

0530260 50-2022-CF-002211-AMB 536

ADULT		ARREST / NOTICE TO APPEAR		1. Arrest (No Warrant) 3. Request for Warrant 6. Arrest (Warrant) 4. Request for Capias 2. N.T.A. 5. Juvenile Referral		1 JUVENILE	
Agency ORI Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N.T.A.'s only) 3 2 2022-003712			
Charge Type: Check as many ☒ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		If Weapon Seized Enter Type UNARMED		Multiple Clearance Indicator			
Location of Arrest (Including Name of Business) 1101 SW 13TH ST, 1101 SW 13TH ST, BOCA RATON, FL 33486		Location of Offense (Business Name, Address) 1101 SW 13TH ST, BOCA RATON, FL 33486					
Date of Arrest 03/20/2022	Time of Arrest 18:02	Booking Date 03/20/2022	Booking Time 18:12	Jail Date 03/20/2022	Jail Time 20:06	Location of Vehicle NONE	
Name (Last, First, Middle) ECKERT, JESSICA LORENA		Alias: Alias (Name, DOB, Soc. Sec. #, Etc.)					
Race W - White B - Black O - Oriental/Asian W	Sex F	Date of Birth 12/25/1986	Height 5'00	Weight 130	Eye Color BROWN	Hair Color BROWN	Complexion MEDIUM
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT BOT BACK / CELTIC KNOT; TATT BOTH SHOULDER / BIRDS		Marital Status M		Religion		Indication of: Alcohol Influence Drug Influence Yes ☒ No ☐ Unk. ☐	
Local Address (Street, Apt. Number) 1215 SW 9TH AVE, BOCA RATON, FL 33486		(City) (State) (Zip)		Phone (954) 803-9259		Residence Type: 1. City 3. Florida 2. County 4. Out of State 1	
Permanent Address (Street, Apt. Number) 1215 SW 9TH AVE, BOCA RATON, FL 33486		(City) (State) (Zip)		Phone (954) 803-9259		Address Source VICTIM	
Business Address (Name, Street) UNEMPLOYED,		(City) (State) (Zip)		Phone		Occupation Unemployed	
D/L Number, State E263432869650 / FL		INS Number		Place of Birth (City, State) PARKLAND, TX		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 ☐ Other		Name (Last, First, Middle)		Residence Phone			
☐ Legal Custodian		Address (Street, Apt. Number)		(City) (State) (Zip)		Business Phone	
Notified by: (Name)		Date		Time		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated	
Released To: (Name)		Relationship		Date		Time	
The above address was provided by ☐ defendant and/or ☐ defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.		School Attended		Grade		Value of Property	
☐ Yes, by: ☐ No		Property Crime? ☐ Yes ☒ No		Description of Property			
Drug Activity N. N/A S. Sell B. Buy P. Possess 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. Synthetic		U. Unknown Z. Other					
Charge Description DRIVE UNDER INFLUENCE ALC		Statute Violation Number 316.193(1A)		Violation of ORD #			
Drug Activity		Drug Type		Amount / Unit		Offense #	
Counts		Domestic Violence		Warrant / Capias Number		Bond	
Charge Description NEGLECT CHILD WITHOUT GREAT BODILY HARM		Statute Violation Number 827.03(2D)		Violation of ORD #			
Drug Activity		Drug Type		Amount / Unit		Offense #	
Counts		Domestic Violence		Warrant / Capias Number		Bond	
Charge Description		Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type		Amount / Unit		Offense #	
Counts		Domestic Violence		Warrant / Capias Number		Bond	
Health - Apparent Physical Condition of Defendant GOOD		Any knowledge of the following: ☐ Mental ☐ Escape/Risk ☐ Medication ☐ Deformation ☐ Injuries		Explain:			
Check which applies: ☐ Released O.R. ☐ Posted Bond		☐ Released to Parent/Guardian ☐ South County Mental Health		☒ T.O.T. County Jail		PROPERTY - Received By 868	
Transported By 868		Date Transported 03/20/2022		Time Transported 20:06		Released By 868	
INSTRUCTION NO. 1 - Mandatory appearance in court INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.		Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444		Court Date and Time 04/18/2022 08:30:00		No Photo Available	
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			
HOLD for Other Agency		Signature of Arresting Officer		Name Verification (Printed by Arrestee)			
☐ Dangerous ☐ Suicidal		☐ Resisted Arrest ☐ Other		(PRINT)			
I.D. #		Pouch #		Name of Arresting Officer (Print) WILLIAMS, D.		I.D. # 868	
I.D. #		Pouch #		Transferring Officer WILLIAMS, DAVID		I.D. # 868	
Agency BOCA		Witness here if subject signed with an "X".		PAGE 1 OF 1			

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

A.J. POSSET 830

OBT Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
A D M I N I S T R A T I V E	Agency ORI Number	Agency Name		Agency Report Number					
	FL FL0500200	BOCA RATON POLICE DEPARTMENT		3 2 2022-003712					
C H A R G E S	Charge Type: Check as many as apply.			Special Notes					
	☒ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other								
D E F E N D A N T	Name (Last, First, Middle)			Alias			Race	Sex	Date of Birth
	ECKERT, JESSICA LORENA						W	F	12/25/1986
C H A R G E S	Charge Description			Charge Description					
	316.193(1A) DUI			827.03(2D) NEGLECT CHILD WITHOUT GREAT BODILY HARM					
V I C T I M	Victim's Name (Last, First, Middle)			Race			Sex	Date of Birth	
	<i>State of Florida</i>								
M I S T R A T I V E	Local Address (Street, Apt. Number)			(City)			(State)	(Zip)	
M I S T R A T I V E	Business Address (Name, Street)			(City)			(State)	(Zip)	
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 commit 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 <u>20</u> day of <u>March</u>, <u>2022</u> at <u>18:02</u> (Specifically include facts constituting cause for arrest.) On 3/20/2022, at 1714 hours, I was dispatched to 1101 SW 13th St in reference to a possible intoxicated driver. Both Officers Rosario and Fowler were dispatched and arrived on the scene before me. Officer Fowler was the first to arrive and upon his arrival, the defendant, Jessica Eckert, was sitting in the driver's seat in actual physical control of her vehicle (FL 46BGBA). Both officer Rosario and Fowler maintained constant observation of Eckert up and until the time I arrived on the scene. During this period Eckert did not consume any substances including liquids. See both their supplements for complete details. There were two witnesses still on the scene who were the original subjects that called BRPD. Both witnesses advised while driving westbound on SW 13th St they observed the defendant's vehicle pulled over and stationary on the right-hand side of the road. Both witnesses stated they observed _____ standing in the roadway flagging down other vehicles. The witnesses had to physically remove the children from the roadway for fear of their safety. One witness stated she was concerned that if she didn't remove the kids they would be hit by a car. According to the witnesses, Eckert was "slumped over the steering wheel" and "appeared to be under the influence of some drug". Eckert was described as extremely slow with responses when asked questions and made multiple statements that she couldn't figure out how to drive her car any further. The vehicle was later confirmed as operational and able to be driven at any time. In speaking with Eckert, I was unable to smell any alcohol on her breath, however, her eyes were extremely glassy/watery. Based upon all the evidence currently available and observations made by the witnesses I asked if Eckert would be willing to participate in Field Sobriety Exercises (FSE's) to which she complied.									
A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME								
	GREEN, KENNETH JOHN NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10) <u>03/20/2022</u> DATE SIGNATURE OF ARRESTING / INVESTIGATING OFFICER WILLIAMS, DAVID (868) NAME OF OFFICER (PLEASE PRINT) <u>03/20/2022</u> DATE								
									PAGE 1 of 3

COURT

STATE ATTORNEY

CENTRAL RECORDS

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OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
A D M I N I S T R A T I V E	Agency ORI Number FL FL0500200	Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2022-003712						
Charge Type: Check as many as apply.		☒ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other		Special Notes:					
Name (Last, First, Middle) ECKERT, JESSICA LORENA		Alias		Race W	Sex F	Date of Birth 12/25/1986			
FSE's were conducted as follows. Horizontal Gaze Nystagmus (HGN) The defendant identified the stimulus as red. The defendant had equal pupil size and equal tracking in both eyes. The defendant's eyes continued to jump as she attempted to follow the stimulus. In conducting the exercise, I was able to observe a Lack of Smooth Pursuit, Distinct and Sustained Nystagmus at Maximum Deviation, the onset of Nystagmus prior to 45 degrees, and Vertical Nystagmus. While giving the instructions the defendant continued to sway. The defendant's Nystagmus was so pronounced upon moving anywhere from resting it was clearly visible. Walk and Turn The surface was flat and hard. The defendant attempted to do the exercise with shoes. I asked the defendant multiple times if conducting the exercise barefoot would be easier, however, she insisted on keeping the shoes. The line used was a tape yellow line. I made sure the defendant both knew the line she would be using and the color of that line. I began the exercise by instructing and demonstrating to the defendant how to complete the exercise. While giving instructions the defendant lost balance several times, failed to stay in the starting position. In conducting the exercise, the defendant walked the improper number of steps, made an improper turn, failed to walk heel-to-toe, and raised her arms above six inches in an attempt to steady herself. I had to explain the instruction over 5 times as each time she confirmed she understood them Eckert would only complete half the exercise. One Leg Stand The surface was flat and hard. The defendant attempted to do the exercise with shoes. The defendant raised her left leg. I advised the defendant multiples times to look at her foot as she was conducting the exercise. The defendant lost track of her count and placed her foot down multiple times. During the exercise, the defendant continued to sway. As with the other exercises I had to explain the instructions over 5 times. During each attempt, Eckert would only complete portions of the exercises even after confirming she understood each time. Finger to nose The surface was flat and hard. The defendant conducted the exercise with shoes. The defendant failed to touch the tip of her finger to the tip of her nose multiple times. The defendant would repeatedly leave her finger on her nose despite explaining the instructions multiple times. During the exercise, the defendant continued to sway.									
SWORN AND SUBSCRIBED BEFORE ME GREEN, KENNETH JOHN NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10) 03/20/2022 DATE SIGNATURE OF ARRESTING / INVESTIGATING OFFICER WILLIAMS, DAVID (868) NAME OF OFFICER (PLEASE PRINT) 03/20/2022 DATE									
								PAGE 2 OF 3	

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OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE		
A D M I N I S T R A T I V E	Agency ORI Number FL FL0500200		Agency Name BOCA RATON POLICE DEPARTMENT		Agency Report Number 3 2 2022-003712				
	Charge Type: Check as many as apply. ☒ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Special Notes:						
Name (Last, First, Middle) ECKERT, JESSICA LORENA				Alias	Race W	Sex F	Date of Birth 12/25/1986		
Time Approximation The surface was flat and hard. The defendant conducted the exercise with shoes. During the exercise, the defendant continued to sway. The defendant notified me of the completion of the exercise after 25 seconds. Due to the totality of the circumstances and my training/experience, I felt the defendant was unable to perform simple tasks during the exercises due to being impaired. I felt the defendant is too impaired to operate a motor vehicle safely. The defendant was placed under arrest at 1802 hours, for driving under the influence. Eckert's state of inebriation resulted in [REDACTED] aged 7 and 3 to flag down drivers in the middle of the roadway in order to help her. This is a clear indicator of Child Neglect and as such Eckert did commit the offense F.S.S. 827.03(2D). Eckert was transported to BRPD. Reference BRPD Intoxilyzer 8000 S#80-006622, results (.000.000) When asked for Urine to identify the presence of Chemical or Controlled Substances Eckert refused. Eckert later asked what kind of drugs are checked, when informed the results were sent to a lab Eckert again confirmed she does not wish to provide Urine. Eckert was transported to Palm Beach County Jail. 22-3712 - DUI / Child Endangerment - 1101 SW 13th St									
<table border="0" style="width:100%;"> <tr> <td style="width:50%; vertical-align: top;"> SWORN AND SUBSCRIBED BEFORE ME GREEN, KENNETH JOHN NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 03/20/2022 DATE </td> <td style="width:50%; vertical-align: top;"> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER WILLIAMS, DAVID (868) NAME OF OFFICER (PLEASE PRINT) 03/20/2022 DATE </td> </tr> </table>								SWORN AND SUBSCRIBED BEFORE ME GREEN, KENNETH JOHN NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 03/20/2022 DATE	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER WILLIAMS, DAVID (868) NAME OF OFFICER (PLEASE PRINT) 03/20/2022 DATE
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COURT	STATE ATTORNEY	CENTRAL RECORDS	JAIL	CRIME ANALYSIS	P. I. O.
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NOT A CERTIFIED COPY

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

I, David Williams, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of Boca Raton Police Services Department, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 20 day of March, 20 22, at 6:02 ☒ P.M. ☐ A.M.

DRIVER Jessica Lorena Eckert,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# E263432869650, state of Florida, was placed under lawful arrest for
the offense of DUI by David Williams and
(Name of Arresting Officer)
issued Citation # ABLQGE.

That on or about the 20 day of March, 20 22, at 7:08 ☒ 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:

[Signature]
Signature of Attesting Officer

Title _____

Date _____

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before

me this _____ day of _____, 20 _____.

by _____,

who is personally known to me or who has produced

_____ as identification

Notary Public _____

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.

**FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT**

Instrument Type: Intoxilyzer 8000
Instrument Registered To: BOCA RATON PD
Instrument Serial Number: 80-006622 Software: 8100.27
Date of Test: 03/20/2022

Date of Last Agency Inspection: 02/25/2022
Observation Period Began: 18:31
Subject's Name: JESSICA L ECKERT

DOB: 12/25/1986 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	18:55
	Air Blank	0.000	18:56
	Control Test	0.079	18:56
	Air Blank	0.000	18:57
	Subject Sample #1	0.000	18:57
	Air Blank	0.000	18:58
	Air Blank	0.000	19:00
	Subject Sample #2	0.000	19:00
	Air Blank	0.000	19:01
	Control Test	0.076	19:01
	Air Blank	0.000	19:02
	Diagnostics Check	OK	19:02

Cylinder Lot: 15421080A1
Exp: 08/05/2023

State of Florida, County of Palm Beach,

Personally appeared before me the undersigned authority, who (☒) is personally known to me or (☒) produced badge as identification, and who after being placed under oath, states:

I, GREGORY J. CARPACCIA, 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: [Signature] Date: 3/20/22
Signature

Sworn to (or affirmed) before me this 20 day of March, 2022

[Signature] Printed Name of Notary Public-State of Florida
Signature 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.

Case #: 22-3712

15 time: 1802 hours

20min Obsv: 1831 hours

DUI INFLUENCE REPORT



BOCA RATON POLICE SERVICES DEPARTMENT
100 NW 2nd Avenue
Boca Raton, FL 33432

Horizontal Gaze Nystagmus:

- | | |
|--|---|
| ☐ Left eye does not follow smoothly | ☐ Right eye does not follow smoothly |
| ☐ Left eye jerks at 45 degrees angle or less | ☐ Right eye jerks at 45 degrees angle or less |
| ☐ Distinct jerking left eye maximum deviation | ☐ Distinct jerking right eye maximum deviation |

Can not do, Why? _____

Walk and turn: _____

Can not do, Why? _____

One leg stand: _____

Can not do, Why? _____

Finger to nose: _____

Can not do, Why? _____

Alphabet (speech pattern): _____

Can not do, Why? _____

Breath/Blood test results: _____

State of Florida, County of Palm Beach,
Sworn and subscribed before me this _____ (date) by _____.

Notary/Clerk of Court/ Officer (FSS 117.10)

Date

Signature of Arresting Officer

Name of Officer (print)

ARRESTING OFFICER: Williams, David

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____



BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT - PART II

To be filled out at testing facility

Agency Case # 22-3712

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is Sunday, March, 20th, 2022.
(day) (month) (date) (year)

B. The time is now approximately ~~4:55~~⁶ 6:55 AM/PM

C. The following is in reference to case number 22-3712.

D. Present at this time is Off. Williams of the Boca Raton Police Department.
(Officer's Name)

E. Officer Williams, have you arrested Jessica Eckert in violation of
Florida State Statute 316.193? (Defendant's name)

F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida? Yes

G. Mr./Mrs./Ms. Eckert, I am required to inform you these
proceedings are being video recorded.

Operator Note: Video record breath request, breath sample, and interview.



BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT - PART I

On the 20 day of March 2022, at 1802 AM/PM:

Subject: Jessica Eckert Case Number: 22-3712

PERSONAL CONTACT

Driving Pattern: _____

_____ CP _____

Observation of Driver: _____

_____ CP _____

Driver's Statement: _____

_____ CP _____

Odors: _____

GENERAL OBSERVATIONS

Speech: _____

Attitude: _____

Clothing: _____ CP _____

Medical Problems: _____

Medications: _____

Other: _____

II. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.

Note: Read only the paragraph applicable to the type of test you are requesting.

- A. I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.
- B. I am now requesting that you submit to a lawful test of your **URINE** for the purpose of determining the presence of chemical or controlled substances.
- C. I am now requesting that you submit to a lawful test of your **BLOOD** for the purpose of determining its alcohol content and the presence of chemical or controlled substances.

IMPLIED CONSENT WARNINGS

Note: Read only if the subject does not comply with your request.

I am Otc. Williams of the Boca Raton Police Department

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 Signature: _____

Note: Also read for CDL holders:

IN ADDITION, your refusal to submit will result in the loss of your commercial privileges for one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from operating a commercial motor vehicle.

Note: After reading the implied consent warning, the arresting officer must request a breath sample again.

(IF REFUSAL THEN)

At this time Mr./Mrs./Ms. _____ has refused to submit to a breath test.

The date is March, 20th, 2022, and the time is 708 AM/PM.
(month) (day) (year)

A refusal form will be completed by the arresting officer.



BOCA RATON POLICE SERVICES DEPARTMENT

JUVENILE CONSTITUTIONAL WARNINGS

Rights of suspects prior to custodial questioning. Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

- (1) You have the right to remain silent and not answer any questions. *Tell me in your own words what you think this means.
(You do not have to talk to me or answer any questions about this offense. You can be quiet if you want.)*
- (2) Any statement you make must be freely and voluntarily given. *Tell me in your own words what you think this means.
(If you do talk to me it has to be because you want to and not because anyone is forcing you to speak.)*
- (3) You have a right to the presence and representation of a lawyer of your choice before you make any statement and during any questioning. *Tell me in your own words what you think this means.
(You can talk to a lawyer before we ask you any questions and you can have him/her with you now, during our questioning.)*
- (4) If you cannot afford a lawyer, you are entitled to the presence and representation of a court appointed lawyer before you make any statement and during any questioning. *Tell me in your own words what you think this means
(If you do not have money for a lawyer and you want one, a lawyer will be given to you for free.)*
- (5) If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent. *Tell me in your own words what you think this means.
(If you decide to talk to me then change your mind, you can stop answering my questions at any time.)*
- (6) I can make no threats or promises to induce you to make a statement. This must be of your own free will. *Tell me in your own words what you think this means
(I am not allowed to threaten you or make you any promises to get you to talk to me. If you decide to talk, it must be because you want to.)*
- (7) Any statement can be and will be used against you in a court of law. *Tell me in your own words what you think this means
(Anything you say to me can and will be told to the judge or a jury in court. A judge is a person who decides if you have done something wrong. Sometimes a group of people called a jury decide this, but the Judge is the person who decides what punishment you get.)*
- (8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: _____ Date: _____ Time: _____



BOCA RATON POLICE SERVICES DEPARTMENT
TESTING FACILITY TASK REPORT

SUBJECT: Eckert, Jessica

CASE #: 22-3712 DATE: 3/20/22

BREATH TEST RESULTS

1) TIME 6:57 ⁰⁰⁰ AM/PM 2) TIME 6:57 ⁰⁰⁰ AM/PM
3) TIME _____ AM/PM 4) TIME _____ AM/PM

BREATH OPERATOR: Ofc. Careccio

MAINTENANCE TECHNICIAN: Ofc. Vancamp

TESTING OFFICER'S OBSERVATIONS

SPEECH: slow, delayed speech/response to instructions

ATTITUDE: Reluctant to follow simple instructions, tiredness

CLOTHING: _____

MEDICAL CONDITION: _____

OTHER: _____

COMMENTS: _____

Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

- (1) You have the right to remain silent and not answer any questions.
- (2) Any statement you make must be freely and voluntarily given.
- (3) You have a right to the presence and representation 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 and representation of a court appointed lawyer before you make any statement 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 be and will be used against you in a court of law.
- (8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: _____

Date: 3/20/2022

Time: 8:26

QUESTIONS AND ANSWERS

Were you operating a motor vehicle at the time of the accident/stop? _____

Where were you going? _____

What street or highway were you on? _____

Direction of travel? _____

Where did you start driving from? _____

What city (county) were you stopped in? _____

What time did you start? _____ AM/PM What time is it now? _____

What is today's date? _____ What day of the week is it? _____

When did you last eat? _____ What did you eat? _____

What have you been doing the past three hours prior to this stop/accident? _____

How much do you weigh? _____ Have you been drinking? _____ What were you drinking? _____

How much? _____ Where? _____ With whom were you drinking? _____

When did you have your first drink? _____ AM/PM When did you stop drinking? _____ AM/PM

How did you consume your last two drinks? _____

Are you under the influence of alcohol now? ☐ Yes ☐ No

Can you feel the effects of alcohol? ☐ Yes ☐ No

Have you consumed alcohol since the accident? ☐ Yes ☐ No

Can you feel the effects of alcohol? ☐ Yes ☐ No

Have you consumed alcohol since the accident? ☐ Yes ☐ No How much? _____

What? _____ Where? _____

What line of work are you in? _____

When did you last work? _____

Do you have any physical defects or injuries? ☐ Yes ☐ No If yes, explain: _____

Are you sick or injured? ☐ Yes ☒ No If yes, explain: _____

Do you limp? ☐ Yes ☐ No

Did you get a bump on the head? ☐ Yes ☐ No

Were you in an accident today? _____

Have you taken any drugs or smoked marijuana today? _____

What? _____ When? _____

Have you seen a doctor or dentist today? ☐ Yes ☐ No Who? _____

Are you taking any prescription medications? ☐ Yes ☐ No What? _____ When? _____

Do you have: Epilepsy? ☐ Yes ☐ No

Inner ear trouble? ☐ Yes ☐ No

Glass eye? ☐ Yes ☐ No

Ear infection? ☐ Yes ☐ No

False teeth? ☐ Yes ☐ No

Diabetes? ☐ Yes ☐ No

Any problems not correctable by glasses or contact lenses? _____

Do you take insulin? ☐ Yes ☐ No If yes, when was your last injection? _____

Have you ever had a driver's license in any other state? _____

I am now ending this video recording. The time is now approximately 7:03 AM PM.

The date is March, 20th, 2022.
(month) (day) (year)



**PALM BEACH COUNTY
SHERIFF'S OFFICE**
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

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

REVIEW COMPLETED BY

Booking Number: 2022007269	Date:
	Specialist Name/ID: T Howard/7185