

## ARREST / NOTICE TO APPEAR

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

1

JUVENILE

OBTS Number			ARREST / NOTICE TO APPEAR						140575												
Agency ORI Number		Agency Name		3   2   2017-004676			Agency Report Number (N.T.A.'s only)														
0500200		Boca Raton Police Department																			
Charge Type: Check as many as apply.		<input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other						If Weapon Seized Enter Type <b>None/not Applicable</b>		Multiple Clearance Indicator											
Location of Arrest (Including Name of Business)				Location of Offense (Business Name, Address)																	
1400 S FEDERAL HWY				1400 S FEDERAL HWY, BOCA RATON, FL 33432																	
Date of Arrest		Time of Arrest		Booking Date		Booking Time		Jail Date		Jail Time											
03/29/2017		21:12		03/29/2017		21:26		03/29/2017		22:15											
Name (Last, First, Middle)				Alias (Name, DOB, Soc. Sec. #, Etc.)																	
FERA, WILLIAM ANTHONY				Alias:																	
Race		Sex		Date of Birth		Height		Weight		Eye Color											
W - White    I - American Indian		M - Male		10/13/1948		6'00		185		BROWN											
B - Black    O - Oriental/Asian										GRAY											
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status		Religion															
				M		CATHOLIC															
Local Address (Street, Apt. Number)				(City)		(State)		(Zip)		Phone		Indication of: Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown <input type="checkbox"/>									
1513 SE 13TH ST, DEERFIELD BEACH, FL 33441												Residence Type: 1. City    3. Florida 2. County    4. Out of State									
Permanent Address (Street, Apt. Number)				(City)		(State)		(Zip)		Phone		Address Source									
1513 SE 13TH ST, DEERFIELD BEACH, FL 33441												FL DL									
Business Address (Name, Street)				(City)		(State)		(Zip)		Phone		Occupation									
RETIRED,												Retired									
D/L Number, State			Soc. Sec. Number		INS Number			Place of Birth (City, State)			Citizenship										
F600921483730 / FL								PITTsburg, PA,			US										
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor											
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor											
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ <input type="checkbox"/> Legal Custodian				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 Department and Released    2. TOT JAC 3. Incarcerated													
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									
<input type="checkbox"/> Yes, by: <input type="checkbox"/> No:				Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No								Description of Property		Value of Property							
C O D E				Drug Activity		S. Sell    R. Smuggle		K. Disperses/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other		Drug Type		B. Barbiturate    H. Hallucinogen		P. Paraphernalia/ Equipment		U. Unknown	
				N. N/A		B. Buy    D. Deliver		C. Cocaine    M. Marijuana		E. Heroin    O. Opium/Deriv.		A. Amphetamine		C. Marijuana    S. Synthetic		D. Heroin		Z. Other			
C H A R G E				Charge Description								Statute Violation Number				Violation of ORD #					
				DUI- PROPERTY DAMAGE/ INJURY TO PROPERTY OR PERSON ENHANCED								316.193(3C1)									
C H A R G E				Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence		Warrant / Capias Number		Bond			
				N				/		2017-004676		1		<input type="checkbox"/> Y <input checked="" type="checkbox"/> N							
C H A R G E				Charge Description								Statute Violation Number				Violation of ORD #					
				Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence		Warrant / Capias Number		Bond			
C H A R G E				Charge Description								Statute Violation Number				Violation of ORD #					
				Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence		Warrant / Capias Number		Bond			
I N T A K E				Health / Apparent Physical Condition of Defendant								Any knowledge of the following:									
				GOOD								<input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries Explain:									
N O T I C E				Check which applies:								<input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health									
				BISSOON								PROPERTY - Received By									
T O A P P E A R				Transported By								Date Transported		Time Transported		Released By					
												/ / : :				BISSOON					
N O T I C E				<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.								Location (Court, Room)									
												South County 200 W Atlantic Ave Delray Beach, FL 33444									
T O A P P E A R				Court Date and Time								05/01/2017 08:30:00									
T O A P P E A R				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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.								3/29/17 4:50 PM									
T O A P P E A R				Signature of Defendant (or Juvenile and Parent/Custodian)								Date Signed									
A D M I N				HOLD for Other Agency				Signature of Arresting Officer				664				Name Verification (Printed by Arrestee)					
								Name of Arresting Officer (Print)				664				(PRINT) William FERA					
								BISSOON, STEPHEN R.													
A D M I N				Intake Deputy		I.D. #		Pouch #		Transporting Officer		I.D. #		Agency		SCANNED					
										RAFALKO		779		BRPD							
												Witness hereunto subject signed with an "X".									
												APR 14 2017									

## PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

A	OBTS Number		PROBABLE CAUSE AFFIDAVIT						
D	Agency ORI Number	Agency Name	Agency Report Number						
M	FL 0500200	BOCA RATON POLICE DEPARTMENT	3	2	2017-004676				
N	Charge Type: <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance Check as many as apply. <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other				Special Notes:				
D	Name (Last, First, Middle)				Alias		Race	Sex	Date of Birth
E	FERA, WILLIAM ANTHONY						W	M	10/13/1948
H	Charge Description				Charge Description				
A	316.193(3C1) DUI- PROPERTY DAMAGE/ INJURY TO PROPERTY								
R	Charge Description				Charge Description				
G	Victim's Name (Last, First, Middle)						Race	Sex	Date of Birth
S	STATE OF FLORIDA,								
C	Local Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone		Address Source	
T	100 NW 2ND AVE, BOCA RATON, FL 33432								
M	Business Address (Name, Street)		(City)	(State)	(Zip)	Phone		Occupation	
<p>The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.</p> <p>The Person taken into custody . . .</p> <p><input type="checkbox"/> committed the below acts in my presence. <input checked="" type="checkbox"/> was observed by <u>Ofc GENDEN</u> who told <u>Ofc BISSOON</u> that he/she saw the arrested person commit 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 <u>29</u> day of <u>March</u>, <u>2017</u> at <u>21:12</u> (Specifically include facts constituting cause for arrest.)</p>									
P	<p>On 03/29/2017 I responded to 1400 S Federal Hwy in reference to a possible impaired driver. Ofc Gannon stopped a 2015 silver Mustang bearing Fl tag#DIHD58 after the vehicle was involved in an accident. The Mustang left the location of the accident which was 3999 N Federal Hwy without giving any of the required information when involved in an accident and drove south bound on N Federal Hwy. The other party involved followed the vehicle and was able to give a tag and location to the vehicle. Ofc Gannon stopped the vehicle due to the vehicle leaving the scene of an accident. See Ofc Gannon report for further details.</p>								
R	<p>Ofc Genden was on scene as well handling the traffic crash. Ofc Genden advised that he met with William Fera the driver and lone occupant of the Mustang and made the following observations: Fera had blood shot glossy eyes, slurred speech, odor of an alcoholic beverage emanating from his person and Fera told him that he had three Vodka drinks earlier in the day. Ofc Genden advised that he couldn't locate his Florida driver's license when he asked Fera for it. While waiting for Ofc Genden to finish with his investigation, I asked Fera what happened in the accident and Fera stated that he rear ended another vehicle. Fera advised that he didn't believe there was any damage so he left the scene and started driving home. I then asked Fera if he had a driver's license and he was unable to locate it from the cards and money that he had in his hands. I then asked him if he had a Florida driver's license at which time he pulled out his wallet and located his Florida driver's license. Ofc Genden advised Fera that he had completed his investigation and was now turning it over to me. See Ofc Genden report for further details.</p>								
O	<p>I then met with Fera and read him his Constitutional Rights in the presence of Ofc Gannon and Fera advised that he understood and would answer my questions without an attorney present. I asked how much he had to drink and he stated that he had three Vodka drinks while he was golfing earlier in the day. While speaking with Fera, his</p>								
B	<p>SWORN AND SUBSCRIBED BEFORE ME</p> <p><u>29</u></p> <p><u>CODLING, JEREMY R</u></p> <p>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p><u>03/29/2017</u></p> <p>DATE</p>								
A	<p><u>80</u> <u>664</u></p> <p>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p><u>BISSOON, STEPHEN R (664)</u></p> <p>NAME OF OFFICER (PLEASE PRINT)</p> <p><u>03/29/2017</u></p> <p>DATE</p>								
D	<p>PAGE</p> <p>1 OF 2</p>								

COURT

STATE ATTORNEY

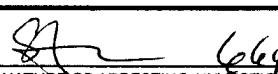
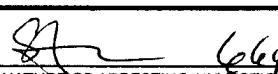
CENTRAL RECORDS

JAIL

CRIME ANALYSIS

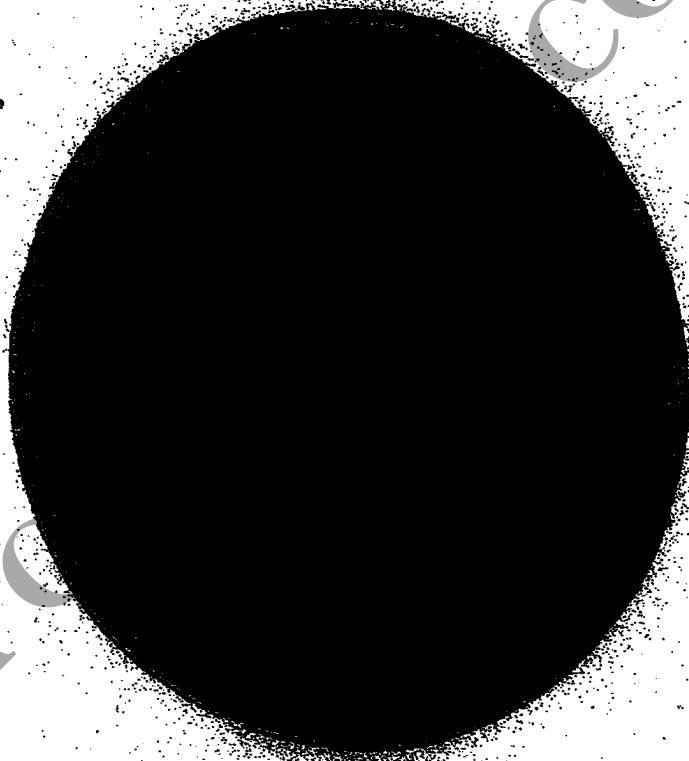
P.I.O.

OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT			1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE	
D Agency ORI Number <b>FL 0500200</b>		Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>			Agency Report Number <b>3 2 2017-004676</b>				
N Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other			Special Notes:				
D Name (Last, First, Middle) <b>FERA, WILLIAM ANTHONY</b>		Alias			Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>10/13/1948</b>		
<p>speech was slurred, his eyes were blood shot and glossy and he had a strong odor of an alcoholic beverage emanating from his person. Based on all the above information and my observations I asked Fera if he would submit to roadside sobriety tasks to dispel my alarm that he was under the influence of alcohol and Fera refused. I then informed Fera of his Taylor Warnings and asked him to conduct the roadside sobriety tasks again and he still refused. I then asked Fera to exit the vehicle so I could place him into custody. As Fera exited the vehicle he stumbled and used the driver side door to keep his balance and not fall. I then had him walk to the rear of the vehicle and he appeared to be unstable while walking. I asked him if he was okay or hurt and he stated no. I then placed him into custody for DUI.</p> <p>I then transported Fera to BRPD where Ofc Rafalko responded as my Breath Test Operator. Ofc Rafalko and I conducted the 20 minute observation and then he was taken into the BAT room. Fera refused to provide a breath sample. I read him Implied Consent Warnings, which he advised that he understood and still refused to provide a breath sample. I also read Fera his Constitutional Rights which he advised that he understood and answered my questions. See DUI influence report.</p> <p>William Fera is being charged under F.S.S. 316.193(3c1) for DUI. A copy of the original in car video tape of the above Road Side Tasks was submitted into BRPD evidence. Fera was taken to Boca Regional Hospital to get medically cleared. Fera's vehicle was towed by Emerald towing.</p>									

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME		 <b>CODLING, JEREMY R</b> <small>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</small> <b>03/29/2017</b> <small>DATE</small>		<small>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</small>  <b>BISSOON, STEPHEN R (664)</b> <small>NAME OF OFFICER (PLEASE PRINT)</small> <b>03/29/2017</b> <small>DATE</small>		PAGE <b>2 OF 2</b>
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10 15 2112

# D. U. I. INFLUENCE REPORT



NOT A COPY

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

BOCA RATON POLICE DEPARTMENT

Agency Case# 17-4676

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

I. INTRODUCTION

(Instrument Operator faces video camera)

A. The day is: Wednesday, March, 29, 2017, 2017 (year)

(day)

(month)

(date)

B. The time is now approximately 2206 AM/PM

C. The following is in reference to case number 17-4676

Officer BISSON, Center, Rafalko  
D. Present at this time is \_\_\_\_\_ of the Boca Raton Police  
Department. (Officer's Name)

E. Officer BISSON, Have you arrested William Fera  
(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. Fera, I am required to  
inform you these proceedings are being video taped.

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

## BOCA RATON POLICE DEPARTMENT

Agency Case #

17-4676**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 Ofc. Bissoon 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: \_\_\_\_\_

**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. Fera has refused to submit to a breath test.

The date is March (Month) 29 (Day) 2017 (Year) and the time AM PM 2209

A refusal form will be completed by the arresting officer.

BOCA RATON POLICE DEPARTMENT  
TESTING FACILITY TASK REPORT

SUBJECT: William Fera  
CASE #: 17-4676 DATE 3/29/17

BREATH TESTS RESULTS

1) TIME 2213 Refused AM/PM 2) TIME \_\_\_\_\_ AM/PM  
3) TIME \_\_\_\_\_ AM/PM 4) TIME \_\_\_\_\_ AM/PM

BREATH OPERATOR: Rafael NO

MAINTENANCE TECHNICIAN: Pare

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Slow / Lethargic

CLOTHING: White T-shirt, Grey Shorts, Black shoes

MEDICAL CONDITION: None

OTHER: \_\_\_\_\_

COMMENTS: Glassy eyes, odor of alcohol emanating from person

## BOCA RATON POLICE DEPARTMENT

Agency Case # 17-467b

## 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)**QUESTIONS AND ANSWERS**Were you operating a motor vehicle at the time of the accident/stop? YesWhere were you going? HomeWhat street or highway were you on? Federal Hwy.Direction of travel? SouthWhere did you start driving from? NorthWhat City (County) were you stopped in? Boca RatonWhat time did you start? 6 pm  AM  PM What time is it now Don't know

10pm

What is today's date? 3/29 What day of the week is it? Wednesday

Agency Case # 17-4676

When did you last eat? 12 pm What did you eat? chilli cheese hotdog

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

How much do you weigh? 185 Have you been drinking? Yes What were you drinking? Vodka

How much? 2 Where? Madison green golf <sup>club</sup> With whom were you drinking? Friends

When did you have your first drink? 5 AM/PM When did you stop drinking? 6 AM/PM

How did you consume your last two drinks? Sipping

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? Retired

When did you last work? 10 years ago

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? No Did you get a bump on the head? No

Were you involved in an accident today? No Yes \_\_\_\_\_

Have you taken any drugs or smoked marijuana today? No

What? \_\_\_\_\_ When? \_\_\_\_\_

Have you seen a doctor or dentist today? No 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? No

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? Pennsylvania

I am now ending this videotaping. The time now is approximately 2222 AM/PM

The date is: March (month) 29 (day) 2017 (year)

## WITNESS LIST

ARRESTING OFFICER: BissoonName: Ofc. Bissoon

Phone # Home

Work 561 338 1234Address: 100 NW 2nd Ave Boca Raton, FL 33433Can testify to: InvestigationName: Ofc. Genden

Phone # Home

Work 11Address: 11Can testify to: Crash investigation / ImpairmentName: Ofc. Gannon

Phone # Home

Work 11Address: Bee PCCan testify to: 11Name: Ofc. Coronado

Phone # Home

Work 11Address: Bee PCCan testify to: 11Name: Ofc. Rafalko

Phone # Home

Work 11Address: 11Can testify to: Breath TestName: 

Phone # Home

Work

Address: Can testify to: Name: 

Phone # Home

Work

Address: Can testify to: