

210711956

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile		N																							
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number (N.T.A.'s only) 06-21-086905																													
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		Weapon Seized / Type <input type="checkbox"/> 1. Yes <input checked="" type="checkbox"/> 2. No		Multiple Clearance Indicator <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 01																															
Location of Arrest (Including Name of Business) BOYNTON BEACH BLVD / S JOG ROAD, UNINCORPORATED/FL/33437						Location of Offense (Business Name, Address) BOYNTON BEACH BLVD / S JOG ROAD, UNINCORPORATED/FL/33437																													
Date of Arrest 07/18/2021		Time of Arrest 0057		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle Priority Towing, 7153 Southern Blvd. WPB 33413, (561) 533-5573																							
Name (Last, First, Middle) Pyborn, Amber, Christine												Alias (Name, DOB, Soc. Sec. #, Etc.)																							
Race W - White I - American Indian B - Black O - Oriental/Asian W		Sex F		Date of Birth 3/24/1981		Height 5'00		Weight 160		Eye Color BLUE		Hair Color BLONDE		Complexion MED		Build MED																			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) RIGHT ANKLE / LEFT WRIST /												Marital Status MARRIED		Religion CHRISTIAN		Indication of Alcohol Influence <input type="checkbox"/> 1. City <input type="checkbox"/> 2. County <input type="checkbox"/> 3. Florida <input type="checkbox"/> 4. Out of State <input type="checkbox"/> 5. Juvenile																			
Local Address (Street, Apt. Number) 21648 Cypress Rd Apt 13a, Boca Raton, FL 33433												Phone (561) 376 1061		Residence Type: <input type="checkbox"/> 1. City <input type="checkbox"/> 2. County <input type="checkbox"/> 3. Florida <input type="checkbox"/> 4. Out of State <input type="checkbox"/> 5. Juvenile																					
Permanent Address (Street, Apt. Number) FL DL												Phone ()		Address Source FL DL		Occupation HOMEMAKER																			
Business Address (Name, Street) ()												Phone ()		Citizenship U.S.		Place of Birth (City, State) FT LAUDERDALE, FL																			
D/L Number, State P165003816040, FL												Soc. Sec. Number ()		INS Number ()		Citizenship U.S.		Place of Birth (City, State) FT LAUDERDALE, FL																	
Co-Defendant Name (Last, First, Middle) ()												Race ()		Sex ()		Date of Birth ()		Arrested <input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		Felony <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile															
Co-Defendant Name (Last, First, Middle) ()												Race ()		Sex ()		Date of Birth ()		Arrested <input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		Felony <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile															
Parent Name (Last, First, Middle) ()												Legal Custodian <input type="checkbox"/> Other ()		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		Date ()		Time ()															
Released To: (Name) ()												Relationship ()		School Attended ()		Grade ()		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) ()																	
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No												Description of Property ()		Value of Property ()		Drug Activity N. N/A S. Sell B. Buy P. Possess T. Traffic		R. Smuggle D. Deliver E. Use		K. Dispense/ Distribute		M. Manufacture/ Product/ Cultivate		Z. Other A. Amphetamine		Drug Type N. N/A A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetics		U. Unknown Z. Other	
Charge Description DRIVING UNDER THE INFLUENCE												Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 316.193(1)(a)		Violation of ORD # ()		Drug Activity N		Drug Type N		Amount / Unit ()		Offense # 21-086905		Warrant / Capias Number ()		Bond ()					
Charge Description ()												Counts ()		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number ()		Violation of ORD # ()		Drug Activity ()		Drug Type ()		Amount / Unit ()		Offense # ()		Warrant / Capias Number ()		Bond ()					
Charge Description ()												Counts ()		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number ()		Violation of ORD # ()		Drug Activity ()		Drug Type ()		Amount / Unit ()		Offense # ()		Warrant / Capias Number ()		Bond ()					
Charge Description ()												Counts ()		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number ()		Violation of ORD # ()		Drug Activity ()		Drug Type ()		Amount / Unit ()		Offense # ()		Warrant / Capias Number ()		Bond ()					
Location (Court, Room Number, Address) Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600												Court Date and Time Month AUGUST Day 19 Year 2021 Time 0830 AM X 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. 07/18/2021		Signature of Defendant (or Juvenile and Parent / Custodian) ()		Date Signed ()		HOLD for other Agency ()		Signature of Arresting Officer ()		Name Verification (Printed by Arrestee) ()		Name of Arresting Officer (Print) INV. W. AMADON		I.D. # 9440		Agency PBSO		Witness here if subject signed with in 30 ()		1 of 1	

PBSO 0148 REV. 09/7

JH 0524699

PB 0524699

19 AUG 19
P.B. COUNTY, FL
GUN CLUB

		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 NTA		3 Request for Warrant 4 Request for Copies		Juv 1	
ADMIN	OBTS Number			Agency ORI Number		Agency Name		Agency Report Number	
	FLO. 5 0 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE				21		086905	
CHARGES	Charge Type	<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		Special Notes					
	Check as many as apply								
DEF	Name (Last, First, Middle)	Alias		Race		Sex		Date of Birth	
	Charge Description	Charge Description		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			
PROBABLE CAUSE STATEMENT	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 The Person taken into custody <input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to _____ admitting to the below facts. <input type="checkbox"/> was observed by _____ who told _____ <input checked="" type="checkbox"/> that he/she saw the arrested person commit the below acts. was found to have committed the below acts, resulting from my (described) investigation. On the <u>17</u> day of <u>JULY</u> 20 <u>21</u> at <u>2355</u> <input type="checkbox"/> A.M <input checked="" type="checkbox"/> P.M (Specifically include facts constituting cause for arrest.)								
	On 7-17-21 at approximately 2355 Hours I was at the intersection of Boynton Beach Blvd and Jog Road attempting to travel Northbound on Jog. As my light turned Green and I attempted to travel Northbound. I observed a Black Nissan Sentra bearing Florida Tag KDA-K24 approaching the intersection Westbound. As I proceeded to go North the Sentra also went Northbound when I observed sparks coming from drivers front rim. Since I could clearly see the vehicle was missing a drivers side front tire, I slowed down so it would not slide into me. I then activated my emergency lights and siren in an attempt to stop the vehicle and as it pulled into the Fountains Plaza the Sentra almost struck the center median that divides traffic in the entrance. I then made contact with the w/f driver who was drinking from a bottle of water as I knocked on the window. As I opened the drivers side door and made contact with the driver she was on the phone face time with her Mom. She then handed me her license in the name of Amber Christine Pyborn. As she spoke to her mom I could clearly hear her talking to her mom in a slurred speech voice. I then asked her for her vehicles registration and insurance and she could not find it. Based on my observations of the driver I requested a DUI unit to my location.								
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH (Signature of Arresting Investigator) <u>D/S R. Cruz</u>								
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>18th</u> day of <u>JULY</u> 20 <u>21</u> by <u>D/S R. Cruz ID 6953</u> First name of Arresting Investigator <u>LEA</u> Type of Identification produced <u>KNOWN</u> <u>D/W W. Brudon #9440</u> Notary Public, Clerk of Court, Officer (F.S.S. 117 / 10)								
		PAGE 1 OF 1							

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 17 DAY OF JULY 20 21 AT 2359 AM PM

SUBJECT: Pyborn, Amber, Christine CASE NUMBER: 21-086905

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV. W. AMADON

PERSONAL CONTACT

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

On Sunday July 18th, 2021 at approximately 0003 hours I was dispatched to the intersection of Boynton Beach Boulevard and Jog Road, located within Unincorporated Palm Beach County regarding a traffic stop with a possible impaired driver. Upon arrival I met with D/S R. Cruz #6953 who provided me with a supplemental probable cause affidavit stating:

"On 07/17/2021 at approximately 2355 hours I was at the intersection of Boynton Beach Blvd and Jog Road attempting to travel Northbound on Jog. As my light turned green and I attempted to travel northbound, I observed a Black Nissan Sentra bearing Florida Tag "KDAK24" approaching the intersection westbound. As I proceeded to go north the Sentra also went northbound when I observed sparks coming from the drivers front rim. Since I could clearly see the vehicle was misalign a drivers side front tire, I slowed down so it would not slide into me. I then activated my emergency lights and siren in an attempt to stop the vehicle and as it pulled into the Fountains Plaza the Sentra almost struck the center median that divides traffic in the entrance. I then made contact with the w/t driver who was drinking from a bottle of water as I knocked on the window. As I opened the drivers side door and made contact with the driver she was on the phone face time with her mom. She then handed me her license in the name of Amber Christine Pyborn. As she spoke to her mom I could clearly hear her talking to her mom in a slurred speech voice. I then asked for her vehicles registration and insurance and she could not find it."

OBSERVATION OF DRIVER:

I observed the driver to be occupying the front driver seat with her keys in her hand. I asked the defendant if she knew why she was stopped. She began to cry. I asked why her front tire was completely missing and she was driving on a rim. She informed me her low tire pressure light had recently illuminated. I asked the defendant to exit her vehicle. She eventually got out. I observed the defendant to be unsteady on her feet. The defendant had a noticeable orbital sway as she stood. The defendant's clothing was unkempt and improperly worn. A button on the front of her dress near her midsection area was not fastened. Her hair was in her face. The defendant weaved as she walked from her vehicle to the front of mine. The defendant's eyes were red, glassy, bloodshot and watery. The defendant's speech was slow, slurred and mush mouthed. She would ramble about her child and randomly profess her love for persons not on scene.

DRIVER'S STATEMENTS:

The defendant admitted to consuming two Guinness Beers.

ODORS:

I immediately detected the odor of an unknown alcoholic beverage coming from the defendants breath, which intensified when the defendant spoke.

GENERAL OBSERVATIONS

SPEECH: slow / slurred / mush mouthed

ATTITUDE: polite / cooperative / respectful / upset / crying

CLOTHING: blue dress

MEDICAL/OTHER: none stated

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. W. AMADON *Inv W Amadon #9440*
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 18 day of JULY 20 21 by INV. W. AMADON

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced: Known Law Enforcement Officer

Joshua Bell (#8656)
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



SUBJECT: Pyborn, Amber, Christine

CASE NUMBER 21-086905

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

☒ LT EYE-LACK OF SMOOTH PURSUIT

☒ RT EYE-LACK OF SMOOTH PURSUIT

☒ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

☒ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

☒ LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

☒ RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

The defendant had a noticeable orbital sway during this task. The defendant's right eye rests right of center relative to her left eye at center.

WALK & TURN:

The defendant was placed into the instructional stance for the Walk and Turn Task. The defendant was instructed to not move from the instructional position until told to do so. The defendant was given instructions and a demonstration. The defendant stepped from the instructional stance prior to being told to do so. The defendant stepped off the line. The defendant missed heel to toe. The defendant performed an improper turn. The defendant did not count aloud. The defendant did not take the correct number of steps. The defendant used her arms for balance. The defendant stopped walking after the turn and paused numerous times. The defendant had a noticeable orbital sway during this task. The defendant would place her toes down on the ground and then lower her heel to the ground rather than her heel striking the ground first.

ONE LEG STAND:

The defendant was placed into the instructional stance for the One Leg Stand. The defendant was instructed to not move from the instructional position until told to do so. The defendant was given instructions and a demonstration. The defendant stepped from the instructional stance prior to being told to do so. The defendant put her foot down. The defendant did not keep both legs straight. The defendant did not point her toe as instructed. The defendant used her arms for balance. The defendant did not count aloud. The defendant had a noticeable orbital sway during this task.

FINGER TO NOSE:

The defendant was placed into the instructional stance for the Finger to Nose. The defendant was instructed to not move from the instructional position until told to do so. The defendant was given instructions and a demonstration. The defendant had to be reminded to keep her feet together. The defendant had to be reminded to keep her eyes closed. The defendant searched for their own nose with their finger. The defendant did not touch tip to tip as instructed. The defendant used the wrong hand. The defendant had a noticeable orbital sway during this task.

ROMBERG ALPHABET:

The defendant was placed into the instructional stance for the Romberg Alphabet. The defendant was instructed to not move from the instructional position until told to do so. The defendant was given instructions and a demonstration. The defendant had to be reminded to keep their eyes closed. The defendant correctly recited the alphabet. The defendant had a noticeable orbital sway during this task.

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

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. W. AMADON

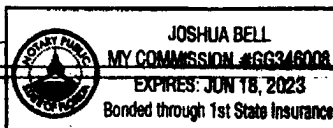
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 18 day of JULY 2021 by INV. W. AMADON

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

Joshua Bell (#8656)

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





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

PBSO CASE # 21-086905 PBSO ZONE 6-41
AGENCY CASE # _____ CRASH CASE # 21-
TIME OF STOP/CRASH 2359 DATE 07/17/2021 DAY Saturday
SUBJECT'S NAME Pyborn, Amber, Christine RACE W SEX F
HGT 5'00 WGT 160 DOB 3/24/1981
LOCATION BOYNTON BEAHC BLVD/ S JOG ROAD , UNINCORPORATED/FL/33437
ARRESTING OFFICER'S NAME & ID INV. W. AMADON (9440) AGENCY Palm Beach County Sheriff's Office
DIVISION: VCD / DUI
NOTIFIED BY COMMO YES
ARRIVAL AT FACILITY 0147
ARREST TIME 0057

BREATH RESULTS:

1)	.191vnm
2)	.146vnm
3)	N/A
4)	N/A

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

SUBJECT: Tyson, Andrew Robert CASE NUMBER: 21-086905

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) _____

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

SUBJECT: W. W. AndersonCASE NUMBER: 21-066905

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? NOWHERE WERE YOU GOING? TO WORKWHAT STREET OR HIGHWAY WERE YOU ON? LA 101DIRECTION OF TRAVEL? S WHERE DID YOU START? LA 101WHAT TIME DID YOU START? 7:30 AM WHAT TIME IS IT NOW? NO ONEWHAT IS TODAY'S DATE? 7/8/01 WHAT DAY OF THE WEEK IS IT? THURWHAT COUNTY AND CITY ARE YOU IN NOW? LOS ANGELESWHEN DID YOU LAST EAT? 8 PM WHAT DID YOU EAT? STEAKWHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? LA 101HOW MUCH DO YOU WEIGH? 145 HAVE YOU BEEN DRINKING? YES WHAT? WINEHOW MUCH? 3 GLASSES WHERE? AT HOME WITH WHOM? TO MYSELFWHEN DID YOU HAVE YOUR FIRST DRINK? 7 PM AND YOUR LAST DRINK? 9 PMHOW DID YOU CONSUME YOUR LAST TWO DRINKS? SCAN YOU FEEL THE EFFECTS OF THE ALCOHOL? NO ARE YOU UNDER THE INFLUENCE? NOHAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? NO HOW MUCH? NOWHAT? NO WHERE? NO WHEN? NOWHAT LINE OF WORK ARE YOU IN? CONDUCTOR WHEN DID YOU LAST WORK? NODO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? NO WHAT? NOARE YOU SICK OR INJURED? NO WHAT'S WRONG? NODO YOU LIMP? NO DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? NOWERE YOU IN AN ACCIDENT TODAY? NOHAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? NO WHEN? NOHAVE YOU SEEN A DOCTOR OR DENTIST TODAY? NO WHO? NO WHY? NOARE YOU TAKING ANY PRESCRIPTION MEDICINES? NO WHAT? NO WHEN? NO

DO YOU HAVE:

EPILEPSY?	<u>NO</u>
GLASS EYE?	<u>NO</u>
FALSE TEETH?	<u>NO</u>
EAR INFECTION?	<u>NO</u>
INNER EAR TROUBLE?	<u>NO</u>
DIABETES?	<u>NO</u>

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? NODO YOU TAKE INSULIN? NO IF SO, WHEN WAS YOUR LAST INJECTION? NOHAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? NO WHERE? NOINTERVIEWER: INV. W. Anderson #9440

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: 07/18/2021

Date of Last Agency Inspection: 07/16/2021

Observation Period Began: 01:47

Subject's Name: AMBER CHRISTINE PYBORN

DOB: 03/24/1981 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	02:16
Air Blank	0.000	02:16
Control Test	0.080	02:16
Air Blank	0.000	02:17
Subject Sample #1	VNM*	02:20
Air Blank	0.000	02:21
Air Blank	0.000	02:22
Subject Sample #2	VNM**	02:26
Air Blank	0.000	02:26
Control Test	0.078	02:27
Air Blank	0.000	02:27
Diagnostics Check	OK	02:27

*Volume Not Met (0.191 - Breath Sample Not Reliable to Determine Breath Alcohol Level)

**Volume Not Met (0.146 - Breath Sample Not Reliable to Determine Breath Alcohol Level)

Cylinder Lot: 22620080A2
Exp: 10/05/2022

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, _____, 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: 07/18/21

Sworn to (or affirmed) before me this 18 day of July, 2021

Eric W. Amador #9440
Signature of Notary Public-State of Florida

INV. W. Amador #9440
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.

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH AND/OR URINE TEST

I, Investigator LE W. AMADON, a duly certified Law Enforcement Officer or Correctional Officer,
(Person reading Implied Consent Warning)
am a member of Palm Beach County Sheriffs Office, and I do swear
(Name of enforcement agency)

or affirm that on or about the EIGHTEENTH day of July, 2021, at 00:57

DRIVER AMBER CHRISTINE PYBORN
(Type or Print) FIRST MIDDLE OR MAIDEN LAST

DL # P165003816040, state of FL, was placed under lawful arrest for

the offense of DUI by Investigator LE W. AMADON and
(Name of Arresting Officer)

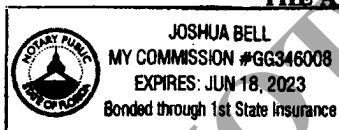
issued Citation # AEA7LSE

That on or about the EIGHTEENTH day of July, 2021, at 02:20
in Palm Beach County,

I requested that the driver submit to a ☒ breath and/or ☐ urine test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) would result in the suspension of his or her driving privilege for a period of (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended for refusing to submit to a breath, urine, or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.

W. Amadon #9440
Signature of Law Enforcement Officer or
Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)



(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before
me this 18 day of July, 2021
by Inv. W. Amadon

who is personally known to me or who has produced
known as identification

Notary Public [Signature]

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title

Date

Note: Mail or hand deliver to the designated
Bureau of Administrative Reviews office,
Department of Highway Safety and Motor
Vehicles, with the driver's license, the
appropriate copy of the UTC and the
probable cause affidavit.

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: PYBORN, AMBER CHRISTINE

CASE NUMBER: 21-086905

DATE: Jul 18, 2021

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0213

ENDING TIME: 0233

BREATH TESTS RESULTS: 1) .191vng TIME 0220 A.M. ☒ P.M. ☐ 2) .146vng TIME 0226 A.M. ☐ P.M. ☐
R TIME 0226 A.M. ☒ P.M. ☐ 4) TIME A.M. ☐ P.M. ☐

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: EMOTIONAL, CRYING, TALKATIVE

CLOTHING: BLUE FLORAL DRESS, NO SHOES

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: BLOODSHOT

ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

COMMENTS:

ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0147 HOURS

SUBJECT STATED SHE WOULD TAKE BREATH TEST

SUBJECT DID NOT FOLLOW BREATH TEST INSTRUCTIONS, SUBJECT FAILED TO MAINTAIN STEADY TONE, SUBJECT STOPPED BLOWING BEFORE BEING TOLD

A/O READ I.C

SUBJECT STATED SHE UNDERSTOOD I.C / SUBJECT STATED SHE WOULD CONTINUE BREATH TEST

SUBJECT DID NOT FOLLOW BREATH TEST INSTRUCTIONS, SUBJECT FAILED TO MAINTAIN STEADY TONE, SUBJECT STOPPED BLOWING BEFORE BEING TOLD

A/O CALLED A REFUSAL AT 0226 HOURS

A/O READ RIGHTS

SUBJECT STATED SHE UNDERSTOOD HER RIGHTS

A/O CONDUCTED Q AND A

SUBJECT ANSWERED Q AND A

REFUSED

WITNESS LIST

CASE NUMBER: 21-086905

ARRESTING OFFICER: INV. W. AMADON

ADDRESS: 3228 Gun Club Road, West Palm Beach , FL 33406

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

CAN TESTIFY TO: DUI Investigation

NAME: D/S R. CRUZ #6953

ADDRESS: 3228 Gun Club Road, West Palm Beach , FL 33406

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

CAN TESTIFY TO: Stopping Deputy

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) 0

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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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____



**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"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2021017771

Date: 7/18/2021

Specialist Name/ID: A. Pinkney/7796