J 0514496 20CT1980MB P362

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number | 1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias | 1 | Juvenile | N

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 20033324

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

Weapon Seized / Type: 2 | 1. Yes 2. No N/A

Multiple Clearance Indicator: 01

Location of Arrest (Including Name of Business): N MILITARY TRAIL / BELVEDERE ROAD WEST PALM BEACH FL, 33406

Location of Offense (Business Name, Address): N MILITARY TRAIL / BELVEDERE ROAD WEST PALM BEACH FL, 33406

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
02/02/2020	1320					PARKED IN PARKING LOT

DEFENDANT

Name (Last, First, Middle): COHEN ANDREW ROY

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

Race (W - White I - American Indian B - Black 0- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	11/22/1956	5'10	215	BROWN	GRAY	MED	LARGE

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

Marital Status: MARRIED | Religion: NONE | Indication of: Alcohol Influence ☐ Y ☐ N ☒ Unk. / Drug Influence ☐ ☐ ☒

Local Address (Street, Apt. Number) (City) (State) (Zip): 7 WOODBURY ST BEVERLY MA, 01915 | Phone: (978) 7128007 | Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

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

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
S73805211, MA	[redacted]		BROOKLYN, NY	US

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth		
				☐ 1. Arrested ☐ 2. At Large	☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth		
				☐ 1. Arrested ☐ 2. At Large	☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other:

Residence Phone: ( )

Address (Street, Apt. Number) (City) (State) (Zip) | Business Phone: ( )

Notified by: (Name)	Date	Time	Juvenile Disposition 1. Handled/ processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated

Released To: (Name)	Relationship	Date	Time

The above address provided by ☐ defendant and / or ☐ defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. ☐ Yes, by: (Name) ☐ No: (Reason)

School Attended | Grade

Property Crime? ☐ Yes ☐ No | Description of Property | Value of Property

CODE

Drug Activity: N. N/A P. Possess | S. Sell B. Buy T. Traffic | R. Smuggle D. Deliver E. Use | K. Dispense/ Distribute | M. Manufacture/ Produce/ Cultivate | Z. Other

Drug Type: N. N/A A. Amphetamine | B. Barbiturate C. Cocaine E. Heroin | H. Hallucinogen M. Marijuana O. Opium/Deriv. | P. Paraphernalia/ Equipment S. Synthetics | U. Unknown Z. Other

CHARGE

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

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant I Capias Number	Bond
N	N	N/A	20033324		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

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

NOTICE TO APPEAR

Location (Court, Room Number, Address)

PALM BEACH COUNTY CRIMINAL JUSTICE COMPLEX, 3228 GUN CLUB RD, WEST PALM BEACH, FL 33406 - PH: (561) 355-2996

Court Date and Time: Month MARCH Day 12TH Year 2020 Time 8:30 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

Signature of Defendant (or Juvenile and Parent /Custodian) | Date Signed: 02/02/2020

ADMIN

HOLD for other Agency Name: | Signature of Arresting Officer: X | Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Name of Arresting Officer (Print) D/S A. TEJEDA I.D. # 31814 | PAGE 1 OF 1

Intake Officer I.D. # | Pouch # | Transporting Officer D/S A. TEJEDA ID # 31814 Agency PBSO | Witness here if subject signed with an "X"

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

DISTRIBUTION

PBSO #146 REV. 8/97

FEB 03 2020

FILED FEB 03 2020 CLERK & COMPTROLLER PALM BEACH COUNTY FL (CRIMINAL DIV)

SUBJECT: COHEN ANDREW CASE NUMBER 20033324

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

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

Other Observations:

THE DEFENDANT WAS PLACED INTO THE INSTRUCTIONAL STANCE. THE DEFENDANT WAS UNABLE TO MAINTAIN THE INSTRUCTIONAL STANCE. THE DEFENDANT VISUALLY AND VERBALLY IDENTIFIED THE RED STIMULUS THAT WAS IN MY HAND. THE DEFENDANT WAS EXPLAINED THE EXERCISE AND STATED THAT HE HAD NO QUESTIONS FOR ME AT THAT TIME. THE DEFENDANT WAS REMINDED TO FOLLOW THE STIMULUS WITH ONLY HIS EYES SEVERAL TIMES. THE DEFENDANT WAS ALSO REMINDED WHAT POSITION HE NEEDED TO BE IN THROUGHOUT THE EXERCISE SEVERAL TIMES.

WALK & TURN:

THE DEFENDANT WAS PLACED INTO THE INSTRUCTIONAL STANCE FOR THE WALK AND TURN AND GIVEN INSTRUCTIONS. THE DEFENDANT STATED THAT HE UNDERSTOOD THE INSTRUCTIONS. THE DEFENDANT DID NOT HAVE ANY QUESTIONS FOR ME AT THAT TIME. THE DEFENDANT WAS UNABLE TO MAINTAIN THE INSTRUCTIONAL STANCE. THE DEFENDANT IMPROPERLY STARTED. THE DEFENDANT STEPPED OFF OF THE ORANGE LINE THAT HE VISUALLY AND VERBALLY IDENTIFIED 3 SEPARATE TIMES. THE DEFENDANT THEN STEPPED OFF OF THE LINE FOR STEPS 3 THROUGH 7. THE DEFENDANT ALSO DID NOT WALK HEEL TO TOE. THE DEFENDANT TOOK 10 STEPS THE FIRST WAY. THE DEFENDANT UTILIZED HIS ARMS FOR BALANCE THROUGHOUT THE EXERCISE. THE DEFENDANT IMPROPERLY TURNED AROUND. THE DEFENDANT'S FIRST 5 STEPS WERE NOT HEEL TO TOE. THE DEFENDANT THEN STEPPED OFF OF TH ELINE FOR STEPS 6 THROUGH 8.

ONE LEG STAND:

THE DEFENDANT WAS PLACED INTO THE INSTRUCTIONAL STANCE FOR THE ONE LEG STAND AND GIVEN INSTRUCTIONS. THE DEFENDANT STATED THAT HE UNDERSTOOD THE INSTRUCTIONS. THE DEFENDANT DID NOT HAVE ANY QUESTIONS FOR ME AT THAT TIME. THE DEFENDANT WAS UNABLE TO MAINTAIN THE INSTRUCTIONAL STANCE. THE DEFENDANT LIFTED HIS RIGHT FOOT OFF OF THE GROUND. THE DEFENDANT ONLY LIFTED HIS FOOT APPROXIMATELY 2 INCHES OFF OF THE GROUND. THE DEFENDANT DID NOT COUNT OUT LOUD AS INSTRUCTED WHEN HE LIFTED HIS RIGHT FOOT OFF OF THE GROUND. THE DEFENDANT WAS NOT LOOKING AT HIS ELEVATED FOOT. THE DEFENDANT USED HIS ARMS FOR BALANCE FOR THE EXERCISE.

FINGER TO NOSE:

THE DEFENDANT WAS PLACED INTO THE INSTRUCTIONAL STANCE FOR THE FINGER TO NOSE AND GIVEN INSTRUCTIONS. THE DEFENDANT STATED THAT HE UNDERSTOOD THE INSTRUCTIONS. THE DEFENDANT DID NOT HAVE ANY QUESTIONS FOR ME AT THAT TIME. THE DEFENDANT WAS UNABLE TO MAINTAIN THE INSTRUCTIONAL STANCE AND BEGAN LOOKING AROUND WHILE THE INSTRUCTIONS WERE BEING GIVEN TO HIM. THE DEFENDANT WAS ABLE TO DEMONSTRATE THAT HE KNEW THE DIFFERENCE FROM HIS LEFT TO HIS RIGHT. THE DEFENDANT WAS TOLD LEFT, AT THAT TIME THE DEFENDANT USED THE SIDE OF HIS FINGER TO TOUCH THE SIDE OF HIS NOSE. THE DEFENDANT WAS TOLD RIGHT, AND USED THE RIGHT FINGER TO TOUCH THE BRIDGE OF HIS NOSE. THE DEFENDANT WAS TOLD LEFT AND USED THE LEFT FINGER TO TOUCH THE TIP OF HIS NOSE. THE DEFENDANT WAS TOLD RIGHT AND USED THE RIGHT SIDE OF HIS FINGER TO TOUCH HIS UPPER LIP. THE DEFENDANT WAS THEN TOLD RIGHT AGAIN AND THE DEFENDANT USED THE RIGHT FINGER TO TOUCH HIS NOSTRIL. THE DEFENDANT WAS FINALLY TOLD LEFT AND USED HIS LEFT FINGER TO TOUCH THE LEFT SIDE OF HIS NOSE. THROUGHOUT THE ENTIRE EXERCISE THE DEFENDANT KEPT HIS EYES OPEN AND DID NOT TILD HIS HEAD BACKWARDS AS INSTRUCTED.

ROMBERG ALPHABET:

THE DEFENDANT WAS PLACED INTO THE INSTRUCTIONAL STANCE FOR THE ROMBERG ALPHABET AND GIVEN INSTRUCTIONS. THE DEFENDANT STATED THAT HE UNDERSTOOD THE INSTRUCTIONS. THE DEFENDANT DID NOT HAVE ANY QUESTIONS FOR ME AT THAT TIME. THE DEFENDANT STATED HIS HIGHEST LEVEL OF EDUCATION COMPLETED WAS A COLLEGE DEGREE, AND STATED THAT HE UNDERSTOOD AND KNEW THE ENTIRE ENGLISH ALPHABET. THE DEFENDANT RECITED THE ENTIRE ALPHABET WITH BOTH EYES OPEN AND HIS HEAD SLIGHTLY TILTED BACKWARDS.

BREATH TEST RESULTS: 1) .155 2) .176 3) .170 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S A. TEJEDA
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 2ND day of FEBRUARY 20 20 by D/S A. TEJEDA

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

Gary Parent (#7909)
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

Notary Public State of Florida
Gary J Parent
My Commission GG 085486
Expires 06/21/2021

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 2ND DAY OF FEBRUARY 20 20, AT 1255 AM ✓ PM

SUBJECT: COHEN ANDREW ROY CASE NUMBER: 20033324

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S A. TEJEDA

PERSONAL CONTACT

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

ON SUNDAY, FEBRUARY 2ND, 2020 AT APPROXIMATELY 1255 HOURS, I RESPONDED TO THE INTERSECTION OF N MILITARY TRAIL AND BELVEDERE ROAD IN UNINCORPORATED WEST PALM BEACH, WITHIN PALM BEACH COUNTY FL IN REFERENCE TO A CRASH INVESTIGATION AS A BACK UP UNIT. UPON ARRIVAL, I MADE CONTACT WITH THE DRIVER OF VEHICLE 2 WHO STATED THAT AFTER THE CAR CRASH THE DEFENDANT STEPPED OUT OF HIS VEHICLE AND "SEMED OUT OF IT" AS HE WALKED OVER TO HER CAR. THE DRIVER AND HER PASSENGER BOTH PROVIDED A SWROEN WRITTEN STATEMENT STATING THAT THE DRIVER "SEEMED OUT OF IT". I THEN MADE CONTACT WITH THE DEFENDANT, WHO WAS IDENTIFIED BY MASSACHUSETTES DRIVER'S LICENSE AS, ANDREW R. COHEN, LATER REFERREC TO AS "THE DEFENDANT". THE DEFENDANT HAD GLASSY BLOODSHOT EYES, I ALSO IMEDIATELY SMELLED A DISTINCT ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM HIS BREATH. THE DEFENDANT HAD TROUBLE UNDERSTANDING QUESTIONS AND EXPLAINING WHAT HAD OCCURRED. IT SHOULD ALSO BE NOTED THAT THE DEFENDANT HAD TROUBLE STANDING AND SWAYED FROM LEFT TO RIGHT. THE DEFENDANT WAS EXPLAINED THAT THE CRASH INVESTIGATION WAS COMPLETED AND THAT I WAS NOW CONDUCITNG A CRIMINAL INVESTIGATION TO WHICH THE DEFENDANT VERBALLY STATED THAT HE UNDERSTOOD AND AGREED.

OBSERVATION OF DRIVER:

THE DEFENDANT HAD A STRONG ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM HIS BREATH. THE DEFENDANT ALSO HAD GLASSY BLOODSHOT EYES. THE DEFENDANT HAD TROUBLE UNDERSTADING SIMPLE QUESTIONS AND EXPLAINING WHAT HAD OCCURRED.

DRIVER'S STATEMENTS:

THE DEFENDANT HAD A SLOW SLURRED SPEECH. HAD TROUBLE EXPLAINING HOW THE CRASH HAD OCCURRED.

ODORS:

DISTINCT ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE CAOMING FROM HIS PERSON.

GENERAL OBSERVATIONS

SPEECH: **SLOW SLURRED SPEECH**

ATTITUDE: **CALM AND COOPERATIVE**

CLOTHING: **NEAT AND CLEAN**

MEDICAL/OTHER: **HIGH BLOOD PRESSURE AND LEAKY HEART VALVE (HEART CONDITION)**
All ROADSIDES CAPTURED ON IN-CAR VIDEO

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S A. TEJEDA
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 2ND day of FEBRUARY 20 20 by D/S A. TEJEDA

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

Gary Parent (#7909)
Notary Public, Clerk of Court, Officer (F.S.S. 941.10)

Notary Public State of Florida
Gary J Parent
My Commission GG 085488
Expires 06/21/2021

TESTING FACILITY TASK REPORT

AGENCY: [illegible]

SUBJECT: [illegible] CASE NUMBER: [illegible]

DATE: 02/02/[illegible] VIDEO TAPE NUMBER: n/a

BEGINNING TIME: 1459 ENDING TIME: 1513

BREATH TESTS RESULTS: 1) .155 TIME 1504 A.M./P.M. 2) .176 TIME 1507 A.M./P.M.

3) .170 TIME 1510 A.M./P.M. 4) n/a TIME — A.M./P.M.

BREATH OPERATOR: [illegible]

MAINTENANCE TECHNICIAN: [illegible] #6907

TESTING OFFICER'S OBSERVATIONS

SPEECH: [illegible]

ATTITUDE: CALM, QUIET, POLITE, COOPERATIVE

CLOTHING: [illegible]

MEDICAL CONDITIONS: [illegible]

MEDICATIONS: [illegible]

OTHER: [illegible]

COMMENTS: [illegible]

A AGREED TO TAKE TEST

A/O [illegible]

A STATED [illegible]

[illegible]

A/O ATTEMPTED [illegible]

A REFUSED TO ANSWER ANY QUESTIONS

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

SUBJECT: _____ CASE NUMBER: _____

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.

SUBJECT'S SIGNATURE: (X)_____

SUBJECT: _____ CASE NUMBER: 20-0[illegible]

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? _____

WHERE WERE YOU GOING? _____

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? _____

SCANNED
FEB 03 2020

INTERVIEWER: _____

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

PBSO #0129C REV. 9/93

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: 80-006239 Software: 8100.27
Date of Test: 02/02/2020

Date of Last Agency Inspection: 01/17/2020
Observation Period Began: 13:34
Subject's Name: ANDREW R COHEN DOB: 11/22/1956 Sex: M

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	15:02
Air Blank	0.000	15:02
Control Test	0.081	15:02
Air Blank	0.000	15:03
Subject Sample #1	0.155	15:04
Air Blank	0.000	15:04
Air Blank	0.000	15:06
Subject Sample #2	0.176	15:07
Air Blank	0.000	15:08
Air Blank	0.000	15:09
Subject Sample #3	0.170	15:10
Air Blank	0.000	15:11
Control Test	0.080	15:11
Air Blank	0.000	15:12
Diagnostics Check	OK	15:12

Cylinder Lot: 17919080A1
Exp: 08/05/2021

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

Breath Test Operator: _____ Date: 02/02/20
Signature

Sworn to (or affirmed) before me this 02 day of FEBRUARY, 2020

_____ D/S A. TEJEDA
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

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

WITNESS LIST

CASE NUMBER: 20033324

ARRESTING OFFICER: D/S A. TEJEDA

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

PHONE NUMBERS (HOME): ______ (WORK) 5616883600

CAN TESTIFY TO: DUI INVESTIGATION AND ACTS OF CASE

NAME: MICHELLE KNIGHT

ADDRESS: 4145 N HAVERHILL ROAD, APT 1207 WEST PALM BEACH FL, 33417

PHONE NUMBERS (HOME) 5615290302 (WORK) ______

CAN TESTIFY TO: PLACING THE DEFENDANT BEHIND THE WHEEL AND DEFENDANT'S ACTIONS AT TIME OF CRASH

NAME: JALEN KNIGHT

ADDRESS 13882 59TH CT N, WEST PALM BEACH FL, 33411

PHONE NUMBERS (HOME) 5615290302 (WORK) ______

CAN TESTIFY TO: PLACING THE DEFENDANT BEHIND THE WHEEL AND DEFENDANT'S ACTIONS AT TIME OF CRASH

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: ______

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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2020003720	**Date:** 02/03/2020
	Specialist Name/ID: T Howard/7185