

0514246

3158 20CT001461MB

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

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

Juvenile  N

**ADMINISTRATIVE**

OBTS Number \_\_\_\_\_

Agency ORI Number **FLO 500000** Agency Name **PALM BEACH COUNTY SHERIFF'S OFFICE** Agency Report Number (N.T.A.'s only) **06-20-030145**

Charge Type:  1. Felony  3. Misdemeanor  5. Ordinance  
 2. Traffic Felony  4. Traffic Misdemeanor  6. Other

Weapon Seized / Type **2**  1. Yes  2. No NONE Multiple Clearance Indicator **01**

Location of Arrest (Including Name of Business) **Greenbriar Dr and Wellington Trace** Location of Offense (Business Name, Address) **Greenbriar Blvd and Wellington Trace Wellington FL 33414**

Date of Arrest **01/24/2020** Time of Arrest **2333** Booking Date \_\_\_\_\_ Booking Time \_\_\_\_\_ Jail Date \_\_\_\_\_ Jail Time \_\_\_\_\_ Location of Vehicle **Priority towing**

**DEFENDANT**

Name (Last, First, Middle) **Gretchen Hunt** Weiss Alias (Name, DOB, Soc. Sec. #, Etc.) \_\_\_\_\_

Race **W - White - American Indian** Sex **F** Date of Birth **07/11/1946** Height **5'04** Weight **130** Eye Color **Blu** Hair Color **Bro** Complexion **fair** Build **small**

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) \_\_\_\_\_ Marital Status **Widowed** Religion **CHRISTIAN** Indication of Alcohol Influence  Y  N  Unk  
Drug Influence  Y  N  Unk

Local Address (Street, Apt. Number) **15684 Ocean Breeze Ln** (City) **Wellington, FL 33414** (State) \_\_\_\_\_ (Zip) \_\_\_\_\_ Phone **(914) 906-3877** Residence Type:  1. City  3. Florida  4. Out of State  2. County  4. Out of State  1

Permanent Address (Street, Apt. Number) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_ Phone \_\_\_\_\_ Address Source **FL DL**

Business Address (Name, Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_ Phone \_\_\_\_\_ Occupation **Self Employed**

D/L Number, State **W200288467510, FL** Soc. Sec. Number \_\_\_\_\_ INS Number \_\_\_\_\_ Place of Birth (City, State) **Bridgeport Ct** Citizenship **USA**

**CO-DEF**

Co-Defendant Name (Last, First, Middle) \_\_\_\_\_ Race \_\_\_\_\_ Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_  1. Arrested  3. Felony  
 2. At Large  4. Misdemeanor  5. Juvenile

Co-Defendant Name (Last, First, Middle) \_\_\_\_\_ Race \_\_\_\_\_ Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_  1. Arrested  3. Felony  
 2. At Large  4. Misdemeanor  5. Juvenile

**JUVENILE**

Parent  Legal Custodian  Other: \_\_\_\_\_ Residence Phone \_\_\_\_\_

Address (Street, Apt. Number) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_ Business Phone \_\_\_\_\_

Notified by: (Name) \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_ Juvenile Disposition  1. Handled/processed within Dept. and Released.  2. TOT HRS / DYS  3. Incarcerated

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

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 355-2526) informed of any change of address.  
 Yes, by: (Name) \_\_\_\_\_  No: (Reason) \_\_\_\_\_ School Attended \_\_\_\_\_ Grade \_\_\_\_\_

Property Crime?  Yes  No Description of Property \_\_\_\_\_ Value of Property \_\_\_\_\_

**CODE**

Drug Activity **N. N/A** S. Sell **T. Traffic** R. Smuggle **D. Deliver** K. Dispense/Distribute **E. Use** M. Manufacture/Produce/Cultivate **Z. Other** Drug Type **N. N/A** B. Barbiturate **C. Cocaine** H. Hallucinogen **M. Marijuana** P. Paraphernalia/Equipment **S. Synthetics** U. Unknown **Z. Other**

**CHARGE**

Charge Description **DRIVING UNDER THE INFLUENCE w/ property damage** Counts **1** Domestic Violence  Y  N Statute Violation Number **316.193(3)(C)(1)** Violation of ORD # \_\_\_\_\_

Drug Activity **N** Drug Type **N** Amount / Unit **.133/.130** Offense # **20-030145** Warrant / Capias Number \_\_\_\_\_ Bond \_\_\_\_\_

Charge Description \_\_\_\_\_ Counts \_\_\_\_\_ Domestic Violence  Y  N Statute Violation Number \_\_\_\_\_ Violation of ORD # \_\_\_\_\_

Drug Activity \_\_\_\_\_ Drug Type \_\_\_\_\_ Amount / Unit \_\_\_\_\_ Offense # \_\_\_\_\_ Warrant / Capias Number \_\_\_\_\_ Bond \_\_\_\_\_

Charge Description \_\_\_\_\_ Counts \_\_\_\_\_ Domestic Violence  Y  N Statute Violation Number \_\_\_\_\_ Violation of ORD # \_\_\_\_\_

Drug Activity \_\_\_\_\_ Drug Type \_\_\_\_\_ Amount / Unit \_\_\_\_\_ Offense # \_\_\_\_\_ Warrant / Capias Number \_\_\_\_\_ Bond \_\_\_\_\_

Charge Description \_\_\_\_\_ Counts \_\_\_\_\_ Domestic Violence  Y  N Statute Violation Number \_\_\_\_\_ Violation of ORD # \_\_\_\_\_

Drug Activity \_\_\_\_\_ Drug Type \_\_\_\_\_ Amount / Unit \_\_\_\_\_ Offense # \_\_\_\_\_ Warrant / Capias Number \_\_\_\_\_ Bond \_\_\_\_\_

**NOTICE TO APPEAR**

Location (Court Room Number, Address) **CRIMINAL JUSTICE COMPLEX / 3228 GUN CLUB ROAD, WPB, FL 33406**

Court Date and Time **Month 02 Day 20 Year 2020 Time 0830 AM**

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 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) **Gretchen Weiss** Date Signed **01/24/2020**

**ADMIN**

HOLD for other Agency  Dangerous  Resisted Arrest  Suicidal  Other \_\_\_\_\_

Name of Arresting Officer (Print) **INV. Schneider 8723** I.D. # **8723** Name Verification (Print) **Gretchen**

Transporting Officer **INV. Schneider** ID # **8723** Agency **PBSO** Witness here if subject signed with an "X"  1 of 1

**FILED**  
**JAN 25 2020**  
**JAN 25 2020**

PROBABLE CAUSE AFFIDAVIT

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

1 Juvenile N

OBTS Number  
Agency ORI Number: FLO 500000  
Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE  
Agency Report Number: 06- 20030145

Charge Type: 1. Felony, 2. Traffic Felony, 3. Misdemeanor, 4. Traffic Misdemeanor, 5. Ordinance, 6. Other  
Special Notes: SUPPLEMENTAL PROBABLE CAUSE

Name (Last, First, Middle): WEISS, GRETCHEN  
Race: W, Sex: F, Date of Birth: 07/11/1946

Charge Description: DRIVING UNDER THE INFLUENCE W/ PROPERTY DAMAGE 316.193(3)(C)(1)

Victim's Name (Last, First, Middle): STATE of FLORIDA,,  
Local Address (Street, Apt Number), Business Address (Name, Street), Occupation: GOVERNMENT

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  
 confessed to admitting to the below facts.  
 was observed by \_\_\_\_\_ who told that he/she saw the arrested person commit the below acts.  
 was found to have committed the below acts, resulting from my (described) investigation.  
On the 24TH day of JANUARY 20 20 at 2216 A. M.  P. M. (Specifically include facts constituting cause for arrest.)

On the above date and time, I was dispatched to a motor vehicle crash at the intersection of Greenbriar Blvd and Wellington Trace in the Village of Wellington. Upon arrival I found a white Land Rover bearing FL tag Z84ACM facing Westbound in an Eastbound lane of travel on Greenbriar Blvd slightly West of the intersection with Wellington Trace. A silver Toyota Tundra was facing Eastbound in a proper turn lane. Both vehicles had front end damage.

I spoke to the driver of the Silver Toyota, W/M Johanan Terrones. He stated the white SUV came into his lane and struck the front of his truck. He identified the driver of the White SUV at the time of the crash as the older white female still sitting in the vehicle at that time.

I approached the white Land Rover and found a white female, later identified by her FL driver license as Gretchen Weiss, sitting in the driver seat. Weiss was extremely confused and was unable to tell me anything about the incident. She was unable to tell me what road she was on, nor what direction she was traveling. All she could say is that she was making a right hand turn. Weiss informed me that she was coming from the Wanderer's Club from an event and that she had a couple glasses of red wine. I could smell the odor of an unknown alcoholic beverage coming from her person and breath. This odor became stronger as we continued to speak. Weiss' eyes were bloodshot and glassy and her speech was slow and slightly slurred. She appeared to be on the nod as she seemed to fall asleep in the vehicle numerous times. Weiss exited her vehicle to be checked by medics on scene. When exiting her vehicle, she had extreme difficulty maintaining her balance and needed to hold on to the driver door to prevent her from falling over. After vital signs were checked, I was informed that all vitals were normal. Weiss was sat in the backseat of her vehicle to prevent her from falling and injuring herself. While sitting in the rear of her vehicle, she again fell asleep numerous times.

Based on the numerous indicators of impairment, I requested a DUI unit to respond. Inv. Schneider #8723 arrived on scene and assumed the investigation.

STATE OF FLORIDA  
COUNTY OF PALM BEACH  
INV. ZEITZ  
(Signature of Arresting Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 24th day of JANUARY 20 20 by INV. ZEITZ  
(Print name of Arresting Investigative Officer) who is personally known to me and/or produced identification Type of identification produced PERSONALLY KNOWN LEO

Notary Public, Clerk of Court, Officer (F.S. 122.10)

SCANNED  
JAN 25 2020

# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 24 DAY OF January 20 20, AT 2231 AM  PM  
SUBJECT: Weiss Gretchen Hunt CASE NUMBER: 20-030145

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV. Schneider 8723

## PERSONAL CONTACT

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

On 01/24/2020 at approximately 2231hrs, I was dispatched to the scene of a motor vehicle crash without injuries at the intersection of Greenbriar Blvd and Wellington Trace, which is located in the village of Wellington, Palm Beach County, Florida.

I arrived at the scene at approximately 2244hrs. After my independent crash investigation, based on physical evidence, and witness statements, I determined that, at approximately 2210hrs, the defendant, Gretchen Hunt Weiss, did indeed travel on the wrong side of the road and cause a head on collision with V2 which was traveling east bound in the east bound lane. (See PBSO crash case #20-030138 )

Witness Miguel Hurtado, identified the defendant, to me, as the driver and sole occupant, of the white Range Rover Discovery at the time of the crash. Hurtado was interviewed on video and swore to the events which transpired surrounding the crash.

D/S Zeitz #24970 relayed to me that Weiss had articulable indicators of impairment, so he called for a DUI Unit to conduct a possible DUI investigation. D/S Zeitz provided me with a written sworn supplemental Probable Cause Affidavit.

### OBSERVATION OF DRIVER:

Upon making contact with the driver who was identified by her Florida driver license as Gretchen Hunt Weiss, I immediately detected an obvious and strong odor of an unknown alcoholic beverage emitting from her person and face area. This odor intensified as I spoke to Weiss. Weiss had glassy, glazed, and blood shot eyes. Weiss' speech was slurred and slow. Weiss' movements were slow and deliberate, with poor coordination. Weiss had an unsteady gait while walking to my patrol vehicle and had difficulty following directions given to her. Weiss was wearing a dark blazer and printed dress with sandals. All the clothing appeared clean and neat.

### DRIVER'S STATEMENTS:

Post-Miranda: Weiss stated she was at a party and had 1 glass of red wine and 1 cosmopolitan.

Weiss consented to a breath test and made post Miranda admissions that she was driving after having 2 drink(s) and was involved in an accident.

Weiss participated in the Q&A.

### ODORS:

A strong and obvious odor of an unknown alcoholic beverage was emitting from her person and face area which intensified as I spoke to Weiss.

## GENERAL OBSERVATIONS

SPEECH: Weiss' speech was slurred and slow.

ATTITUDE: talkative, sleepy, polite, friendly, cooperative, pleading

CLOTHING: Neat and orderly

MEDICAL/OTHER: See BAT report

STATE OF FLORIDA  
COUNTY OF PALM BEACH

INV. Schneider 8723  
Signature of Arresting/Investigative Officer

Subscribed and sworn to before me this 25 day of January 20 20 by INV. Schneider 8723

SCANNED

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

Shari O'Neal (#6212)  
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

**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:**

Weiss would sway roughly in a side to side front to back pattern throughout the task. Weiss did touch the tip of the pen but not as directed. She reached out and touched the tip multiple times to positively identify the point to be tracked. Weiss was reminded numerous times to track the pen with her eyes only. Weiss failed to keep her head still while tracking the stimulus.

**WALK & TURN:**

I attempted to explained and demonstrated the instructions for the "Walk & Turn" to Weiss who was extremely unsteady on her feet. Weiss was unable to stand on the line and needed to hold my arm for balance. Weiss stated she could not perform this task sober. Weiss was unable to perform the task and for her safety the task was not performed.

**ONE LEG STAND:**

I attempted to explained and demonstrated the instructions for the "One leg Stand" to Weiss who was extremely unsteady on her feet. Weiss was unable to stand on one leg and stated she can't perform this task . Weiss was unable to perform the task and for her safety the task was not performed.

**FINGER TO NOSE:**

I explained and demonstrated the instructions for the "Finger to Nose" task to Weiss who stated that she understood. During the task, I observed Weiss to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Weiss failed to return her arms down to her sides as instructed after touching her nose. Weiss' index finger did not touch the tip of the nose on multiple attempts. Weiss searched for the tip of her nose using the finger to find their nose prior to touching the tip. The sequence used for this task was L, R, L, R, R, L.

**ROMBERG ALPHABET:**

I explained and demonstrated the instructions for the "Rhomberg Alphabet" task to Weiss who stated that she understood. During the task, I observed Weiss to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Weiss correctly recited the alphabet correctly.

**BREATH TEST RESULTS:**     .133                     .130

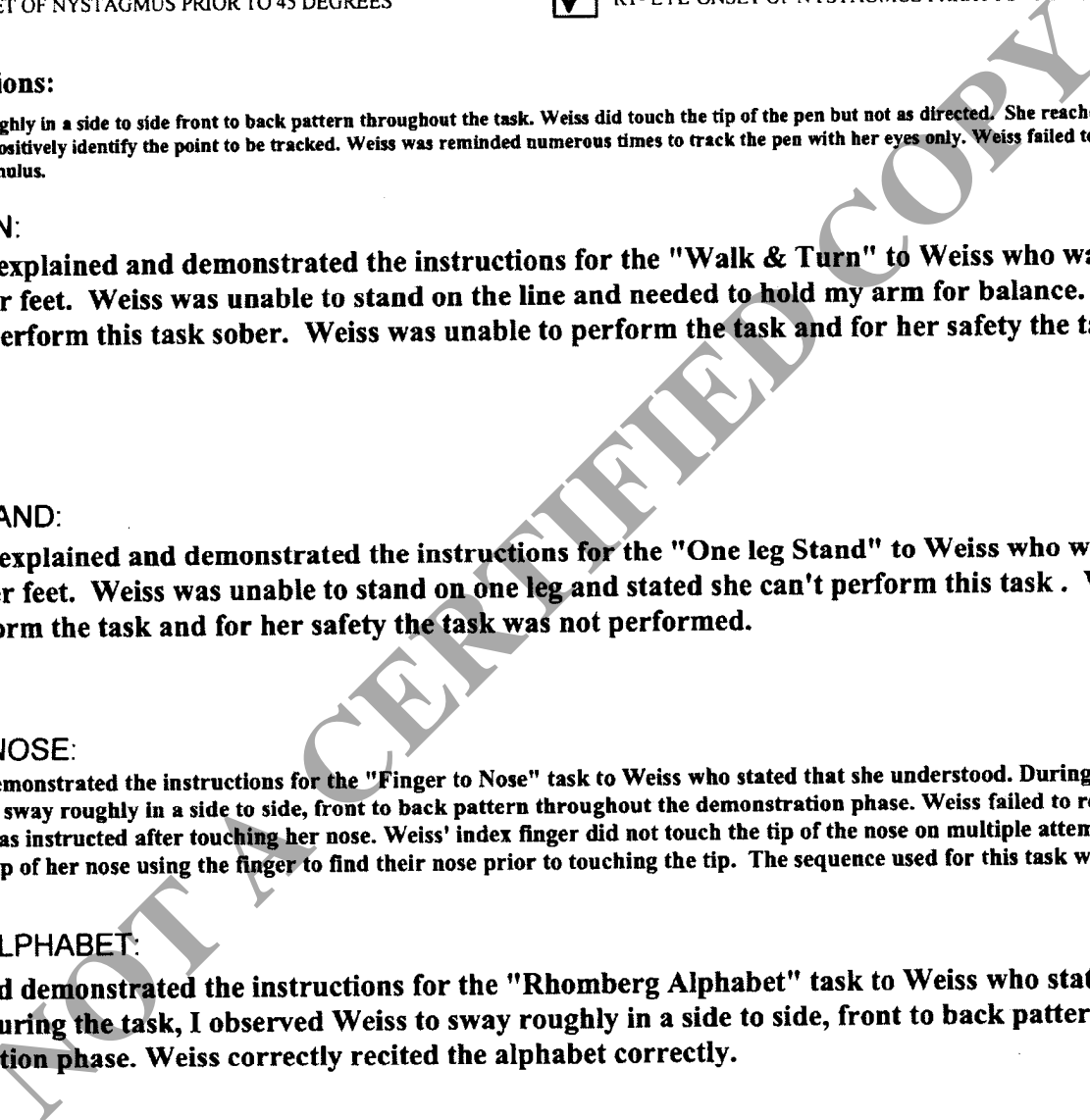
STATE OF FLORIDA  
COUNTY OF PALM BEACH

INV. Schneider 8723  
Signature of Arresting/Investigative Officer

This foregoing instrument was sworn to or affirmed and subscribed before me this 25 day of January 2020 by INV. Schneider 8723

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

Sharon Nease (6212)  
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)





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

PBSO CASE # 20-030145 PBSO ZONE 8-32

AGENCY CASE # 20-030145 CRASH CASE # 20-030138

TIME OF STOP/CRASH 2231 DATE 01/24/2020 DAY Friday

SUBJECT'S NAME Weiss Gretchen H RACE W SEX f  
LAST FIRST MID

HGT 5'4 WGT 130 DOB 7/11/1946

LOCATION Greenbriar Dr and Wellington Trace

ARRESTING OFFICER'S NAME & ID INV. Schneider 8723 AGENCY PBSO

DIVISION: VCD/DUI

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0014

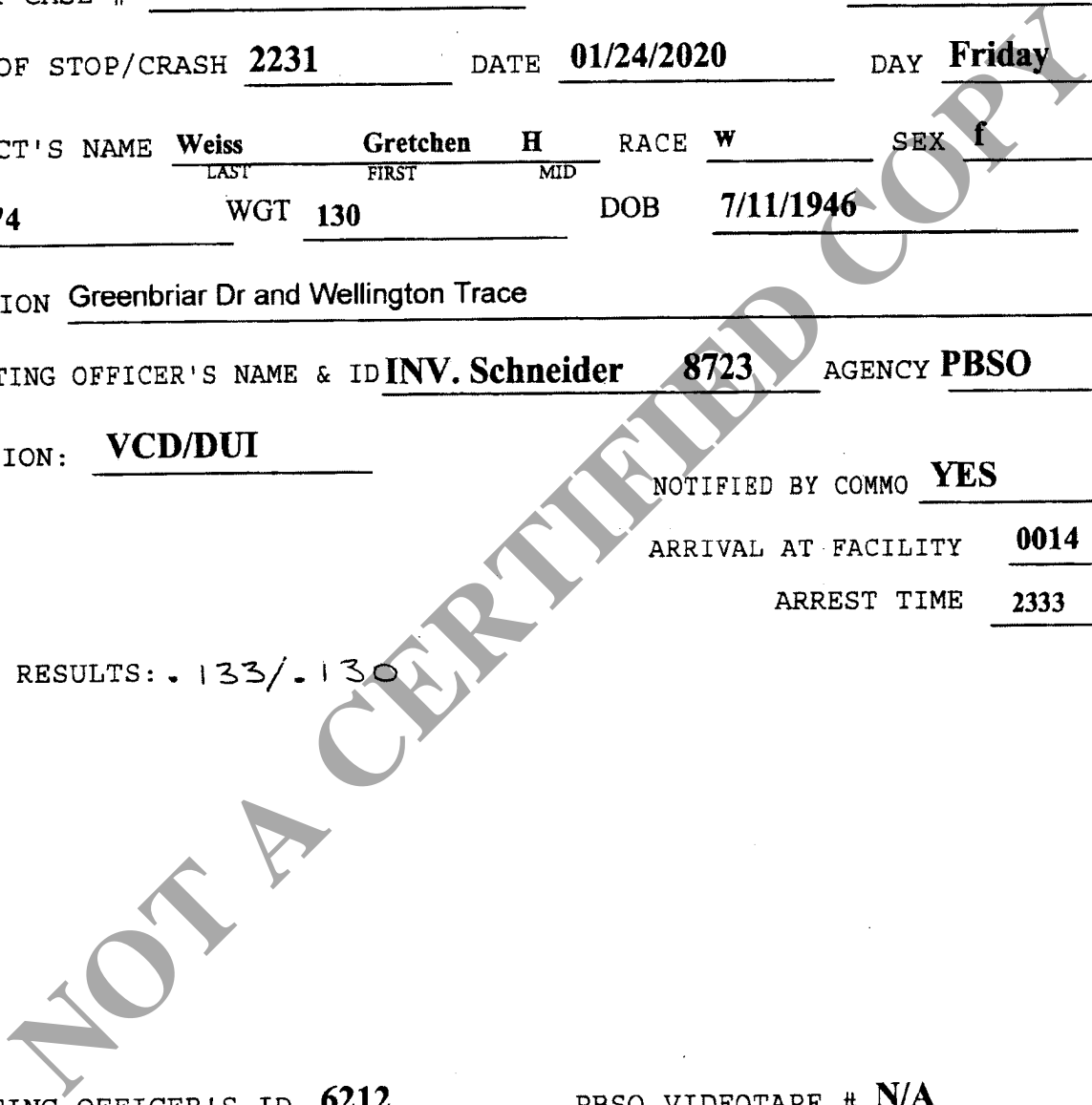
ARREST TIME 2333

BREATH RESULTS: .133/.130

TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # N/A

**SCANNED**

JAN 25 2020







SUBJECT: George A. ... CASE NUMBER: 20-20115

# 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? home

WHAT STREET OR HIGHWAY WERE YOU ON? 100

DIRECTION OF TRAVEL? W WHERE DID YOU START? 100 ...

WHAT TIME DID YOU START? 1:30 WHAT TIME IS IT NOW? 1:45

WHAT IS TODAY'S DATE? 11/11/10 WHAT DAY OF THE WEEK IS IT? Tuesday

WHAT COUNTY AND CITY ARE YOU IN NOW? see ...

WHEN DID YOU LAST EAT? 11:30 WHAT DID YOU EAT? ...

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? in custody

HOW MUCH DO YOU WEIGH? 130 HAVE YOU BEEN DRINKING? no WHAT? ...

HOW MUCH? 1/2 h WHERE? ... WITH WHOM? ...

WHEN DID YOU HAVE YOUR FIRST DRINK? 1:30 AND YOUR LAST DRINK? 8:30

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? ...

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? yes ARE YOU UNDER THE INFLUENCE? ...

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? no HOW MUCH? ...

WHAT? ... WHERE? ... WHEN? ...

WHAT LINE OF WORK ARE YOU IN? self-employed WHEN DID YOU LAST WORK? today

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? yes WHAT? ... WHEN? ...

DO YOU HAVE:

- EPILEPSY? no
- GLASS EYE? no
- FALSE TEETH? no
- EAR INFECTION? no
- INNER EAR TROUBLE? no
- DIABETES? no

SCANNED

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? no WHERE? WI

INTERVIEWER: Tom Schuyler 823

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: 80-006239 Software: 8100.27  
Date of Test: 01/25/2020

Date of Last Agency Inspection: 01/17/2020  
Observation Period Began: 00:14  
Subject's Name: GRETCHEN H WEISS

DOB: 07/11/1946 Sex: F

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:	Test	g/210L	Time
	Diagnostics Check	OK	00:39
	Air Blank	0.000	00:40
	Control Test	0.080	00:40
	Air Blank	0.000	00:41
	Subject Sample #1	0.133	00:41
	Air Blank	0.000	00:42
	Air Blank	0.000	00:44
	Subject Sample #2	0.130	00:44
	Air Blank	0.000	00:45
	Control Test	0.080	00:45
	Air Blank	0.000	00:45
	Diagnostics Check	OK	00:46

Cylinder Lot: 17919080A1  
Exp: 08/05/2021

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 SHARI L O'NEAL, 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: S. O'neal Date: 01-25-20  
Signature

Sworn to (or affirmed) before me this 25 day of January, 2020

[Signature] 8723 Inv. Schneider #8723  
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

# WITNESS LIST

CASE NUMBER: 20-030145

ARRESTING OFFICER: INV. Schneider 8723

ADDRESS: 3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME): \_\_\_\_\_ (WORK) (561) 688-4001

CAN TESTIFY TO: SEE DUI PROBABLE CAUSE AFFIDAVIT & OFFENSE REPORT

NAME: DS Zeitz

ADDRESS: 3228 GUN CLUB ROAD WEST PALM BEACH FL 33406 (DISTRICT 8)

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) 561-688-5447

CAN TESTIFY TO: Supplemental Probable Cause affidavit

NAME: Miguel Hurtado

ADDRESS 16155 Norris Rd, Wellington FL 33414

PHONE NUMBERS (HOME) 203-297-3073 (WORK) \_\_\_\_\_

CAN TESTIFY TO: Identifying the driver of Vehicle 1, vehicles in motion

NAME: Johan naka Terrones

ADDRESS 15570 Imperial Lane, Wellington FL 33414

PHONE NUMBERS (HOME) 0 (WORK) 0

CAN TESTIFY TO: Defendant making a wide turn and turning into victims vehicle

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

SCANNED

JAN 25 2020



**Palm Beach County Sheriff's Office – Arrests Only**

	X	Florida State Statute	Description	Page Number(s)
I/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2020002743	Date: 1/25/2020
	Specialist Name/ID: B Evans / 23649

SCANNED  
JAN 25 2020