

20 CF 5765

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

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

OBTS Number	Agency ORI Number <b>FLO 502600</b>		Agency Name <b>PALM BEACH GARDENS POLICE DEPARTMENT</b>		Agency Report Number (N.T.A.'s only) <b>78-20003191</b>	
Charge Type: Check as many as apply.	<input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	Weapon Seized / Type 1. Yes 2. No	Multiple Clearance Indicator	
Location of Arrest (Including Name of Business) <b>Prosperity Farm and Gardens Pkw</b>			Location of Offense (Business Name, Address) <b>2490 PGA BLVD</b>			
Date of Arrest <b>07/12/2020</b>	Time of Arrest <b>01:35</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle <b>KAUFF'S TOWING &amp; RECOVERY 4301 East Avenue, West Palm Beach, FL 33405</b>

Name (Last, First, Middle) <b>Millard, Jason, Glen</b>		Alias (Name, DOB, Soc. Sec. #, Etc.)				
Race W - White   - American Indian B - Black   - Oriental/Asian	Sex <b>W</b>	Date of Birth <b>11/22/1974</b>	Height <b>5'10</b>	Weight <b>170</b>	Eye Color <b>BROWN</b>	Hair Color <b>BROWN</b>
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>Tattoo on both sides of neck.</b>		Marital Status <b>Divorced</b>	Religion <b>CHRISTIAN</b>	Indication of Alcohol Influence Drug Influence Y N Unk. <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
Local Address (Street, Apt. Number) <b>1941 Pleasant Dr</b>		(City) <b>North Palm Beach</b>	(State) <b>FL</b>	(Zip) <b>33408</b>	Phone ( )	Residence Type: 1. City 2. County 3. Florida 4. Out of State <b>11</b>
Permanent Address (Street, Apt. Number) <b>1941 Pleasant Dr</b>		(City) <b>North Palm Beach</b>	(State) <b>FL</b>	(Zip) <b>33408</b>	Phone ( )	Address Source <b>VERBAL</b>
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation
DfL Number, State <b>m463427744220 FL</b>		Soc. Sec. Number		INS Number	Place of Birth (City, State) <b>FT. LAUDERDALE, 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"/> 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 <input type="checkbox"/> Other	Name (Last)	(First)	(Middle)	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 / OYS 3. Incarcerated
Released To: (Name)	Relationship		Date
The above address 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 (Phone 355-2525) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)			School Attended
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No	Description of Property		Value of Property

Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine	B. Barbiturate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other
Charge Description <b>DRIVING UNDER THE INFLUENCE</b>	Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number <b>316.193(1)(A)</b>	Violation of ORD #		Warrant / Capias Number	Bond <b>OR</b>			
Charge Description <b>CORRUPTION BY THREAT AGAINST PUBLIC SERVANT</b>	Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number <b>838.021(3)(B)</b>	Violation of ORD #		Warrant / Capias Number	Bond <b>1,000</b>			
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation of ORD #		Warrant / Capias Number	Bond			
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation of ORD #		Warrant / Capias Number	Bond			

Location (Court, Room Number, Address)	<b>TO BE SET</b>	
Court Date and Time	Month	Day
	Year	Time
	AM	PM
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED		
Signature of Defendant (or Juvenile and Parent /Custodian)		Date Signed <b>07/12/2020</b>

HOLD for other Agency Name:	Signature of Arresting Officer <b>[Signature]</b>	Name Verification (Printed by Arrestee) <b>SCANNED</b>
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	Name of Arresting Officer (Print) <b>Ofc. ANDREW FLINK</b>	I.D. # <b>514</b>
Intake Deputy <b>[Signature]</b>	Transporting Officer <b>ANDREW FLINK</b>	I.D. # <b>514</b>
Pouch #	Agency <b>PBGPD</b>	Agency <b>PBGPD</b>
DISTRIBUTION: WHITE - COURT COPY		PAGE <b>1</b> OF <b>1</b>

0186026

526

# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 12 DAY OF JULY 202020 AT 0116 AM PM

SUBJECT: Millard, Jason, Glen CASE NUMBER: 20003191

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

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

Officer Hennessy 409 advised he observed vehicle disobey Traffic Control Device at 2490 PGA BLVD, PBG FL. Officer Hennessy conducted a traffic stop on the vehicle a Kia Sedan FL Tag 791QIX, in the area of Prosperity and Gardens Pkwy. Officer Hennessy said the individual in the drivers seat is the driver at the time of the traffic stop. This officer identified the driver via FL drivers license photo via DAVID, as Jason Millard. This officer made contact with Millard while he was actual physical control of the vehicle.

**OBSERVATION OF DRIVER:**

This Officer observed Millard to have glassy eyes, he exhibited slurred speech and showed signs of being jittery as this Officer was asking him of his information. Millard also had the odor of unknown alcoholic beverage emitting from his breath.

**DRIVER'S STATEMENTS:**

Millard stated he was going to the store to get cigarettes. He stated he had a few drinks at dinner approximately 5:00pm with food.

**ODORS:**

Unknown alcoholic beverages

## GENERAL OBSERVATIONS

**SPEECH:** Slurred

**ATTITUDE:** Rapid mood swings

**CLOTHING:** White shirt, orange/white shorts, black flip flops

**MEDICAL/OTHER:** None stated

STATE OF FLORIDA  
COUNTY OF PALM BEACH

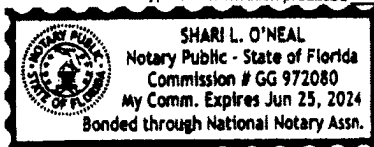
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of July 2020 by Ofc. ANDREW FLINK

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

Personally Known

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



**SCANNED**  
**JUL 12 2020**

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

A D M I N	Agency ORI Number <b>FL 0502600</b>	Agency Name <b>PALM BEACH GARDENS POLICE</b>	Agency Report Number <b>7   8   20-003191</b>
	Charge Type: Check as many as apply. <input checked="" 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:
D E F	Name (Last, First, Middle) <b>MILLARD, JASON GLENN</b>		Alias <b>MILLARD, JASON GLENN  </b>
	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>11/22/1974</b>
C H A R G E S	Charge Description <b>316.193(1)(A) DUI - DRIVING UNDER THE INFLUENCE/NORMAL</b>	Charge Description <b>838.021(3)(A) HARM/THREATEN PUBLIC SERVANT OR FAM</b>	
	Charge Description	Charge Description	
V I C T I M	Victim's Name (Last, First, Middle) <b>FLINK, ANDREW</b>		Address Source
	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>08/04/1987</b>
L O C A L A D D R E S S	Local Address (Street, Apt. Number) <b>10500 N MILITARY TRAIL, PALM BEACH GARDENS, FL 33410</b>	City <b>FL 33410</b>	Phone <b>(561) 799-4445</b>
	Business Address (Name, Street)	City	Phone

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 committ 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 12 day of July, 2020 at 01:23 (Specifically include facts constituting cause for arrest.)

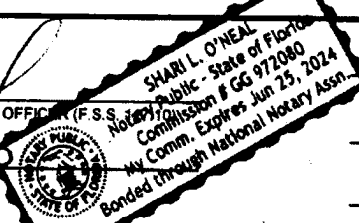
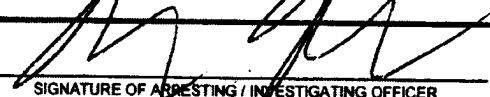
On 07/12/2020, at approximately 0123 hours, this Officer and Ofc Sheobo 524 (in training) arrived in the area of Prosperity Farms Rd and Gardens Pkwy, PBG, FL, to assist Ofc Hennessy 409 on a traffic stop. Body worn camera and in car video were used.

Officer Hennessy advised he observed vehicle disobey Traffic Control Device at 2490 PGA BLVD, PBG FL. Officer Hennessy conducted a traffic stop on the vehicle a Kia Sedan FL Tag 791QIX, in the area of Prosperity and Gardens Pkwy. Officer Hennessy said the individual in the drivers seat is the driver at the time of the traffic stop. This officer identified the driver via FL drivers license photo via DAVID, as Jason Millard (SU). This officer made contact with Millard while he was actual physical control of the vehicle.

This Officer observed Millard to have glassy eyes, he exhibited slurred speech and showed signs of being jittery as this Officer was asking him of his information. Millard also had the odor of unknown alcoholic beverage emitting from his breath. Millard stated he was going to the store to get cigarettes. He stated he had a few drinks at dinner approximately 5:00pm with food.

Based on this Officer's observations, Millard was asked to participate in Standardized Field Sobriety Exercises, to which he complied. Millard said he did not have any medical conditions which would affect the exercises conducted.

The first exercise conducted, was the Horizontal Gaze Nystagmus. The stimulus used, was a Toxoptix X3, with an illuminated red tip. This Officer observed a lack of smooth pursuit in both eyes, distinct and sustained Nystagmus at maximum deviation in both eyes. This Officer noticed the onset of Nystagmus prior to 45 degrees in both eyes. Millard was swaying and having difficulty understanding instructions.

A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
	 _____ NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S.) DATE <u>07/12/2020</u>	 _____ <b>FLINK, ANDREW S (514)</b> NAME OF OFFICER (PLEASE PRINT) DATE <u>07/12/2020</u>
		PAGE 1 of 2

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

SCANNED  
JUL 12 2020

PROBABLE CAUSE AFFIDAVIT  
SUPPLEMENT

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

1

JUVENILE

Agency ORI Number <b>FL 0502600</b>	Agency Name <b>PALM BEACH GARDENS POLICE</b>	Agency Report Number <b>7   8   20-003191</b>
Charge Type: Check as many as apply. <input checked="" 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>MILLARD, JASON GLENN</b>	Alias <b>MILLIARD, JASON GLENN  </b>	Race Sex Date of Birth <b>W M 11/22/1974</b>

The next exercise conducted, was the Walk and Turn. The line used was a strip of yellow tape placed upon the pavement by this Officer. Millard began the exercise before being instructed to start numerous times. Millard also would not remain in the starting position, as instructed. Millard repeatedly lost his balance and stepped out of position and raised his arms from his sides. On the first set, Millard took 15 steps, he also stepped out off the line during the attempted steps. Millard took a hard pause before turning to take the heel to toe steps back to starting point. Millard pivoted on both feet for the turnaround, rather than as instructed. On the return, Millard took 14 steps back to starting position. Also during the return, Millard paused to regain his balance after the eighth step.

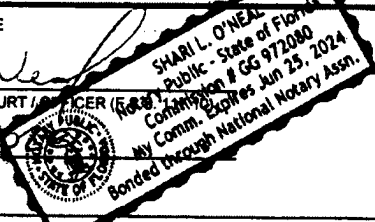
The final exercise conducted, was the One-Leg Stand. Millard began the exercise before being instructed to do so. Millard was looking directly at me while doing the task instead of looking at his leg and had to be told to look at his raised foot. Millard also was swaying back and forth during the task. At the count of 10, Millard switched from raising his left leg to raising his right leg during the task. At the next count of 10, Millard placed his foot down and had to be instructed to raise it again to continue the exercise. Millard raised his arms more than six inches from his sides and had to be instructed to lower them to his sides.

Based on this Officer's observations, Millard was placed under arrest at 0215 hours. While en route to and at the PBSO BAT, Millard began having rapid mood swings where he became aggressive toward Officers. Millard called this Officer a "faggot" repeatedly and on multiple occasions made threatening statements directed toward this Officer. Millard said "if you take these cuffs off me, I'll beat your ass", "if you don't let me out, I'll fuck you up", "I hope to catch you outside so I can tear you apart". Millard switched between English, French-Creole and Spanish while yelling at this Officer. Millard threatened physical harm against this Officer while in the PBSO BAT facility several more times by gesturing a closed fist, or by doing the act of sliding his thumb across his throat and pointing at this Officer.

Millard was requested to provide a breath sample for the purpose of determining its alcohol content to which he refused. Ofc Sheebo read Florida Implied Consent to Millard, to which he acknowledged and again refused, at 0241 hours.

It should be noted, Millard was knowingly driving with a suspended Florida Driver License, which had been suspended since 03/16/2020.

Based on the results of the investigation, this Officer has probable cause to prove Jason Millard operated a motor vehicle, in the state of Florida, while under the influence of alcohol, in violation of FSS 316.193(1) (A). Also Millards statements and gestures toward this Officer were in a threatening manner, in violation of FSS 838.021 (3) (B).

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  <b>FLINK, ANDREW S (514)</b> NAME OF OFFICER (PLEASE PRINT)
		
	DATE <b>07/12/20</b> DATE <b>07/12/2020</b>	

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

SCANNED  
JUL 12 2020

SUBJECT: Millard, Jason, Glen

CASE NUMBER 20003191

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- LT EYE-LACK OF SMOOTH PURSUIT
- RT EYE-LACK OF SMOOTH PURSUIT
- LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Millard was swaying and having difficulty understanding instructions.

WALK & TURN:

Millard began the exercise before being instructed to start numerous times. Millard also would not remain in the starting position, as instructed. Millard repeatedly lost his balance and stepped out of position and raised his arms from his sides. On the first set, Millard took 15 steps, he also stepped out off the line during the attempted steps. Millard took a hard pause before turning to take the heel to toe steps back to starting point. Millard pivoted on both feet for the turnaround, rather than as instructed. On the return, Millard took 14 steps back to starting position. Also during the return, Millard paused to regain his balance after the eighth step.

ONE LEG STAND:

Millard began the exercise before being instructed to do so. Millard was looking directly at me while doing the task instead of looking at his leg and had to be told to look at his raised foot. Millard also was swaying back and forth during the task. At the count of 10, Millard switched from raising his left leg to raising his right leg during the task. At the next count of 10, Millard placed his foot down and had to be instructed to raise it again to continue the exercise. Millard raised his arms more than six inches from his sides and had to be instructed to lower them to his sides.

ROMBERG ALPHABET:

Not conducted

FINGER TO NOSE:

Not conducted

BREATH TEST RESULTS: 1) REF 2) REF 3) - 4) -

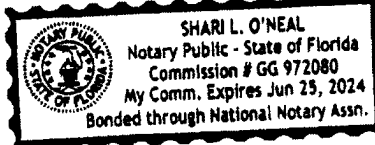
STATE OF FLORIDA  
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of July 2020 by Ofc. ANDREW FLINK

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

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



SCANNED  
JUL 12 2020

SUBJECT: Alford 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: John

**SCANNED**  
**JUL 12 2020**

SUBJECT: Milton Jones 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 Off Fink of the PPD

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) Rod 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.

SUSPECT'S SIGNATURE: (X) Rod on camera

**SCANNED**  
**JUL 12 2020**



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

PBSO CASE # 20-086786 PBSO ZONE 3-13

AGENCY CASE # 20003191 CRASH CASE # \_\_\_\_\_

TIME OF STOP/CRASH \_\_\_\_\_ DATE 07/12/2020 DAY \_\_\_\_\_

SUBJECT'S NAME Millard Jason Glen RACE W SEX M  
LAST FIRST MID

HGT 5'10 WGT 170 DOB 11/22/1974

LOCATION Prosperity Farm and Gardens Pkw

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

DIVISION: TRAFFIC UNIT

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 02:15

ARREST TIME 01:35

BREATH TESTS:

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

BREATH TEST OPERATOR: 6212 O'Neal

NOT A CERTIFIED COPY

**SCANNED  
JUL 12 2020**

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

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

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

or affirm that on or about the 12TH day of JULY, 20 20, at 01:35 P.M. A.M.

DRIVER Jason Glen Millard
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# m463427744220, state of FL, was placed under lawful arrest for
the offense of DRIVING UNDER THE INFLUENCE by Ofc. ANDREW FLINK and
issued Citation # A56HAQE
(Name of Arresting Officer)

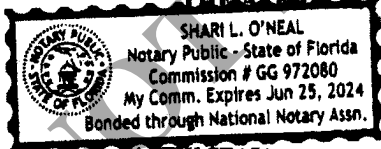
That on or about the 12TH day of JULY, 20 20, at 0241 P.M. A.M.

in PALM BEACH County,

I requested that the driver submit to a X breath and/or urine test to determine his or her blood alcohol level
and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such
test(s) would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or
for a period of eighteen (18) months if his or her driving privilege had been previously suspended for refusing to
submit to a breath, urine or blood test. I also informed the driver that he or she commits a misdemeanor by refusing
to submit to a lawful test as requested above if his or her driving privilege has been previously suspended for
refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he
or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's
License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has
previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver
refused to submit to the test(s) requested.

Signature of Law Enforcement Officer or
Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)



(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me:

The foregoing instrument was sworn and subscribed before

me this 12 day of July, 20 20,

by Ofc. ANDREW FLINK,

who is personally known to me or who has produced

Personally Known as identification

Notary Public [Signature]

Signature of Attesting Officer

Title

Date 07/12/2020

Note: Mail or hand deliver to the designated
Bureau of Administrative Reviews office,
Department of Highway Safety and Motor
Vehicles, with the driver's license, the
appropriate copy of the UTC, and the
probable cause affidavit.

# TESTING FACILITY TASK REPORT

AGENCY: PBG OFC. FLINK #514

SUBJECT: MILLARD, JASON G.

CASE NUMBER: 20-086786

DATE: 07-12-2020

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0238 HRS

ENDING TIME: 0243 HRS

BREATH TESTS RESULTS: 1) R TIME 0241 A.M.  P.M.  2) TIME A.M.  P.M.

3) TIME A.M.  P.M.  4) TIME A.M.  P.M.

BREATH OPERATOR: S.O'NEAL #6212

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH: LOUD, AGRUMENTATIVE

ATTITUDE: AGITATED, UPSET, UNCOOPERATIVE, SARCASTIC, PROFANE

CLOTHING: SHIRT- WHITE/PRINT SHORTS-ORANGE & WHITE/PLAID

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

## OTHER:

EYES: RED, GLASSY

## COMMENTS:

20 MIN. OBSERVATION DONE BY A/O FLINK #514  
A/O REQUESTED THE BREATH TEST.  
D REFSUED THE REQUEST.  
IMPLIED CONSENT READ ON CAMERA.  
D UNDERSTOOD THE I/C, D STILL REFUSED AFTER THE I/C WAS READ.  
C/W READ ON CAEMRA, D REFUSED Q&A

SCANNED  
JUL 12 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"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2020016740	Date: 7/12/2020
	Specialist Name/ID: Gammage/5660

**SCANNED**  
**JUL 12 2020**