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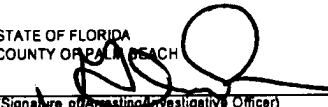
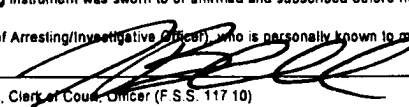
ARREST / NOTICE TO APPEAR
Juvenile Referral Report1. Arrest
2. N.T.A.
3. Request for Warrant
4. Request for Capias


Juvenile

1

N

ADMINISTRATIVE	OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-21120442	
	Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type <input type="checkbox"/> 1. Yes <input checked="" type="checkbox"/> 2. No		Multiple Clearance Indicator 01			
DEFENDANT	Location of Arrest (Including Name of Business) FOREST HILL BLVD / SOUTH SHORE BLVD, WELLINGTON, FL 33414				Location of Offense (Business Name, Address) FOREST HILL BLVD / SOUTH SHORE BLVD, WELLINGTON, FL 33414			
	Date of Arrest 10/24/2021	Time of Arrest 0041	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle FOREST HILL BLVD / SOUTH SHORE BLVD, WELLINGTON, FL 33414	
CO-DEF	Name (Last, First, Middle) ADA VERONICA, MIRANDA ROJAS, ADA VERONICA							
	Alias (Name, DOB, Soc. Sec. #, Etc.)							
JUVENILE	Race W - White I - American Indian B - Black O - Oriental/Asian	Sex W	Date of Birth 7/4/1989	Height 5'05	Weight 150	Eye Color BROWN	Hair Color BLACK	Complexion LIGHT
	Build THIN		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) ANGEL (BACK UPPER LEFT SHOULDER)		Marital Status SINGLE	Religion CATHOLIC	Indication of: Alcohol Influence Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk.	
CHARGE	Local Address (Street, Apt. Number) 12033 BASIN ST N, WELLINGTON, FL 33414		(City) (State) (Zip)		Phone (347) 685-8605		Residence Type: 1. City 2. County 3. Florida 4. Out of State 01	
	Permanent Address (Street, Apt. Number)		(City) (State) (Zip)		Phone		Address Source FL DL	
CHARGE	Business Address (Name, Street)		(City) (State) (Zip)		Phone		Occupation DENTAL ASSISTANT	
	D/L Number, State M653018897440,		Soc. Sec. Number		INS Number		Place of Birth (City, State) JINOATE, NICARAGUA	
CHARGE	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
CHARGE	Parent / Legal Custodian / Other: <input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other		Name (Last) (First) (Middle)		Residence Phone			
	Address (Street, Apt. Number)		(City) (State) (Zip)		Business Phone			
CHARGE	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	
CHARGE	The above address provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)				School Attended		Grade	
	Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property		Value of Property			
CHARGE	Drug Activity S. Sell N. N/A P. Possess		R. Smuggle D. Deliver E. Use		K. Dispense/ Distribute		M. Manufacture/ Z. Other Product/ Cultivate	
	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 DUI		Counts 1		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 316.193(3)(c)(1)	
	Drug Activity N		Drug Type N		Amount / Unit		Offense # 21120442	
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		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		Juvénile N	
ADMIN	OBTS Number			Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06- 21120442	
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DEF	Name (Last, First, Middle)	ADA VERONICA MIRANDA ROJAS, ADA VERONICA				Alias	Race W	Sex F	Date of Birth 7/4/1989
	Charge Description	DUI				316.193(3)(c)(1)			
CHARGES	Charge Description								
	Charge Description								
VICTIM	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 GOVERNMENT			
<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> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to _____ admitting to the below facts. </div> <div> <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation. </div> </div> <p>On the 24TH day of OCTOBER 20 21 at 0041 <input checked="" type="checkbox"/> A. M. <input type="checkbox"/> P. M. (Specifically include facts constituting cause for arrest.)</p>									
<p>On October 23rd, 2021 at approximately 2353 hours, I was dispatched to the area of Forest Hill Blvd. and South Shore Blvd. in regards to a vehicle accident.</p> <p>Upon my arrival, D/S Ramirez #37537 advised me that he would be handling the crash investigation but asked that I talk with one of the drivers, Ada Veronica Miranda Rojas, in regards to what happened. Upon making contact with Rojas I immediately detected a strong alcoholic odor emanating from her person that grew stronger as she spoke with me. Rojas had glassy gloss like appearance to her eyes, her skin was clammy and wet from sweat. Her speech was slurred, lethargic, slow and at times hard to understand. Rojas was swaying as I spoke with her and at times had trouble maintaining her balance. Rojas was wear a black dress with brown sandals that appeared in order. I then confirmed that D/S Ramirez was complete with his crash investigation and then advised Rojas that I suspected that she was impaired and advised her that I was now conducting a DUI investigation. During the start of of my investigation I was advised by Rojas's passenger, Michelle Chapman D.O.B. 11/06/1983, that Rojas was driving her vehicle that was involved in the accident a 2011 silver Hyundai bearing FL tag ICQH82. Rojas also affirmed that she was the driver. For further details of the crash see case number 21120434 for details.</p> <p>When I spoke with Rajas she advised that she was coming from Flannigans on Forest Hill Blvd and S State Road 7. She stated that she had drank approximately four alcoholic beverages at the Flannigans but felt that she was alright to drive. Rajas denied having any medical issues or injuries that would prevent her from doing roadside tasks. She stated that she did not have any balancing issues and that she would be able to preform the tasks in her sandals. I then asked her if she would submit to field sobriety test to which she agreed.</p> <p>I started by performing a HGN test on Rojas. After explaining the task and performing the task on Rojas I observed that both her left and right eyes did not have smooth pursuit during the task and showed onset of nystagmus prior to 45 degrees as well as when at max deviation. I did not observe nystagmus during the vertical gaze process.</p> <p>I then had Rojas perform the Walk & Turn test. After explaining the task Rojas preformed the test where I observed her take only 8 steps in the 9 step process forward and then only 8 steps again on the way back. She also momentarily lost her balance on the 4th step forward and the 6th step back. After completing the task Rojas affirmed that she understood the instructions for the task.</p>									
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH		<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;">  D/S G PALMER (Signature of Arresting/Investigative Officer) </div> <div style="text-align: right;"> D/S G PALMER </div> </div>						
	<p>The foregoing instrument was sworn to or affirmed and subscribed before me this 24th day of October 20 21 by D/S G PALMER</p> <p>(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced _____</p>								
	Notary Public, Clerk of Court, Officer (F.S.S. 117.10)		<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;">  Notary Public, Clerk of Court, Officer (F.S.S. 117.10) </div> <div style="text-align: right;"> JOSHUA BELL MY COMMISSION #GG346008 EXPIRES: JUN 18, 2023 </div> </div>						

		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	Juvenile	N
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	Charge Description DUI		316.193(3)(c)(1)		Charge Description					
CHARGES	Charge Description				Charge Description					
VICTIM	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 GOVERNMENT			
<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> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to _____ admitting to the below facts. </div> <div> <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation. </div> </div> <p>On the 24TH day of OCTOBER 20 21 at 0041 <input checked="" type="checkbox"/> A. M. <input type="checkbox"/> P. M. (Specifically include facts constituting cause for arrest.)</p>										
<p>I then Rojas perform the One Leg Stand test. After explaining the instructions for the task to Rojas I asked her to begin. During the first try she only counted to 8 seconds and she opened her eyes. After explaining the instructions to her a second time she performed the task where I observed her lose balance at the 8, 16 and the 24 second marks.</p> <p>I then had Rojas perform the Finger to Nose test. After explaining the instructions for the task to Rojas I conducted the test where I observed her fail to bring her finger back down on all 6 attempts as well as miss the tip of her nose on 4 of the 6 attempts. Also she failed to use the tip of her finger on 4 of the 6 attempts.</p> <p>I then had Rojas perform the Ramberg Alphabet test. After explaining the instructions for the task to Rojas she advised that she would be more comfortable performing the task in Spanish. I had D/S Ramirez who is a Spanish speaker stand by for the task in order to observe Rojas's proficiency with the alphabet while performing the task. During the task Rojas messed up with the U and the V of the alphabet and then switched to English from the W to the Z.</p> <p>Due to the multiple clues of impairments from the roadside tasks as well as my observations prior to the the tasks I found probable cause to charge Ada Veronica Miranda Rojas pursuant to F.S.S. 316.193(3)(c) (1) for driving under influence. Rojas's cuffs were double locked and checked for proper spacing. I transported Rojas to the BAT without incident. I began my observation period at 0120 hours at which time I did not observe Rojas take anything by mouth or vomit. I then brought Rojas in to the test area where she submitted a breath sample by choice she test results for further information. After submission of Rojas breath she was read her Miranda Warning which she affirmed she understood. She then answered several questions related to the investigation from a questionnaire form.</p>										
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH		D/S G PALMER							
	(Signature of Arresting/Investigative Officer)									
	The foregoing instrument was sworn to or affirmed and subscribed before me this 24th day of October 20 21 by D/S G PALMER									
	(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. 117.4)		 JOSHUA BELL MY COMMISSION #GG346008 EXPIRES: JUN 18, 2023		PAGE 2 OF 2				

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 24TH DAY OF OCTOBER 20 21, AT 0041 PM

SUBJECT: ADA VERONICA, MIRANDA ROJAS, CASE NUMBER: 21120442

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S G PALMER

PERSONAL CONTACT

DRIVING PATTERN: Actual physical control (physical evidence or statements putting def. behind wheel of vehicle)

N/A

OBSERVATION OF DRIVER:

Rojas had glassy gloss like appearance to her eyes, her skin was clammy and wet from sweat. Rojas was swaying as I spoke with her and at times had trouble maintaining her balance.

DRIVER'S STATEMENTS:

When I spoke with Rojas she advised that she was coming from Flannigans on Forest Hill Blvd and S State Road 7. She stated that she had drank approximately four alcoholic beverages at the Flannigans but felt that she was alright to drive. Rojas denied having any medical issues or injuries that would prevent her from doing roadside tasks. She stated that she did not have any balancing issues and that she would be able to preform the tasks in her sandals. I then asked her if she would submit to field sobriety test to which she agreed.

ODORS:

Upon making contact with Rojas I immediately detected a strong alcoholic odor emanating from her person that grew stronger as she spoke with me.

GENERAL OBSERVATIONS

SPEECH: slurred, lethargic, slow and at times hard to understand

ATTITUDE: COOPERATIVE

CLOTHING: Rojas wear a black dress with brown sandals that appeared in order.

MEDICAL/OTHER:

STATE OF FLORIDA
COUNTY OF PALM BEACH

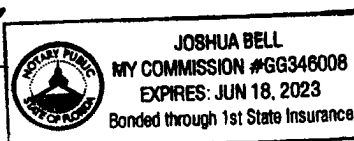
D/S G PALMER

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 24th day of October 20 21 by D/S G PALMER

(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)



SUBJECT: ADA VERONICA, MIRANDA ROJA CASE NUMBER 21120442

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT |
| <input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input checked="" type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input checked="" type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

WALK & TURN:

I then had Rojas perform the Walk & Turn test. After explaining the task Rojas preformed the test where I observed her take only 8 steps in the 9 step process forward and then only 8 steps again on the way back. She also momentarily lost her balance on the 4th step forward and the 6th step back. After completing the task Rojas affirmed that she understood the instructions for the task.

ONE LEG STAND:

I then Rojas perform the One Leg Stand test. After explaining the instructions for the task to Rojas I asked her to begin. During the first try she only counted to 8 seconds and she opened her eyes. After explaining the instructions to her a second time she performed the task where I observed her lose balance at the 8, 16 and the 24 second marks.

FINGER TO NOSE:

I then had Rojas perform the Finger to Nose test. After explaining the instructions for the task to Rojas I conducted the test where I observed her fail to bring her finger back down on all 6 attempts as well as miss the tip of her nose on 4 of the 6 attempts. Also she failed to use the tip of her finger on 4 of the 6 attempts.

ROMBERG ALPHABET:

I then had Rojas perform the Ramberg Alphabet test. After explaining the instructions for the task to Rojas she advised that she would be more comfortable performing the task in Spanish. I had D/S Ramirez who is a Spanish speaker stand by for the task in order to observe Rojas's proficiency with the alphabet while performing the task. During the task Rojas messed up with the U and the V of the alphabet and then switched to English from the W to the Z.

BREATH TEST RESULTS: 1) .147 2) .150 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

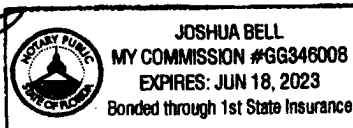
D/S G PALMER

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 24th day of October 2021 by D/S G PALMER

(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)



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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006238 Software: 8100.27
Date of Test: 10/24/2021

Date of Last Agency Inspection: 10/08/2021
Observation Period Began: 01:20
Subject's Name: ADA V MIRANDA ROJAS

DOB: 07/04/1989 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	01:47
	Air Blank	0.000	01:48
	Control Test	0.080	01:48
	Air Blank	0.000	01:48
	Subject Sample #1	0.147	01:50
	Air Blank	0.000	01:50
	Air Blank	0.000	01:52
	Subject Sample #2	0.150	01:53
	Air Blank	0.000	01:53
	Control Test	0.079	01:54
	Air Blank	0.000	01:54
	Diagnostics Check	OK	01:54

Cylinder Lot: 19021080A2
Exp: 09/05/2023

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 JOSHUA J BELL, 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: _____

Signature

Date: 10/24/21

Sworn to (or affirmed) before me this 24 day of October, 2021

Signature of Notary Public-State of Florida

D/S G. Palmer #25514
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.



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

PBSO CASE # 21120442 PBSO ZONE 8-21

AGENCY CASE # _____ CRASH CASE # 21120434

TIME OF STOP/CRASH 2353 DATE 10/23/2021 DAY Saturday

SUBJECT'S NAME ADA VERONICA, MIRANDA ROJAS, RACE W SEX F

HGT 5'05 WGT 120 DOB 7/4/1989

LOCATION FOREST HILL BLVD / SOUTH SHORE BLVD, WELLINGTON, FL 33414

ARRESTING OFFICER'S NAME & ID D/S G PALMER (25514) AGENCY Palm Beach County Sheriff's Office

DIVISION: 4250

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0120

ARREST TIME 0041

BREATH RESULTS:

1) .147

2) .150

3) N/A

4) N/A

TESTING OFFICER'S ID 8656 PBSO VIDEOTAPE # N/A

WITNESS LIST

CASE NUMBER: 21120442

ARRESTING OFFICER: D/S G PALMER

ADDRESS: 3228 GUN CLUB RD, WEST PALM BEACH, FL 33406

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

CAN TESTIFY TO: TO THE PROBABLE CAUSE FOR THE ARREST

NAME: D/S J RAMIREZ # 37537

ADDRESS: 3228 GUN CLUB RD, WEST PALM BEACH, FL 33406

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

CAN TESTIFY TO: SPANISH RELATED PORTION OF ONE OF THE TASKS

NAME: MICHELLE D. CHAPMAN

ADDRESS 9220 FOUNTAIN RD, LAKE WORTH, FL 33467

PHONE NUMBERS (HOME) 561-877-9551 (WORK) _____

CAN TESTIFY TO: ROJAS DRIVING

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: MIRANDA ROJAS, ADA VERONICA

CASE NUMBER: 21-120442

DATE: Oct 24, 2021

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0145

ENDING TIME: 0205

BREATH TESTS RESULTS: 1) .147 TIME 0150 A.M. ☒ P.M. ☐ 2) .150 TIME 0153 A.M. ☒ P.M. ☐
3) N/A TIME XX A.M. ☐ P.M. ☐ 4) N/A TIME XX A.M. ☐ P.M. ☐

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: EMOTIONAL, COOPERATIVE

CLOTHING: BLACK DRESS, BROWN SANDALS

MEDICAL CONDITIONS: CHOLESTOROL

MEDICATIONS: CHOLESTOROL

OTHER:

EYES: BLOODSHOT, GLASSY

SUBJECT STATED SHE DRANK 3 GIN AND TONICS Q AND A

COMMENTS:

ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0120 HOURS

SUBJECT STATED SHE WOULD TAKE BREATH TEST

TECH READ BREATH TEST RESULTS

SUBJECT STATED SHE UNDERSTOOD BREATH TEST RESULTS

A/O READ RIGHTS

SUBJECT STATED SHE UNDERSTOOD HER RIGHTS

A/O CONDUCTED Q AND A

SUBJECT ANSWERED Q AND A

SUBJECT: Miranda Rojas, Ada V. 0000 CASE NUMBER: 21-170442

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.

-OR-

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances.

-OR-

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence of chemical or controlled substances.

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

I am _____ of the _____.

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X) _____

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) _____

Rafael A. Gomez

QUESTIONS AND ANSWERS

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? YES

WHERE WERE YOU GOING? TO WORK

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

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

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

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

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? WHAT'S WRONG?

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY?

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE:

- EPILEPSY?** _____
- GLASS EYE?** _____
- FALSE TEETH?** _____
- EAR INFECTION?** _____
- INNER EAR TROUBLE?** _____
- DIABETES?** _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: W/S G. K. Jones # 15514



**PALM BEACH COUNTY
SHERIFF'S OFFICE**
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2021026704

Date: 10/25/21

Specialist Name/ID: A. Pinkney/7796