

0529398

221 2381 NB 2180

OBTS Number		ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile		N	
Agency ORI Number FLO 5 0 2 6 0 0		Agency Name PALM BEACH GARDENS POLICE DEPARTMENT				Agency Report Number 78 - 22000715							
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 1. Yes 2. No		Multiple Clearance Indicator			
Location of Arrest (Including Name of Business) 13500-BLK ALT A1A, PBG, FL 33418						Location of Offense (Business Name, Address) ALT A1A/HOOD RD, PBG, FL 33418							
Date of Arrest 02/11/2022		Time of Arrest 02:42		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle KAUFF'S TOWING AND RECOVERY 4701 EAST AVENUE, WPB, FL 33407	
Name (Last, First, Middle) GAUDINO, BRIAN, M										Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian		Sex M		Date of Birth 01/23/1984		Height 5'10		Weight 240		Eye Color BRO		Hair Color BRO	
Complexion LGT		Build LARGE		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status SINGLE		Religion NOT STATED		Indication of: Alcohol Influence Drug Influence		Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>	
Local Address (Street, Apt. Number) 188 COMMODOR DR, JUPITER, FL 33477				Phone (917) 816-2598				Residence Type: 1. City 2. County 3. Florida 4. Out of State		2			
Permanent Address (Street, Apt. Number) 188 COMMODOR DR, JUPITER, FL 33477				Phone				Address Source VERBAL					
Business Address (Name, Street) 188 COMMODOR DR, JUPITER, FL 33477				Phone				Occupation					
D/L Number, State 3572129 RI		Soc. Sec. Number		INS Number		Place of Birth (City, State) NORWALK, CT		Citizenship US					
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<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		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile	
<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					
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 <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							
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 Description DRIVING UNDER THE INFLUENCE OVER .08		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 316.193(1)(C)		Violation of ORD #					
Drug Activity N		Drug Type N		Amount / Unit .111		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			
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) NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700													
Court Date and Time Month MARCH Day 16 Year 2022 Time 10:00 AM <input checked="" type="checkbox"/> PM <input type="checkbox"/>													
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) [Signature]												Date Signed 02/11/2022	
HOLD for other Agency Name:				Signature of Arresting Officer [Signature]				Name Verification (Printed by Arrestee) [Signature]					
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal				<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:				Name of Arresting Officer (Print) OFC. A. FLINK					
I.D. # 18342				Pouch #				ID # 514					
Transporting Officer OFC. A. FLINK				ID # 514				Agency PBPGD					
Witness here if subject signed with an "X"												PAGE 1 OF 1	



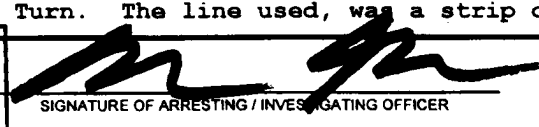
DISTRIBUTION: WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - AGENCY

GOLD - DEFENDANT (N.T.A.'s ONLY)

OBT Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE	
ADMINISTRATIVE	Agency ORI Number FL FL0502600		Agency Name Palm Beach Gardens Police Department		Agency Report Number 7 8 22-000715					
	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 checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other					Special Notes:				
DEFENSE	Name (Last, First, Middle) GAUDINO, BRIAN M					Race W		Sex M		Date of Birth 01/23/1984
	Charge Description 316.193(1)(C) DUI - BREATH .08 OR ABOVE					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 checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <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. On the 11 day of February , 2022 at 02:32 (Specifically include facts constituting cause for arrest.)									
	On 02/11/2022 at approximately 0232 hours, this Officer arrived in the area of 13500-block of Alt A1A, PBG, FL, to assist Ofc Hennessy 409 on a traffic stop. Body worn camera and in car video were used.									
	Ofc Hennessy said he observed the vehicle, an Audi sedan (LQDQ81/FL) traveling 65 MPH in a posted 50 MPH zone, in the area of Alt A1A and Hood Rd, PBG, FL. Ofc Hennessy further stated he observed the vehicle drift out of its lane three times, one of which it almost went off the roadway on the right side. This Officer made contact with the driver and sole occupant, identified via Rhode Island Driver License photo, Brian Gaudino (OF), while he was still in actual physical control of same. Gaudino had flushed red face, slurred speech, bloodshot watery eyes, and the obvious odor of an unknown alcoholic beverage emanating from his breath at conversational distance. Gaudino said he was coming from a strip club by the airport and was on his way to Admiral's Cove. When asked how much he had to drink, Gaudino paused and thought about it, before he said he consumed one beer on this night.									
	Based on this Officer's observations, Gaudino was asked to exit the vehicle to participate in Standardized Field Sobriety Exercises, to which he complied. Gaudino had to place his left hand onto his vehicle as he walked to the rear. He walked with an unsteady gait and appeared very uneasy on his feet. Gaudino said he did not have any medical conditions which would affect the exercises performed.									
	The first exercise conducted, was the Horizontal Gaze Nystagmus. The stimulus used, was a Streamlight Stylus with an illuminated red tip. This Officer observed lack of smooth pursuit in both eyes and sustained involuntary jerking in both eyes at maximum deviation. Gaudino had the onset of Nystagmus prior to 45 degrees in both eyes.									
	The second exercise conducted, was the Walk and Turn. The line used, was a strip of									
	<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 100.01 through 1st State Insurance) 02/11/2022 DATE </div> <div style="width: 30%; text-align: center;">  JOSHUA BELL MY COMMISSION #GG348008 EXPIRES: JUN 18, 2023 </div> <div style="width: 30%;">  SIGNATURE OF ARRESTING / INVESTIGATING OFFICER FLINK, ANDREW S. (514) NAME OF OFFICER (PLEASE PRINT) 02/11/2022 DATE </div> </div>									
	<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> DATE 02/11/2022 </div> <div style="width: 30%; text-align: center;"> DATE 02/11/2022 </div> <div style="width: 30%; text-align: right;"> PAGE 1 OF 2 </div> </div>									
	<div style="display: flex; justify-content: space-between;"> <div style="width: 20%;">COURT</div> <div style="width: 20%;">STATE ATTORNEY</div> <div style="width: 20%;">CENTRAL RECORDS</div> <div style="width: 20%;">JAIL</div> <div style="width: 20%;">CRIME ANALYSIS</div> <div style="width: 20%;">P. I. O.</div> </div>									

OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
Agency ORI Number FL FL0502600		Agency Name Palm Beach Gardens Police Department		Agency Report Number 7 8 22-000715			
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 checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		Special Notes:			
Name (Last, First, Middle) GAUDINO, BRIAN M		Alias		Race W	Sex M	Date of Birth 01/23/1984	

yellow tape placed upon the sidewalk by this Officer. During the instructions, Gaudino stepped out of the starting position and had to be told to get back into the position. During the first set of steps, Gaudino took slow deliberate steps and raised his arms more than six inches from his sides. Gaudino conducted an improper turnaround by way of pivoting on both feet. During the return set of steps, Gaudino raised his arms more than six inches from his sides.

The third and final exercise conducted, was the One-Leg Stand. During the exercise Gaudino raised his right foot. Gaudino swayed and upon the count of 15, began to lose his balance and sway more from side to side before hopping two times and placing his foot down. Gaudino raised his foot again and almost immediately placed it down again, then time expired.

Based on this Officer's observations, Gaudino was placed under arrest 0242 hours. At PBSO BAT, this Officer requested Gaudino to provide a breath sample for the purpose of determining its alcohol content, to which he provided an unsure response. This Officer read Florida Implied Consent to Gaudino to which he acknowledged and said he would provide a breath sample. At 0338 hours, he blew .111 and at 0341 hours, he blew .108.

Based on the results of the investigation, this Officer has probable cause to prove Brian Gaudino operated a motor vehicle, in the state of Florida, while under the influence of alcohol to the extent his normal faculties were impaired, while having an unlawful breath alcohol content, in violation of FSS 316.193(1) (C).

SWORN AND SUBSCRIBED BEFORE ME NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 11 Bonded through 1st State Insurance) 02/11/2022 DATE	 JOSHUA BELL MY COMMISSION #GG348008 EXPIRES: JUN 18, 2023	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER FLINK, ANDREW S (514) NAME OF OFFICER (PLEASE PRINT) 02/11/2022 DATE
--	---	---

PAGE
2 OF **2**

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

SUBJECT: Gaudino, Brian M

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 CA of the FIELD

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) _____

Read on camera

SUBJECT: Gaudino, Kevin M CASE NUMBER: _____

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? _____

INTERVIEWER: OFC. A. FLANK #514



**PALM BEACH GARDENS POLICE DEPARTMENT
DUI TESTING FACILITY INFORMATION SHEET**



PBSO Case #: 22-034900 PBSO Zone: 3-13

Agency Case #: 22000715 Crash Case #: _____

Incident Information:

Time of Stop/Crash: 0224 Date of Incident: 02/11/2022 Day: FRIDAY

Location of Incident: ALT A1A/HOOD RD, PBG, FL 33418

Arrest Information:

Time of Arrest: 02:42 Date of Arrest: 02/11/2022 Day: FRIDAY

Location of Arrest: 13500-BLK ALT A1A, PBG, FL 33418

Subject's Name: (L) GAUDINO, (F) BRIAN, (M) M

DOB: 01/23/1984 Race: W Sex: M Height: 5'10 Weight: 240 Hair BRO Eye BRO

Address: 188 COMMODOR DR, JUPITER, FL 33477 Phone: (917) 816-2598

Arresting Officer's Name: OFC. A.FLINK ID#: 514

Agency: PBGPD Division: TRAFFIC - DUI

Breath Results

- 1) .111 at 03:38 hrs.
- 2) .108 at 03:41 hrs.
- 3) - at - hrs.
- 4) - at - hrs.

---BAT Use---

BAT Notified: YES
Arrival Time at BAT: 0306
Subject Arrest Time: 02:42

Breath Test Operator: BELL, JOSH 8656

PBSO

TESTING FACILITY TASK REPORT

AGENCY: PBG

SUBJECT: GAUDINO, BRIAN M

CASE NUMBER: 22-034900

DATE: Feb 11, 2022

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0333

ENDING TIME: 0343

BREATH TESTS RESULTS: 1) .111 TIME 0338 A.M. ☒ P.M. ☐ 2) .108 TIME 0341 A.M. ☒ P.M. ☐
3) XX TIME XX A.M. ☐ P.M. ☐ 4) XX TIME XX A.M. ☐ P.M. ☐

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: TALKATIVE, COOPERATIVE, FIDGETY

CLOTHING: GREEN TEE SHIRT, GREY SHORTS, BLACK SLIDES

MEDICAL CONDITIONS:

MEDICATIONS:

OTHER:

EYES: BLOODSHOT, GLASSY

COMMENTS:

ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0306 HOURS

SUBJECT SEEMED UNSURE WHEN HE AGREED TO TAKE BREATH TEST

A/O READ I.C

SUBJECT STATED HE UNDERSTOOD I.C

SUBJECT STATED HE WOULD TAKE BREATH TEST

BREATH TEST COMPLETED

A/O READ RIGHTS

SUBJECT STATED HE UNDERSTOOD HIS RIGHTS

TECH READ BREATH TEST RESULTS

SUBJECT STATED HE UNDERSTOOD BREATH TEST RESULTS

Q AND A NOT CONDUCTED

**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: 80-006477 Software: 8100.27
Date of Test: 02/11/2022

Date of Last Agency Inspection: 01/14/2022
Observation Period Began: 03:06
Subject's Name: BRIAN M GAUDINO

DOB: 01/23/1984 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	03:36
	Air Blank	0.000	03:36
	Control Test	0.079	03:37
	Air Blank	0.000	03:37
	Subject Sample #1	0.111	03:38
	Air Blank	0.000	03:38
	Air Blank	0.000	03:40
	Subject Sample #2	0.108	03:41
	Air Blank	0.000	03:41
	Control Test	0.079	03:42
	Air Blank	0.000	03:42
	Diagnostics Check	OK	03:42

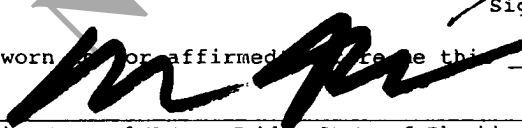
Cylinder Lot: 19021080A2
Exp: 09/05/2023

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:  Date: 02/11/22
Signature

Sworn or affirmed before me this 11 day of February, 2022
 Off. A. Flink #514
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.



**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: 2022003945	Date: 2/11/2022
	Specialist Name/ID: Pinkneya/7796