

2 ICT 15577 SB

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

A D M I N I S T R A T I O N	OBTS Number		Agency ORI Number <b>0500200</b>		Agency Name <b>Boca Raton Police Department</b>		Agency Report Number (N.T.A.'s only) <b>3, 2 2021-010758</b>	
	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		If Weapon Seized Enter Type: <b>UNARMED</b>	
D E F E N D A N T	Location of Arrest (Including Name of Business) <b>400 W PALMETTO PARK RD, BOCA RATON FL 33400-W</b>				Location of Offense (Business Name, Address) <b>400 W PALMETTO PARK RD, BOCA RATON, FL 33432</b>			
	Date of Arrest <b>09/15/2021</b>	Time of Arrest <b>02:31</b>	Booking Date <b>09/15/2021</b>	Booking Time <b>02:41</b>	Jail Date <b>09/15/2021</b>	Jail Time <b>04:50</b>	Location of Vehicle <b>WESTWAY</b>	
C O D E F E N D E D	Name (Last, First, Middle) <b>OBREGON, EDGARDO ANDRE</b>				Alias (Name, DOB, Soc. Sec. #, Etc.) Alias:			
	Race W - White B - Black	Sex <b>M</b>	Date of Birth <b>05/30/1999</b>	Height <b>5'07</b>	Weight <b>180</b>	Eye Color <b>BROWN</b>	Hair Color <b>BLACK</b>	Complexion <b>MEDIUM</b>
	Sears, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>None</b>				Marital Status <b>S</b>	Religion <b>UNKNOWN</b>	Indication of Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
	Local Address (Street, Apt. Number) (City) (State) (Zip) <b>2600 GREENWOOD TER G109, BOCA RATON, FL 33431</b>				Phone			
	Permanent Address (Street, Apt. Number) (City) (State) (Zip) <b>2600 GREENWOOD TER G109, BOCA RATON, FL 33431</b>				Phone			
	Business Address (Name, Street) (City) (State) (Zip) <b>STUDENT,</b>				Occupation <b>DEFENDANT</b>			
	D/L Number, State <b>0162201991900 / FL</b>		Soc. Sec. Number		INS Number		Place of Birth (City, State) <b>MIAMI, FL, United</b>	
	Citizenship <b>US</b>		Race		Sex		Date of Birth	
	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
	Name (Last, First, Middle)		Race		Sex		Date of Birth	
Relationship		Date		Time		Residence Phone		
Address (Street, Apt. Number) (City) (State) (Zip)		Date		Time		Business Phone		
Notified by: (Name)		Date		Time		Residence Phone		
Released To: (Name)		Date		Time		Business Phone		
Relationship		Date		Time		Residence Phone		
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		Grade		Value of Property		
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property		Value of Property		
Drug Activity		S. Sell		R. Smuggle		K. Disperse/Distribute		
N. N/A		B. Buy		D. Deliver		M. Manufacture/Produce/Cultivate		
P. Possess		T. Traffic		E. Use		Z. Other		
Drug Type		B. Barbiturate		H. Hallucinogen		F. Paraphernalia/Equipment		
N. N/A		C. Cocaine		M. Marijuana		U. Unknown		
A. Amphetamine		E. Heroin		O. Opium/Deriv.		Z. Other		
S. Synthetic		U. Unknown		Z. Other		Z. Other		
Charge Description <b>DUI (ENHANCED)</b>		Statute Violation Number <b>316.193(4)</b>		Violation of ORD #		Violation of ORD #		
Drug Activity		Drug Type		Amount / Unit		Offense #		
N						<b>2021-010758</b>		
Counts		Domestic Violence		Warrant / Capias Number		Bond		
1		<input type="checkbox"/> Y <input checked="" type="checkbox"/> N						
Charge Description		Statute Violation Number		Violation of ORD #		Violation of ORD #		
Drug Activity		Drug Type		Amount / Unit		Offense #		
Counts		Domestic Violence		Warrant / Capias Number		Bond		
		<input type="checkbox"/> Y <input type="checkbox"/> N						
Health / Apparent Physical Condition of Defendant <b>GOOD</b>		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		Explain:		Explain:		
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 checked="" type="checkbox"/> T.O.T. County Jail		PROPERTY - Received By <b>HARRISON</b>		
Transported By <b>MCHUGH</b>		Date Transported <b>09/15/2021</b>		Time Transported <b>04:50</b>		Released By <b>PBCJ</b>		
INSTRUCTION NO. 1 - Mandatory appearance in court INSTRUCTION NO. 2 - You need not appear in court but must comply with instructions on Page 2.		Location (Court, Room) <b>South County 200 W Atlantic Ave Delray Beach, FL 33444</b>		Court Date and Time <b>10/12/2021 08:30:00</b>		No Photo Available		
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)		Date Signed		No Photo Available		
HOLD for Other Agency		Signature of Arresting Officer <b>D. M. Harrison</b>		Name Verification (Printed by Arrestee)		Name Verification (Printed by Arrestee)		
<input type="checkbox"/> Dangerous <input type="checkbox"/> Seizural		<input type="checkbox"/> Released Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) <b>HARRISON, D. M.</b>		LD. # <b>856</b>		
Intake Deputy <b>J. M. ...</b>		LD. #		Pouch #		Transporting Officer <b>MCHUGH</b>		
						LD. # <b>153</b>		
						Agency <b>BRPD</b>		
						Witness here if subject signed with an "X".		

1575939

3165

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

OBTS Number	Agency ORI Number <b>FL 0500200</b>		Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>	Agency Report Number <b>3   2   2021-010758</b>
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Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	Special Notes:
	<input type="checkbox"/> 2. Traffic Felony	<input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other	

Name (Last, First, Middle) <b>OBREGON, EDGARDO ANDRE</b>	Alias	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>05/30/1999</b>
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Charge Description <b>316.193(4). DUI (ENHANCED)</b>	Charge Description
Charge Description	Charge Description

Victim's Name (Last, First, Middle) <b>STATE OF FLORIDA,</b>	Race <b>U</b>	Sex <b>U</b>	Date of Birth
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Local Address (Street, Apt. Number) <b>100 NW 2ND AVE, BOCA RATON, FL 33432</b>	(City)	(State)	(Zip)	Phone <b>(561) 338-1234</b>	Address Source
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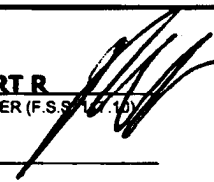

Business Address (Name, Street)	(City)	(State)	(Zip)	Phone <b>(561) -</b>	Occupation
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The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.  
The Person taken into custody ...  
 committed the below acts in my presence.  was observed by \_\_\_\_\_ who told \_\_\_\_\_ that he/she saw the arrested person commit the below acts.  
 confessed to \_\_\_\_\_ admitting to the below facts.  was found to have committed the below acts, resulting from my (described) investigation.  
On the **15** day of **September**, **2021** at **02:31** (Specifically include facts constituting cause for arrest.)

On 09/15/2021 at approximately 0201 hours, I responded to the area of 400 W Palmetto Park Rd to assist Sgt Smith with a traffic stop which he conducted.

Upon my arrival, Sgt Smith advised the following: On 09/15/2021 at approximately 0147 hours, he observed a gray Volkswagon perform an improper start while driving, at which point he conducted a traffic stop on the gray Volkswagon bearing FL tag HXZZ40, which came to a stop on W Palmetto Park Rd at approximately the 400 block, westbound. Sgt Smith advised that he observed white male later identified by his FL DL to be Edgardo A. Obregon (DOB: 05/30/1999) to be the driver of the vehicle and sole occupant. The vehicle was running with keys in the vehicle. While Sgt Smith spoke with Obregon, Obregon told Sgt Smith that he was coming from The Standard, a local bar in Boca Raton. Sgt Smith further advised he could smell a strong odor of alcohol emanating from the vehicle and the driver side of the vehicle. Sgt Smith also observed several open alcoholic cans in the vehicle. When Sgt Smith asked Obregon for his license, registration, and insurance for the traffic stop, Obregon handed Sgt Smith his vehicle registration, FL DL, and his health insurance card, not his car insurance card. When Sgt Smith asked Obregon for his vehicle insurance, Obregon handed him an old insurance card. See Sgt Smith's supplemental report and In-Car video for further details.

I then spoke to Obregon, who was still seated in the driver seat of the vehicle. Before asking Obregon any questions, Obregon told me he had only one alcoholic beverage. I could immediately smell a strong odor of alcohol emanating from the driver side of the vehicle, and I noticed his eyes were bloodshot red and glossy. I then asked him what kind of alcoholic beverage, and he replied it was "vodka with red bull." I then asked him where he was coming from, and he replied The Standard. I asked if he had the one alcoholic beverage at the Standard, and he replied yes. I then asked where he was heading to, and he said he was going home in Boca Raton. I asked him when the last time he ate was, and he replied at approximately 1900 hours today. I then told Obregon that I

SWORN AND SUBSCRIBED BEFORE ME		
<b>VOLGUARDSON, ROBERT R</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
<b>09/15/2021</b> DATE		<b>HARRISON, DANIELLE MARIE (856)</b> NAME OF OFFICER (PLEASE PRINT)
		<b>09/15/2021</b> DATE

<b>OBTS Number</b>	<b>Agency Name</b>	<b>Agency Report Number</b>
<b>FL 0500200</b>	<b>BOCA RATON POLICE DEPARTMENT</b>	<b>3   2   2021-010758</b>
<b>Charge Type:</b> Check as many as apply.		<b>Special Notes:</b>
<input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		

<b>Name (Last, First, Middle)</b>	<b>Race</b>	<b>Sex</b>	<b>Date of Birth</b>
<b>OBREGON, EDGARDO ANDRE</b>	<b>W</b>	<b>M</b>	<b>05/30/1999</b>

was concerned for his ability to drive, so I asked him to step outside of his vehicle to speak with me. Obregon then stepped outside of his vehicle.


Once outside of his vehicle, I observed Obregon to be swaying a bit. I then asked Obregon if he would be willing to perform field sobriety tasks to dispel my alarm that he was under the influence and impaired. Obregon advised he would perform the tasks. I then asked if Obregon had any physical injuries or impairments that would impair his ability to walk, stand, or balance. He replied no. I then asked if he had any glasses or contact lenses to correct his vision, and he replied his vision was perfect. I then asked if he was taking any prescription medications, and he replied he was not. I asked what his highest level of education was, and he replied he has a high school diploma and has college credits as a senior in college now. I then asked if English was his primary language, and he replied he speaks both Spanish and English. I asked if he was able to read, write, speak, and understand English without issue, and replied yes. While speaking with Obregon, I could smell a strong odor of alcohol emanating from Obregon's breath and person. Obregon advised he was comfortable in his shoes. Obregon told Ofc Price that he did not have any medical conditions.

I then walked Obregon over to a solid white line on a flat, dry surface and well-lit. The roadside field sobriety tasks were captured on my In-Car Video as well. I performed and demonstrated each task before he attempted them.

The first task was the Horizontal Gaze Nystagmus. After explaining the instructions to Obregon, I asked Obregon what was it that I wanted him to do. Obregon replied that he was going to "walk straight." I replied saying no, there is no walking for this task. Obregon then replied he was going to stare at the "light." I replied saying no, there is no light, and I told him again that I wanted him to stare at the tip of the pen. During the task, Obregon would move his head slightly while following the tip of the pen stimulus with his eyes.

The second task was the Walk and Turn. Obregon did not maintain the start position and moved from it multiple times after I told him not to move from the starting position until I told him to. I then explained the instructions and demonstrated the task in front of him two times, once towards him on the solid white line and another time sideways so he could see my heel-to-toe steps. While performing this task, Obregon stepped off the line several times and used his hands to balance. While making the turnaround, he made an improper turn by not keeping his left foot on the solid white line as I explained and demonstrated in front of him. He took nine steps forward and nine steps back, counting out loud properly to nine each time.

The third task was Rhomberg Balance (estimate thirty sequence). I showed Obregon prior to start what 30 seconds looks like on my timer. He acknowledged he understood the instructions. Obregon estimated 30 seconds in 33 seconds.

SWORN AND SUBSCRIBED BEFORE ME  <b>VOLGUARDSON, ROBERT R</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.3)  <b>09/15/2021</b> DATE	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  <b>HARRISON, DANIELLE MARIE (856)</b> NAME OF OFFICER (PLEASE PRINT)  <b>09/15/2021</b> DATE
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PROBABLE CAUSE AFFIDAVIT  
SUPPLEMENT

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

1

JUVENILE


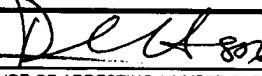
OBTS Number	Agency ORI Number <b>FL 0500200</b>		Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>	Agency Report Number <b>3   2   2021-010758</b>
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 3. Misdemeanor	<input checked="" type="checkbox"/> 4. Traffic Misdemeanor
	<input type="checkbox"/> 5. Ordinance	<input type="checkbox"/> 6. Other	Special Notes:	

Name (Last, First, Middle) <b>OBREGON, EDGARDO ANDRE</b>	Alias	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>05/30/1999</b>
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The fourth task was the Rhomberg Alphabet. Obregon recited the English alphabet from A to Z without issue.

The fifth task was the Finger-to-Nose (L-R-L-R-R-L). Upon asking Obregon if he understood the instructions, Obregon advised and showed me which hand was his left and which hand was his right. He also showed me what his left index finger was and what his right index finger was. He then showed me what the tip of the index finger on each hand was, and what the tip of his nose was. When I asked what was it that I wanted him to do, he said "whatever hand you say, I touch my nose." I then asked, "what part of your nose?" He replied, "index finger." On the first left, he missed the tip of his nose. Each time he brought his index finger up to his nose, he would move his head towards that direction. So, when I said "left" and he brought his left index finger up, he would move his head to the left. He also did not keep his head slightly tilted back as I told him to.

Based on information above, I placed Obregon under arrest for DUI. I handcuffed Obregon and checked for proper fit and double-locked. Ofc Maranges and Ofc Price conducted a search of Lowe's person and then placed him into the back of my marked police vehicle. I then conducted an inventory search of Obregon's vehicle due to his vehicle being in the roadway, impeding traffic. During the inventory search, I found a yellow and blue "Twisted Tea 5% alcohol" opened alcoholic can in the rear passenger door pocket. I also found an orange "Smirnoff Ice Smash 8%" opened alcoholic can and a white "Coors light ~4%" opened alcoholic can both in the rear driver side door pocket. Photos of these cans were captured on my MVR body camera. I then transported Obregon to BRPD booking for a BAT. Ofc Price and Ofc Horne responded to the BRPD BAT booking at the breath tech operators. Upon arrival to the BRPD booking facility, I conducted a 20-minute observation. Obregon was then taken into the BAT room. Obregon agreed to provide a breath sample. Obregon provided two breath samples of 0.177 and 0.184. I then read his Constitutional Warnings which he advised he understood, and he declined to answer my questions. See DUI Influence report. Edgardo A. Obregon is being charged under F.S.S. 316.193(4) for DUI (above 0.15). I issued Obregon a DUI citation for Driving While Intoxicated. Obregon was also issued a citation for Improper Start from Parked/Stopped/Standing Position pursuant to F.S.S. 316.154 by Sgt Smith (citation # ADR40XE), which was the reason for the traffic stop. Ofc Maranges assisted with the inventory of the vehicle, which was then later towed by Westway Towing (See Ofc Maranges, Ofc Price, and Ofc Horne's supplemental reports for further details).

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME		
	<b>VOLGUARDSON, ROBERT R</b>		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.05)		<b>HARRISON, DANIELLE MARIE (856)</b>
	<b>09/15/2021</b>		NAME OF OFFICER (PLEASE PRINT)
	DATE	<b>09/15/2021</b>	DATE

FLORIDA DEPARTMENT OF LAW ENFORCEMENT  
ALCOHOL TESTING PROGRAM  
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000  
Instrument Registered To: BOCA RATON PD  
Instrument Serial Number: 80-006622 Software: 8100.27  
Date of Test: 09/15/2021

Date of Last Agency Inspection: 08/27/2021  
Observation Period Began: 02:55  
Subject's Name: EDGARDO A OBREGON

DOB: 05/30/1999 Sex: M

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	03:25
	Air Blank	0.000	03:26
	Control Test	0.079	03:26
	Air Blank	0.000	03:26
	Subject Sample #1	0.177	03:29
	Air Blank	0.000	03:30
	Air Blank	0.000	03:31
	Subject Sample #2	0.184	03:32
	Air Blank	0.000	03:33
	Control Test	0.077	03:33
	Air Blank	0.000	03:34
	Diagnostics Check	OK	03:34

Cylinder Lot: 22419080A3  
Exp: 10/05/2021

State of Florida, County of Palm Beach

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

I DANIEL X PRICE, 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: [Signature] Date: 09/15/21  
Signature

Sworn to (or affirmed) before me this 15 day of September, 2021

Signature of Notary Public-State of Florida [Signature] Printed Name of Notary Public-State of Florida Dr. D. Harrison

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.

Arresting Ofc: Ofc. Harrison

Breath tech: Ofc. Price

1015 time: 0231

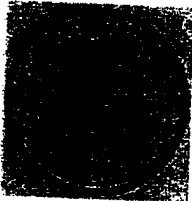
BRPD Case number: 21-10758

## DUI INFLUENCE REPORT



BOCA RATON POLICE SERVICES DEPARTMENT

100 NW 2<sup>nd</sup> Avenue  
Boca Raton, FL 33432



BOCA RATON POLICE SERVICES DEPARTMENT  
DUI INFLUENCE REPORT - PART I

On the 15 day of September, at 0231 AM PM:

Subject: Obregon, Edgardo A. Case Number: 2021-010758

PERSONAL CONTACT

Driving Pattern: See PC  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Observation of Driver: See PC  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Driver's Statement: See PC  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Odors: See PC  
\_\_\_\_\_  
\_\_\_\_\_

GENERAL OBSERVATIONS

Speech: See PC  
Attitude: see PC  
Clothing: see PC  
Medical Problems: see PC  
Medications: see PC  
Other: \_\_\_\_\_

NOT A CERTIFIED COPY

Horizontal Gaze Nystagmus:

- Left eye does not follow smoothly
- Left eye jerks at 45 degrees angle or less
- Distinct jerking left eye maximum deviation

- Right eye does not follow smoothly
- Right eye jerks at 45 degrees angle or less
- Distinct jerking right eye maximum deviation

Can not do, Why? \_\_\_\_\_

Walk and turn: see PC

Can not do, Why? \_\_\_\_\_

One leg stand: see PC

Can not do, Why? \_\_\_\_\_

Finger to nose: see PC

Can not do, Why? \_\_\_\_\_

Alphabet (speech pattern): see PC

Can not do, Why? \_\_\_\_\_

Breath/Blood test results: 0.177 and 0.184

State of Florida, County of Palm Beach,  
Sworn and subscribed before me this September (date) by 15, 2021

Officer Price  
Notary/Clerk of Court/ Officer (FSS 117.10) \_\_\_\_\_ Date 09/15/21

X [Signature] 886  
Signature of Arresting Officer \_\_\_\_\_ Name of Officer (print) D. HARRISON

ARRESTING OFFICER: Harrison # 856

Name: Sgt Smith Phone # 561-368-1234 Work # \_\_\_\_\_

Address: 100 NW 2nd Ave, Boca Raton FL 33432

Can testify to: Driving Pattern, Personal contact

Name: Off Manges Phone # 561-368-1234 Work # \_\_\_\_\_

Address: Same as above

Can testify to: SFST'S

Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Work # \_\_\_\_\_

Address: \_\_\_\_\_

Can testify to: \_\_\_\_\_

Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Work # \_\_\_\_\_

Address: \_\_\_\_\_

Can testify to: \_\_\_\_\_

Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Work # \_\_\_\_\_

Address: \_\_\_\_\_

Can testify to: \_\_\_\_\_

Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Work # \_\_\_\_\_

Address: \_\_\_\_\_

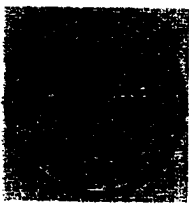
Can testify to: \_\_\_\_\_

Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Work # \_\_\_\_\_

Address: \_\_\_\_\_

Can testify to: \_\_\_\_\_

NOT A CERTIFIED COPY



BOCA RATON POLICE SERVICES DEPARTMENT  
DUI INFLUENCE REPORT - PART II

To be filled out at testing facility

Agency Case # 2021-010758

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is September, Wednesday, 15, 2021 or  
(day) (month) (date) (year)

B. The time is now approximately 0318 AM/PM.

C. The following is in reference to case number 2021-010758

D. Present at this time is Officer Harrison of the Boca Raton Police Department.  
(Officer's Name)

E. Officer Harrison, have you arrested Edgardo Obregon in violation of  
Florida State Statute 316.193? (Defendant's name)

F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida? yes

G. Mr./Mrs./Ms. Edgardo Obregon, I am required to inform you these  
proceedings are being video recorded.

Operator Note: Video record breath request, breath sample, and interview.

NOT A CERTIFIED COPY

**II. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.**

*Note: Read only the paragraph applicable to the type of test you are requesting.*

- A. I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.
- B. I am now requesting that you submit to a lawful test of your URINE for the purpose of determining the presence of chemical or controlled substances.
- C. I am now requesting that you submit to a lawful test of your BLOOD for the purpose of determining its alcohol content and the presence of chemical or controlled substances.

**IMPLIED CONSENT WARNINGS**

*Note: Read only if the subject does not comply with your request.*

I am Off. Harrison of the Boca Raton PD.

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 Signature: Subject provided sample

*Note: Also read for CDL holders:*

IN ADDITION, your refusal to submit will result in the loss of your commercial privileges for one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from operating a commercial motor vehicle.

*Note: After reading the implied consent warning, the arresting officer must request a breath sample again.*

**(IF REFUSAL THEN)**

At this time Mr./Mrs./Ms. \_\_\_\_\_ has refused to submit to a breath test.

The date is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, and the time is \_\_\_\_\_ AM/PM.  
(month) (day) (year)

A refusal form will be completed by the arresting officer.



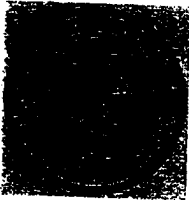
BOCA RATON POLICE SERVICES DEPARTMENT  
JUVENILE CONSTITUTIONAL WARNINGS

**Rights of suspects prior to custodial questioning.**  
**Identify yourself and state:**

I am required to warn you before you make any statement that you have the following Constitutional rights:

- (1) You have the right to remain silent and not answer any questions. *Tell me in your own words what you think this means. (You do not have to talk to me or answer any questions about this offense. You can be quiet if you want.)*
- (2) Any statement you make must be freely and voluntarily given. *Tell me in your own words what you think this means. (If you do talk to me it has to be because you want to and not because anyone is forcing you to speak.)*
- (3) You have a right to the presence and representation of a lawyer of your choice before you make any statement and during any questioning. *Tell me in your own words what you think this means. (You can talk to a lawyer before we ask you any questions and you can have him/her with you now, during our questioning.)*
- (4) If you cannot afford a lawyer, you are entitled to the presence and representation of a court appointed lawyer before you make any statement and during any questioning. *Tell me in your own words what you think this means (If you do not have money for a lawyer and you want one, a lawyer will be given to you for free.)*
- (5) If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent. *Tell me in your own words what you think this means. (If you decide to talk to me then change your mind, you can stop answering my questions at any time.)*
- (6) I can make no threats or promises to induce you to make a statement. This must be of your own free will. *Tell me in your own words what you think this means (I am not allowed to threaten you or make you any promises to get you to talk to me. If you decide to talk, it must be because you want to.)*
- (7) Any statement can be and will be used against you in a court of law. *Tell me in your own words what you think this means (Anything you say to me can and will be told to the judge or a jury in court. A judge is a person who decides if you have done something wrong. Sometimes a group of people called a jury decide this, but the Judge is the person who decides what punishment you get.)*
- (8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_



BOCA RATON POLICE SERVICES DEPARTMENT  
TESTING FACILITY TASK REPORT

SUBJECT: Edgardo Obregon

CASE #: 2021-010750 DATE: 09/15/21

BREATH TEST RESULTS

1) TIME .177 0329 AM/PM 2) TIME .184 0332 AM/PM

3) TIME \_\_\_\_\_ AM/PM 4) TIME \_\_\_\_\_ AM/PM

BREATH OPERATOR: Officer Price

MAINTENANCE TECHNICIAN: Officer Van Camp

TESTING OFFICER'S OBSERVATIONS

SPEECH: Odor of alcohol

ATTITUDE: Calm

CLOTHING: Gray and Black shirt, Dark Jeans, no shoes

MEDICAL CONDITION: None

OTHER: N/A

COMMENTS: N/A

NOT A CERTIFIED COPY

**Identify yourself and state:**

I am required to warn you before you make any statement that you have the following Constitutional rights:

- (1) You have the right to remain silent and not answer any questions.
- (2) Any statement you make must be freely and voluntarily given.
- (3) You have a right to the presence and representation 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 and representation of a court appointed lawyer before you make any statement 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 be and will be used against you in a court of law.
- (8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: Read on Camera Date: 09/15/21 Time: 0333

**QUESTIONS AND ANSWERS**

Were you operating a motor vehicle at the time of the accident/stop? \_\_\_\_\_

Where were you going? \_\_\_\_\_

What street or highway were you on? \_\_\_\_\_

Direction of travel? \_\_\_\_\_

Where did you start driving from? \_\_\_\_\_

What city (county) were you stopped in? \_\_\_\_\_

What time did you start? \_\_\_\_\_ AM/PM What time is it now? \_\_\_\_\_

What is today's date? \_\_\_\_\_ What day of the week is it? \_\_\_\_\_

When did you last eat? \_\_\_\_\_ What did you eat? \_\_\_\_\_

What have you been doing the past three hours prior to this stop/accident? \_\_\_\_\_

How much do you weigh? \_\_\_\_\_ Have you been drinking? \_\_\_\_\_ What were you drinking? \_\_\_\_\_

How much? \_\_\_\_\_ Where? \_\_\_\_\_ With whom were you drinking? \_\_\_\_\_

When did you have your first drink? \_\_\_\_\_ AM/PM When did you stop drinking? \_\_\_\_\_ AM/PM

How did you consume your last two drinks? \_\_\_\_\_

Are you under the influence of alcohol now?  Yes  No

Can you feel the effects of alcohol?  Yes  No

Have you consumed alcohol since the accident?  Yes  No

Can you feel the effects of alcohol?  Yes  No

Have you consumed alcohol since the accident?  Yes  No How much? \_\_\_\_\_

What? \_\_\_\_\_ Where? \_\_\_\_\_

What line of work are you in? \_\_\_\_\_

When did you last work? \_\_\_\_\_

Do you have any physical defects or injuries?  Yes  No If yes, explain: \_\_\_\_\_

Are you sick or injured?  Yes  No If yes, explain: \_\_\_\_\_

Do you limp?  Yes  No Did you get a bump on the head?  Yes  No

Were you in an accident today? \_\_\_\_\_

Have you taken any drugs or smoked marijuana today? \_\_\_\_\_

What? \_\_\_\_\_ When? \_\_\_\_\_

Have you seen a doctor or dentist today?  Yes  No Who? \_\_\_\_\_

Are you taking any prescription medications?  Yes  No What? \_\_\_\_\_ When? \_\_\_\_\_

Do you have: Epilepsy?  Yes  No Inner ear trouble?  Yes  No

Glass eye?  Yes  No Ear infection?  Yes  No

False teeth?  Yes  No Diabetes?  Yes  No

Any problems not correctable by glasses or contact lenses? \_\_\_\_\_

Do you take insulin?  Yes  No If yes, when was your last injection? \_\_\_\_\_

Have you ever had a driver's license in any other state? \_\_\_\_\_

I am now ending this video recording. The time is now approximately 0334 AM/PM.

The date is September, 15, 2021.  
(month) (day) (year)



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

**REVIEW COMPLETED BY**

ooking Number: 2021023015

Date: 9/16/2021

Specialist Name/ID: M. Tooks #8557