

0288201 21 CF 344 MB 1439

ARREST / NOTICE TO APPEAR

1. Arrest (No Warrant) 3. Request for Warrant
6. Arrest (Warrant) 4. Request for Capias
2. N.T.A. 5. Juvenile Referral

1

JUVENILE

AD MI NI ST RA TI ON	OBT Number		Agency ORI Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N.T.A.'s only) 3, 2 2021-004825	
D E F E N D A N T	Charge Type: Check as many <input checked="" type="checkbox"/> 1. Felony <input checked="" 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		If Weapon Seized		Multiple Clearance Indicator		Enter Type None/not Applicable	
	Location of Arrest (Including Name of Business) 3200 N FEDERAL HWY, 3200 N FEDERAL HWY, BOCA RATON,				Location of Offense (Business Name, Address) 3200 N FEDERAL HWY, BOCA RATON, FL 33431			
	Date of Arrest 04/23/2021	Time of Arrest 18:03	Booking Date 04/23/2021	Booking Time 18:49	Jail Date 04/23/2021	Jail Time 18:49	Location of Vehicle EMERALD TOWING	
	Name (Last, First, Middle) WEGENER, CHRISTINE ANNA				Alias (Name, DOB, Soc. Sec. #, Etc.)			
C O D E D	Race W - White I - American Indian B - Black O - Oriental/Asian				Sex F	Date of Birth 09/29/1972	Height 5'09	Weight 150
	Eye Color BLUE				Hair Color BLONDE		Complexion LIGHT	Build Medium
	Local Address (Street, Apt. Number) 5211 SAPPHIRE VALLEY, BOCA RATON, FL 33486				Phone (561) 994-3882		Residence Type: 1. City 3. Florida 2. County 4. Out of State 1	
	Permanent Address (Street, Apt. Number) 5211 SAPPHIRE VALLEY, BOCA RATON, FL 33486				Phone (561) 994-3882		Address Source FL DL	
	Business Address (Name, Street) NONE				Phone (954) 242-6900		Occupation	
	DVI Number, State W256101728490 / FL		Sec. Sec. Number		INS Number		Place of Birth (City, State) Germany	
	Citizenship US							
	Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile
	Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth	<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
	J U V E N I L E	<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ Name (Last, First, Middle)				Residence Phone		
<input type="checkbox"/> Legal Custodian				Business Phone				
Address (Street, Apt. Number) (City) (State) (Zip)								
Notified by: (Name)				Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated		
Released To: (Name)				Relationship	Date	Time		
The above address was 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's Office (Phone 355-2526) informed of any change of address.				School Attended				
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Description of Property				
Value of Property								
Drug Activity S. Sell N. N/A P. Possess R. Smuggle B. Buy T. Traffic 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. Synthetic U. Unknown/Other				
C H A R G E		Charge Description FELONY DUI (3RD WITHIN 10 YEARS)				Statute Violation Number 316.193(2B1)		Vehicle # 1000
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number	Board
	N	N	/	1	1	N		
C H A R G E	Charge Description REFUSAL TO SUBMIT TO TESTING; PENALTIES				Statute Violation Number 316.1939(1)		Violation of ORD #	
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number	Board
	N	N	/	1	1	N		
C H A R G E	Charge Description UNLAWFUL COMPENSATION/REWARD FOR OFFICIAL BEHAVIOR				Statute Violation Number 838.016		Violation of ORD #	
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number	Board
	N	N	/	1	1	N		
I N T A K E	Health / Apparent Physical Condition of Defendant FAIR				Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformation <input type="checkbox"/> Injury			
	Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail				PROPERTY - Received By J. CASAS ID818			
	Transported By J. CASAS ID818				Date Transported	Time Transported	Released By J. CASAS ID818	
N O T I C E T O A P P E A R	<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.				Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444			
	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.				Court Date and Time TBD			
	Signature of Defendant (or Juvenile and Parent/Custodian)				Date Signed			
A D M I N	HOLD for Other Agency				Name Verification (Printed by Arrestee)			
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Related Arrest <input type="checkbox"/> Subsidial <input type="checkbox"/> Other				(PRINT)			
	Signature of Arresting Officer CASAS, J. I.D. # 818				Transporting Officer J. CASAS I.D. # 818 Agency BRPD			
Witness here if subject signed with an "X".				PAGE 1 OF 1				

No
Photo
Available

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

OBTS Number		Agency ORI Number FL 0500200		Agency Name BOCA RATON POLICE DEPARTMENT		Agency Report Number 3 2 2021-004825	
Charge Type: Check as many as apply.		<input checked="" type="checkbox"/> 1. Felony <input checked="" 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	
Name (Last, First, Middle) WEGENER, CHRISTINE ANNA		Alias		Race W		Sex F	
Date of Birth 09/29/1972		Charge Description 316.193(2B1) FELONY DUI (3RD WITHIN 10 YEARS)		Charge Description 316.1939(1) REFUSAL TO SUBMIT TO TESTING			
Charge Description 838.016 UNLAWFUL COMPENSATION/REWARD FOR OFFICIAL		Charge Description		Charge Description			
Victim's Name (Last, First, Middle) STATE OF FLORIDA,		Local Address (Street, Apt. Number) 100 NW 2ND AVE, BOCA RATON, FL 33432		City (State)		Zip (Zip)	
Business Address (Name, Street) (561) 338-1234		City (561) -		State (561) -		Zip (561) -	
<p>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.</p> <p>The Person taken into custody...</p> <p><input type="checkbox"/> committed the below acts in my presence.</p> <p><input type="checkbox"/> confessed to admitting to the below facts.</p> <p><input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the 23 day of April, 2021 at 18:03 (Specifically include facts constituting cause for arrest.)</p>							
<p>On 4/23/2021, at approximately 1750 hours, I responded to the area of 3200 N Federal Hwy as a back-up officer for a traffic stop. Upon arrival, I observed that Officer Vick had pulled over a blue 2017 Porsche Macan SUV bearing FL tag DUJ78. Officer Vick informed me that he stopped the vehicle for failing to maintain a single lane per F.S.S. 316.089(1) and following too closely per F.S.S. 316.0895. Officer Vick also stated that the driver, Christine Wegener, displayed obvious signs of impairment upon walking up to the vehicle. Wegener was initially identified by a US passport and later by FL DL in the DAVID system. See Officer Vick's supplement for additional information regarding his involvement and observations.</p>							
<p>I then made contact with Wegener who was still sitting in the driver's seat of the vehicle. I immediately observed that Wegener's speech was thick and slurred, and she had an overwhelmingly strong odor of alcohol emanating from her breath when she spoke. I asked Wegener to remove her sunglasses and observed that her eyes were also red and glassy.</p>							
<p>At first, Wegener stated she was on her way home after praying at a church. I then asked her to repeat where she was coming from and she answered my question by stating that her name was Christine Anne Wegener later confessed to being at the "back yard" in Mizner Park which was actually determined to be Yard House. She said she was with her friends and confessed to consuming one alcoholic beverage. Wegener lost her train of thought while answering my questions and began talking about her father watching over us from heaven.</p>							
<p>Wegener said she was on her way home to Berkley Street in Boca Raton and claimed it was the next right turn at the traffic light. It should be noted that the traffic light she was referring to was NE 32nd St which is approximately 35 blocks away from Berkley Street. Wegener later claimed she lived at the address listed on her FL DL (5211</p>							
SWORN AND SUBSCRIBED BEFORE ME		Notary Public State of Florida Paris Pound My Commission GG-200028 Expires 03/25/2022		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER CASAS, JAVIER (818)		NAME OF OFFICER (PLEASE PRINT)	
DATE 04/23/2021		DATE 04/23/2021		DATE 04/23/2021		PAGE 1 OF 2	

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
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M	Name (Last, First, Middle) WEGENER, CHRISTINE ANNA		Alias	Race W	Sex F	Date of Birth 09/29/1972	
I	<p>Sapphire Valley, Boca Raton, FL, 33486) which is on the complete opposite side of the city.</p> <p>While speaking with Wegener, she made several sexual advancements towards me and offered to have sex with me if I arrested her and took her to jail. She later asked to not be arrested and requested that I take her home or get her an Uber.</p> <p>I asked Wegener to submit to standardized field sobriety exercises and she was non-compliant with my request. I then informed Wegener of her Taylor warnings and she continued to be non-compliant.</p> <p>Based on the totality of the circumstances, I found probable cause to believe that Wegener was operating a vehicle within the state while under the influence alcohol or controlled chemical substances. Wegener was placed under arrest for DUI per F.S.S. 316.193(1a). The charge was later enhanced to Felony DUI per F.S.S. 316.193(2b1) due to this being her third DUI and the last one being within 10 years (2013).</p> <p>While enroute to Palm Beach County Jail, Wegener Offered to pay me \$20,000 in the form of a personal check to drop her off at her residence. She later increased the offer to \$30,000 if I left her on the side of the road and didn't tell anyone. She continually stated that I could buy my wife gifts and go on vacation with the money she would pay me to not take her to jail. Based on Wegener's statements, it was evident that Wegener was offering unlawful compensation or reward in exchange for the nonperformance of my public duty. She is being charged accordingly per F.S.S. 838.016(1).</p> <p>Wegener was transported to Palm Beach County Sheriff's Office DUI Testing Facility where PBSO Breath Operator Pound (#24639) conducted the BAT room procedures. Wegener was asked to provide a breath sample for the purpose of determining its alcohol content and she asked what would happen if she didn't. She was informed of implied consent twice and ultimately stated she would provide a breath sample. When it was time to walk up to the instrument and provide the breath sample, Wegener became non-compliant and was ultimately charged with a refusal to submit to testing. Wegener was informed of her constitutional warnings (Miranda) twice and refused to answer any further questions without an attorney present.</p> <p>Due to Wegener having refused to submit to a lawful test of her breath, urine, or blood in the past, she is additionally being charged with refusal to submit to testing per F.S.S. 316.1939(1).</p> <p>See DUI influence report for further.</p>						
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COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

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

I, OFC. J. CASAS, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of BOCA RATON POLICE SERVICES DEPARTMENT, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 23RD day of APRIL, 20 21, at 1803 ☐ P.M. ☐ A.M.

DRIVER CHRISTINE A WEGENER
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

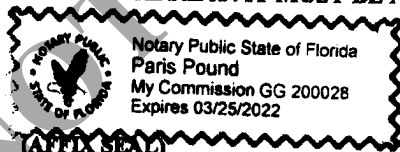
DL# W256101728490, state of FLORIDA, was placed under lawful arrest for
the offense of DUI by OFC. J. CASAS and
issued Citation # A6LQD6E (Name of Arresting Officer)

That on or about the 23RD day of APRIL, 20 21, at 1922 ☐ P.M. ☐ A.M.
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 one (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]
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 23 day of April, 20 21,
by _____,

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

Notary Public [Signature]

HSMV-BAR1001 (REV. 10/2016)

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.



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

PBSO CASE # 21-058545 PBSO ZONE 7-11

AGENCY CASE # 32-2021-004825 CRASH CASE # _____

TIME OF STOP/CRASH 1736 DATE 04/23/2021 DAY _____

SUBJECT'S NAME WEGENER CHRISTINE A RACE W SEX F
LAST FIRST MID

HGT 5'10" WGT 160 DOB 09/29/1972

LOCATION 3200 N FEDERAL HWY

ARRESTING OFFICER'S NAME & ID J. CASAS 818 AGENCY BRPD

DIVISION: SPEC. SERV. - DUI

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 1849

ARREST TIME 1803

BREATH RESULTS:

1)	
2)	
3)	
4)	

TESTING OFFICER'S ID 24639 PBSO VIDEOTAPE # N/A

TESTING FACILITY TASK REPORT

AGENCY: BRPD

SUBJECT: WEGENER, CHRISTINE A

CASE NUMBER: 21-058545

DATE: Apr 23, 2021

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 19:14

ENDING TIME: 19:24

BREATH TESTS RESULTS: 1) R TIME 19:22 A.M. ☐ P.M. ☒ 2) N/A TIME N/A A.M. ☐ P.M. ☐
3) N/A TIME N/A A.M. ☐ P.M. ☐ 4) N/A TIME N/A A.M. ☐ P.M. ☐

BREATH OPERATOR: P.POUND #24639

MAINTENANCE TECHNICIAN: J. KARLECKE# 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: ACCENT

ATTITUDE: TALKATIVE, UPSET, LOUD

CLOTHING: BLUE / RED / WHITE / GREEN DRESS, TAN HEELS

MEDICAL CONDITIONS: HIGH BLOOD PRESSURE

MEDICATIONS: DONT KNOW

OTHER:

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 18:49 HRS.

SUBJECT: REFUSED TO TAKE TEST

A/O: READ I/C TWO TIMES

SUBJECT: STATED SHE UNDERSTOOD I/C AND AGREED TO TAKE TEST

SUBJECT: REFUSED TO COME UP TO TAKE TEST

A/O: CALLED REFUSAL AT 19:22 HRS

A/O: READ RIGHTS TWO TIMES

NO Q&A CONDUCTED

SUBJECT: INVOKED HER RIGHTS TO COUNSEL

**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: 80-006240 Software: 8100.27
Date of Test: 04/23/2021

Date of Last Agency Inspection: 04/09/2021

Observation Period Began: 18:49

Subject's Name: CHRISTINE A WEGENER

DOB: 09/29/1972 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		19:19
	Air Blank	0.000	19:19
	Control Test	0.080	19:19
	Air Blank	0.000	19:20
	Subject Sample #1 REF*		19:21
	Air Blank	0.000	19:22
	Control Test	0.080	19:22
	Air Blank	0.000	19:23
	Diagnostics Check OK		19:23

*Subject Test Refused

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

State of Florida, County of PALM BEACH.

Personally appeared before me the undersigned authority, who (☒) is personally known to me or (☐) produced _____ as identification, and who after being placed under oath, states:

I PARIS D POUND, 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: 04/23/21

Signature

Sworn to (or affirmed) before me this 23rd day of April, 2021

Signature of Notary Public-State of Florida

DFL. J. CASAS
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.

SUBJECT: WEGENER, CHRISTINE A CASE NUMBER: 21-4825

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.

-OR-

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances.

-OR-

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am _____ of the _____.

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X) Read on Camera

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X) Read on Camera

SUBJECT: WEGENER, CHRISTINE A CASE NUMBER: 21-4825

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: Off. J. Casas 818

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL



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

REVIEW COMPLETED BY

Booking Number: 2021009893

Date: 4/24/21

Specialist Name/ID: A. Pinkney/7796