

ADMISSION		ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias		1 JUVENILE	
OBTS Number		Agency ORI Number		Agency Name		Agency Report Number (N.T.A.'s only)	
0500200		Boca Raton Police Department		3 2		2016-017198	
Charge Type: Check as many as apply: 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other		Location of Arrest (Including Name of Business)		Location of Offense (Business Name, Address)		If Weapon Seized Enter Type	
99 SE 3RD ST, BOCA RATON, FL		99 SE 3RD ST, BOCA RATON, FL 33432		None/not Applicable		Multiple Clearance Indicator 01	
Date of Arrest		Time of Arrest		Booking Date		Booking Time	
11/25/2016		23:52		11/26/2016		00:02	
Name (Last, First, Middle)		Alias:		Alias (Name, DOB, Soc. Sec. #, Etc.)		Location of Vehicle	
RODRIGUEZ, WENDY VANESSA						EMERALD TOWING	
Race		Sex		Date of Birth		Height	
W - White B - Black O - Oriental/Asian		W F		04/30/1996		5'03	
Weight		Eye Color		Hair Color		Complexion	
145		BROWN		BLACK		MEDIUM	
Build		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status		Religion	
Small		TATT F STOMACH / BUTTERFLY		S			
Local Address (Street, Apt. Number)		(City)		(State)		(Zip)	
2283 SW 65TH WAY, BOCA RATON, FL 33428							
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)	
2283 SW 65TH WAY, BOCA RATON, FL 33428							
Business Address (Name, Street)		(City)		(State)		(Zip)	
PALM BEACH STATE, BOCA RATON, FL							
D/L Number, State		Soc. Sec. Number		INS Number		Place of Birth (City, State)	
R362880966500 / FL						BOGOTA, Columbia	
Citizenship		Co-Defendant Name (Last, First, Middle)		Race		Sex	
CB							
Date of Birth		Race		Sex		Date of Birth	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
Parent		Other		Name (Last, First, Middle)		Residence Phone	
Address (Street, Apt. Number)		(City)		(State)		(Zip)	
Business Phone		Notified by: (Name)		Date		Time	
Released To: (Name)		Relationship		Date		Time	
The above address was 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's Office (Phone 355-2526) informed of any change of address.		School Attended		Grade		Value of Property	
Property-Crime?		Description of Property		Value of Property			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
Drug Activity		S. Sell		R. Smuggle		K. Disperses/Distribute	
N. N/A		B. Buy		D. Deliver		M. Manufacture/Produce/Cultivate	
P. Possess		T. Traffic		E. Use		Z. Other	
Charge Description		Statute Violation Number		Violation of ORD #			
DUI- PROPERTY DAMAGE/ INJURY TO PROPERTY OR PERSON ENHANCED		316.193(3C1)					
Drug Activity		Drug Type		Amount / Unit		Offense #	
N						2016-017198	
Counts		Domestic Violence		Warrant / Capias Number		Bond	
1		<input type="checkbox"/> Y <input checked="" type="checkbox"/> N					
Charge Description		Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type		Amount / Unit		Offense #	
Counts		Domestic Violence		Warrant / Capias Number		Bond	
		<input type="checkbox"/> Y <input type="checkbox"/> N					
Charge Description		Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type		Amount / Unit		Offense #	
Counts		Domestic Violence		Warrant / Capias Number		Bond	
		<input type="checkbox"/> Y <input type="checkbox"/> N					
Health / Apparent Physical Condition of Defendant		Any knowledge of the following:		Mental		Escape Risk	
GOOD		Explain:		Medication		Deformities	
Check which applies:		Released O.R.		Released to Parent/Guardian		<input checked="" type="checkbox"/> T.O.T. County Jail	
<input type="checkbox"/> Released Bond		<input type="checkbox"/> South County Mental Health		PROPERTY - Received By		Released By	
				531		531	
Transported By		Date Transported		Time Transported		Other	
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court		Location (Court, Room)		South County 200 W Atlantic Ave Delray Beach, FL 33444		Court Date and Time	
<input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court							
but must comply with instructions on Page 2.							
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		No Photo Available	
HOLD for Other Agency		Signature of Arresting Officer		Name Verification (Printed by Arrestee)		(PRINT)	
<input type="checkbox"/> Dangerous		<input type="checkbox"/> Resisted Arrest		NOV 26 AM 4:16			
<input type="checkbox"/> Suicidal		<input type="checkbox"/> Other		JESIONEK, ROBERT S.		ID # 531	
Pouch #		Transporting Officer		ID # 713		Agency BRPD	
44 HONCA/7204		D. Graham					
						WITNESS here if subject signed with an "X"	
						PAGE 1 OF 1	

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OBT Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
A D M I N	Agency ORI Number FL 0500200		Agency Name BOCA RATON POLICE DEPARTMENT		Agency Report Number 3 2 2016-017198				
	Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes:		
D E F	Name (Last, First, Middle) <i>Gaitan</i> RODRIGUEZ, WENDY VANESSA				Race W		Sex F		Date of Birth 04/30/1996
	Charge Description 316.193(3C1) DUI- PROPERTY DAMAGE/ INJURY TO PROPERTY				Charge Description				
C H A R G E S	Charge Description				Charge Description				
	Charge Description				Charge Description				
V I C T I M	Victim's Name (Last, First, Middle) State Of Florida				Race		Sex		Date of Birth
	Local Address (Street, Apt. Number) (City) (State) (Zip)				Phone		Address Source		
	Business Address (Name, Street) (City) (State) (Zip)				Phone		Occupation		
<p>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.</p> <p>The Person taken into custody ...</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the 25 day of November, 2016 at 23:52 (Specifically include facts constituting cause for arrest.)</p> <p>On 11/25/2016 at 2307 hours, I was dispatched to 233 South Federal Highway, Boca Raton, Florida in reference to a traffic crash. I arrived at 2313 hours and located the vehicles on SE 3rd Street just west of South Federal Highway.</p> <p>I made contact with Wendy Rodriguez Gaitan who identified herself as the driver of a Ford Explorer. She stated she was attempting to pull into an empty parking space to shout at someone that lived in the building. She then stated that another vehicle had struck her vehicle and left. I asked her to point out the area where her vehicle was struck. When she did, I observed no damage.</p> <p>While I was talking with her I could smell a strong odor of an alcoholic beverage coming from her breath. Her eyes were red and glassy. Her speech was slurred. She was unable to make complete sentences. She was swaying while standing.</p> <p>I spoke to Michael Capone. He stated he had been inside the restaurant working. He heard a loud noise and walked outside. He saw subject later identified as Wendy Rodriguez Gaitan in the driver's seat of the Ford Explorer. There were no passengers. He then called the police department. He provided a written statement.</p> <p>From my crash investigation, V1 was westbound on SE 3rd Street. V1 struck V2 which had been parked and unattended. V1 continued forward and struck V3 which also had been parked and unattended. The damage to V1 corresponded to the damage found on V2 and V3. There were no physical injuries.</p> <p>I completed the written traffic crash report. I set up my in car camera in an adjacent parking lot. I asked her to walk to the front of my vehicle. She was swaying while walking.</p>									
A D M I N I S T R A T I V E	<p>SWORN AND SUBSCRIBED BEFORE ME</p> <p><i>WOLLSCHLAGER, ANTHONY J</i> WOLLSCHLAGER, ANTHONY J NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p>11/26/2016 DATE</p>								
	<p><i>[Signature]</i> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p>JESIONEK, ROBERT S (531) NAME OF OFFICER (PLEASE PRINT)</p> <p>11/26/2016 DATE</p>								
	<p>PAGE 1 OF 2</p>								
	<p>COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS</p> <p style="text-align: right;">SCANNED P. I. O. NOV 2 / 2016</p>								

OBT Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
Agency ORI Number FL 0500200		Agency Name BOCA RATON POLICE DEPARTMENT		Agency Report Number 3 2 2016-017198			
Charge Type: Check as many as apply.		<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes:			
Name (Last, First, Middle) RODRIGUEZ, WENDY VANESSA		Alias		Race W	Sex F	Date of Birth 04/30/1996	

I read her The Miranda Warnings. I then asked her questions about the accident. She stated again that another vehicle hit her vehicle. She was driving her vehicle and there were no passengers. When asked further questions she stated I plead the 5th.

I explained my crash investigation was complete and I was now conducting a DUI Investigation. I asked her if she would attempt the road side tasks to dispel my alarm that she was driving impaired. She stated I plead the 5th. I explained the tasks were voluntary and that I could not force her. I explained that if she refused it could be used against her in a court of law, she was forcing me to make my decision on everything I had observed to that point, and I could use her refusal as a basis to build probable cause if I decided to make an arrest. She had no questions. I asked her again if she would attempt the tasks and she would only respond with, I plead the 5th.

At 2352 hours, I placed her under arrest. A driver exchange form was left on the windshield of each parked vehicle that had been damaged. Her vehicle was removed by Emerald Towing. I transported her to The BRPD.

Officer Crawford conducted The Intoxilyzer 8000 testing. I asked her to provide a breath sample. She first said yes and then said no. I read her Implied Consent. I asked her again to provide a breath sample and she refused. At 0042 hours on 11/26/2016 she was issued a refusal.

She was charged with DUI FSS 316.193(3C1). She was given the court date of 1/9/2017 at 8:30am. The video was submitted into property. After processing she was transported to The PBCJ.

SWORN AND SUBSCRIBED BEFORE ME <div style="text-align: center;"> WOLLSCHLAGER, ANTHONY J NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <div style="display: flex; justify-content: space-between; margin-top: 10px;"> 11/26/2016 DATE </div> </div>	<div style="text-align: center;"> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER JESIONEK, ROBERT S (531) NAME OF OFFICER (PLEASE PRINT) <div style="display: flex; justify-content: space-between; margin-top: 10px;"> 11/26/2016 DATE </div> </div>
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COURT

STATE ATTORNEY

CENTRAL RECORDS

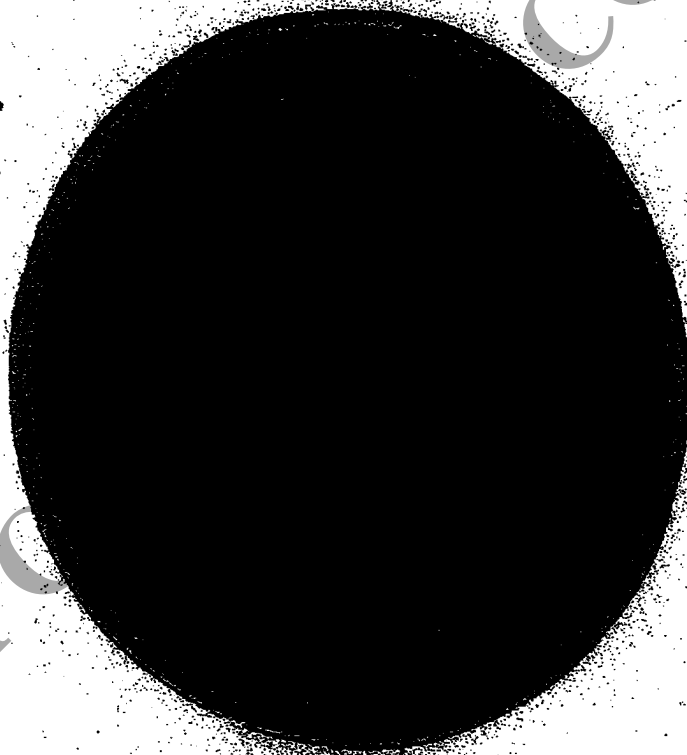
JAIL

CRIME ANALYSIS

P. I. O.

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D. U. I. INFLUENCE REPORT



**Boca Raton Police Services Department
100 Northwest Second Avenue
Boca Raton, Florida 33432**

WITNESS LIST

ARRESTING OFFICER: Tesiorich

Name: Ok. Crawford Phone # Home - Work -

Address: -

Can testify to: Breath testims

Name: Ok. Gannon Phone # Home - Work -

Address: -

Can testify to: see report

Name: Michael Capone Phone # Home - Work 917-284-5618

Address: 781 Crystal Lake Dr. Pompano Bch, FL 33064

Can testify to: see report

Name: - Phone # Home - Work -

Address: -

Can testify to: -

Name: - Phone # Home - Work -

Address: -

Can testify to: -

Name: - Phone # Home - Work -

Address: -

Can testify to: -

Name: - Phone # Home - Work -

Address: -

Can testify to: -

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BOCA RATON POLICE DEPARTMENT

Agency Case# 16-17198

PART II D.U.I. REPORT
To be filled out at testing facility

I. INTRODUCTION

(Instrument Operator faces video camera)

A. The day is: Saturday, November, 26th, 2016
(day) (month) (date) (year)

B. The time is now approximately 12:33 AM/PM

C. The following is in reference to case number 2016-17198

D. Present at this time is Officer Teslorch of the Boca Raton Police
Department. (Officer's Name)

E. Officer Teslorch, Have you arrested Wendy Rodriguez Gaitan
(Defendant's name)

In violation of Florida State Statute 316.193?

F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida?

G. Mr./Mrs./Ms. Rodriguez Gaitan, I am required to
Inform you these proceedings are being video taped.

Operator Note: Video tape breath request, breath sample, and interview.

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BOCA RATON POLICE DEPARTMENT

Agency Case # 16-17198

H. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.

Note: Read only the paragraph applicable to the type of test you are requesting.

- A.** I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.
- B.** I am now requesting that you submit to a lawful test of your **URINE** for the purpose of determining its alcohol content.
- C.** I am now requesting that you submit to a lawful test of your **BLOOD** for the purpose of determining its alcohol content and the presence of chemical or controlled substances.

IMPLIED CONSENT WARNINGS

Note: Read only if the subject does not comply with your request.

2. I am Off R. Jesperson of the Boca Raton PD

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 signature: Video

ALSO READ FOR CDL HOLDERS

IN ADDITION, your refusal to submit will result in the loss of your commercial privileges for one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from operating a commercial motor vehicle.

After reading the implied consent warning, the arresting officer must request a breath sample again.

(IF REFUSAL THEN)

At this time Mr/Mrs/Ms. Rodriguez Garcia has refused to submit to a breath test.

The date is Nov (Month) 26 (Day) 2016 (Year) and the time 12:42 AM/PM

A refusal form will be completed by the arresting officer.

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BOCA RATON POLICE DEPARTMENT
TESTING FACILITY TASK REPORT

SUBJECT: Rodriguez Paitan, Wendy

CASE #: 2016-19198 DATE: 11/26/16

BREATH TESTS RESULTS

1) TIME - Refused AM/PM 2) TIME - AM/PM
3) TIME - AM/PM 4) TIME - AM/PM

BREATH OPERATOR: Ok. Cantard

MAINTENANCE TECHNICIAN: Ok. Pare

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: mood swings, calm, then talkative, questions, then reasoning

CLOTHING: white t-shirt, black shirt, blue jeans, black sneakers

MEDICAL CONDITION: None

OTHER: -

COMMENTS: Her eyes are glassy + bloodshot.

I can smell a strong odor of alcoholic beverage emanating from her breath.

"Honestly that was a stupid question, I don't know why I asked it" regarding fines + court costs. unable to explain costs, not assessed by us.

BOCA RATON POLICE DEPARTMENT

Agency Case # 16-19198

ADULT CONSTITUTIONAL WARNINGS
(Juvenile warning on reverse side)

"I am required to warn you before you make any statement that you have the following rights":

- ✓1) You have the right to remain silent and not answer any questions.
- ✓2) Any statement you make must be freely and voluntarily given.
- ✓3) You have the right to the presence of a lawyer and representation 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 statement 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 be and will be used against you in a court of law.

DO YOU UNDERSTAND THESE RIGHTS AS I HAVE READ THEM TO YOU AND DO YOU WISH TO SPEAK TO ME?

(X) Video

QUESTIONS AND ANSWERS

Were you operating a motor vehicle at the time of the accident/stop? _____

Where were you going? _____

What street or highway were you on? _____

Direction of travel? _____

Where did you start driving from? _____

What City (County) were you stopped in? _____

What time did you start? _____ AM/PM What time is it now

What is today's date? _____ What day of the week is it? _____

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Agency Case #

16-17198

When did you last eat? _____ What did you eat? _____

What have you been doing the past three hours prior to this stop/accident? _____

How much do you weigh? _____ Have you been drinking? _____ What were you drinking? _____

How much? _____ Where? _____ With whom were you drinking? _____

When did you have your first drink? _____ AM/PM When did you stop drinking? _____ AM/PM

How did you consume your last two drinks? _____

Are you under the influence of alcohol now? Yes ☐ No ☐Can you feel the affects of alcohol? Yes ☐ No ☐Have you consumed alcohol since the accident? Yes ☐ No ☐Can you feel the affects of alcohol? Yes ☐ No ☐Have you consumed alcohol since the accident? Yes ☐ No ☐ How much? _____ What? _____

Where? _____

What line of work are you in? _____

When did you last work? _____

Do you have any physical defects or injuries? Yes ☐ No ☐ If yes, explain: _____Are you sick or injured? Yes ☐ No ☐ If yes explain: _____

Do you limp? _____ Did you get a bump on the head? _____

Were you involved in an accident today? _____

Have you taken any drugs or smoked marijuana today? _____

What? _____ When? _____

Have you seen a doctor or dentist today? _____ Who? _____

Are you taking any prescription medicines? Yes ☐ No ☐ What? _____ When? _____

Do you have: Epilepsy? Yes ☐ No ☐ Inner ear trouble? Yes ☐ No ☐
 Glass Eye? Yes ☐ No ☐ Ear Infection? Yes ☐ No ☐
 False Teeth? Yes ☐ No ☐ Diabetes? Yes ☐ No ☐

Any eye problems not correctable by glasses or contact lenses? _____

Do you take insulin? Yes ☐ No ☐ If yes, when was your last injection? _____

Have you ever had a driver's license in any other state? _____

I am now ending this videotaping. The time now is approximately 12:46 AM/PM

The date is: November (month) 26th (day) 2016 (year).

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