

20CT2831 MB

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Juvenile N

OBTS Number	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-20-038330	
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 2 1. Yes 2. No NONE		Multiple Capias Indicator 01
Location of Arrest (Including Name of Business) BOCA CHASE DR & OAK LAKE WAY			Location of Offense (Business Name, Address) BOCA CHASE DR & OAK LAKE WAY BOCA RATON FL 33498			
Date of Arrest 02/15/2020	Time of Arrest 0509	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle INTERSTATE TOWING

Name (Last, First, Middle) Kelemen Brittney Susanne		Alias (Name, DOB, Soc. Sec. #, Etc.)						
Race W - White I - American Indian B - Black O - Oriental/Asian H	Sex F	Date of Birth 07/10/1998	Height 5'03	Weight 110	Eye Color HZL	Hair Color BLK	Complexion FAIR	Build SLIM
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) WORDS LEFT RIBS			Marital Status Single	Religion NONE	Indication of Alcohol Influence 1. City 2. County 3. Florida 4. Out of State 2			Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>
Local Address (Street, Apt. Number) 18304 Clear Brook Cir		(City) Boca Raton, FL 33498	(State)	(Zip)	Phone (954) 684-4127	Residence Type 1. City 2. County 3. Florida 4. Out of State 2		
Permanent Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone	Address Source FL DL		
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation STUDENT		
D/L Number, State K455077987500, FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) TOMS RIVER NJ		Citizenship USA

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:	Address (Street, Apt. Number)				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
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		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)(c)		Violation of ORD #		Warrant / Capias Number		
Drug Activity N	Drug Type N	Amount / Unit .160/.158	Offense # 20-038330	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #		Warrant / Capias Number		
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 #		Warrant / Capias Number		
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 #		Warrant / Capias Number		
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				

Location (Court Room Number, Address) CRIMINAL JUSTICE COMPLEX / 3228 GUN CLUB ROAD, WPB, FL 33406					
Court Date and Time Month 3 Day 12 Year 2020 Time 0830 AM <input checked="" type="checkbox"/> 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) <i>Beermann</i>				Date Signed 02/15/2020	

HOLD for other Agency Name	Signature of Arresting Officer <i>X</i>	Name Verification (Printed by Arrestee) <i>Beermann</i>
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Intake Disposed	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other	(PRINT) <i>Beermann</i>
ID #	Pouch #	Agency PBSO
Name of Arresting Officer (Print) INV. SCHNEIDER 8723	ID # 8723	Witness Signature
Transporting Officer INV. SCHNEIDER 8723	ID # 8723	Page 1 OF 1

PROBABLE CAUSE AFFIDAVIT

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

OBTS Number Agency ORI Number Agency Name Agency Report Number
FLO 5 0 0 0 0 0 PALM BEACH COUNTY SHERIFF'S OFFICE 0 6 20 10 38 33 0

Charge Type: Check as many as apply 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other
Special Notes: SUPP PC

Name (Last, First, Middle) KELEMEY, BRITNEY S Alias Race Sex Date of Birth WF 07.10.98

Charge Description DUI
Victim's Name (Last, First, Middle) State of Florida Race Sex Date of Birth
Local Address (Street, Apt. Number) Palm Beach County (City) (State) (Zip) Phone () Address Source
Business Address (Name, Street) (City) (State) (Zip) Phone () Occupation GOVT

The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above Defendant committed the following violation of law.
The person taken into custody...
[X] committed the below acts in my presence. [] was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
[] confessed to _____ admitting to the below facts. [] was found to have committed the below acts, resulting from my (described) investigation.
On the 15 day of Feb 20 20 at 0425 A.M. [] P.M. (Specifically include facts constituting cause for arrest.)
ON THE ABOVE DATE AND TIME WHILE WORKING AN OFF DUTY DETAIL AT COCO POINT A SUBDIVISION OF BOCA GRANDE IN BOCA GRANDE FLORIDA. I COULD HEAR WHAT SOUNDED LIKE A VEHICLE DRIVING ON A FLAT TIRE. AS THE VEHICLE APPROACHED ME I GOT ON TO BOCA GRANDE DRIVE AND AS IT PASSED ME I CONDUCTED A TRAFFIC STOP ON IT THE VEHICLE A GOLD SUZUKI FLORIDA TAG JL6023 WAS OCCUPIED BY A W/F LATER IDENTIFIED AS BRITNEY SUSANNE KELEMEY. AS I SPoke TO BRITNEY I DETECTED THE ODOR OF AND UNK ALCOHOLIC BEVERAGE. COMING FROM HER I ALSO OBSERVED HER EYES TO BE VERY GLASSY, AND HER SPEECH TO BE SLURRED. AS SHE SPoke TO ME. AS I SPoke TO BRITNEY SHE ATTEMPTED TO EXPLAIN TO ME, THAT SHE ON HER WAY HOME TO (BOCA GRANDE) WHICH IS ON COLINAS ROAD, AND NOT EVEN CLOSE TO OUR CURRENT LOCATION. AS I ASKED BRITNEY FOR VEHICLE INFORMATION, REGISTRATION AND INSURANCE AND SHE LOOKED FOR HER REGISTRATION ON HER PHONE. AS I ADVISED HER I DID NOT BELIEVE THE VEHICLE'S REGISTRATION WOULD BE ON HER PHONE, SHE THEN HANDED ME THE VEHICLE'S PHYSICAL REGISTRATION AND INSURANCE. SHE ALSO CONTINUED TO TELL ME SHE, GILES GEIGO AND THEY WERE COMING TO ASSIST HER. BASED ON MY OBSERVATIONS OF HER I REQUESTED A DUI TO COME TO MY LOCATION.

STATE OF FLORIDA COUNTY OF PALM BEACH
(Signature of Arresting/Investigative Officer) [Signature]
The foregoing instrument was sworn to or affirmed and subscribed before me this 15th day of FEB 20 20 by DS [Signature] LEO SCANNED
Notary Public, Clerk of Court, Officer (F.S.S. 117.10) [Signature] 8702 FEB 16 2020 1 OF 1

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 15 DAY OF FEB 20 20, AT 0424 AM PM

SUBJECT: Kelemen Brittney Susanne CASE NUMBER: 20-038330

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV. SCHNEIDER 8723

PERSONAL CONTACT

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

On February 15, 2020 at approximately 0429hrs, I was dispatched to the scene of a motor vehicle traffic stop at the intersection of Boca Chase Dr. & Oak Lake Way, which is located in Boca Raton, unincorporated Palm Beach County, Florida.

I arrived at the scene at approximately 0448hrs D/S Cruz #6953 relayed to me that Kelemen had articulable indicators of impairment, so he called for a DUI Unit to conduct a possible DUI investigation. D/S Cruz provided me with a written sworn supplemental Probable Cause Affidavit.

OBSERVATION OF DRIVER:

Upon making contact with the driver who was identified by her Florida driver license as Brittney Susanne Kelemen, I immediately detected an obvious and strong odor of an unknown alcoholic beverage emitting from her person and face area. This odor intensified as I spoke to Kelemen. Kelemen had glassy and blood shot eyes. Kelemen's speech was slurred. Kelemen had difficulty following directions given to her. Kelemen was wearing a white shirt, blue jeans, and brown sandals. All the clothing appeared neat and orderly.

DRIVER'S STATEMENTS:

Pre-Miranda: Kelemen stated she was driving home from work and had 3 whiskey sours at work.

Kelemen consented to breath and post Miranda she refused Q&A.

ODORS:

A strong and obvious odor of an unknown alcoholic beverage was emitting from her person and face area which intensified as I spoke to Kelemen.

GENERAL OBSERVATIONS

SPEECH: Kelemen's speech was slurred.

ATTITUDE: talkative, polite, friendly, cooperative, repetitive

CLOTHING: clean neat and orderly

MEDICAL/OTHER: [REDACTED]

STATE OF FLORIDA
COUNTY OF PALM BEACH

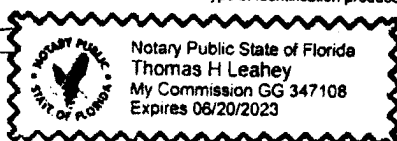
INV. SCHNEIDER 8723
signature of Arresting/Investigative Officer)

the foregoing instrument was sworn to or affirmed and subscribed before me this 15 day of Feb 20 20 by INV. SCHNEIDER 8723

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

T. Leahey 19183

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



SCANNED
FEB 16 2020

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:

Kelemen would sway roughly in a side to side front to back pattern throughout the task. Kelemen did touch the tip of the pen as directed to positively identify the point to be tracked. Kelemen was reminded numerous times to track the pen with her eyes only. Kelemen failed to keep her head still while tracking the stimulus.

WALK & TURN:

I explained and demonstrated the instructions for the "Walk & Turn" to Kelemen who stated she understood. During the task, I observed Kelemen to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Kelemen could not maintain her balance while listening to instructions. Kelemen stepped out of the instructional stance during the demonstration to catch her balance. Kelemen missed heel-to-toe steps and stepped off the line. Kelemen performed an improper turn. Kelemen lost her balance by staggering, and then turning other than which was demonstrated.

ONE LEG STAND:

I explained and demonstrated the instructions for the "One Leg Stand" to Kelemen who stated that she understood. During the task, I observed Kelemen to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Kelemen continued to sway while balancing on one leg. Kelemen failed to count properly by thousands as instructed. Kelemen put her foot down to regain balance numerous times before the 30 seconds had elapsed.

FINGER TO NOSE:

I explained and demonstrated the instructions for the "Finger to Nose" task to Kelemen who stated that she understood. During the task, I observed Kelemen to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Kelemen's index finger did not touch the tip of the nose on numerous attempts and she searched for the tip of her nose using the finger to find her nose prior to touching the tip. The sequence used for this task was L, R, L, R, R, L.

ROMBERG ALPHABET:

I explained and demonstrated the instructions for the "Rhomberg Alphabet" task to Kelemen who stated that she understood. During the task, I observed Kelemen to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Kelemen incorrectly recited the alphabet, she started at E.

BREATH TEST RESULTS: .160 .158

STATE OF FLORIDA
COUNTY OF PALM BEACH

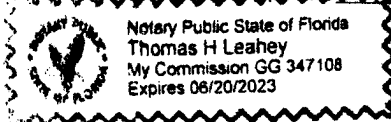
INV. SCHNEIDER 8723
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 15 day of Feb 2020 by INV. SCHNEIDER 8723

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

T. Leahey 19183
(Signature)

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



**SCANNED
FEB 16 2020**

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: 02/15/2020

Date of Last Agency Inspection: 02/14/2020

Observation Period Began: 05:56

Subject's Name: BRITTNEY S KELEMEN

DOB: 07/10/1998 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	06:23
	Air Blank	0.000	06:24
	Control Test	0.081	06:24
	Air Blank	0.000	06:24
	Subject Sample #1	0.160	06:25
	Air Blank	0.000	06:26
	Air Blank	0.000	06:28
	Subject Sample #2	0.158	06:29
	Air Blank	0.000	06:30
	Control Test	0.080	06:30
	Air Blank	0.000	06:30
	Diagnostics Check	OK	06:30

Cylinder Lot: 00919080A3
Exp: 03/05/2021

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 THOMAS H LEANEY, 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: T Leaney Date: 02/15/2020
Signature

Sworn to (or affirmed) before me this 15th day of February, 2020

[Signature] Printed Name of Notary Public-State of Florida INV D Schneider # 8723

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.

SCANNED
FEB 16 2020



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

PBSO CASE # 20-038330 PBSO ZONE 7-51

AGENCY CASE # _____ CRASH CASE # _____

TIME OF STOP/CRASH 0424 DATE 02/15/2020 DAY Saturday

SUBJECT'S NAME Kelemen Brittney Susanne RACE H SEX F
LAST FIRST MID

HGT 5'03 WGT 110 DOB 07/10/1998

LOCATION BOCA CHASE DR & OAK LAKE WAY

ARRESTING OFFICER'S NAME & ID INV. SCHNEIDER 8723 AGENCY PBSO

DIVISION: VCD/DUI

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0556

ARREST TIME 0509

BREATH RESULTS:

- 1 .160
- 2 .158
- 3 *N/A*
- 4 *N/A*

TESTING OFFICER'S ID 19183 PBSO VIDEOTAPE # N/A

NOT A CERTIFIED COPY

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FEB 16 2020

TESTING FACILITY TASK REPORT

AGENCY: PBSO
SUBJECT: Kelemen, Brittany S. CASE NUMBER: 20-038330
DATE: 02/15/20 VIDEO TAPE NUMBER: N/A
BEGINNING TIME: 06:19 ENDING TIME: 06:33
BREATH TESTS RESULTS: 1) .160 TIME 06:25 A.M./P.M. 2) .158 TIME 06:27 A.M./P.M.
3) N/A TIME — A.M./P.M. 4) N/A TIME — A.M./P.M.
BREATH OPERATOR: T. Lepore # 17183
MAINTENANCE TECHNICIAN: J Kevlecke # 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: thick, slurred
ATTITUDE: friendly, cooperative, repetitive
CLOTHING: blue jeans, white top, tan sandals
MEDICAL CONDITIONS: [REDACTED]
MEDICATIONS: [REDACTED]

OTHER: eyes glassy + bloodshot
odor of unknown alcoholic beverage on breath.

COMMENTS: arrived at center A/O conducted 20 minute
observation period at 05:56 hrs

D/O read + then asked if she has a choice to refuse

A/O read TIC + A stated she understood TIC

D agreed to perform breath test

Tech read breath test results + D stated she understood
breath test results.

A/O read rights + D stated she understood rights.

A/O attempted PFR + D declined to answer questions

SCANNED
FEB 16 2020

SUBJECT: Kelemen, Brittany S CASE NUMBER: 20-038330

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: _____

SCANNED
FEB 16 2020

SUBJECT: Kelomen, Anthony S CASE NUMBER: 17-038330

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 Inv to Schmitter #023 of the PBSO

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

SCANNED
FEB 16 2020

WITNESS LIST

CASE NUMBER: 20-038330

ARRESTING OFFICER: INV. SCHNEIDER 8723

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

PHONE NUMBERS (HOME): _____ (WORK) (561) 688-4001

CAN TESTIFY TO: SEE DUI PROBABLE CAUSE AFFIDAVIT & OFFENSE REPORT & IN CAR VIDEO

NAME: DS R. Cruz PBSO ID 6953

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

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

CAN TESTIFY TO: See Supp PC Affidavit

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) 0 (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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ADDRESS _____

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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: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

SCANNED
FEB 16 2020



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)
I/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 checked="" type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	4,9
	<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"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2020005236	Date: 02/16/2020
	Specialist Name/ID: AM/31562

SCANNED
FEB 16 2020