

0518420

20CT-12578

PCH-1014

ARREST / NOTICE TO APPEAR

ADMI NIST RATI ON	Agency ORF Number 0502300	Agency Name North Palm Beach Police Department	Agency Report Number (N.T.A.'s only) 7, 0 20-000553	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias 1	JUVENILE
DEF END ANT	Charge Type Check in my custody <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	Location of Arrest (Including Name of Business) YACHT CLUB DR/US HWY 1 NPB, FL 33408	Location of Offense (Business Name, Address) 299 YACHT CLUB DR/US HIGHWAY 1, NORTH PALM BEACH, FL 33408	If Weapon Seized NONE	Multiple Clearance Indicator
	Date of Arrest 10/05/2020	Time of Arrest 23:48	Booking Date 10/06/2020	Booking Time 00:08	Jail Date 10/06/2020
	Name (Last, First, Middle) WOOD, DAVID LEE JR		Alias (Name, DOB, Soc. Sec. #, Etc.)		
	Race W - White A - American Indian B - Black O - Oriental/Asian W	Sex M	Date of Birth 08/29/1973	Height 6'01	Weight 300
	Eye Color Blue	Hair Color Brown	Complexion	Build Large	
	Local Address (Street, Apt. Number) 1827 RIDGE ROAD, NORTH PALM BCH, FL 33408	City NORTH PALM BCH, FL	State FL	Zip 33408	Phone (561) 308-9141
	Permanent Address (Street, Apt. Number) 1827 RIDGE ROAD, NORTH PALM BCH, FL 33408	City NORTH PALM BCH, FL	State FL	Zip 33408	Phone (561) 308-9141
	Business Address (Name, Street) W300172733090 / FL	City FAYETTEVILLE, NC	State NC	Zip 27008	Phone (561) 308-9141
	DL Number, State W300172733090 / FL	Soc. Sec. Number	INS Number	Places of Birth (City, State) FAYETTEVILLE, NC	Citizenship US
	Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
	Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian Name (Last, First, Middle)	Address (Street, Apt. Number) 1827 RIDGE ROAD, NORTH PALM BCH, FL 33408			Residence Phone
	Notified by: (Name)	Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT IAC 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.				
	<input type="checkbox"/> Yes, by: <input type="checkbox"/> No:	Property Owner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Description of Property	Value of Property	
	Drug Activity N.N/A P. Possess	S. Sell B. Buy T. Traffic	R. Seizure D. Deliver E. Use	K. Disperse/ 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 Z. Other
	Charge Description DUI - DRIVING UNDER THE INFLUENCE/NORMAL FACULTIES IMPAIRED	State Violation Number 316.193(1)(A)	Violation of ORD #		
	Drug Activity N	Drug Type N	Amount / Unit /	Offense #	Counts 1
	Charge Description DL - SUSPD - DRIVING W/ SUSPND/REVOKD/ CANCLD - W/KNOWL	State Violation Number 322.34(2)(A)	Violation of ORD #		
	Drug Activity N	Drug Type N	Amount / Unit /	Offense #	Counts 1
	Charge Description	State Violation Number	Violation of ORD #		
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts
	Health / Apparent Physical Condition of Defendant	Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries			
	Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond	<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health	<input type="checkbox"/> T.O.T. County Jail	PROPERTY - Received By	Released By
	Transported By	Date Transported	Time Transported	Other	
	<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.	Location (Court, Room) North County PALM BEACH GARD 33410 Court Date and Time 11/04/2020 08:30:00 317 PGM BIVD			
	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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.				No Photo Available
	Signature of Defendant (or Juvenile and Parent/Custodian)				Date Signed
	HOLD for Other Agency	Signature of Arresting Officer Prudhomme	Name Verification (Printed by Arrestee)		
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Related Arrest <input type="checkbox"/> Other	Name of Arresting Officer (Print) PRUDHOMME, D.	ID.# 9889	(PRINT)
	Intake Deputy Spann 8101	ID.# 8101	Pouch #	Transporting Officer PRUDHOMME	ID.# 9889 Agency NPBPD
	Witness here if subject signed with an "X".				PAGE 1 OF 1

SCANNED
OCT 06 2020

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

A D M I N I S T R A T I V E	OBTS Number	Agency ORI Number FL 0502300		Agency Name NORTH PALM BEACH POLICE	Agency Report Number 7 0 20-000553		
	Charge Type: Check as many as apply:	Special Notes:					
D E F E N D E N T	Name (Last, First, Middle) WOOD, DAVID LEE J			Alias	Race W	Sex M	Date of Birth 08/29/1973
	Charge Description 316.193(1)(A) DUI - DRIVING UNDER THE INFLUENCE/NORMAL		Charge Description				
C H A R G E S	Charge Description		Charge Description				
	Charge Description		Charge Description				
V I C T I M	Victim's Name (Last, First, Middle)			Race	Sex	Date of Birth	
	Local Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone	Address Source
P R O B A B L E C A U S E S T A T E M E N T	Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation
	<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. The Person taken into custody . . .</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>5</u> day of <u>October</u>, <u>2020</u> at <u>23:52</u> (Specifically include facts constituting cause for arrest.)</p> <p>On 10/05/2020 at approximately 2316 hours, I observed a grey 2014 Chevy truck, FL tag NRNC65, traveling northbound in the 700 block of US Highway 1, North Palm Beach FL 33408, with no lights on. As I began to follow the vehicle, the vehicle was traveling partially in the right travel lane and partially in the bicycle lane to the right of the travel lane for approximately 1/4 mile. The passenger side tires were one to two feet into the bicycle lane. I then activated my emergency lights and conducted a traffic stop on the vehicle at US Highway 1 and Yacht Club Drive.</p> <p>I made contact with the driver, who was identified by his Florida driver's license as W/M David L Wood Jr (08/29/73). I explained the reason for the traffic stop and requested Wood's driver's license, registration, and proof of insurance. Wood handed me his driver's license and searched for his registration and proof of insurance in the glove box. Wood searched for several minutes for the documents and then stated that he could not find them, even though I observed the registration several times in the stack of papers he was searching through.</p> <p>I observed that Wood's eyes were red and glassy and his speech was slurred. I also detected a strong odor of an unknown alcoholic beverage on his breath as he spoke. I asked Wood if he had consumed any alcohol and he stated that he drank two beers at Pirate's Well. Based on Wood's driving pattern, obvious signs of impairment and admission to consuming alcohol, I requested Police Officer Prud'Homme respond to the scene to conduct a driving under the influence investigation.</p> <p>The subsequent investigation was turned over to Police Officer Prud'Homme. Wood was issued a citation for driving without headlights between sunset and sunrise (Citation ADZ25AE).</p>						
S W O R N A N D S U B S C R I B E D B E F O R E M E	SWORN AND SUBSCRIBED BEFORE ME		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER				
	 PRUDHOMME, DANIEL NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		 COUNCIL, ANDREW (9794) NAME OF OFFICER (PLEASE PRINT)				
DATE		DATE					
<u>10/05/2020</u>		<u>10/05/2020</u>					
		PAGE 1 OF 1					

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P.I.O.

SCANNED
OCT 06 2020

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

I, D Prud'Homme, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

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

or affirm that on or about the 5th day of October, 20 20, at 23:48 P.M. A.M.

DRIVER David Lee Wood
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# W300 172 73 3090, state of FL, was placed under lawful arrest for
the offense of 316.193(1)(A) by D Prud'Homme and
issued Citation # AD225BE
(Name of Arresting Officer)

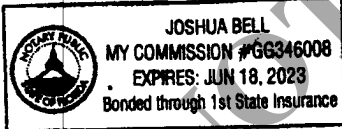
That on or about the 6th day of Oct, 20 20, at 0111 P.M. A.M.

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] 9889
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:

(AFFIX SEAL)
The foregoing instrument was sworn and subscribed before
me this 5th day of October, 20 20,
by D Prud'Homme,

Signature of Attesting Officer

Title _____

Date _____

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

Notary Public [Signature]

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.

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 5TH DAY OF OCTOBER 20 20, AT 2348 AM PM

SUBJECT: Wood, David, Lee CASE NUMBER: 20-000553

AGENCY: NORTH PALM BEACH POLICE DEPARTMENT ARRESTING OFFICER: D Prud'Homme 9889

PERSONAL CONTACT

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

+PC for Stop: Police Sergeant Council stop vehicle (See his PC)

OBSERVATION OF DRIVER:

+Face/Eyes: Bloodshot and glassy eyes

DRIVER'S STATEMENTS:

+Roadsides: "I messed up man"
+Implied Consent Read: Yes

ODORS:

Odor of unknown alcoholic beverage

GENERAL OBSERVATIONS

SPEECH: slurred, thick speech

ATTITUDE: _____

CLOTHING: _____

MEDICAL/OTHER:

STATE OF FLORIDA
COUNTY OF PALM BEACH

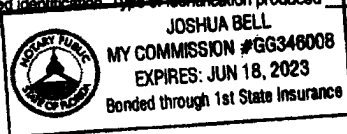
[Signature] 9889
Signature of Arresting/Investigative Officer

This foregoing instrument was sworn to or affirmed and subscribed before me this 5th day of October 2020 by D Prud'Homme

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
OCT 06 2020

SUBJECT: Wood, David, Lee

CASE NUMBER 20-000553

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:

Condition of Eyes: Bloodshot and glassy eyes
Observations: Swayed left to right throughout HGN, Told 3 times to follow with eyes and eyes only, Stopped focusing on pen 4 times (Reminded to follow pen 4x)

WALK & TURN:

- *Lost Balance- Stepped off line while after he was standing in starting position (left foot on line with right foot in front, touching heel to toe)
- *Started Before Instructed- no
- *Missed Heel to Toe- Missed heel to toe on every step of the first nine (9) minus the 3rd step/4th step. Missed every heel to toe on second nine steps.
- *Stepped Off Line- Stepped off line on 2nd, 5th, 6th, 7th, 8th, 9th steps on the first nine. Stepped off line 1st, 2nd, 3rd, 4th, 5th, 6th (stopped at 6 steps out of 9)
- *Used Arms for Balance- Arms were raised throughout the Walk and Turn
- *Wrong Number of Steps- Only took 6 steps on the second 9 steps
- *Stopped While Performing Task- No
- *Improper Turn- Spun on front foot (pivot)

ONE LEG STAND:

- *Put Foot Down- Put foot down 3 times in 6 seconds (task was stopped for his safety)
- *Used Arms for Balance
- *Swayed- Swayed left to right during the instruction stage
- *Hopped- No

Other Observations: Did not count as instructed (Did not count out loud)

FINGER TO NOSE:

- R1 - Finger pad to bridge of nose held it for 5 seconds(secs) (Reminded to bring his hand back down)
- L1- Finger pad to bridge of nose held it for 20secs (Reminded to bring his hand back down)
- R2- Finger pad to bridge of nose held it for 7secs (Reminded to bring his hand back down)
- L2- Finger pad to bridge of nose held it for 12secs
- L3- Started to bring right hand up to nose then stopped to bring the left hand up. Finger pad to bridge of nose held it for 6secs
- R3- Finger pad to bridge of nose held it for 5secs

ROMBERG ALPHABET:

Recited Alphabet as follows: A, B, C, D, E, F, G, A, B, F, N, O, P, Q, V, S, W, Y, Z

BREATH TEST RESULTS: 1) REFUSED 2) REFUSED 3) REFUSED 4) REFUSED

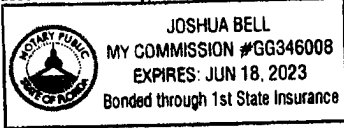
STATE OF FLORIDA
COUNTY OF PALM BEACH

David Prud'Homme 3089
Signature of Arresting/Investigative Officer

The foregoing instrument was sworn to or affirmed and subscribed before me this 5th day of October 2020 by D Prud'Homme

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

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



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OCT 06 2020

DUI WITNESS LIST

Arresting Officer: D Prud'Homme 9889 Email: dprudhomme@village-npb.org

Agency Address: 560 US Hwy 1, NPB FL 33408 Phone: 561-848-2525

Can Testify To: Events of the case

Backup Officer(s): Police Sergeant Council

Agency Address: 560 US Hwy 1, NPB FL 33408 Phone: 561-848-2525

Can Testify To: Events of the case

Breathalyzer Technician: J Bell ID# 8657 Agency: PBSO

DRE: _____ Agency Case #: _____

Agency Address: _____ Phone: _____ Email: _____

Name: _____ Involvement: _____

Address: _____ Phone: _____

Can Testify To: _____ Wheel Witness

Name: _____ Involvement: _____

Address: _____ Phone: _____

Can Testify To: _____ Wheel Witness

Name: _____ Involvement: _____

Address: _____ Phone: _____

Can Testify To: _____ Wheel Witness

Name: _____ Involvement: _____

Address: _____ Phone: _____

Can Testify To: _____ Wheel Witness

Name: _____ Involvement: _____

Address: _____ Phone: _____

Can Testify To: _____ Wheel Witness

Name: _____ Involvement: _____

Address: _____ Phone: _____

Can Testify To: _____ Wheel Witness

Name: _____ Involvement: _____

Address: _____ Phone: _____

Can Testify To: _____ Wheel Witness

NOT A CERTIFIED COPY

SUBJECT: Wood JR, David Lee

CASE NUMBER: 20-000553

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.

SCANNED
OCT 06 2020

SUSPECT'S SIGNATURE: (X) Read on camera

SUBJECT: Wood JR, David Lee CASE NUMBER: 20-000553

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

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

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

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

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

WHAT? _____ WHERE? _____ WHEN? _____

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

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE:

- EPILEPSY? _____
- GLASS EYE? _____
- FALSE TEETH? _____
- EAR INFECTION? _____
- INNER EAR TROUBLE? _____
- DIABETES? _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: Ofc. D. Prud'Homme #9889

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

SCANNED
OCT 06 2020

TESTING FACILITY TASK REPORT

AGENCY: NPPD
SUBJECT: WOOD JR, DAVID LEE
CASE NUMBER: 20-113786
DATE: Oct 6, 2020
VIDEO DVD NUMBER: N/A
BEGINNING TIME: 0107
ENDING TIME: 0111

REFUSED

- BREATH TESTS OR SUIT
- 1) R TIME 0110 A.M. P.M.
 - 2) N/A TIME XX A.M. P.M.
 - 3) N/A TIME XX A.M. P.M.
 - 4) N/A TIME XX A.M. P.M.

BREATH OPERATOR: JOSHUA J BELL #8656
MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED
ATTITUDE: TALKATIVE, MAKING JOKES
CLOTHING: BLUE LONG SLEEVE SHIRT, TAN CARGO SHORTS, BLACK SNEAKERS
MEDICAL CONDITIONS: NONE
MEDICATIONS: NONE

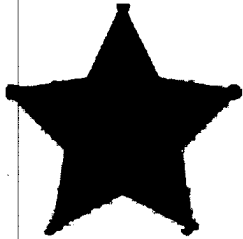
OTHER:

EYES: BLOODSHOT,
ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

COMMENTS:

ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0045 HOURS
SUBJECT STATED HE WOULD NOT TAKE BREATH TEST
A/O READ I.C
SUBJECT STATED HE UNDERSTOOD I.C AND REFUSED TO TAKE BREATH TEST
A/O READ RIGHTS
SUBJECT STATED HE UNDERSTOOD HIS RIGHTS
SUBJECT DECLINED TO ANSWER Q AND A

SCANNED
REFUSED
OCT 06 2020



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

PBSO CASE # 20-113786 PBSO ZONE 3-13

AGENCY CASE # 20-000553 CRASH CASE # N/A

TIME OF STOP/CRASH 2316 DATE 10/05/20 DAY MONDAY

SUBJECT'S NAME WOOD JR, DAVID LEE RACE W SEX M

HGT 6'1 WGT 300 DOB 08/29/1973

LOCATION YACHT CLUB DR / US HWY 1

ARRESTING OFFICER'S NAME & ID OFC. D. PRUD'HOMME #9889 AGENCY NPBPD

DIVISION: PATROL

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0045

BREATH RESULTS: Arrest Time 2348

1. REFUSED
2. REFUSED
3. REFUSED
4. REFUSED

TESTING OFFICER'S ID BELL 8656

NOT A CERTIFIED COPY

SCANNED
OCT 06 2020



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"/>	F.C. Art. 1, Sect 16	Other: Marsy's Law	
	<input type="checkbox"/>	119.071(2)(M)	Other: Personal identifying information of a witness to a murder.	

REVIEW COMPLETED BY

Booking Number: 2020023552	Date: 10/06/2020
	Specialist Name/ID: VARGO/6665

SCANNED
OCT 06 2020

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