST, WITHIN 10 DAYS AFTER THE DATE OF SUSPENSION, A REVIEW OF SUSPENSION BY THE DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES OR A REVIEW TO DETERMINE ELIGIBILITY FOR A RESTRICTED LICENSE IF THIS IS YOUR FIRST DUI RELATED OFFENSE. SEE REVERSE SIDE.

NAME - SIGNATURE OF OFFICER | BADGE NO. | ID NO. | TROOP UNIT

HSMV 73904 (Rev. 10/14)

HUBA
(425)

17005456

FLORIDA DUI UNIFORM TRAFFIC CITATION A56GUJE

COUNTY OF: PALM BEACH 06
CITY (IF APPLICABLE): PALM BEACH GARDENS
☐ (1) F.H.P. ☒ (2) P.D. ☐ (3) S.O. ☐ (4) OTHER
AGENCY NAME: PALM BEACH GARDENS
AGENCY #: 78

SUMMONS (VIOLATOR'S COPY)

IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON

DAY OF WEEK	MONTH	DAY	YEAR	TIME
FRIDAY	09	15	2017	10:37 ☐ A.M. ☒ P.M.

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IF DIFFERENT THAN ONE ON DRIVER LICENSE "X" HERE ▶
STREET: 716 KITTYHAWK WAY
CITY: NORTH PALM BEACH | STATE: FL | ZIP CODE: 33408
TELEPHONE NUMBER | DATE OF BIRTH: 01 03 1957 | AGE: W | SEX: F | HGT: 508
DRIVER LICENSE NUMBER: W650877575030 | STATE: FL | CLASS: E | CDL LICENSE: ☐ Y ☒ N | YR LICENSE EXP.: 2021 | COMMERCIAL VEHICLE: ☐ YES ☒ NO
YR. VEHICLE: 2015 | MAKE: HYUN | STYLE: 3D | COLOR: BLK | PLACARDED HAZARDOUS MATERIAL: ☐ YES ☒ NO
VEHICLE LICENSE NO.: HLRO54 | TRAILER TAG NO. | STATE: FL | YEAR TAG EXPIRES: 2018 | > 15 PASSENGERS: ☐ YES ☒ NO
UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY: 4379 NORTHLAKE BLVD, PALM BEACH GARDENS | MOTORCYCLE: ☐ YES ☒ NO | COMPANION CITATION/#: ☐ YES ☒ NO
FT. ____ MILES ____ ☐ N ☐ S ☐ E ☐ W OF NODE ____

DID UNLAWFULLY COMMIT THE OFFENSE OF DRIVING UNDER THE INFLUENCE OF ALCOHOLIC BEVERAGES, CHEMICAL OR CONTROLLED SUBSTANCES; DID DRIVE, OR WAS IN ACTUAL PHYSICAL CONTROL OF A VEHICLE, WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE/CHEMICAL SUBSTANCE/CONTROLLED SUBSTANCE TO THE EXTENT NORMAL FACULTIES WERE IMPAIRED, OR WITH A BLOOD OR BREATH ALCOHOL LEVEL OF .08 OR ABOVE OF ____.

COMMENTS PERTAINING TO OFFENSE (Only one offense each citation)
DUI - DRIVING WHILE UNDER INFLUENCE | 17-00 | BIKE/CAR: ☐ YES ☒ NO

☐ AGGRESSIVE DRIVER | PASSENGER < 18 YEARS: ☐ YES ☒ NO | STATE STATUTE | SECTION: 316.193 | SUB-SECTION: (1)
TRAIN: ☐ YES ☒ NO | DAMAGE TO OTHER PROPERTY: ☐ YES $ ____ ☒ NO | INJURY TO ANOTHER: ☐ YES ☒ NO | SERIOUS BODILY INJURY TO ANOTHER: ☐ YES ☒ NO | FATAL: ☐ YES ☒ NO

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X SIGNATURE OF VIOLATOR

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LICENSE SURRENDERED? ☒ YES ☐ NO REASON DUI ARREST
ELIGIBLE FOR PERMIT? ☐ YES ☒ NO REASON ____

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NAME - SIGNATURE OF OFFICER | BADGE NO. | ID NO. | TROOP UNIT

HSMV 73904 (Rev. 10/14)

DO A CERTIFIED COPY

XXXAMENDED TICKET XXX

HUBA
(425)

17005456

FLORIDA DUI UNIFORM TRAFFIC CITATION A56GUJE

COUNTY OF: PALM BEACH 06
CITY (IF APPLICABLE): PALM BEACH GARDENS
☐ (1) F.H.P. ☒ (2) P.D. ☐ (3) S.O. ☐ (4) OTHER
AGENCY NAME: PALM BEACH GARDENS
AGENCY #: 78

IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON
COMPLAINT (RETAINED BY COURT)

DAY OF WEEK	MONTH	DAY	YEAR	
FRIDAY	09	15	2017	10:37 ☐ A.M. ☒ P.M.

NAME (PRINT) FIRST: VIRGINIA MIDDLE: STARR DEY LAST: WREN
STREET: 716 KITTYHAWK WAY
IF DIFFERENT THAN ONE ON DRIVER LICENSE "X" HERE ▶
CITY: NORTH PALM BEACH STATE: FL ZIP CODE: 33408
TELEPHONE NUMBER | DATE OF BIRTH: MO 01 DAY 03 YR 1957 | RACE: W | SEX: F | HGT: 508

DRIVER LICENSE NUMBER: W650877575030
STATE: FL | CLASS: E | CDL LICENSE: ☐ Y ☒ N | YR LICENSE EXP.: 2021 | COMMERCIAL VEHICLE: ☐ YES ☒ NO

YR VEHICLE	MAKE	STYLE	COLOR	PLACARDED HAZARDOUS MATERIAL
2015	HYUN	3D	BLK	☐ YES ☒ NO

VEHICLE LICENSE NO.	TRAILER TAG NO.	STATE	YEAR TAG EXPIRES	> 15 PASSENGERS
HLRQ54		FL	2018	☐ YES ☒ NO

UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY: 4379 NORTHLAKE BLVD, PALM BEACH GARDENS
MOTORCYCLE: ☐ YES ☒ NO
COMPANION CITATION(S): ☐ YES ☒ NO

FT. _____ MILES _____ ☐ N ☐ S ☐ E ☐ W OF NODE _____

DID UNLAWFULLY COMMIT THE OFFENSE OF DRIVING UNDER THE INFLUENCE OF ALCOHOLIC BEVERAGES, CHEMICAL OR CONTROLLED SUBSTANCES; DID DRIVE, OR WAS IN ACTUAL PHYSICAL CONTROL OF A VEHICLE, WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE/CHEMICAL SUBSTANCE/CONTROLLED SUBSTANCE TO THE EXTENT NORMAL FACULTIES WERE IMPAIRED, OR WITH A BLOOD OR BREATH ALCOHOL LEVEL OF .08 OR ABOVE OF _____.

COMMENTS PERTAINING TO OFFENSE (Only one offense each citation): DUI-DAMAGE TO PERSON/PROPERTY | 17-00
RE-EXAM: ☐ YES ☒ NO

☐ AGGRESSIVE DRIVER | PASSENGER < 18 YEARS: ☐ YES ☒ NO | STATE STATUTE | SECTION: 316.193 | SUB-SECTION: (3)(C)(1)

CRASH: ☐ YES ☒ NO | DAMAGE TO OTHER PROPERTY: ☐ YES $ _____ ☒ NO | INJURY TO ANOTHER: ☐ YES ☒ NO | SERIOUS BODILY INJURY TO ANOTHER: ☐ YES ☒ NO | FATAL: ☐ YES ☒ NO

THIS IS A CRIMINAL VIOLATION, COURT APPEARANCE REQUIRED, AS INDICATED BELOW.

COURT DATE: 10/18/2017 TIME: 10:00 AM A56GUJE
COURT AND LOCATION: NORTH COUNTY GOVERNMENT CENTER
3188 PGA Boulevard PBG, FL 33410

ARREST DELIVERED TO: PBSO JAIL DATE: 09/15/2017

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LICENSE SURRENDERED? ☒ YES ☐ NO REASON: DUI ARREST
ELIGIBLE FOR PERMIT? ☐ YES ☒ NO REASON: _____

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RANK - SIGNATURE OF OFFICER | BADGE NO | ID NO. | TROOP UNIT

HSMV 73904 (Rev. 10/14)

COMPLAINT

CASE NO. _____ DOCKET NO. _____ PAGE NO. _____

DATE	COURT ACTION AND OTHER ORDERS
	BAIL FIXED AT $ _____ OR CASH DEPOSIT OF $ _____ SIGNATURE OF PERSON GIVING BAIL SIGNATURE OF PERSON TAKING BAIL
	FINE IN THE AMOUNT OF $ _____ RECEIVED AS REQUIRED BY COURT SCHEDULE. SIGNATURE OF CLERK
	CONTINUANCE TO _____ REASON _____
	CONTINUANCE TO _____ REASON _____
	BOND ESTREATED _____
	WARRANT ISSUED _____
	VIOLATOR FAILED TO APPEAR-DRIVER LICENSE SUSPENDED
	VIOLATOR ARRAIGNED ON _____ (DATE) PLEA: _____ FINDING: _____ ADJUDICATION: _____ SENTENCE: FINE _____ COST _____ JAILED _____ DAYS DRIVER IMPROVEMENT SCHOOL _____ OTHER _____ DRIVER LICENSE SUSPENDED OR REVOKED FOR _____ DAYS RECOMMEND DRIVER LICENSE SUSPENSION FOR _____ DAYS RECOMMEND RE-TEST _____ SIGNATURE OF JUDGE
	TESTIMONY - JUDGE'S NOTES (OR OTHER COURT ORDERS):
	APPEAL BOND OF $ _____
	VIOLATOR'S FINGERPRINT WHEN APPLICABLE ▶

NOT A CERTIFIED COPY

*** AMMENDED TICKET ***

HUBA
(425)

17005456

FLORIDA DUI UNIFORM TRAFFIC CITATION A56GUJE

COUNTY OF: PALM BEACH 06
CITY (IF APPLICABLE): PALM BEACH GARDENS
☐ (1) F.H.P. ☒ (2) P.D. ☐ (3) S.O. ☐ (4) OTHER
AGENCY NAME: PALM BEACH GARDENS
AGENCY #: 78

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SUMMONS (VIOLATOR'S COPY)

DAY OF WEEK	MONTH	DAY	YEAR	
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NAME (PRINT): FIRST VIRGINIA | MIDDLE STARR DEY | LAST WREN

STREET: 716 KITTYHAWK WAY — IF DIFFERENT THAN ONE ON DRIVER LICENSE "X" HERE ▶

CITY: NORTH PALM BEACH | STATE: FL | ZIP CODE: 33408

TELEPHONE NUMBER | DATE OF BIRTH: MO 01 DAY 03 YR 1957 | RACE: W | SEX: F | HGT: 508

DRIVER LICENSE NUMBER: W650870757503 0 | STATE: FL | CLASS: E | CDL LICENSE: ☐ Y ☒ N | YR LICENSE EXP: 2021 | COMMERCIAL VEHICLE: ☐ YES ☒ NO

YR. VEHICLE	MAKE	STYLE	COLOR	PLACARDED HAZARDOUS MATERIAL
2015	HYUN	3D	BLK	☐ YES ☒ NO

VEHICLE LICENSE NO.	TRAILER TAG NO.	STATE	YEAR TAG EXPIRES	> 15 PASSENGERS
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MOTORCYCLE: ☐ YES ☒ NO
COMPANION CITATION(S): ☐ YES ☒ NO

FT _____ MILES _____ ☐ N ☐ S ☐ E ☐ W OF NODE _____

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RE-EXAM: ☐ YES ☒ NO

☐ AGGRESSIVE DRIVER | PASSENGER < 18 YEARS: ☐ YES ☒ NO | STATE STATUTE | SECTION: 316.193 | SUB-SECTION: (3)(C)(1)

CRASH	DAMAGE TO OTHER PROPERTY	INJURY TO ANOTHER	SERIOUS BODILY INJURY TO ANOTHER	FATAL
☐ YES ☒ NO	☐ YES $ _____ ☒ NO	☐ YES ☒ NO	☐ YES ☒ NO	☐ YES ☒ NO

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COURT DATE: 10/18/2017 TIME: 10:00 AM A56GUJE
COURT AND LOCATION: NORTH COUNTY GOVERNMENT CENTER
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X SIGNATURE OF VIOLATOR

EFFECTIVE IMMEDIATELY, YOUR DRIVING PRIVILEGE IS SUSPENDED/DISQUALIFIED FOR:

☐ DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. THIS SUSPENSION IS FOR A PERIOD OF SIX MONTHS IF THIS IS THE FIRST VIOLATION OR ONE YEAR IF PREVIOUSLY SUSPENDED FOR DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR ONE YEAR FOR THE FIRST OFFENSE OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT OFFENSE.

☒ REFUSAL TO SUBMIT TO LAWFUL BREATH, BLOOD OR URINE TEST SECTION 322.2615, F.S. THIS SUSPENSION IS FOR A PERIOD OF ONE YEAR IF THIS IS A FIRST REFUSAL OR 18 MONTHS IF PREVIOUSLY SUSPENDED FOR THIS OFFENSE. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/ PRIVILEGE WILL ALSO BE DISQUALIFIED FOR A PERIOD OF ONE YEAR FOR A FIRST REFUSAL OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT REFUSAL.

LICENSE SURRENDERED? ☒ YES ☐ NO REASON: DUI ARREST
ELIGIBLE FOR PERMIT? ☐ YES ☒ NO REASON: _____

UNLESS INELIGIBLE, THIS CITATION SHALL SERVE AS A TEMPORARY DRIVER LICENSE AND WILL EXPIRE AT MIDNIGHT ON THE 10TH DAY FOLLOWING THE DATE OF SUSPENSION.

AT THE LANTANA 33462-1516 BUREAU OF ADMINISTRATIVE REVIEWS OFFICE. YOU MAY REQUEST, WITHIN 10 DAYS AFTER THE DATE OF SUSPENSION, A REVIEW OF SUSPENSION BY THE DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES OR A REVIEW TO DETERMINE ELIGIBILITY FOR A RESTRICTED LICENSE IF THIS IS YOUR FIRST DUI RELATED OFFENSE. SEE REVERSE SIDE.

RANK - SIGNATURE OF OFFICER | BADGE NO. | ID NO | TROOP UNIT

HSMV 23904 (Rev. 10/14)

Information Regarding Review Hearing

FINAL ORDER

This will serve as notice of final order of license suspension/disqualification effective on the date it was issued to you. You may, request a formal or informal review of the suspension/disqualification, or if this is your first DUI related offense, you may waive the review and request a review to determine eligibility for a restricted license. If you want the department to conduct a review of your suspension/disqualification you must request such review at the location indicated on the reverse side. Your request must be submitted in writing **within ten calendar days** after the date of suspension/disqualification and include a copy of this notice. When requesting a review, or if this is your first DUI related offense and you wish to waive the review and request an eligibility review for a restricted license, you must include a non-refundable filing fee of $25 made payable to DHSMV.

REVIEW PROCESSES

The informal review shall consist solely of an examination of the materials submitted by you and the law enforcement officer or correctional officer. The formal review allows you to be heard and present witnesses in regard to this suspension/disqualification.

WAIVER OF FORMAL/INFORMAL REVIEW

If this is your first DUI related offense and you otherwise qualify, you may waive your right to a review of the suspension and receive a business purpose only license for use during the period your driver license is suspended. A non-refundable filing fee of $25 made payable to DHSMV is required for determination of your eligibility for a restricted license.

DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL (.08 OR ABOVE)

1. Whether the law enforcement officer had probable cause to believe that the person was driving or in actual physical control of a motor vehicle in this state while under the influence of alcoholic beverages or controlled substances (DUI).
2. Whether the person had an unlawful blood or breath alcohol level (.08 or above).

REFUSAL TO SUBMIT TO A BREATH, BLOOD OR URINE TEST

1. Same as number one above.
2. Whether the person refused to submit to any such test after being requested to do so by a law enforcement officer or correctional officer.
3. Whether the person whose license was suspended was told that if he or she refused to submit to such test his or her privilege to operate a motor vehicle would be suspended.

IN CASE OF A DISQUALIFICATION THE FOLLOWING ISSUES WILL BE CONSIDERED: DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL (.08 OR ABOVE)

1. Whether the arresting law enforcement officer had probable cause to believe that the person was driving or in actual physical control of a commercial motor vehicle, or any motor vehicle if the driver holds a commercial driver's license, in this state while he or she had any alcohol, chemical substances, or controlled substances in his or her body.
2. Whether the person had an unlawful blood-alcohol level of 0.08 or higher.

REFUSAL TO SUBMIT TO A BREATH, BLOOD, OR URINE TEST

1. Same as number one above.
2. Whether the person refused to submit to any such test after being requested to do so by a law enforcement or correctional officer.
3. Whether the person was told that if he or she refused to submit to such test his or her driving privilege to operate a commercial motor vehicle would be disqualified.

FAILURE TO REQUEST A REVIEW WITHIN THE 10 DAY PERIOD SHALL RESULT IN THE WAIVER OF YOUR RIGHT TO A REVIEW OF THE SUSPENSION/DISQUALIFICATION AND A REVIEW OF YOUR ELIGIBILITY FOR A RESTRICTED LICENSE.

Location of Administrative Reviews Hearing Offices

1. **Clearwater 33762**
   4585 140th Avenue North, Suite 1002
2. **Daytona Beach 32114-4663**
   995 Orange Avenue
3. **Ft. Myers 33901**
   4048 Evans Avenue, Suite 305
4. **Ft. Pierce 34982-8105**
   3220 South Federal Hwy., Suite 8
5. **Gainesville 32609-2861**
   2815 N.W. 13th Street, Suite 302
6. **Jacksonville 32210-3522**
   7439 Wilson Blvd
7. **Lantana 33462**
   1299 West Lantana Rd
8. **Lauderdale Lakes 33144**
   3718-3 West Oakland Park Blvd
9. **Miami 33144**
   7795 West Flagler Street, Suite 82C
10. **Melbourne 32901-7121**
    2325 S. Babcock Street
11. **Panama City 32401-2230**
    237 West 15th Street (Lincoln Center)
12. **Pensacola 32503-7450**
    100 Stumpfield Road
13. **Tallahassee 32399-0500**
    2900 Apalachee Pkwy, Rm B141, MS 85
14. **Tampa 33610-4479**
    2814 East Hillsborough Avenue
15. **Orlando 32810-4221**
    4101 Clarcona-Ocoee Road, Ste. 152
16. **Winter Springs 32708**
    154 Tuscawilla Road, Suite 1368

COPY CERTIFIED COPY

HUBA
(425)

17005456

FLORIDA UNIFORM TRAFFIC CITATION **A7GEEIE** CHECK DIGIT

COUNTY OF: PALM BEACH 06
CITY (IF APPLICABLE): PALM BEACH GARDENS
☐ (1) F.H.P. ☒ (2) P.D. ☐ (3) S.O. ☐ (4) OTHER
AGENCY NAME: PALM BEACH GARDENS
AGENCY #: 78

IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON — COMPLAINT (RETAINED BY COURT)

DAY OF WEEK	MONTH	DAY	YEAR	
SATURDAY	09	16	2017	01:19 ☒ A.M. ☐ P.M.

NAME (PRINT) FIRST: VIRGINIA MIDDLE: STARR DEY LAST: WREN
STREET: 716 KITTYHAWK WAY — IF DIFFERENT THAN ONE ON DRIVER LICENSE "X" HERE ▶
CITY: NORTH PALM BEACH — STATE: FL — ZIP CODE: 33408
TELEPHONE NUMBER — DATE OF BIRTH: MO 01 DAY 03 YR 1957 — RACE: W — SEX: F — HGT: 508
DRIVER LICENSE NUMBER: W650877575030 — STATE: FL — CLASS: E — CDL LICENSE: ☐ YES ☒ NO — YR LICENSE EXP.: 2021 — COMMERCIAL VEHICLE: ☐ YES ☒ NO
YR. VEHICLE: 2015 — MAKE: HYUN — STYLE: 3D — COLOR: BLK — PLACARDED HAZARDOUS MATERIAL: ☐ YES ☒ NO
VEHICLE LICENSE NO.: HLRQ54 — TRAILER TAG NO. — STATE: FL — YEAR TAG EXPIRES: 2018 — > 15 PASSENGERS: ☐ YES ☒ NO
UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY: 4379 NORTHLAKE BLVD, PALM BEACH GARDENS — MOTORCYCLE: ☐ YES ☒ NO
COMPANION CITATION NUMBER(S): ☐ YES ☒ NO
FT. ____ MILES ____ ☐ N ☐ S ☐ E ☐ W OF MODE ____

DID UNLAWFULLY COMMIT THE FOLLOWING OFFENSE. CHECK ONLY ONE OFFENSE EACH CITATION.

☐ UNLAWFUL SPEED ____ MPH SPEED APPLICABLE ____ MPH
(☐ INTERSTATE ☐ SCHOOL ZONE ☐ CONSTRUCTION WORKERS PRESENT)
SPEED MEASUREMENT DEVICE ____

☐ CARELESS DRIVING
☐ VIOLATION OF TRAFFIC CONTROL DEVICE
☐ FAILURE TO STOP AT A TRAFFIC SIGNAL
☐ IMPROPER LANE CHANGE OR COURSE
☐ NO PROOF OF INSURANCE
☐ VIOLATION OF RIGHT-OF-WAY
☐ IMPROPER PASSING
☐ CHILD RESTRAINT
☐ SAFETY BELT VIOLATION
☐ IMPROPER OR UNSAFE EQUIPMENT
☐ EXPIRED TAG SIX (6) MONTHS OR LESS
☐ EXPIRED TAG MORE THAN SIX (6) MONTHS
☐ DRIVING WHILE LICENSE SUSPENDED OR REVOKED
☐ EXPIRED DRIVER LICENSE SIX (6) MONTHS OR LESS
☐ EXPIRED DRIVER LICENSE MORE THAN SIX (6) MONTHS
☐ NO VALID DRIVER LICENSE
☐ DRIVING UNDER THE INFLUENCE
☐ Passenger Under 18 Yrs
BAL ____

OTHER VIOLATIONS OR COMMENTS PERTAINING TO OFFENSE:
DUI - REFUSAL TO SUBMIT TO DUI BREATH TEST WITH A PREVIOUS R | Refusal To Submit With Previous
RE-EXAM: ☐ YES ☒ NO — DL SEIZED: ☐ YES ☒ NO

☐ AGGRESSIVE DRIVING — IN VIOLATION OF STATE STATUTE — SECTION: 316.1939 — SUB-SECTION

CRASH	PROPERTY DAMAGE	INJURY TO ANOTHER	SERIOUS BODILY INJURY TO ANOTHER	FATAL
☐ YES ☒ NO	☐ YES $ ____ ☒ NO	☐ YES ☒ NO	☐ YES ☒ NO	☐ YES ☒ NO

☒ CRIMINAL VIOLATION. COURT APPEARANCE REQUIRED. AS INDICATED BELOW.
☐ INFRACTION. COURT APPEARANCE REQUIRED. AS INDICATED BELOW.
☐ INFRACTION WHICH DOES NOT REQUIRE APPEARANCE IN COURT.

A7GEEIE CHECK DIGIT

CIVIL PENALTY IS $ ____

COURT INFORMATION — DATE: 10/18/2017 — TIME: 10:00 AM
COURT: NORTH COUNTY GOVERNMENT CENTER
LOCATION: 3188 PGA Boulevard PBG, FL 33410

ARREST DELIVERED TO: PBSO JAIL — DATE: 09/16/2017

I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION. WILLFUL REFUSAL TO ACCEPT AND SIGN THE CITATION MAY RESULT IN ARREST. I UNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF COURT.

X SIGNATURE OF VIOLATOR (SIGNATURE IS REQUIRED IF INFRACTION REQUIRES APPEARANCE IN COURT)

RANK - NAME OF OFFICER — BADGE NO. — ID. NO. — TROOP UNIT

☒ I CERTIFY THIS CITATION WAS DELIVERED TO THE PERSON CITED ABOVE AND CERTIFY THE CHARGE ABOVE

HSMV 75901 (Rev. 07/12)

COMPLAINT

WHEN PRESENTED TO VIOLATOR, THE FOLLOWING AMOUNT WAS ENTERED.
PAY A CIVIL PENALTY IN THE AMOUNT OF $ ____

CASE NO. ____ DOCKET NO. ____ PAGE NO. ____

DATE	COURT ACTION AND OTHER ORDERS
	BAIL FIXED AT $ ____ OR CASH DEPOSIT OF $ ____ SIGNATURE OF PERSON GIVING BAIL SIGNATURE OF PERSON TAKING BAIL
	FINE IN THE AMOUNT OF $ ____ RECEIVED AS REQUIRED BY COURT SCHEDULE ____ SIGNATURE OF CLERK
	CONTINUANCE TO ____ REASON ____
	CONTINUANCE TO ____ REASON ____
	BOND ESTREATED ____
	WARRANT ISSUED ____
	VIOLATOR FAILED TO APPEAR-DRIVER LICENSE SUSPENDED
	VIOLATOR ARRAIGNED ON ____ (DATE) PLEA: ____ FINDING: ____ ADJUDICATION: ____ SENTENCE: FINE ____ COST ____ JAILED ____ DAYS DRIVER IMPROVEMENT SCHOOL ____ OTHER ____ DRIVER LICENSE SUSPENDED OR REVOKED FOR ____ DAYS RECOMMEND DRIVER LICENSE SUSPENSION FOR ____ DAYS RECOMMEND RE-TEST ____ SIGNATURE OF JUDGE
	TESTIMONY - JUDGE'S NOTES (OR OTHER COURT ORDERS):
	APPEAL BOND OF $ ____
	VIOLATOR'S FINGERPRINT WHEN APPLICABLE ▶

NOT A CERTIFIED COPY

HUBA
(425)

17005456

FLORIDA UNIFORM TRAFFIC CITATION **A7GEEIE** CHECK DIGIT

COUNTY OF: PALM BEACH 06
CITY (IF APPLICABLE): PALM BEACH GARDENS
☐ (1) F.H.P. ☒ (2) P.D. ☐ (3) S.O. ☐ (4) OTHER
AGENCY NAME: PALM BEACH GARDENS
AGENCY #: 78

IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON
SUMMONS (VIOLATOR'S COPY)

DAY OF WEEK	MONTH	DAY	YEAR	
SATURDAY	09	16	2017	01:19 ☒ A.M. ☐ P.M.

NAME (PRINT) FIRST: VIRGINIA MIDDLE: STARR DEY LAST: WREN

STREET: 716 KITTYHAWK WAY — IF DIFFERENT THAN ONE ON DRIVER LICENSE "X" HERE ▶

CITY: NORTH PALM BEACH STATE: FL ZIP CODE: 33408

TELEPHONE NUMBER | DATE OF BIRTH: MO 01 DAY 03 YR 1957 | RACE: W | SEX: F | HGT: 508

DRIVER LICENSE NUMBER: W650877575030 | STATE: FL | CLASS: E | COL LICENSE: ☐ YES ☒ NO | YR LICENSE EXP.: 2021 | COMMERCIAL VEHICLE: ☐ YES ☒ NO

YR. VEHICLE	MAKE	STYLE	COLOR	PLACARDED HAZARDOUS MATERIAL
2015	HYUN	3D	BLK	☐ YES ☒ NO

VEHICLE LICENSE NO.	TRAILER TAG NO.	STATE	YEAR TAG EXPIRES	≥ 16 PASSENGERS
HLRQ54		FL	2018	☐ YES ☒ NO

UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY: 4379 NORTHLAKE BLVD, PALM BEACH GARDENS
MOTORCYCLE: ☐ YES ☒ NO
COMPANION CITATION NUMBER(S): ☐ YES ☒ NO

FT. _____ MILES _____ ☐ N ☐ S ☐ E ☐ W OF NODE _____

DID UNLAWFULLY COMMIT THE FOLLOWING OFFENSE. CHECK ONLY ONE OFFENSE EACH CITATION.

☐ UNLAWFUL SPEED _____ MPH SPEED APPLICABLE _____ MPH
(☐ INTERSTATE ☐ SCHOOL ZONE ☐ CONSTRUCTION WORKERS PRESENT)
SPEED MEASUREMENT DEVICE _____

☐ CARELESS DRIVING
☐ VIOLATION OF TRAFFIC CONTROL DEVICE
☐ FAILURE TO STOP AT A TRAFFIC SIGNAL
☐ IMPROPER LANE CHANGE OR COURSE
☐ NO PROOF OF INSURANCE
☐ VIOLATION OF RIGHT-OF-WAY
☐ IMPROPER PASSING
☐ CHILD RESTRAINT
☐ SAFETY BELT VIOLATION
☐ IMPROPER OR UNSAFE EQUIPMENT
☐ EXPIRED TAG SIX (6) MONTHS OR LESS
☐ EXPIRED TAG MORE THAN SIX (6) MONTHS
☐ DRIVING WHILE LICENSE SUSPENDED OR REVOKED
☐ EXPIRED DRIVER LICENSE SIX (6) MONTHS OR LESS
☐ EXPIRED DRIVER LICENSE MORE THAN SIX (6) MONTHS
☐ NO VALID DRIVER LICENSE
☐ DRIVING UNDER THE INFLUENCE
☐ Passenger Under 18 Yrs
BAL _____

OTHER VIOLATIONS OR COMMENTS PERTAINING TO OFFENSE.
DUI - REFUSAL TO SUBMIT TO DUI BREATH TEST WITH A PREVIOUS R | Refusal To Submit With Previous
RE-EXAM: ☐ YES ☒ NO
DL SEIZED: ☐ YES ☒ NO

☐ AGGRESSIVE DRIVING | IN VIOLATION OF STATE STATUTE | SECTION: 316.1939 | SUB-SECTION

CRASH	PROPERTY DAMAGE	INJURY TO ANOTHER	SERIOUS BODILY INJURY TO ANOTHER	FATAL
☐ YES ☒ NO	☐ YES $ _____ ☒ NO	☐ YES ☒ NO	☐ YES ☒ NO	☐ YES ☒ NO

☒ CRIMINAL VIOLATION. COURT APPEARANCE REQUIRED. AS INDICATED BELOW.
☐ INFRACTION. COURT APPEARANCE REQUIRED. AS INDICATED BELOW.
☐ INFRACTION WHICH DOES NOT REQUIRE APPEARANCE IN COURT.

A7GEEIE CHECK DIGIT

CIVIL PENALTY IS $ _____

COURT INFORMATION: DATE 10/18/2017 TIME 10:00 AM
COURT: NORTH COUNTY GOVERNMENT CENTER
LOCATION: 3188 PGA Boulevard PBG, FL 33410

ARREST DELIVERED TO: PBSO JAIL DATE: 09/16/2017

I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION. WILLFUL REFUSAL TO ACCEPT AND SIGN THE CITATION MAY RESULT IN ARREST. I UNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF COURT.

X SIGNATURE OF VIOLATOR (SIGNATURE IS REQUIRED IF INFRACTION REQUIRES APPEARANCE IN COURT)

RANK / NAME OF OFFICER | BADGE NO. | ID NO. | TROOP/UNIT

☒ I CERTIFY THIS CITATION WAS DELIVERED TO THE PERSON CITED ABOVE AND CERTIFY THE CHARGE ABOVE

HSMV 75901 (Rev. 07/12)

IMPORTANT INSTRUCTIONS REGARDING A NON-CRIMINAL TRAFFIC INFRACTION NOT REQUIRING A COURT APPEARANCE

If you were charged with a civil infraction, you must complete one of the following options **within 30 calendar days** of the date of this citation. If you fail to comply **within 30 calendar days,** your driving privilege will be suspended until you comply. You will then be subject to additional penalties. Please see the front of the citation for the contact information for the Clerk of Court in the county where this violation occurred.

Option 1: You may pay the civil penalty listed on the front of this citation to the Clerk of Court. You must enclose this citation if you mail payment, which may be a money order or a cashier's check. The clerk _____ does _____ does not accept personal checks. Payment of the civil penalty is considered a conviction and points will be assessed, if applicable. Proof of compliance in the form of driver license or registration certificate, whichever is applicable, is required in addition to payment if you were cited for driver license expired less than six months, expired tag less than six months, failure to display a valid driver license, or failure to display a valid registration. You **will** be required to complete a driver improvement course if you are convicted of running a red light or passing a school bus. Your driving privilege will be suspended if you are convicted of not providing proof of insurance. Accumulation of points may increase the cost of your insurance.

Option 2: If you were cited for expired driver license, failure to display a valid driver license, expired tag, failure to possess a valid registration, or no proof of insurance, you may show proof to the Clerk of Court that you had a valid driver license, tag/registration, or insurance, whichever is applicable, at the time of the offense. The charge will be dismissed upon payment of a dismissal fee.

Option 3: If you **do not** hold a commercial driver license and you were cited for driver license expired 6 months or less, expired tag 6 months or less, failure to display a valid driver license, failure to possess a valid registration, no proof of insurance, or driving while license suspended [See s.322.34 (10)(a), F.S.], you may elect to show proof of compliance to the Clerk of Court in the form of a valid driver license, registration, or proof of insurance, whichever is applicable. You may only make one such an election per 12 month period and no more than three elections in a lifetime. You must pay court costs and adjudication will be withheld.

Option 4: If you **do not** hold a commercial driver license, you may be eligible to elect to complete a Florida driver improvement course. You must contact the Clerk of Court to make this election. You may make only one such election per 12 month period and not more than 5 elections in your lifetime. Please visit www.flhsmv.gov for a list of approved courses and to determine your eligibility for this election. Adjudication will be withheld and points will not be assessed. You must pay a civil penalty and court costs. This option is not available for certain traffic offenses, including driver license, tag, and registration violations. Completion of a driver improvement course is required if you are cited for running a red light/traffic control device, even if you do not make this election.

Option 5: You may elect a court hearing by contacting the Clerk of Court. If you request a hearing and the County Judge/Magistrate/Hearing Officer determines that you have committed the offense, the County Judge/Magistrate/Hearing Officer may impose a penalty of up to $500 (or $1,000 if a fatality occurred) and/or require completion of a driver improvement course. Points may be assessed. If it is determined that no infraction has been committed, no cost or penalties shall be imposed.

Option 6: If you were cited with a non-criminal violation of operating a motor vehicle in an unsafe condition (s. 316.610 F.S.) or not properly equipped (s. 316.610, F.S. or s. 316.2935, F.S.), you may have the defect corrected, then contact your local county or city law enforcement agency to have the correction certified below. You must pay the local law enforcement agency $ _____ for this service. You may then mail or present this affidavit of compliance along with $ _____ to the Clerk of Court within 30 calendar days of the date of this citation. No points will be assessed. This option does not apply to a commercial motor vehicle or a transit bus owned by a governmental entity.

FAULTY EQUIPMENT AFFIDAVIT OF COMPLIANCE

(Law Enforcement Use Only)

I certify that the defective equipment described herein has been corrected and complies with the requirements of the Florida traffic laws.

DATE: _____ ASSIGNED DHSMV AGENCY #: _____

Signed: _____
(Name, Title, and ID #)

1 OF A CERTIFIED COPY

HUBA
(425)

17005456

FLORIDA UNIFORM TRAFFIC CITATION **A7GEEHE** CHECK DIGIT

COUNTY OF: PALM BEACH 06
CITY (IF APPLICABLE): PALM BEACH GARDENS
☐ (1) F.H.P. ☒ (2) P.D. ☐ (3) S.O. ☐ (4) OTHER
AGENCY NAME: PALM BEACH GARDENS
AGENCY #: 78

IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON — COMPLAINT (RETAINED BY COURT)

DAY OF WEEK	MONTH	DAY	YEAR	
SATURDAY	09	16	2017	01:02 ☒ A.M. ☐ P.M.

NAME (FIRST) VIRGINIA MIDDLE STARR DEY LAST WREN

STREET: 716 KITTYHAWK WAY — IF DIFFERENT THAN ONE ON DRIVER LICENSE "X" HERE ▶

CITY: NORTH PALM BEACH STATE: FL ZIP CODE: 33408

TELEPHONE NUMBER	DATE OF BIRTH MO	DAY	YR	RACE	SEX	HGT
	01	03	1957	W	F	508

DRIVER LICENSE NUMBER: W650877575030
STATE: FL CLASS: E CDL LICENSE: ☐ YES ☒ NO YR LICENSE EXP: 2021 COMMERCIAL VEHICLE: ☐ YES ☒ NO

YR. VEHICLE	MAKE	STYLE	COLOR	PLACARDED HAZARDOUS MATERIAL
2015	HYUN	3D	BLK	☐ YES ☒ NO

VEHICLE LICENSE NO.	TRAILER TAG NO.	STATE	YEAR TAG EXPIRES	> 10 PASSENGERS
HLRO54		FL	2018	☐ YES ☒ NO

UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY: 4379 NORTHLAKE BLVD. PALM BEACH GARDENS
MOTORCYCLE: ☐ YES ☒ NO
COMPANION CITATION NUMBER(S): ☐ YES ☒ NO

FT. _____ MILES _____ ☐ N ☐ S ☐ E ☐ W OF NODE _____

DID UNLAWFULLY COMMIT THE FOLLOWING OFFENSE. CHECK ONLY ONE OFFENSE EACH CITATION.

☐ UNLAWFUL SPEED _____ MPH SPEED APPLICABLE _____ MPH
(☐ INTERSTATE ☐ SCHOOL ZONE ☐ CONSTRUCTION WORKERS PRESENT)
SPEED MEASUREMENT DEVICE _____

☐ CARELESS DRIVING
☐ VIOLATION OF TRAFFIC CONTROL DEVICE
☐ FAILURE TO STOP AT A TRAFFIC SIGNAL
☐ IMPROPER LANE CHANGE OR COURSE
☐ NO PROOF OF INSURANCE
☐ VIOLATION OF RIGHT-OF-WAY
☐ IMPROPER PASSING
☐ CHILD RESTRAINT
☐ SAFETY BELT VIOLATION
☐ IMPROPER OR UNSAFE EQUIPMENT
☐ EXPIRED TAG SIX (6) MONTHS OR LESS
☐ EXPIRED TAG MORE THAN SIX (6) MONTHS
☐ DRIVING WHILE LICENSE SUSPENDED OR REVOKED
☐ EXPIRED DRIVER LICENSE SIX (6) MONTHS OR LESS
☐ EXPIRED DRIVER LICENSE MORE THAN SIX (6) MONTHS
☐ NO VALID DRIVER LICENSE
☐ DRIVING UNDER THE INFLUENCE
☐ Passenger Under 18 Yrs
BAL _____

OTHER VIOLATIONS OR COMMENTS PERTAINING TO OFFENSE:
DL - DEPT/MV RESTRICTIONS | Violation Of Business Purposes Only Restriction
RE-EXAM ☐ YES ☒ NO
DL SEIZED ☐ YES ☒ NO

☐ AGGRESSIVE DRIVING | IN VIOLATION OF STATE STATUTE | SECTION 322.16 | SUB-SECTION (1)(C)

CRASH	PROPERTY DAMAGE	INJURY TO ANOTHER	SERIOUS BODILY INJURY TO ANOTHER	FATAL
☐ YES ☒ NO	☐ YES $ _____ ☒ NO	☐ YES ☒ NO	☐ YES ☒ NO	☐ YES ☒ NO

☒ CRIMINAL VIOLATION. COURT APPEARANCE REQUIRED. AS INDICATED BELOW.
☐ INFRACTION. COURT APPEARANCE REQUIRED. AS INDICATED BELOW.
☐ INFRACTION WHICH DOES NOT REQUIRE APPEARANCE IN COURT.

A7GEEHE CHECK DIGIT

CIVIL PENALTY IS $ _____

COURT INFORMATION — DATE: 10/18/2017 TIME: 10:00 AM
COURT: NORTH COUNTY GOVERNMENT CENTER
LOCATION: 3188 PGA Boulevard PBG, FL 33410

ARREST DELIVERED TO: PBSO JAIL DATE _____

I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION. WILLFUL REFUSAL TO ACCEPT AND SIGN THE CITATION MAY RESULT IN ARREST. I UNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF COURT.

X SIGNATURE OF VIOLATOR (SIGNATURE IS REQUIRED IF INFRACTION REQUIRES APPEARANCE IN COURT)

RANK - BADGE OF OFFICER | BADGE NO. | ID. NO. | TROOP DIST

☒ I CERTIFY THIS CITATION WAS DELIVERED TO THE PERSON CITED ABOVE AND CERTIFY THE CHARGE ABOVE
HSMV 73901 (Rev. 07/12)

COMPLAINT

WHEN PRESENTED TO VIOLATOR, THE FOLLOWING AMOUNT WAS ENTERED.
PAY A CIVIL PENALTY IN THE AMOUNT OF $ _____.

CASE NO. _____ DOCKET NO. _____ PAGE NO. _____

DATE	COURT ACTION AND OTHER ORDERS
	BAIL FIXED AT $ _____ OR CASH DEPOSIT OF $ _____ _____ SIGNATURE OF PERSON GIVING BAIL _____ SIGNATURE OF PERSON TAKING BAIL
	FINE IN THE AMOUNT OF $ _____ RECEIVED AS REQUIRED BY COURT SCHEDULE _____ SIGNATURE OF CLERK
	CONTINUANCE TO _____ REASON _____
	CONTINUANCE TO _____ REASON _____
	BOND ESTREATED _____
	WARRANT ISSUED _____
	VIOLATOR FAILED TO APPEAR-DRIVER LICENSE SUSPENDED
	VIOLATOR ARRAIGNED ON _____ (DATE) PLEA: _____ FINDING: _____ ADJUDICATION: _____ SENTENCE: FINE _____ COST _____ JAILED _____ DAYS DRIVER IMPROVEMENT SCHOOL _____ OTHER _____ DRIVER LICENSE SUSPENDED OR REVOKED FOR _____ DAYS RECOMMEND DRIVER LICENSE SUSPENSION FOR _____ DAYS RECOMMEND RE-TEST _____ _____ SIGNATURE OF JUDGE
	TESTIMONY - JUDGE'S NOTES (OR OTHER COURT ORDERS):
	APPEAL BOND OF $ _____
	VIOLATOR'S FINGERPRINT WHEN APPLICABLE ⟶

NOT A CERTIFIED COPY

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 15th DAY OF September 20 17, AT 21:47 AM PM

SUBJECT: WREN, VIRGINIA STARR CASE NUMBER: 17-005456

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: A. Huba

PERSONAL CONTACT

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

On 9/15/17, I responded to Buongiorno's Pizza located at 4379 Northlake Blvd to assist with an accident investigation. I was informed by Ofc. Batista #439 that witness Tami Hennacy had observed a white female subject (identified by Florida Driver's license as Virginia Wren) to have been the driver of a black Hyundai Veloster that parked in front of the restaurant. I was informed by Ofc. Carver #471 that the aforementioned vehicle was involved in a hit and run crash just a few minutes prior to this encounter, and that a witness had identified Wren as the driver during that crash (see 17-005454 for more information on the hit and run).

OBSERVATION OF DRIVER:

Upon approaching Wren, I smelled the odor of an unknown intoxicating beverage, and observed her eyes to be glassy. Wren attempted to stand up from the bench she was sitting on, and fell back down. Wren's shorts were wet and smelling of urine, consistent with her urinating on herself.

Statements: Wren was slurring her words during our encounter, repeatedly referring to police officers as "polife occifers." Wren then advised that she "may be" impaired. I advised Wren that I observed signs of

DRIVER'S STATEMENTS:

impairment, and that I had some sobriety tasks for her to perform, to which she agreed. While conducting the Standardized Field Sobriety Tasks, Wren stated to me "I want to marry you." I asked Wren to perform the Walk And Turn task, at which time she stated "we're gonna have a parade, lets go."

ODORS:

Strong odor of an unknown intoxicating beverage as she spoke; the smell of urine emanating from her person.

GENERAL OBSERVATIONS

SPEECH: slurred

ATTITUDE: mood swings from joyful to rage

CLOTHING: white shirt, blue jean shorts, silver shoes

MEDICAL/OTHER: Wren intially stated none, then advising that her eyeballs "hurt."

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 15 day of Sept 20 17 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)

Samantha Palmer
1ST FLORIDA NOTARY, LLC

NOT A CERTIFIED COPY

SUBJECT: WREN, VIRGINIA STARR CASE NUMBER: 17-005456

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION
- [x] LT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION
- [x] RT EYE- ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

WALK & TURN:

HGN: Had to repeatedly give instructions; had trouble keeping head still; had VGN.
WAT: Demonstrated and explained multiple times; subject had trouble keeping balance and repeatedly moved from the instructional position. Subject had to be repeatedly told to count out loud. Subject had to hold hands up in the air to maintain balance during the exercise. Subject repeatedly deviated from the instructions provided to her during the test. Subject took 11 steps forward and 11 steps back; none heal to toe.

ONE LEG STAND:

OLS: Demonstrated and explained multiple times; subject would not pay attention to the officer providing the instructions. After attempting to get Wren to participate in the exercise an excess of five times, the exercise was terminated.

FINGER TO NOSE:

FN: Not performed due to subject refusing to follow instructions during the One Leg Stand.

ROMBERG/ALPHABET:

RA: Not performed due to subject refusing to follow instructions during the One Leg Stand.

BREATH TEST RESULTS: refused

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)
The foregoing instrument was notarized or sworn before me this 15 day of Sept 2017 by _____

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)

Samantha Palmer
Commission # FF172577
Expires: OCT 23 2018
Bonded thru
1ST FLORIDA NOTARY, LLC

NOT A CERTIFIED COPY

WITNESS LIST

CASE NUMBER: 17-005456

ARRESTING OFFICER: A. Huba

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 the case

NAME: A. Luciano #478

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 the case

NAME: 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 the case

NAME: E. Batista #439

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 the case

NAME: Tami Hennacy

ADDRESS 12197 Acapulco Ave, Palm Beach Gardens, FL, 33410

PHONE NUMBERS (HOME) 561-801-9025 (WORK)

CAN TESTIFY TO: Facts of the 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:

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PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

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PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NOT A CERTIFIED COPY

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH SO
Instrument Serial Number: 80-006476 Software: 8100.27
Date of Test: 09/15/2017

Date of Last Agency Inspection: 08/04/2017
Observation Period Began: 22:47
Subject's Name: VIRGINIA S WREN DOB: 01/03/1957 Sex: F

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	23:11
Air Blank	0.000	23:12
Control Test	0.082	23:12
Air Blank	0.000	23:13
Subject Sample #1	NSP*	23:16
Air Blank	0.000	23:16
Air Blank	0.000	23:18
Subject Sample #2	REF**	23:19
Air Blank	0.000	23:19
Control Test	0.080	23:19
Air Blank	0.000	23:20
Diagnostics Check	OK	23:20

*No Sample Provided
**Subject Test Refused

Cylinder Lot: 279870
Exp: 02/04/2019

State of Florida, County of Palm Beach

Personally appeared before me the undersigned authority, who (__) is personally known to me or (__) produced _____ as identification, and who after being placed under oath, states:

I SAMANTHA M PALMER, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____ Date: 09/15/17
Signature

Sworn to (or affirmed) before me this 15 day of Sept, 2017

_____ OFC. Huda
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 17-127773 PBSO ZONE 3-13

AGENCY CASE # 17-005456 CRASH CASE # 17-005454

TIME OF STOP/CRASH 21:43 DATE 9/15/17 DAY Friday

SUBJECT'S NAME Wren, Virginia RACE W SEX F

HGT 508 WGT 125 DOB 01 / 23 / 57

LOCATION 4379 Northlake Blvd, PBG, FL, 33410

ARRESTING OFFICER'S NAME & ID A. Hubo #475 AGENCY PBGPD

DIVISION: Road Patrol

NOTIFIED BY COMMO

ARRIVAL AT FACILITY 22:47

ARREST TIME 22:13

BREATH RESULTS:

1. REFUSED
2.
3.
4.

TESTING OFFICER'S ID 24520 PBSO VIDEOTAPE # N/A

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

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TESTING FACILITY TASK REPORT

AGENCY: PBG/HUBA

SUBJECT: WREN, VIRGINIA

CASE NUMBER: 17-127773

DATE: 09/15/2017

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 2309

ENDING TIME: 2329

BREATH TESTS RESULTS: 1) R TIME 2319 A.M.☐ P.M.☒ 2) XX TIME XX A.M.☐ P.M.☐

3) XX TIME XX A.M.☐ P.M.☐ 4) XX TIME XX A.M.☐ P.M.☐

BREATH OPERATOR: S. PALMER #24520

MAINTENANCE TECHNICAN: J Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: RAMBLING, REPETITIVE, UPSET, MOODSWINGS, CRYING

CLOTHING: WHITE TANK TOP, BLUE JEAN SHORTS, SILVER SANDALS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES GLASSY AND BLOODSHOT, UNSTEADY ON HER FEET, ADMITTED TO DRINKING THREE VODKA AND PINEAPPLE DRINKS

COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 2247
SUBJECT AGREED TO TAKE BREATH TEST
TECH EXPLAINED TEST INSTRUCTIONS
SUBJECT STATED SHE DID NOT WANT TO TAKE TEST
A/O READ I/C
SUBJECT STATED SHE UNDERSTOOD I/C
AND AGAIN REFUSED TO TAKE TEST
A/O READ RIGHTS
SUBJECT STATED SHE UNDERSTOOD HER RIGHTS
A/O CONDUCTED Q&A
SUBJECT ANSWERED QUESTIONS

NOT A CERTIFIED COPY

SUBJECT: Wren, Virginia CASE NUMBER: 17-005456

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 OFC. Huba of the Palm Bch Gardens.

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) Read on Camera

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) Read on Camera

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

PBSO #0129B REV. 06/11

NOT A CERTIFIED COPY

SUBJECT: Wren, Virginia CASE NUMBER: 97-005456

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? No

WHERE WERE YOU GOING? Home

WHAT STREET OR HIGHWAY WERE YOU ON? Waterway Cafe

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

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

WHAT IS TODAY'S DATE? 9-16-1997 WHAT DAY OF THE WEEK IS IT? Friday

WHAT COUNTY AND CITY ARE YOU IN NOW? Palm Beach County / North Palm Beach

WHEN DID YOU LAST EAT? Long time ago WHAT DID YOU EAT? Turkey sandwich

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? Pleading with people to be my friend

HOW MUCH DO YOU WEIGH? More than I want to HAVE YOU BEEN DRINKING? Yes WHAT? Vodka and pineapple

HOW MUCH? 3 drinks at the time WHERE? Waterway Cafe WITH WHOM? Myself and my tennis partner

WHEN DID YOU HAVE YOUR FIRST DRINK? When I was 17 AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? Sipping

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? No ARE YOU UNDER THE INFLUENCE? No, but probably am

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? Boy designer WHEN DID YOU LAST WORK? Yesterday

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? No WHAT? _____

ARE YOU SICK OR INJURED? Yes / No WHAT'S WRONG? Mentally (Subject then recited their claim)

DO YOU LIMP? No DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? Yes, yesterday

WERE YOU IN AN ACCIDENT TODAY? No

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? No WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? No WHAT? _____ WHEN? _____

DO YOU HAVE:
EPILEPSY? No
GLASS EYE? No
FALSE TEETH? Yes
EAR INFECTION? No
INNER EAR TROUBLE? No
DIABETES? No

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? Yes, they hurt sometimes

DO YOU TAKE INSULIN? No IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? No WHERE? _____

INTERVIEWER: A. Hebe #415

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

PBSO #0129C REV. 9/93

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RECEIPT FOR PRISONER'S PERSONAL PROPERTY
PALM BEACH COUNTY

JAIL

Jacket # 01067577 Cell # _____ Pouch # 896

ARRESTING AGENCY

Arrest Agency PBGPD Arrest Date 9/15/17 Arrest Time 22:13 Tamper-Proof Bag # 0649703

Print Prisoner's Wren (FIRST NAME) Virginia (MI) S

Prisoner's DOB 01/03/57 [redacted]

MALE	FEMALE	WHITE	BLACK	HISPANIC	OTHER
☐	☒	☒	☐	☐	☐

1's	5's	10's	20's	50's	100's	Other	U.S. Bills Total	U.S. Coins Total	Check/M.O. Total
3	2	0	3	0	0	0	$ 73.00	$ 0	$ 0

Total Amount of Money in Writing: Seventy Three Dollars and zero cents

Total Amount of Money Numerical: $ 73.00

DESCRIPTION OF PERSONAL PROPERTY	BAG 1 OF 1 - BULK PROPERTY - BAG 2 OF 2	
1. Gray cell phone w/ white case	1. C station	1.
2. Chase visa debit card	2.	2.
3. Suntrust Mastercard	3.	3.
4. Capital One Mastercard	4.	4.
5.	5.	5.
6.	6.	6.
7.	7.	7.
8.	PRISONER IS WEARING	
9.	1. White shirt	
10.	2. Blue shorts	
11.	3. ~~Silver~~ Gray shoes	

By my signature, I acknowledge that the above described property is all the property, other than that held as evidence, in my possession at the time of my arrest.

Non-Compliant (SIGNATURE OF PRISONER) | D. Hall (PRINT NAME OF OFFICIAL TAKING PROPERTY) | 45 (ID #) | [signature] (SIGNATURE)

TRANSPORT

CHAIN OF CUSTODY

I certify the above inventory is correct and I have received all items listed above.

Name	ID Number	Agency	Date
1. Hall	45	PBGPD	9/16/17
2. D. Hall	2279	PBSO	9/16/17
3.			

INTAKE

Shower/Uniform Issuance. D/S Print Name and ID #:

Items retained by inmate		Additional property/clothing placed into Property	

RELEASE

By my signature, I acknowledge receipt of all my listed property and money in the amount of:

Check Total $ _____ Cash Total $ _____

SIGNATURE OF PRISONER | SIGNATURE/ID # OF WITNESS | DATE

CANARY - PBSO PROPERTY GREEN - TRANSPORTING OFFICER PINK - ARRESTING OFFICER/AGENCY WHITE- INMATE

PBSO #0637 REV. 01/06

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PALM BEACH GARDENS POLICE DEPARTMENT

Inventory and Vehicle Storage Receipt

Date of Tow 9/15/17 Time 22:30 A.M / ~~P.M~~ Case No. 17 -005456

Name of Vehicle Owner: Virginia WREN Address of Owner: 716 Kitty Hawk Way

Year Vehicle 2015 Make of Vehicle HYUN Body Style 3D Miles 30663

Color BLACK Tag # HLRQ54 State FL VIN # KMHTC6AD7FU220807

Location Vehicle Invent. & Towed From 4379 NORTHLAKE BLVD

Name / Address Towing Service KAUFFS Towing 4701 EAST AVE, LWB IMPOUND ☐ YES ☐ ~~NO~~

Reason for Tow ARREST FCIC ☐ YES ~~☐ NO~~

Hold on Vehicle for Criminal Investigative Purposes ☐ YES ☐ NO, if yes why _____

☐ Forfeiture ☐ Other _____

Equipment of Vehicle:

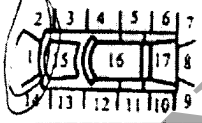
- ~~☐~~ CD
- ☐ Cass
- ☐ GPS
- ~~☐~~ ONSTAR
- ☐ Other List _____

- ☐ Other _____
- ~~☐~~ Wheel Covers / No. of 4
- ☐ Jack
- 2 No. of Tires (including spare)

Other Equipment _____

List Property in Vehicle Towels (2), Sunglasses, Lotion, Pillow, Purse with misc paperwork, Earrings, Watch, Many Dolphin Cup, Umbrella

Identifying Marks or Damage MISC DINGS AND DENTS, DAMAGE TO FRONT BUMPER



Vehicles without HOLD ORDERS become the responsibility of the towing company at time of tow-in and may be released without authorization.

OFFICER'S NAME YACINTHE, W (Printed) ID # 4600 Signature _____ (Officer)

WE, THE UNDERSIGNED OFFICER(S) AND TOW DRIVER, HEREBY CERTIFY THAT THE ABOVE LISTED PROPERTY INVENTORY IS CORRECT TO THE BEST OF OUR KNOWLEDGE.

Signature _____ TD1923 (Tow Truck Driver) Signature _____ (Impounding Officer)

NAME JASON Jenkins (Printed) OFFICER'S NAME YACINTHE, W (Printed)

WHITE - OFFICE COPY YELLOW - OWNER/DRIVER PINK - TOWING COMPANY

PBGPD REV. 11/12 -019

NOT A CERTIFIED COPY

1 DUI

PALM BEACH GARDENS POLICE DEPARTMENT
CASE FILE TRANSMITTAL REPORT

Adult ☒
Juvenile ☐

Case #: 17-005456 Defendant: WREN, VIRGINIA STARR

Officer/Detective: A. Huba

Courier ☒ Direct File ☐ Date Due: _____

Date Transmitted: _____

Received by SA Office Representative: _____

Evidence Included with Transmittal: Yes ☐ No ☒

Video Evidence: Yes ☐ No ☒

Description of attached evidence:

N/A

RECEIVED
SEP 18 2017
RECORDS DIVISION
PALM BEACH GARDENS POLICE DEPT

Remarks:

Filing Officer: _____
(Signature and ID#)

A. Huba
(Printed Name of Officer and ID#)

NOT A CERTIFIED COPY

**Ammended PC / Rough arrest **
Included w/ packet -

PALM BEACH GARDENS POLICE DEPARTMENT
STATE ATTORNEY'S OFFICE FILING
INFORMATION FORM

Defendant: WREN, VIRGINIA STARR
A.K.A:
Co-defendant (if any):

Victim Related/Acquainted with Defendant? Yes: ☐ No: ☐ N/A: ☑
Arrest Date: 09/15/2017 Agency Case Number: 17-005456

Arresting/Lead Officer: A. Huba Officer Phone Number: (561) 799-4445
Agency: Palm Beach Gardens Police Department Agency Phone Number: (561) 799-4445
Court Liaison Phone Number: (561) 799-4592

Current Shift Hours: 1630 to 0330 Days Off: Varies
Leave/Shift Change Info: Varies

Was arrest made for, or in conjunction with another agency and, if so, what agency?

Sentencing Recommendations:

Additional Comments:

Filing Documents Attached:

- ☑ Rough Arrest
- ☑ PC Affidavit (Sworn Original)
- ☑ Witness/Evidence List
- ☐ Offense Reports (All)
- ☐ Witness Statements (All)
- ☐ FCIC/NCIC Criminal History
- ☑ Accident Reports
- ☐ Other:

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