

J-0437724

P-462, 20CT3693 NB

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

1 [] Juvenile [N]

OBTS Number	Agency ORI Number FLO 502600		Agency Name PALM BEACH GARDENS POLICE DEPARTMENT		Agency Report Number (N.T.A.'s only) 78- 20001354	
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	Multiple Clearance Indicator	
Location of Arrest (Including Name of Business) PGA BLVD/MIRASOL DR, PBG, FL			Location of Offense (Business Name, Address) PGA BLVD/MIRASOL DR, PBG, FL			
Date of Arrest 02/29/2020	Time of Arrest 21:54	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle KAUFF'S TOWING & RECOVERY 4301 East Avenue, West Palm Beach, FL 33405

Name (Last, First, Middle) **SCHAEFER, CORY, MICHAEL** Alias (Name, DOB, Soc. Sec. #, Etc.)

Race W - White I - American Indian B - Black O - Oriental/Asian	Sex M	Date of Birth 05/17/1979	Height 6'3	Weight 210	Eye Color BRO	Hair Color BRO	Complexion LIGHT	Build LARGE
---	-----------------	------------------------------------	----------------------	----------------------	-------------------------	--------------------------	----------------------------	-----------------------

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)
N/A

Marital Status **SINGLE** Religion **CATHOLIC** Indication of Alcohol Influence Drug Influence
Y N Unk.

Local Address (Street, Apt. Number) (City) (State) (Zip) 279 NW 11TH ST, BOCA RATON, FL 33432	Phone (561) 445-1430	Residence Type: 1. City 2. County 3. Florida 4. Out of State 2
Permanent Address (Street, Apt. Number) (City) (State) (Zip) 279 NW 11TH ST, BOCA RATON, FL 33432	Phone ()	Address Source VERBAL
Business Address (Name, Street) (City) (State) (Zip) ()	Phone ()	Occupation BARTENDER

D/L Number, State **S160113791770 FL** Soc. Sec. Number **()** INS Number **()** Place of Birth (City, State) **HUNTINGTON, NY** Citizenship **()**

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 Legal Custodian Other:

Name (Last) (First) (Middle) () () ()

Address (Street, Apt. Number) (City) (State) (Zip) () () ()

Business Phone () () ()

Notified by: (Name) () Date () Time ()

Released To: (Name) () Relationship () Date () Time ()

Juvenile Disposition:
1. Handled processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated

The above address provided by defendant and / or defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 365-2628) informed of any change of address.
 Yes, by: (Name) No: (Reason)

School Attended () Grade ()

Property Crime? Yes 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)(A)		Violation of ORD #
Drug Activity N	Drug Type N	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		
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 **APRIL** Day **1** Year **2020** Time **10:00** AM 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) **(Signature)** Date Signed **02/29/2020**

HOLD for other Agency Name:	Signature of Arresting Officer (Signature)	Name Verification (Printed by Arrestee) ()
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:	(PRINT) OFc. ANDREW FLINK 514
Intake Deputy (Signature)	I.D. # () Pouch # ()	Transporting Officer ANDREW FLINK 514 Agency PBPGPD

Witness here if subject signed with an **()**

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A. ONLY)

SCANNED
1 MAR 02 2020
8:00

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 29TH DAY OF FEBRUARY 2020, AT 2114 AM PM

SUBJECT: SCHAEFER, CORY, MICHAEL CASE NUMBER: 20001354

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: Ofc. ANDREW FLINK 514

PERSONAL CONTACT

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

This Officer was dispatched to the area of PGA Blvd and Mirasol Dr, PBG, FL, in regard to a white male slumped over the wheel of a Toyota. Ofc Witt 492, arrived and blocked in the front of the vehicle, a black Toyota sedan (IETA74/FL). Fire Rescue was dispatched and arrived on scene, in the event the driver was having a medical episode. This Officer and Ofc Witt made contact with the driver, later identified via Florida Driver License photo, Cory Schaefer, while he was still in the driver seat of the vehicle while it was on and running.

OBSERVATION OF DRIVER:

Schaefer appeared disoriented, had bloodshot watery eyes, slow slurred speech, flushed red face and the obvious odor of an unknown alcoholic beverage emanating from his breath. It also appeared Schaefer had urinated in his pants, as the front of his pants appeared wet and he had the odor of urine emanating from his person. When asked for his driver license, Schaefer handed a Chase debit card to this Officer. Schaefer then fumbled through the rest of his wallet and dropped several cards, before presenting his license to this Officer. Schaefer was uneasy on his feet and walked with an unsteady gait.

DRIVER'S STATEMENTS:

Schaefer said he was a bar-tending the Honda Classic. Schaefer denied consuming any alcoholic beverages on this night.

ODORS:

Unknown alcoholic beverage, urine.

GENERAL OBSERVATIONS

SPEECH: Slow slurred

ATTITUDE: Compliant

CLOTHING: Black jacket, teal shirt, white under shirt, khaki pants, black sneakers

MEDICAL/OTHER: None stated.

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 29th day of February 2020 by Ofc. ANDREW FLINK

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

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



SCANNED
MAR 02 2020

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|--|--|
| <input type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT | <input type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT |
| <input type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

Not conducted after Taylor Warnings advised

WALK & TURN:

Not conducted after Taylor Warnings advised

ONE LEG STAND:

Not conducted after Taylor Warnings advised

ROMBERG ALPHABET:

Not conducted after Taylor Warnings advised

FINGER TO NOSE:

Not conducted after Taylor Warnings advised

BREATH TEST RESULTS:

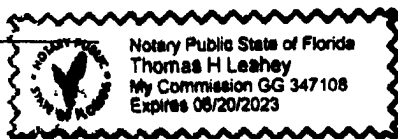
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 29th day of February 2020 by Ofc. ANDREW FLINK

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

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



SCANNED
MAR 02 2020



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

PBSO CASE # 20-044069 PBSO ZONE 3-13

AGENCY CASE # 20001354 CRASH CASE # _____

TIME OF STOP/CRASH 2114 DATE 02/29/2020 DAY SATURDAY

SUBJECT'S NAME SCHAEFER CORY MICHAEL RACE W SEX M
LAST FIRST MID

HGT 6'3 WGT 210 DOB 05/17/1979

LOCATION PGA BLVD/MIRASOL DR, PBG, FL

ARRESTING OFFICER'S NAME & ID Ofc. ANDREW FLINK 514 AGENCY PBGPD

DIVISION: TRAFFIC UNIT

NOTIFIED BY COMMO WALK-IN

ARRIVAL AT FACILITY 2249

ARREST TIME 21:54

BREATH RESULTS:

- 1)
- 2)
- 3) -
- 4) -

REFUSED

BREATH TEST OPERATOR: 7909

SCANNED
MAR 02 2020

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

I, Ofc. ANDREW FLINK, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of Palm Beach Gardens Police Department, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 29th day of February, 2020, at 21:54 P.M. A.M.

DRIVER CORY MICHAEL SCHAEFER
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# S160113791770, state of FL, was placed under lawful arrest for

the offense of DRIVING UNDER THE INFLUENCE by Ofc. ANDREW FLINK and

issued Citation # A56H8JE (Name of Arresting Officer)

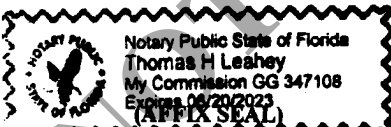
That on or about the 29th day of February, 2020, at P.M. A.M.

in PALM BEACH County,

I requested that the driver submit to a X 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 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 this 29th day of February, 2020,

by Ofc. ANDREW FLINK,

who is personally known to me or who has produced Personally Known as identification

Notary Public [Signature]

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title

Date 02/29/2020

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 MAR 02 2020

TESTING FACILITY TASK REPORT

AGENCY: 1 PC
SUBJECT: Pennington, Cory CASE NUMBER: 20-4400
DATE: 2/27/20 VIDEO TAPE NUMBER: 11
BEGINNING TIME: 2015 ENDING TIME: 2020
BREATH TESTS RESULTS: 1) 1 TIME 2:16 A.M./P.M. 2) 1 TIME --- A.M./P.M.
3) 1 TIME --- A.M./P.M. 4) 1 TIME --- A.M./P.M.
BREATH OPERATOR: G. [unclear]
MAINTENANCE TECHNICIAN: [unclear]

TESTING OFFICER'S OBSERVATIONS

SPEECH: None
ATTITUDE: Cooperative
CLOTHING: Black t-shirt, blue jeans, black shoes, black socks
MEDICAL CONDITIONS: None
MEDICATIONS: None
OTHER: Wearing glasses and a black face mask

REFUSED

COMMENTS: Subject was cooperative and provided the following information:

A stated he received the assignment

at [unclear]

A stated he worked for [unclear]

REFUSED

A stated he worked for [unclear]

A stated he worked for [unclear]

A to [unclear]

A stated he worked for [unclear]

SCANNED
MAR 02 2020

SUBJECT: SCHAEFER, CORY 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? yes

WHERE WERE YOU GOING? to work

WHAT STREET OR HIGHWAY WERE YOU ON? PA 100

DIRECTION OF TRAVEL? E WHERE DID YOU START? PA 100

WHAT TIME DID YOU START? 5-9:00 WHAT TIME IS IT NOW? unknown

WHAT IS TODAY'S DATE? March 1st WHAT DAY OF THE WEEK IS IT? Sunday

WHAT COUNTY AND CITY ARE YOU IN NOW? PA 100

WHEN DID YOU LAST EAT? 5:4 WHAT DID YOU EAT? 1/2 chicken

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? at work

HOW MUCH DO YOU WEIGH? 15 HAVE YOU BEEN DRINKING? no 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? no ARE YOU UNDER THE INFLUENCE? no

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? at work WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? no WHAT? _____

ARE YOU SICK OR INJURED? no WHAT'S WRONG? _____

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? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? no WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? no 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? no

DO YOU TAKE INSULIN? no IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? yes WHERE? Ny.

INTERVIEWER: C. M. ...

SCANNED
MAR 02 2020

SUBJECT: CHASSER, CORV 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 UCC Truck of the FDNY

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) Raul Camacho

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) Raul Camacho

SCANNED
MAR 02 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)
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"/>	539.001(B)(1), 539.003	Other: Pawn Broker Information	
	<input type="checkbox"/>	415.107 (1)	Other: In order to protect the rights of the individual or other persons responsible for the welfare of a vulnerable adult, all records concerning reports of abuse, neglect, or exploitation of the vulnerable adult.	

REVIEW COMPLETED BY

Booking Number: 2020006930	Date: 3/1/2020
	Specialist Name/ID: M. Tooks #8557

SCANNED
2020 02 2020