

ADMI NIST RAT ION	OBTS Number <b>0525879</b>	ARREST / NOTICE TO APPEAR <b>21CT 15 287 mb</b>		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	0	JUVENILE	
	Agency ORI Number <b>0500800</b>	Agency Name <b>West Palm Beach Police Department</b>	Agency Report Number (N.T.A.'s only) <b>9 / 4 / 2021-0013122</b>		If Weapon Seized Enter Type <b>UNARMED</b>		Multiple Clearance Indicator	
DEF END ANT	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	Location of Arrest (Including Name of Business) <b>222ND ST/SPRUCE AVE, WPB, FL</b>		Location of Offense (Business Name, Address) <b>500 222ND ST/SPRUCE AVE, WEST PALM BEACH, FL 33401</b>		
	Date of Arrest <b>09/11/2021</b>	Time of Arrest <b>22:46</b>	Booking Date <b>09/11/2021</b>	Booking Time <b>22:56</b>	Jail Date	Jail Time	Location of Vehicle	
D E F E N D E N T	Name (Last, First, Middle) <b>BEATTIE, EDWARD TASKER</b>		Alias: Alias (Name, DOB, Soc. Sec. #, Etc.)		Race W - White B - Black O - Asian <b>W</b>			
	Sex <b>M</b>	Date of Birth <b>06/10/1959</b>	Height <b>5'10</b>	Weight <b>220</b>	Eye Color <b>BROWN</b>	Hair Color <b>BROWN</b>	Complexion <b>FAIR</b>	
D E F E N D E N T	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status	Religion	Indication of Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>			
	Local Address (Street, Apt. Number) <b>1801 N FLAGLER DR 202, WEST PALM BEACH, FL 33407</b>		(City)	(State)	(Zip)	Home Phone		
D E F E N D E N T	Permanent Address (Street, Apt. Number) <b>1801 N FLAGLER DR 202, WEST PALM BEACH, FL 33407</b>		(City)	(State)	(Zip)	Mobile Phone		
	Business Address (Name, Street)		(City)	(State)	(Zip)	Work Phone		
D E F E N D E N T	D/I. Number, State <b>B300238592100 / FL</b>	Soc. Sec. Number	INS Number	Place of Birth (City, State) <b>WEST PALM BEACH, FL</b>		Citizenship <b>U.S.</b>		
	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		
D E F E N D E N T	Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor		
	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		
J U V E N I L E	<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ <input type="checkbox"/> Legal Custodian		Name (Last, First, Middle)		Residence Phone			
	Address (Street, Apt. Number)		(City)	(State)	(Zip)	Business Phone		
J U V E N I L E	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			
C O D E	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			
	<input type="checkbox"/> Yes, by: _____ <input type="checkbox"/> No: _____		Property Crime? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Description of Property <b>VEHICLE</b>		Value of Property <b>\$3,000</b>		
C H A R G E	Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Disperses/ 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				
C H A R G E	Charge Description <b>DUI-DAMAGE TO PERSON/PROPERTY</b>		Statute Violation Number <b>316.193(3C1)</b>		Violation of ORD #			
	Drug Activity	Drug Type <b>N</b>	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number	
C H A R G E	Charge Description		Statute Violation Number		Violation of ORD #			
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number	
C H A R G E	Charge Description		Statute Violation Number		Violation of ORD #			
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number	
I N T A K E	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"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail		PROPERTY - Received By <b>OFC E HOWARD</b>		Released By <b>OFC E HOWARD</b>		Released To <b>PBC JAIL</b>	
N O T I C E T O A P P E A R	Transported By <b>OFC E HOWARD</b>		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) <b>Criminal Justice CRIMINAL JUSTICE COMPLEX</b>		Court Date and Time <b>10/07/2021 08:30:00</b>			
A D M I N	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			
	I CONSENT TO RECEIVE REMINDERS OF COURT DATE(S) AND TIMES FOR THIS CASE BY TEXT MESSAGE TO THE NUMBER IDENTIFIED HERE. I UNDERSTAND THAT STANDARD TEXT MESSAGE RATES MAY APPLY AND THAT I MAY REVOKE THIS CONSENT VIA THE TEXT MESSAGE SYSTEM IF I CHOOSE.		INITIAL					
A D M I N	HOLD for Other Agency		Signature of Arresting Officer <b>204 #2201</b>		Name Verification (Printed by Arresting Officer) <b>SEP 12 AM 2:17</b>			
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other	Name of Arresting Officer (Print) <b>HOWARD, EDWARD</b>		I.D.# <b>02201</b>			
A D M I N	Intake Agency <b>DUNGLER</b>		Transporting Officer <b>OFC E HOWARD</b>		I.D.# <b>2201</b>			
	I.D.#		Agency <b>WPB</b>		Witness here if subject signed with an "X"			

SEP 12 AM 2:17  
SEP 17 7:27  
PAGE 1 OF 1

# DUI PROBABLE CAUSE AFFIDAVIT

On the 11th Day of September at 2246 A.M. P.M.  
Subject: Edward T. Beattie Case Number: 20210013122  
Agency: West Palm Beach Police Department Arresting Officer: Ofc. E Howard #2201

## Personal Contact

### Driving Pattern

Actual physical control (physical evidence putting the driver behind the wheel)

The 2016 Brown Buick Sedan was parked mid-block on 22ns Street, facing east. Multiple bystanders stated a white male was in the driver seat of the vehicle and drinking from a wine bottle. They also stated he was staying there for several hours while they were outside. A witness, Jackie Edwards, stated the vehicle then began to drive eastbound on 22nd Street. It struck several empty chairs and sideswiped a Chevrolet sedan that was parked on the street per on street parking. Bystanders and the witness advised the driver made no attempt to stop the vehicle.

Other officers were in the area and were flagged down. They stopped the Brown Buick Sedan and had the driver exit the vehicle due to the crash. Jackie stated the driver was the sole occupant of the vehicle and exited from the driver side. Officer Casey Walters also stated that the driver was the sole occupant of the vehicle.

### Observation of Driver

The driver had bloodshot and glassy eyes. The driver was seated on the ground and had great difficulty in standing up. The driver then swayed while standing up.

### Drivers Statements:

(Post Miranda) The driver was unable to clearly explain how the crash occurred. He did not even realize he was involved in a crash. The driver stated he consumed two beers several hours ago. A half empty bottle of wine (Livingston Chardonnay), which was still cold to the touch, was discovered on the floor behind the passenger seat. The driver stated he had a few sips from the bottle. The driver stated he was sitting in his car and waiting for his girlfriend. He gave a timeframe of 40 minutes to several hours. He then decided to leave because he was tired of waiting. The driver stated he was on 23rd Street, but was on 22nd Street.

### Odors:

An odor of an unknown alcoholic beverage could be smelled emanating from the driver, and it grew stronger the more he spoke to me.

## General Observations

Speech: Slurred

Attitude: Cooperative

Clothing: Nothing appeared unusual about his clothing.

Medical Problems/Medications: Stated he takes Rosuvastatin twice daily, and took a pill earlier.

Other: The driver was advised I was finished with the crash investigation, and was now conducting an investigation of driving under the influence. He stated he would participate in SFST's. The driver was read his constitutional rights from a pre-printed card, and stated he understood each right that was read to him.

# DUI PROBABLE CAUSE AFFIDAVIT

Subject: Edward T. Beattie

Case Number: 20210013122

## Roadside Tasks

### Horizontal Gaze Nystagmus

Left Eye Does Not Follow Smoothly

Right Eye Does Not Follow Smoothly

Left Eye Jerks at 45 Degree Angle or Less

Right Eye Jerks at 45 Degree Angle or Less

Distinct Jerking Left Eye at Maximum Deviation

Distinct Jerking Right Eye at Maximum Deviation

The driver had unequal pupil sizes. Medics responded to the scene and stated he had no head injury. The driver also stated his pupils are typically unequal. The driver was instructed to stand with his feet together with his arms at his sides. He was then asked if he could identify the color of the stimulus I placed in front of his eyes; in which he advised was blue (which was correct). He was reminded to track the stimulus with his eyes only. He failed to keep his head still while tracking the stimulus. I observed the driver swaying during the instructional and practical portion of this exercise. The driver was instructed numerous times to track the stimulus with his eyes only and not move his head.

### Walk and Turn Task

The driver was asked to place his left foot on the line (yellow duct tape) with his right foot directly in front of it and then with his heel touching his toe, then place his arms at his sides and stay in this position while I demonstrated this task. I observed the driver swaying during the instructional portion of this exercise. He could not maintain his balance while listening to the instructions and stepped out of the stance during the demonstration to catch his balance. He started the task before being instructed. On the first set of heel to toe steps he missed heel to toe on step 2,3,4,6,7,9, and took 12 steps. He performed the turn other than the way it was demonstrated. On the second set of heel to toe steps, the driver missed heel to toe on step 4. He took 15 steps. The driver raised his arms for balance, stopped several times before completing the task, and did not count each step out loud.

### One Leg Stand

I had the driver stand with his feet together and hands down at his side as I explained the exercise. I explained and demonstrated the exercise and he stated he understood the instructions. He started the task before being instructed. When told to begin, the driver lifted his right foot off the ground. He used his arms to balance by raising them more than six inches from his sides. He put his foot down to regain his balance at least seven times before the thirty seconds had elapsed. The driver did not raise his foot for the instructed amount of time. I observed the driver swaying during the instructional and practical portion of this exercise.

### Finger To Nose

I had the driver stand with his feet together and hands down at his sides as I explained the exercise. I explained and demonstrated the exercise and he stated he understood the instructions. The driver demonstrated that he knew his right from his left. I asked the driver to tilt his head back and close his eyes. The sequence performed was: L, R, L, R, R, L. The driver did not touch the tip of his nose as instructed, and failed to return his arms to his side after each sequence. The driver did not use the correct finger for each sequence. I observed the driver swaying during the instructional and practical portion of this exercise.

### Romberg Balance

I had the driver stand with his feet together and hands down at his sides as I explained the exercise. I explained and demonstrated the exercise and he stated he understood the instructions. The driver stated he had a masters degree and would have no issue in counting. I had the driver tilt his head back and close his eyes and estimate the passage of 30 seconds. He advised he finished this exercise at an internal clock of 30 seconds when the actual time was 11 seconds. I observed the driver swaying during this exercise. The driver began the exercise before being instructed to begin.

## Breath Results from Instrument

1st Result

0.195

2nd Result

0.190

3rd Result

If Applicable

State of Florida

County of Palm Beach

The Following Instrument was notarized or sworn before me this

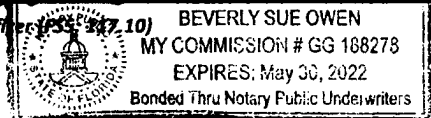
(DATE)

Personally Known

Produced Identification

Notary Public

*[Signature]*  
Notary / Clerk of Courts / Officer



*[Signature]*  
Signature of Arresting Officer



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

PBSO CASE # 21-105721 PBSO ZONE 3-15

AGENCY CASE # 2021-0013122 CRASH CASE # \_\_\_\_\_

TIME OF STOP/CRASH 2137 DATE 9/11/21 DAY Saturday

SUBJECT'S NAME Edward Beattie RACE W SEX M

HGT 5'11 WGT 220 DOB 6/10/59

LOCATION 22<sup>nd</sup> St | Spruce Ave, WPB, FL

ARRESTING OFFICER'S NAME & ID Edward Howard AGENCY WPB

DIVISION: Patrol #2201

NOTIFIED BY COMMO Y

ARRIVAL AT FACILITY 2310

Arrest Time 2242

- BREATH RESULTS:
- 1. .195
  - 2. .190
  - 3. N/A
  - 4. N/A

TESTING OFFICER'S ID 24639

NOT A CERTIFIED COPY

SUBJECT: RETTIE EDWARDS 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 \_\_\_\_\_ 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) \_\_\_\_\_

## 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) RETTIE EDWARDS

SUBJECT: BEATTIE COWARD 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? \_\_\_\_\_

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: \_\_\_\_\_

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: 80-006477 Software: 8100.27  
Date of Test: 09/11/2021

Date of Last Agency Inspection: 09/10/2021  
Observation Period Began: 23:10  
Subject's Name: EDWARD BEATTIE

DOB: 06/10/1959 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	23:35
	Air Blank	0.000	23:36
	Control Test	0.079	23:36
	Air Blank	0.000	23:37
	Subject Sample #1	0.195	23:37
	Air Blank	0.000	23:38
	Air Blank	0.000	23:40
	Subject Sample #2	0.190	23:40
	Air Blank	0.000	23:41
	Control Test	0.080	23:41
	Air Blank	0.000	23:42
	Diagnostics Check	OK	23:42

Cylinder Lot: 02021080A1  
Exp: 03/05/2023

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: 09/11/21  
Signature

Sworn to (or affirmed) before me this 11<sup>th</sup> day of September, 2021

EQ1 47701 \_\_\_\_\_  
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida  
GFC E HOWARD

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.

# TESTING FACILITY TASK REPORT

AGENCY: WPPD

SUBJECT: BEATTIE, EDWARD

CASE NUMBER: 21-105721

DATE: Sep 11, 2021

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 23:33

ENDING TIME: 23:43

BREATH TESTS RESULTS: 1) .195 TIME 23:37 A.M.  P.M.  2) .190 TIME 23:40 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: SLURRED

ATTITUDE: CALM, QUIET

CLOTHING: BLACK SHORTS , WHITE / BLUE SHIRT , NO SHOES

MEDICAL CONDITIONS: SHOULDERS

MEDICATIONS: NONE

## OTHER:

EYES: GLASSY AND BLOODSHOT

## COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 23:10 HRS.

SUBJECT: AGREED TO TAKE TEST

A/O: READ RIGHTS

SUBJECT: STATED HE UNDERSTOOD RIGHTS

TECH: READ TEST RESULTS

SUBJECT: STATED HE UNDERSTOOD TEST RESULTS

A/O: ATTEMPTED Q&A

SUBJECT: REFUSED QUESTIONS



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

#### REVIEW COMPLETED BY

Booking Number: 2021022754	Date: 9/12/21
	Specialist Name/ID: A. Pinkney/7796