

21CT1550 MB

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1. Arrest 3. Request for Warrant
2. N.T.A. 4. Request for Capias
1 [] 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) 06-21-031405 | |
| 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 | |
| Location of Arrest (Including Name of Business) Sandalfoot Blvd and SR 7 Boca Raton Fl | | Location of Offense (Business Name, Address) Sandalfoot Blvd and SR 7 Boca Raton | | | | | |
| Date of Arrest 02/02/2021 | Time of Arrest 0332 | Booking Date | Booking Time | Jail Date | Jail Time | Location of Vehicle Boca Raton Towing | |
| Name (Last, First, Middle) Hernandez Aristizabal Cesar | | Alias (Name, DOB, Soc. Sec. #, Etc.) | | | | | |
| Race W - White I - American Indian B - Black O - Oriental/Asian | Sex M | Date of Birth 08/20/1983 | Height 6'1" | Weight 220 | Eye Color Brn | Hair Color Brn | Complexion Light |
| Build Large | | Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) multiple tattoos | | Marital Status Married | Religion CHRISTIAN | Indication of Alcohol Influence Drug Intoxication Y <input type="checkbox"/> N <input type="checkbox"/> Unit <input type="checkbox"/> | |
| Local Address (Street, Apt. Number) 9818 Arbor Oaks Ln Apt 104 | | (City) Boca Raton | (State) FL | (Zip) 33428 | Phone (786) 805-2475 | 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 DRIVERS LICENSE | |
| Business Address (Name, Street) | | (City) | (State) | (Zip) | Phone | Occupation | |
| DL Number, State H655101833000 | | Soc. Sec. Number | | INS Number | | Place of Birth (City, State) Bogota Columbia | |
| Citizenship YES | | 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 | | |
| Parent <input type="checkbox"/> 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 | | Residence Photo | |
| Released To: (Name) | | Relationship | | Date | Time | 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 355-2528) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason) | | Description of Property | | Value of Property | | Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 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)(A) | | Violation of ORD # | |
| Drug Activity N | | Drug Type N | Amount / Unit | Offense # 21-031405 | 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 |
| <p>CRIMINAL JUSTICE COMPLEX / 3228 GUN CLUB ROAD, WPB, FL 33406</p> <p>Court Date and Time Month February Day 25 Year 2021 Time 8:30 AM <input checked="" type="checkbox"/> PM</p> <p>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 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</p> <p>Signature of Defendant (or Juvenile and Parent /Custodian) _____ Date Signed 02/02/2021</p> | | | | | | | |
| HOLD for other Agency Name: | | Signature of Arresting Officer [Signature] | | Name Verification (Printed by Arrestee) SCANNED | | | |
| <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal | | <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other | | Name of Arresting Officer (Print) Cpl. M. SMITH | | I.D. # 9621 | |
| Intake Deputy SMITH 8101 | | I.D. # | | Pouch # | | Transporting Officer Smith | |
| I.D. # | | ID # 9621 | | Agency PBSO | | Witness Name (Printed with an "X") FEB 02 2021 | |
| DISTRIBUTION: WHITE - COURT COPY | | GREEN - STATE ATTORNEY | | YELLOW - AGENCY | | PINK - AGENCY | |
| GOLD - DEFENDANT (N.T.A.'s ONLY) | | PAGE 1 | | OF 1 | | FEB 02 2021 AM 7:07 | |

J# 0521151

PH 2020

| | | | | | |
|--|--|---|--|---|--|
| OBTS Number | | PROBABLE CAUSE AFFIDAVIT | | 1. Arrest <input type="checkbox"/> 3. Request For Warrant <input type="checkbox"/> Juvenile <input type="checkbox"/> N | |
| Agency ORI Number FLO 500000 | | Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE | | Agency Report Number 06 21 | |
| Charge Type: Check as many as apply | | Special Metro | | | |
| <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other | | | | | |
| Defendant Name (Last, First, Middle) HERNANDEZ ARISTIZABAL CESAR A | | Race W | | Sex M | |
| | | Date of Birth 08/20/1983 | | | |
| Charge DUI | | Charge | | | |
| Charge | | Charge | | | |
| Victim 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 (Street, Apt. Number) City State Zip Phone Occupation | | | | | |
| The undersign 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"/> 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 (described) investigation. | | | |
| On the 02 day of FEBRUARY 20 21 at 0245 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM | | | | | |

On Tuesday, February 2nd 2021 at approximately 0227 hours I was dispatched to sandalfoot blvd and us highway 441 in reference to a welfare check.

The caller advised there was a silver dodge caravan sitting at the light on State road 7 and Sandalfoot Blvd in the north bound lanes, which sat through 2 light cycles.

Upon my arrival there was a Silver Dodge Caravan, (Florida tag GASG80) sitting in the north bound lane, which sat through 1 light cycle while Deputies were on scene. I made contact with the driver, Cesar Hernandez Aristizabal who was in the drivers seat with the car running and his foot on the brake. Hernandez Aristizabal rolled his window down and I could smell a strong and obvious odor of alcohol coming from him which intensified as he spoke. Hernandez Aristizabal had glossy bloodshot eyes and was slurring his words

At this time a DUI unit was called for possible impairment. Cpl. Smith arrived and took over.

| | |
|---|---|
| The foregoing instrument was sworn to and affirmed before me this 02 day of FEBRUARY 20 21 , by: | |
| <i>Col. M. Smith</i> Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00) | D/S C. ABBOTT 36122 Name of Arresting/Investigating Officer |
| <i>[Signature]</i> Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00) | <i>[Signature]</i> Signature of Arresting/Investigating Officer |
| Page 1 of 1 | |

SCANNED
FEB 02 2021



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

PBSO CASE # 21-031405 PBSO ZONE 7-43

AGENCY CASE # _____ CRASH CASE # _____

TIME OF STOP/CRASH 0228 DATE 02/02/2021 DAY Tuesday

SUBJECT'S NAME Hernandez Aristizabal Cesar RACE W SEX M
LAST FIRST MID

HGT 6'1 WGT 220 DOB 08/20/1983

LOCATION Sandalfoot Blvd and SR 7

ARRESTING OFFICER'S NAME & ID Cpl. M. Smith 9621 AGENCY PBSO

DIVISION: VCD/DUI

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0415

ARREST TIME 0332

BREATH RESULTS:

1 **REFUSED**
 2
 3
 4

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

SCANNED
 FEB 02 2021

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE _____ DAY OF _____ 20 21 AT 0228 AM PM
SUBJECT: Hernandez Aristizabal Cesar CASE NUMBER: 21-031405
AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Cpl. M. SMITH

PERSONAL CONTACT

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

On 02/02/2021 at approximately 02:35hrs, I was called to the scene of a traffic stop near the intersection of Sandalfoot Blvd and SR 7, which is located in unincorporated Palm Beach County, Florida. I arrived at the scene at approximately 0309hrs. D/S Abbott #36122 relayed to me, and completed a written signed sworn supplemental Probable Cause Affidavit stating the following " On Tuesday, February 2nd 2021 at approximately 0227 hours I was dispatched to Sandalfoot Blvd and US highway 441 in reference to a welfare check.

The caller advised there was a silver dodge caravan sitting at the light on State road 7 and Sandalfoot Blvd in the north bound lanes, which sat through 2 light cycles.

Upon my arrival there was a Silver Dodge Caravan, (Florida tag GASG80) sitting in the north bound lane, Which sat through 1 light cycle while Deputies were on scene. I made contact with the driver, Cesar Hernandez Aristizabal who was in the drivers seat with the car running and his foot on the brake. Hernandez Aristizabal rolled his window down and I could smell a strong and obvious odor of alcohol coming from his which intensified as he spoke. Hernandez Aristizabal had glossy bloodshot eyes and was slurring his words." D/S Abbott noticed that the defendant had articulable indicators of impairment, so he called for a DUI unit to conduct a possible DUI investigation. D/S Abbott identified the defendant, to me, as the driver and sole occupant of the vehicle, at the time of the stop.

OBSERVATION OF DRIVER:

Upon making contact with the driver who was identified by their Florida Driver License as Cesar Hernandez Aristizabal, I immediately detected an obvious and strong odor of an unknown alcoholic beverage emitting from his person and face area. This odor intensified as I spoke to Hernandez Aristizabal. Hernandez Aristizabal had glassy, glazed, and blood shot eyes. Hernandez Aristizabal's speech was slurred, slow, thick, and at times difficult to understand. Hernandez Aristizabal's movements were slow and deliberate. Hernandez Aristizabal was lethargic in his movements with poor coordination. Hernandez Aristizabal had an unsteady gait while walking to my patrol vehicle and had difficulty following directions given to him. Hernandez Aristizabal was wearing a red t-shirt, blue jean shorts, and gray shoes. All the clothing appeared neat.

DRIVER'S STATEMENTS:

Hernandez Aristizabal stated that he had been working and that he was tired.

ODORS:

obvious and strong odor of an unknown alcoholic beverage emitting from his person and face area.

GENERAL OBSERVATIONS

SPEECH: speech was slurred, slow, thick, and at times difficult to understand.

ATTITUDE: Calm, Cooperative

CLOTHING: red t-shirt, blue jean shorts, and gray shoes.

MEDICAL/OTHER: See BAT report

STATE OF FLORIDA
COUNTY OF PALM BEACH

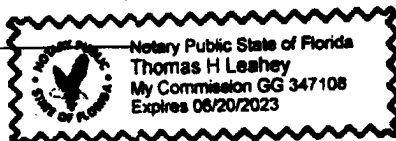
Cpl. M. SMITH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 2nd day of February 2021 by Cpl. M. SMITH

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

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



SCANNED
FEB 02 2021

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:

Hernandez Aristizabal would sway roughly in a side to side front to back pattern throughout the task. Hernandez Aristizabal did positively identify the point to be tracked. Hernandez Aristizabal was reminded numerous times to track the pen with his eyes only. Hernandez Aristizabal failed to keep his head still while tracking the stimulus.

WALK & TURN:

I explained and demonstrated the instructions for the "Walk & Turn" through Spanish Interpreter D/S Torres #36859 to Hernandez Aristizabal who stated the he understood. During the task, I observed Hernandez Aristizabal to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Hernandez Aristizabal could not maintain his balance while listening to instructions. Hernandez Aristizabal stepped out of the instructional stance during the demonstration to catch his balance. Hernandez Aristizabal started the task before being instructed to do so. Hernandez Aristizabal would stop walking to steady himself. Hernandez Aristizabal missed heel-to-toe steps and stepped off the line. Hernandez Aristizabal used his arms for balance by raising them more than six inches. Hernandez Aristizabal performed an improper turn. Hernandez Aristizabal performed the incorrect number of steps.

ONE LEG STAND:

I explained and demonstrated the instructions for the "One Leg Stand" through Spanish Interpreter D/S Torres #36859 to Hernandez Aristizabal who stated that he understood. During the task, I observed Hernandez Aristizabal to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Hernandez Aristizabal continued to sway while balancing on one leg. Hernandez Aristizabal used his arms to balance raising them more than 6 inches from his sides. Hernandez Aristizabal started hopping in an attempt to maintain balance. Hernandez Aristizabal failed to count out loud by thousands as instructed.

FINGER TO NOSE:

I explained and demonstrated the instructions for the "Finger to Nose" task through Spanish Interpreter D/S Torres #36859 to Hernandez Aristizabal who stated that he understood. During the task, I observed Hernandez Aristizabal to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Hernandez Aristizabal failed to return his arms down to his sides as instructed after touching his nose. Hernandez Aristizabal index finger did not touch the nose on 6 of 6 attempts. The sequence used for this task was L, R, L, R, R, L.

ROMBERG ALPHABET:

I explained and demonstrated the instructions for the "Rhombert Alphabet" task through Spanish Interpreter D/S Torres #36859 to Hernandez Aristizabal who stated that he understood. During the task, I observed Hernandez Aristizabal to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Hernandez Aristizabal would sway more than 2 inches. Hernandez Aristizabal would use his arms for balance by raising them more than 6 inches. Hernandez Aristizabal correctly recited the alphabet.

BREATH TEST RESULTS: REFUSED

STATE OF FLORIDA
COUNTY OF PALM BEACH

Cpl. M. SMITH
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 2nd day of February 2021 by Cpl. M. SMITH

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

T. Leahy
Notary Public, Clerk of Court, Officer (F.S.S-417.10)



SCANNED
FEB 02 2021

TESTING FACILITY TASK REPORT

AGENCY:
SUBJECT:
CASE NUMBER:
DATE:
VIDEO DVD NUMBER:
BEGINNING TIME:
ENDING TIME:

BREATH TESTS RESULTS: 1) TIME A.M. P.M. 2) TIME A.M. P.M.
3) TIME A.M. P.M. 4) TIME A.M. P.M.

BREATH OPERATOR:
MAINTENANCE TECHNICIAN:

TESTING OFFICER'S OBSERVATIONS

SPEECH:
ATTITUDE:
CLOTHING:
MEDICAL CONDITIONS:
MEDICATIONS:

OTHER:

eyes are glassy and bloodshot
odor of unknown alcoholic beverage on breath
subject stated he drank 1 beer - Q&A

REFUSED

COMMENTS:

arrived at center A/O conducted 20 minute observation period 0415 hrs
subject refused to perform breath test - Do I have to do it
A/O read I/C 2X & subject understood I/C
subject refused to perform breath test
A/O read rights & subject understood rights
A/O conducted Q&A
subject answered questions

REFUSED

SCANNED
FEB 02 2021

SUBJECT: Hernandez Aristizabal, Cesar A CASE NUMBER: 21-031405

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

SCANNED
FEB 02 2021

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL

SUBJECT: Hernandez Aristizabal, Cesar CASE NUMBER: 21-031405

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? Yes

WHERE WERE YOU GOING? Home

WHAT STREET OR HIGHWAY WERE YOU ON? 4th Street

DIRECTION OF TRAVEL? N WHERE DID YOU START? 4th Street

WHAT TIME DID YOU START? 7:00 WHAT TIME IS IT NOW? 11:00

WHAT IS TODAY'S DATE? 2/2/21 WHAT DAY OF THE WEEK IS IT? Monday

WHAT COUNTY AND CITY ARE YOU IN NOW? San Diego

WHEN DID YOU LAST EAT? 7:00 WHAT DID YOU EAT? Breakfast

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

HOW MUCH DO YOU WEIGH? 180 HAVE YOU BEEN DRINKING? Yes WHAT? Tequila

HOW MUCH? 2 WHERE? Home WITH WHOM? Friends

WHEN DID YOU HAVE YOUR FIRST DRINK? 18 AND YOUR LAST DRINK? 10:00

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? Shot

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

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? Yes HOW MUCH? 2

WHAT? Tequila WHERE? Home WHEN? 11:00

WHAT LINE OF WORK ARE YOU IN? Student WHEN DID YOU LAST WORK? 11:00

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? No WHAT? None

ARE YOU SICK OR INJURED? No WHAT'S WRONG? None

DO YOU LIMP? No DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? No

WERE YOU IN AN ACCIDENT TODAY? No

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN? None

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? No WHO? None WHY? None

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? No WHAT? None WHEN? None

DO YOU HAVE:

- EPILEPSY? No
- GLASS EYE? No
- FALSE TEETH? No
- EAR INFECTION? No
- INNER EAR TROUBLE? No
- DIABETES? No

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? No

DO YOU TAKE INSULIN? No IF SO, WHEN WAS YOUR LAST INJECTION? None

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? No WHERE? None

INTERVIEWER: _____

ALSCANNED
FEB 02 2021

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

I, Investigator LE MARK SMITH, 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 SECOND day of February, 2021, at 3:32 AM

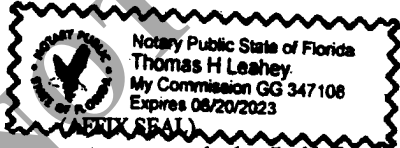
DRIVER CESAR A HERNANDEZ ARISTIZABA
(Type or Print) FIRST MIDDLE OR MAIDEN LAST
DL # H-655-101-83-300-0, state of FL, was placed under lawful arrest for
the offense of DUI by Investigator LE MARK SMITH and
(Name of Arresting Officer)
issued Citation # AEA7B8E

That on or about the SECOND day of February, 2021, at 4:43 AM
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.

Signature of Law Enforcement Officer or
Correctional Officer

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



The foregoing instrument was sworn and subscribed before me:

The foregoing instrument was sworn and subscribed before
me this 02nd day of February, 2021
by Cpl M Smith #9621
who is personally known to me or who has produced
Knann as identification.
Notary Public T. Leahey

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.

SCANNED
FEB 02 2021

WITNESS LIST

CASE NUMBER: 21-031405

ARRESTING OFFICER: Cpl. M. SMITH

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

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

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

NAME: D/S Abbott 36122

ADDRESS: 3228 GUN CLUB RD WEST PALM BEACH FL 33406

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

CAN TESTIFY TO: SUPPLEMENTAL PC

NAME: D/S Torres 36859

ADDRESS 3228 GUN CLUB RD WEST PALM BEACH FL

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

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 _____

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: _____

SCANNED
FEB 07 2023



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

REVIEW COMPLETED BY

| | |
|----------------------------|----------------------------------|
| Booking Number: 2021002718 | Date: 2/02/21 |
| | Specialist Name/ID: J. Beck/9007 |