







OBTS Number		<b>PROBABLE CAUSE AFFIDAVIT</b>		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile	N
ADMIN	Agency ORI Number	Agency Name	Agency Report Number					
	<b>FLO 500000</b>	<b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>	<b>06- 21-031387</b>					
CHARGES	Charge Type: Check as many as apply:		Special Notes:					
	<input type="checkbox"/> 1. Felony	<input checked="" type="checkbox"/> 2. Traffic Felony	<input checked="" type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance	<input type="checkbox"/> 6. Other	<i>SUP PC</i>	
DEF	Name (Last, First, Middle)		Alias		Race	Sex	Date of Birth	
	<b>MAGEE, JENNIFER, REBECCA</b>		/		W	F	11/13/1974	
CHARGES	Charge Description		Charge Description					
	DUI		316.193					
VICTIM	Victim's Name (Last, First, Middle)		Race		Sex	Date of Birth		
	<b>State of Florida, ,</b>							
VICTIM	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. The Person taken into custody</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence. <input checked="" type="checkbox"/> was observed by <b>D/S E. Davalos</b> who told <b>Inv. Schaefer</b> that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> confessed to _____ <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>admitting to the below facts.</p> <p>On the <b>1st</b> day of <b>February</b> 20<b>21</b> at <b>9:55</b> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p>								
<p><b>This is a supplemental probable cause affidavit.</b></p> <p><b>On Monday, February 01, 2021 at approximately 2155 hours, I was stopped at a red light on the westbound lanes of Forest Hill Blvd and Royal Fern Drive. As I was waiting for the light to turn green, I heard a loud bang and immediately felt my marked PBSO vehicle get hit from behind. I immediately turned on my emergency red and blue lights and exited my marked patrol vehicle (Asset # 75114), so I can check if any parties involved in the crash had injuries.</b></p> <p><b>I made contact of vehicle two (2), a black female, who stated she was not injured but she was in shock from being hit from behind. I walked eastbound and made contact with the driver of the other vehicle involved in the crash (Vehicle 1). I made contact with a white female, who was wearing a black long sleeve jacket and jeans. I asked the female if she has any injuries. She denied having any injuries. I was able to observe that the female had blood shot eyes and I was able to smell a strong odor of an unknown alcoholic beverage coming from the driver. I told her to stay in her car and do not move, due to other PBSO units arriving soon to handle the crash she caused. The female proceeded to move her vehicle (a black Chevrolet Tahoe), to the left side turning lane. I told her to stop and not move her vehicle. She continued to drive her vehicle westbound and made a U turn at the intersection. I attempted to have her stop the vehicle as she continued to drive eastbound on Forest Hill Blvd. The driver of vehicle one (1), made a right turn on Stribling Way, and continued to drive southbound, as I lost sight of the vehicle.</b></p> <p><b>Very short after, deputies made contact with a white female who matched the description of the driver of vehicle one (1- Black Chevrolet Tahoe), near the area where the vehicle was last seen. Moments later I drove to Pierson Road and Fairlane Farms Road. I positively identified the female who deputies encountered as the driver of vehicle that caused the crash and fled the scene.</b></p> <p><b>At this time my involvement in this case has ended</b></p>								
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH		D/S E. Davalos					
	<i>[Signature]</i> #24107							
<p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>1st</u> day of <u>February</u> 20<u>21</u> by <u>D/S E. Davalos 24107</u></p> <p>(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced _____</p> <p><i>Inv. Schaefer #8777</i></p> <p>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>								

**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 o chemical or controlled substances.

**NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST**

I am INV. J. SCHAEFER 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: READ ON CAMERA Magee,, Jennifer,, Rebecca

**CONSTITUTIONAL WARNINGS**

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

You have the right to remain silent and not answer any questions.

Any statement must be freely and voluntarily given.

You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.

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.

If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.

I can make no threats or promises to induce you to make a statement. This must be of your own free will.

Any statement can and will be used against you in a court of law.

SCANNED  
FEB 02 2021

SUSPECT'S SIGNATURE: READ ON SCENE & ON CAMERA Magee,, Jennifer,, Rebecca

SUBJECT: MAGEE, JENNIFER R CASE NUMBER: 21 071381

### 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: \_\_\_\_\_

WHITE - STATE ATTY.    YELLOW - DHSMV    PINK - CENTRAL RECORDS    GOLD - JAIL

SCANNED  
FEB 02 2021

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

I, INV. J. SCHAEFER, a duly certified Law Enforcement Officer or Correctional Officer, (Name of Officer reading Implied Consent Warning)

am a member of PBSO (Name of law enforcement agency), and I do swear

or affirm that on or about the 1st day of FEBRUARY, 20 21, at 10:54 P.M. A.M.

DRIVER Jennifer, Rebecca Magee, (Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

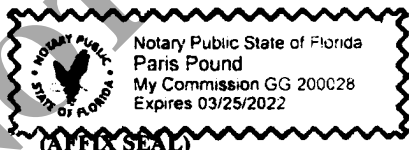
DL# M200-436-74-913-0, FL, state of FLORIDA, was placed under lawful arrest for the offense of DUI w/PROPERTY DAMAGE by INV. J. SCHAEFER (Name of Arresting Officer) and issued Citation # A2GCS1P

That on or about the 2nd day of FEBRUARY, 20 21, at 12:08 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.

Inv. J. Schaefer #8777
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 1st day of FEBRUARY, 20 21,

by INV. J. SCHAEFER,

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

Notary Public

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.

SCANNED FEB 22 2021

# TESTING FACILITY TASK REPORT

AGENCY:

SUBJECT:  CASE NUMBER:

DATE:  VIDEO DVD NUMBER:

BEGINNING TIME:  ENDING TIME:

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

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

BREATH OPERATOR:

MAINTENANCE TECHNICIAN:

## TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE:

CLOTHING:

MEDICAL CONDITIONS:

MEDICATIONS:

OTHER:

## COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 23:39 HRS.

SUBJECT: REFUSED TO TAKE TEST

A/O: READ I/C

SUBJECT: STATED SHE UNDERSTOOD I/C AND REFUSED TO TAKE TEST

A/O: READ RIGHTS

SUBJECT: STATED SHE UNDERSTOOD RIGHTS

A/O: ATTEMPTED Q&A

SUBJECT: INVOKED HER RIGHTS TO COUNSEL.

REFUSED

REFUSED

SCANNED  
FEB 02 2021



# Palm Beach County Sheriff's Office

Date 02/01/2021 Time: 22:54 Defendant: MAGEE, JENNIFER, REBECCA Case #: 21-031387  
 Location of Stop: 3500 BLOCK PIERSON ROAD Defendant D.O.B.: 11/13/1974 Defendant Race / Sex : W F  
 Location of Roadside: NOT PERFORMED Crash Case # 21-031074

### VEHICLE IN MOTION

Vehicle Description: Year: 2018 Make: CHEVY Model: TAHOE Color: BLK Tag #: JMAGEE State: FL  
 Violations Observed: LEAVING ACCIDENT SCENE w/PROPERTY DAMAGE  
 Citation #(s): #A2GCS1P-DUI w/PROPERTY DAMAGE / #ADY08LE - LEAVING SCENE w/PROP DAMAGE / #ADY08ME FAIL to SIGN

### PERSONAL CONTACT

Driver Identification: M200-436-74-913-0 Did driver exit vehicle?  Yes  No

- Manner -  Falling  Unsteady  Leans on Vehicle  Swaying  Other: \_\_\_\_\_
- Odor of breath alcohol/other -  Strong  Moderate  Slight  None
- Eyes -  N/A  Glassy  Red  Bloodshot  Watery  Dilated  Constricted
- Speech -  N/A  Slurred  Slow  Thick Tongued  Incoherent  Rambling  Accent
- Walking -  N/A  Staggering  Stumbling  Weaving  Falling
- Standing -  N/A  Swaying  Needs Support  Leaning  Falling
- Clothing -  N/A  Disheveled  Soiled  Missing  Neat Explain: \_\_\_\_\_
- Attitude -  N/A  Hostile  Aggressive  Profane  Other: \_\_\_\_\_
- Medications -  N/A  Yes  No Names \_\_\_\_\_  
Time of Consumption: \_\_\_\_\_

### PHYSICAL

Are you sick?  Yes  No Are you injured?  Yes  No  
 Do you wear contacts?  Yes  No If yes, what type?  Rigid  Soft Do you wear glasses?  Yes  No  
 Do you have any physical defects?  Yes  No If yes, specify: \_\_\_\_\_  
 Do you take any medication?  Yes  No If yes, specify: \_\_\_\_\_  
 Diabetic?  Yes  No Are you taking insulin?  Yes  No Epileptic?  Yes  No Glass eye?  Yes  No  
 Are you presently under the care of a doctor of dentist:  Yes  No If yes, which? \_\_\_\_\_  
 What are you being treated for? \_\_\_\_\_

### ENVIRONMENTAL FACTORS

- Area/Conditions -  Day  Night Wind -  Calm  Windy  Rain
- Traffic -  Heavy  Moderate  Light
- Area -  Parking Lot  Roadside  Other: \_\_\_\_\_
- Surface -  Paved  Level  Hard  Dry  Other: \_\_\_\_\_
- Lighting -  Street Light  Car Lights  Other: \_\_\_\_\_

F.S.T. -  Yes  No  Refused (If refused, was person advised they could be arrested and their refusal used in court?)  Yes  No  
 Witness to F.S.T.: INV. M. SMITH #9621

Arrested?  Yes  No  
 Additional Charges:  DWLS  No DL  Warrant  Resisting  Possession  Other: LEAVING SCENE w/PROP DAMAGE

Sworn and subscribed before me, this 01 day of FEBRUARY, 2021

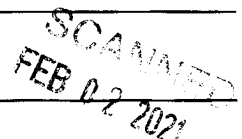
- Notary Public  Law Enforcement Officer  
 Personally known  Produced identification

Inv. J Schaefer #8777  
 Signature

INV. J SCHAEFER #8777

Print Name & Officer ID#:

Name and signature of Notary



Date: 02/01/2021 Time: 22:54 Defendant: MAGEE, JENNIFER, REBECCA Case #: 21-031387

FIELD SOBRIETY TASKS ADMINISTERED

H.G.N.

Left	Right
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

- Lack of smooth pursuit
- Distinct and Sustained Nystagmus at maximum deviation
- Onset prior to 45 degrees
- Vertical Nystagmus observed

Lack of Convergence:  Yes  No  Refused to do exercise

WALK AND TURN

1. Steps from line during instructions.
2. Starts too soon.
3. Stops while walking.
4. Does not touch heel to toe. \_\_\_\_\_ down \_\_\_\_\_ additional back \_\_\_\_\_ additional
5. Incorrect number of steps. \_\_\_\_\_ & \_\_\_\_\_
6. Raises arms for balance.
7. Improper turn.  Describe: \_\_\_\_\_
8. Steps off line/loses balance.  Step #: \_\_\_\_\_
9. Cannot do exercise.  Explain: \_\_\_\_\_
10. Type of line used: \_\_\_\_\_
11. Type of footwear: \_\_\_\_\_ Removed original footwear?: \_\_\_\_\_
12. Refused to do exercise.

ONE LEG STAND

1. Sways while balancing.
2. Uses arms for balance.
3. Hopping.
4. Puts foot down.  # of seconds: \_\_\_\_\_
5. Cannot do exercise.  Explain: \_\_\_\_\_
6. Refused to do exercise.

ALTERNATIVE TASKS

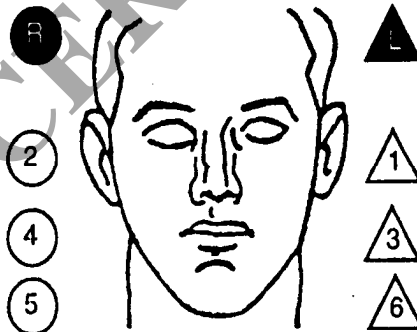
Finger to Nose

1. Keeps eyes open.
2. Does not return arms to side.
3. Fails to touch nose.
4. Uses wrong hand.
5. Unable to do exercise.
6. L  R  L  R  R  L
7. Refused to do exercise.

Explain: \_\_\_\_\_

Explain: \_\_\_\_\_

Notes: \_\_\_\_\_



Rhomberg/Balance/Alphabet

1. Opens eyes.
2. Sway while balancing.
3. Raises arms to balance.
4. Estimates 30 seconds at: \_\_\_\_\_
5. Misses alphabet recitation.

Explain: \_\_\_\_\_

6. Cannot do exercise.

Explain: \_\_\_\_\_

7. Refused to do exercise.

Explain: \_\_\_\_\_

SEE PAGE #3 FOR ADDITIONAL

Sworn and subscribed before me, this 01 day of FEBRUARY, 20 21

- Notary Public  Law Enforcement Officer
- Personally known  Produced identification

Name and signature of Notary

Inv. J. Schaefer #8777  
Signature

INV. J SCHAEFER #8777

Print Name & Officer ID#:

SCANNED  
FEB 02 2021

Date: 02/01/2021 Time: 22:54 Defendant: MAGEE, JENNIFER, REBECCA Case #: 21-031387

ADDITIONAL PROBABLE CAUSE ALTERNATIVE TASKS

On 02/01/2021 at approximately 21:55 the defendant rear ended a 2011 white Toyota Van which then impacted a white 2017 Ford PBSO patrol vehicle at a red traffic signal at the intersection of Forest Hill Blvd and Fern Drive which is located in the Village of Wellington, Palm Beach County, Florida. The driver of the Ford, an off-duty Deputy Sheriff, exited his vehicle and checked on both drivers. The Deputy, E. Davalos #24107 made contact with the defendant, whom he described as a W/F wearing a black jacket and jeans and detected signs of impairment. The defendant then moved her vehicle from its resting position and D/S Davalos told her to stop. The defendant then proceeded to make a U-turn at the light and fled the scene eastbound.

D/S Davalos broadcast the vehicle description and partial tag and direction of travel. Responding Deputies were able to locate a W/F wearing a black jacket and jeans walking eastbound on Pierson Road near Fairlane Farms Road which is primarily a commercial area. Contact with the defendant was made by D/S B. Shouse #34287 who detected signs of impairment as well. D/S Davalos drove to the location of D/S Shouse and the defendant and made a positive identification as being the driver of the black Chevy at the time of the crash and who in turn fled the scene. The defendant was verbally identified as "JENNIFER REBECCA MAGEE" and confirmed utilizing D.A.V.I.D.

D/S M. Barbusio #29006 BOLO'd the area for Magee's vehicle which was a 2018 black Chevy Tahoe bearing Florida personalized tag of JMAGEE. The defendant's vehicle was located at 3111 Fortune Way which was in close proximity to where the defendant was found walking. The black Chevy had visible damage to the front bumper along with white paint transfer which coincided with the damage on the 2011 Toyota Van.

Upon my making contact with Magee, 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 Magee prior to donning my PPE mask. Magee had glassy and blood shot eyes. Magee's speech was slurred, slow, and at times difficult to understand. Magee made numerous incoherent statements. Magee's movements were slow and deliberate. Magee was lethargic in his movements with poor coordination. Magee was wearing a black jacket and blue jeans, as described in the BOLO.

With the crash investigation complete, I informed Magee that I was now going to be conducting a criminal DUI investigation. Magee was read her Miranda warning and post Miranda stated the reason for the accident was that she could just not stop in time. Magee was very fidgety & talkative while conducting the preliminary interview. With Magee showing signs of possible impairment, I requested that she perform some standardized field sobriety tasks. Magee declined to perform the SFST's and her Taylor Warnings were explained to her which she stated she understood. Magee again decline to perform the SFST's and wanted to call her attorney.

At this time, with Magee showing definite signs of impairment, and based on all the clues exhibited, and the totality of the circumstances, I determined that Magee was in actual physical control of a vehicle, while under the influence of alcoholic beverages or chemical substances as set forth in Florida Statute 877.111, or a controlled substance as set forth in Florida Statute 893 or any combination thereof, and was affected to the extent that her normal faculties were impaired, contrary to Florida Statute 316.193(1) and was taken into custody without incident. As a result of my on scene investigation and the actions of Magee, I additionally found that probable cause existed for Leaving the Accident Scene with Property Damage, contrary to FS 316.061(1).

All Deputies noted above competed sworn written supplemental probable cause affidavits.

Sworn and subscribed before me, this 01 day of FEBRUARY, 2021

- Notary Public Law Enforcement Officer
Personally known Produced identification

Signature: Inv. J Schaefer #8777
INV. J SCHAEFER #8777
Print Name & Officer ID#:
SCANNED FEB 02 2021

Name and signature of Notary

# WITNESS LIST

CASE NUMBER: 21-031387

ARRESTING OFFICER: INV. J. SCHAEFER

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, IN-CAR & BAT VIDEO

NAME: D/S E. DAVALOS #24107 (DISTRICT 16)

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

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) (561) 688-3000

CAN TESTIFY TO: SEE SUPPLEMENTAL PROBABLE CAUSE AFFIDAVIT

NAME: D/S B SHOUSE #34287 (DISTRICT 8)

ADDRESS 3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME) (561) \_\_\_\_\_ (WORK) (561) 688-3000

CAN TESTIFY TO: SEE SUPPLEMENTAL PROBABLE CAUSE AFFIDAVIT

NAME: D/S M BARBUSIO #29006 (DISTRICT 8)

ADDRESS 3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME) 0 \_\_\_\_\_ (WORK) 0

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: \_\_\_\_\_

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

ADDRESS \_\_\_\_\_

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

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

NOT A CERTIFIED COPY

SCANNED  
FEB 02 2021



**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 checked="" type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	4
	<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: 2021002712	Date: 2/02/21
	Specialist Name/ID: J. Beck/9007