

0519745

20CT 15020 MB

2897

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile N	
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number (N.T.A.'s only) 06- 20-128694					
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		Weapon Seized / Type 2 1. Yes 2. No		Multiple Clearance Indicator 1							
Location of Arrest (including Name of Business) BOYNTON BEACH BLVD/S MILITARY TRAIL, BOYNTON BEACH/FL/33437						Location of Offense (Business Name, Address) BOYNTON BEACH BLVD/S MILITARY TRAIL, BOYNTON BEACH/FL/33437					
Date of Arrest 11/20/2020		Time of Arrest 03:04		Booking Date 11/20/2020		Booking Time		Jail Date		Jail Time	
						Location of Vehicle ZUCCALAS TOWING					
Name (Last, First, Middle) Johnson, Jennifer, Marie											
Alias (Name, DOB, Soc. Sec. #, Etc.)											
Race W - White B - Black O - Oriental/Asian		Sex W F		Date of Birth 7/21/1977		Height 5'03		Weight 130		Eye Color Green	
								Hair Color Blonde		Complexion Light	
										Build Slender	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status		Religion		Indication of Alcohol Influence Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk.	
Local Address (Street, Apt. Number) 8020 Briantea Dr, Boynton Beach, FL 33472						(City)		(State)		(Zip)	
Permanent Address (Street, Apt. Number)						(City)		(State)		(Zip)	
Business Address (Name, Street)						(City)		(State)		(Zip)	
D/L Number, State J52543377610, FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) Tallahassee, FL		Citizenship US			
Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth	
Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth	
Parent Legal Custodian Other:						Name (Last)		(First)		(Middle)	
Address (Street, Apt. Number)						(City)		(State)		(Zip)	
Notified by: (Name)						Date		Time		Juvenile Disposition Handled/processed within Dept. and Released.	
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. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)						School Attended		Grade			
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. Amphetamines		B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetics		U. Unknown Z. Other			
Charge Description Driving Under The Influence (DUI)						Counts 1		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 316.193 (1)(A)	
Drug Activity N						Drug Type N		Amount / Unit		Offense # 20-128694	
Charge Description						Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number	
Drug Activity N						Drug Type N		Amount / Unit		Offense #	
Charge Description						Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number	
Drug Activity N						Drug Type N		Amount / Unit		Offense #	
Charge Description						Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number	
Drug Activity N						Drug Type N		Amount / Unit		Offense #	
Location (Court, Room Number, Address) Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600											
Court Date and Time Month December Day 10 Year 2020 Time 08:30 AM X 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 11/20/2020					
HOLD for other Agency Name:						Signature of Arresting Officer					
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:						Name of Arresting Officer (Print) D/S B. SANZ					
Intake Deputy D. M. G. G. G.						ID # 30565					
Pouch #						Agency PBSO					
Witness here if subject signed with an "X"						PAGE 1 OF 1					

		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	Juvenile
ADMIN	OBTS Number			Agency ORI Number		Agency Name		Agency Report Number	
		FLO 500000		PALM BEACH COUNTY SHERIFF'S OFFICE				06- 20-128694	
CHARGES	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)	Johnson, Jennifer.		Alias		Race w		Sex f	
DEF	Charge Description	Driving Under the Influence		Charge Description				Date of Birth 07/21/1977	
	Charge Description			Charge Description					
VICTIM	Victim's Name (Last, First, Middle)	State of Florida,		Race		Sex		Date of Birth	
	Local Address (Street, Apt. Number)	(City)	(State)	(zip)	Phone	Address Source			
	Business Address (Name, Street)	(City)	(State)	(zip)	Phone	Occupation			
<p>The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.</p> <p>The Person taken into custody</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to _____ admitting to the below facts. </div> <div> <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation. </div> </div> <p>On the <u>29</u> day of <u>November</u> 20<u>20</u> at <u>02:38</u> <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p>I was patrolling South Bount On South Military Trl south of Boynton Beach Blvd.</p> <p style="text-align: center;">258653</p> <p>I observed a White Infiniti QX50 FL tag 258622 traveling northbound at an estimated 65 mph in a posted 45 mph zone I activated my STALKER DSR 2X SERIAL # DP009433 using the FRONT # KC030148 antenna, which gave a digital speed and a matching Doppler tone of 66 mph. I turned around and got behind the vehicle at the red light at S Military Trl and Boynton Beach Blvd. After the vehicle began heading Westbound on Boynton Beach Blvd it accelerated to 60 mph in a 45 mph zone. I activated my overhead emergency lights, stopping the vehicle in the area of Boynton Beach Blvd and Boynton Place Cir.</p> <p>The complainant stated to me that she was traveling home from being out with her friends.</p> <p>While I was writing the traffic citations, D/S B. Sanz # 30565 spoke with the defendant and decided to conduct the DUI investigation. The investigation was turned over to him.</p>									
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH		<div style="text-align: center;"> Cpl. Christopher Ward (Signature of Arresting/Investigative Officer) </div>						
			<p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>20</u> day of <u>November</u> 20<u>20</u> by <u>Cpl. Christopher Ward</u></p> <p>(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>Personally Known LEO</u></p> <p><u>AS Sanz 30565</u> Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>						

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 20 DAY OF November 2020, AT 02:34 AM PM

SUBJECT: Johnson, Jennifer, Marie CASE NUMBER: 20-128694

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S B. SANZ

PERSONAL CONTACT

DRIVING PATTERN: Actual physical control (physical evidence or statements putting def. behind wheel of vehicle)

D/S Ward ID # 16305 provided a supplemental probable cause with the following: D/S Ward observed a White Infiniti QX50 FL tag 258622 traveling northbound at an estimated 65 mph in a posted 45 mph zone I activated my STALKER DSR 2X SERIAL # DP009433 using the FRONT # KC030148 antenna, which gave a digital speed and a matching Doppler tone of 66 mph. I turned around and got behind the vehicle at the red light at S Military Trl and Boynton Beach Blvd. After the vehicle began heading Westbound on Boynton Beach Blvd it accelerated to 60 mph in a 45 mph zone. I activated my overhead emergency lights, stopping the vehicle in the area of Boynton Beach Blvd and Boynton Place Cir.

OBSERVATION OF DRIVER:

I observed that Jennifer Johnson was wearing a white shirt and black skirt. While questioning Jennifer, I observed her eyes to be red and glassy. I observed that she was slurring her words. Jennifer was asked to exit the vehicle to perform field sobriety tasks and she agreed. While exiting the vehicle, Jennifer appeared to be shaky on her feet.

DRIVER'S STATEMENTS:

I asked if Jennifer had been drinking or used any drugs, in which she stated she drank two glasses of red wine, and took no drugs. I asked Jennifer what medical problems and/or previous injuries she had, in which she stated none. Glasses or Contacts. No. I asked what medications she took, in which she stated none.

ODORS:

Obvious odor of an unknown alcoholic beverage

GENERAL OBSERVATIONS

SPEECH: slurred, slow

ATTITUDE: calm, compliant

CLOTHING: wearing white shirt and black skirt

MEDICAL/OTHER: NONE

STATE OF FLORIDA
COUNTY OF PALM BEACH

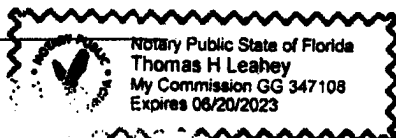
D/S B. SANZ

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 20 day of November 2020 by D/S B. SANZ

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

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



SUBJECT: Johnson, Jennifer, MarieCASE NUMBER 20-128694

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:

Once positioned in the front of D/S Ward's vehicle, I continued my investigation. I instructed Jennifer to keep her hands by her side, stand with her feet together, and follow a pen with her eyes not turning her head. I asked her if she understood my instructions. Jennifer verbally stated she understood my instructions. I observed both eyes to be red, bloodshot, and glossy. Her left and right eye displayed equal pupil size, equal tracking, and a lack of smooth pursuit. I observed distinct and sustained nystagmus was present in both her left and right eye at maximum deviation during two separate four second evaluations. The onset of nystagmus was prior to a 45 degree angle in both her left and right eye during two separate four second evaluations.

WALK & TURN:

I positioned Jennifer on a painted white line which was on a visually smooth and visually level surface, free of any debris and well lit by the headlights on D/S Ward's vehicle and nearby street lighting. I instructed Jennifer to place her left foot on the line and her right foot in front of the left touching heel to toe. I instructed her that she was to keep her hands at her side and stay in this position until I instructed her to do otherwise. I instructed her to walk nine heel to toe steps counting out loud, while watching her feet. On the ninth step she was to keep her front foot on the line and use her back foot, in a series of small steps, to turn around before walking nine heel to toe steps the opposite direction counting out loud and watching her feet. I demonstrated the task while I was verbally instructing her in the proper way to complete the task. During the task, I observed Jennifer swayed while balancing, started too soon, stops walking to steady self, did not touch heel to toe, stepped off the line. Jennifer used her arms to maintain balance (+6"), did not turn properly, and took the incorrect number of steps.

ONE LEG STAND:

I placed Jennifer with her feet together and arms at her side. I demonstrated the task as I verbally instructed her to raise one of her feet approximately six inches off of the ground, point her toe towards my patrol car, look at the raised foot, and count out loud 1001, 1002, 1003 and so on until told to stop. I asked her if she understood the instructions and demonstration I provided. After Jennifer stated she understood my instructions, the task was performed. While Jennifer stood in the instructional position, I observed she started too soon and swayed while standing stationary. While raising her foot she swayed while balancing, put her foot down (within 30 seconds), did not look at her foot as instructed, and kept looking over towards me.

FINGER TO NOSE:

I instructed Jennifer to stand with her feet together, make each hand into a fist keeping, extended her index fingers and to place her palms facing up. Jennifer was instructed to lower her arms by her side. I instructed and demonstrated the proper hand and arm position and for her to remain in this position while I demonstrated the rest of the task. I instructed and demonstrated her to tilt her head back approximately 45 degrees and close their eyes while waiting for a verbal command of left or right. On the command of "left" or "right", she would raise the requested hand, touch the tip of her finger to the tip of her nose, then bring her hand immediately back down to her side. During the instruction and demonstration of the task she swayed while standing in the instructional position. I asked her if she understood the instructions I provided and she verbally stated she understood. I instructed her to start the task as explained. During the task, I observed Jennifer used the correct finger but did not touch the tip of her nose.

ROMBERG ALPHABET:

I verbally inquired if Jennifer could recite the entire English alphabet. Jennifer stated she was able to recite the English alphabet and I instructed her to place her feet together with her arms at her side and stay in this position until told to do otherwise. I instructed Jennifer that upon starting she was to tilt her head back approximately 45 degrees and close their eyes. Jennifer would begin to state the alphabet in a slow and methodical manner without singing or rhyming it. I asked Jennifer if she understood the instructions and she verbally replied she understood. I instructed Jennifer to start the task as explained. During the task, I observed the driver swayed from side to side, from front to back, and used her arms for balancing.

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

STATE OF FLORIDA
COUNTY OF PALM BEACH

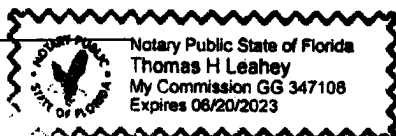
D/S B. SANZ

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 20 day of November 2020 by D/S B. SANZ

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

Notary Public, Clerk of Court, Officer (F.S.S. 117-40)



TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: Johnson, Jennifer M

CASE NUMBER: 20-128694

DATE: Nov 20, 2020

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0409

ENDING TIME: 0418

BREATH TESTS RESULTS: 1) R TIME 0411 A.M. ☒ P.M. ☐ 2) n/a TIME 0 A.M. ☐ P.M. ☐
3) n/a TIME 0 A.M. ☐ P.M. ☐ 4) n/a TIME 0 A.M. ☐ P.M. ☐

BREATH OPERATOR: Thomas H Leahey #19183

MAINTENANCE TECHNICIAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: thick

ATTITUDE: cooperative, fidgety

CLOTHING: black skirt, white tank top, black flip flops

MEDICAL CONDITIONS: none

MEDICATIONS: none

OTHER:

eyes are glassy & bloodshot
odor of unknown alcoholic beverage on breath
subject stated she had 2 glasses of wine - Q&A

REFUSED

COMMENTS:

arrived at center A/O conducted 20 minute observation period 0347 hrs.

subject refused to perform breath test

A/O read I/C & subject understood I/C

subject refused to perform breath test

A/O read rights & subject understood rights

A/O conducted Q&A

subject answered questions

REFUSED

WITNESS LIST

CASE NUMBER: 20-128694

ARRESTING OFFICER: D/S B. SANZ

ADDRESS: 7894 S. Jog Road Lake Worth, FL 33467

PHONE NUMBERS (HOME): (561) 688-4860 (WORK) _____

CAN TESTIFY TO: FACTS OF CASE AND INVESTIGATING SUCH CASE

NAME: D/S C. WARD 16305

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: Road Side Task, and initial stop

NAME: D/S R. GONZALEZ 31774

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: Road side task

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____



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

PBSO CASE # 20-128694

PBSO ZONE 6-41

AGENCY CASE # _____

CRASH CASE # _____

TIME OF STOP/CRASH 02:34

DATE 11/20/2020

DAY Friday

SUBJECT'S NAME Johnson, Jennifer, Marie

RACE W

SEX F

HGT 5'03

WGT 130

DOB 7/21/1977

LOCATION BOYNTON BEACH BLVD/S MILITARY TRAIL, BOYNTON BEACH/FL/33437

ARRESTING OFFICER'S NAME & ID D/S B. SANZ (30565)

AGENCY Palm Beach County Sheriff's Office

DIVISION: 6

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 03:47

ARREST TIME 03:04

BREATH RESULTS:

REFUSED

2) _____

3) _____

4) _____

TESTING OFFICER'S ID 19183

PBSO VIDEOTAPE # N/A

SUBJECT: Johnson, Jennifer M

CASE NUMBER: 20 128694

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? Boynton Beach Blvd

DIRECTION OF TRAVEL? West WHERE DID YOU START? I 95

WHAT TIME DID YOU START? IDK WHAT TIME IS IT NOW? 12:45

WHAT IS TODAY'S DATE? 11/20/20 WHAT DAY OF THE WEEK IS IT? Friday

WHAT COUNTY AND CITY ARE YOU IN NOW? Palm Beach County, West Palm Beach

WHEN DID YOU LAST EAT? 11/19/20 20:30 WHAT DID YOU EAT? Sub

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? Time with friends

HOW MUCH DO YOU WEIGH? 150 HAVE YOU BEEN DRINKING? Yes WHAT? Red wine

HOW MUCH? 2 glasses WHERE? Edin's WITH WHOM? Friends

WHEN DID YOU HAVE YOUR FIRST DRINK? 20:00 AND YOUR LAST DRINK? 20:45

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? Sip

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? No ARE YOU UNDER THE INFLUENCE? No

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? No HOW MUCH? No

WHAT? N/A WHERE? N/A WHEN? N/A

WHAT LINE OF WORK ARE YOU IN? Education WHEN DID YOU LAST WORK? Thursday

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? No WHAT? N/A

ARE YOU SICK OR INJURED? No WHAT'S WRONG? N/A

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? N/A

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? No WHO? N/A WHY? N/A

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? No WHAT? N/A WHEN? N/A

DO YOU HAVE:	EPILEPSY?	<u>No</u>
	GLASS EYE?	<u>No</u>
	FALSE TEETH?	<u>No</u>
	EAR INFECTION?	<u>No</u>
	INNER EAR TROUBLE?	<u>No</u>
	DIABETES?	<u>No</u>

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? N/A

INTERVIEWER: US Sanchez Bxet

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL

SUBJECT: Tolson, Jennifer M

CASE NUMBER: 20-128694

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 D/S B Smith 30565 of the PBSO

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X) _____

Read on camera

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X) _____

Read on camera

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

20-128694

I, D/S B. SANZ, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of Palm Beach County Sheriff's Office, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 20 day of November, 20 20, at 03:04 ☐ P.M. ☒ A.M.

DRIVER Jennifer Marie Johnson
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

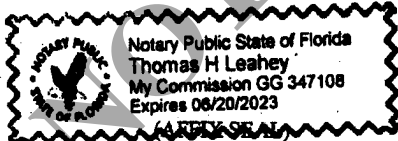
DL# J525433777610, state of Florida, was placed under lawful arrest for
the offense of Driving Under The Influence (DUI) by D/S B. SANZ and
issued Citation # _____
(Name of Arresting Officer)

That on or about the 20 day of November, 20 20, at _____ ☐ P.M. ☒ A.M.
in Palm Beach County,

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

[Signature]
Signature of Law Enforcement Officer or
Correctional Officer

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



The foregoing instrument was sworn and subscribed before
me this 20 day of November, 20 20,
by D/S B. SANZ,

who is personally known to me or who has produced
KNOWN LEO as identification

Notary Public T. Leahey

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title _____

Date _____

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.