21CT9383AMB

9/5
☐ Check if Supplement is Attached

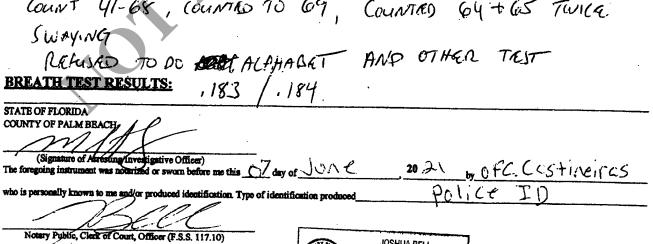
П		/ NOTICE TO APPEAR nile Referral Report	1. Arrest 3. Request for Warrant Juvenile 2. N.T.A. 4. Request for Caples
ų	Agency ORI Number Agency Name		Gency Report Number (N.T.A.'s only) 694 (())
TRATI	Charge Type: 1. Felony 3. Medemeanor	5. Ordinance	It Wespon Seized Multiple
MENTS	Landon of Arest (Individual Name of Business)	Location of Offense	Enter Type Clearance Indicator Business Name, Address)
ş		OCH, R STO Royar Par	M WAY IS COUNTY MY PALM, BRACH, SC 37470 Time Cognition of Wahidle, EAUFF S TOWING
	0,6,0,7,2, 10,2,3,4 060/4		
Г	Name (Leat. First, Middle) HOS FELD JOHN CMC	•	DOB, Soc. Sec. #, Etc.
	Race W - White B - Black O - Orientel/Asian W Sex Dete of Birth O - 7 4 -	7.6 509 Weight	Eye Color Helr Color Completion Build BLUK BROWN FAIR MEDIUM
	Scars, Marks, Tattoos, Unique Physical Festures (Location, Type, Description)		Hel Status Religion Indication of V. N. Unk ALLIED Wilder W. Alcohol Influence Orug Influence
DEFENDAM		PAM BARHEL 33411	Phone Residence Type: 3. Florida (2)
	Local Address (Street, Apt. Number) Dermanent Address (Street, Apt. Number) Permanent Address (Street, Apt. Number) O276 FOXT(A) L M S AFT 1/2 WAST(M. Business Address (Name. Street) (City)	(State) (Zip)	Phone Address Source
l	10276 FOXTANL NO 5 AFT 1/2 WASTIM Business Address (Name. Street) (City)	M BEALH, FL 33411 (State) (Zip)	Phone Occupation
l	 	I INS Number	Pleas of Birth (City, State) Citizenship
L	H214 465 762540	- Number	MIAMI, FL US
Ę	Co-Defendant (Last, First, Middle)	Race Sex	Date of Sirth 1. Arrested 3. Felony 4. Mademeanor 5. Juvenile
8	Co-Defendant (Lest, First, Middle)	Race Sex	Date of Birth 1. Arrested 3. Felony 4. Misdemsanor 5. Juvenite
r	Parent Name (Last) (Fin	st) (M	ddle) Residence Phone
1	Address (Street, Apt. Number) (Ci	Y.	(Zip) Business Phone
	Notified by: (Name)	Date Time	Juvenile Disposition 1. Handled/Processed within 2. TOT HRS/DYS
Ž	Released To: (Name)	Relationship	Dept. and Released. 3. Incorporated Date Time
ľ	The above address was provided by defendant and / or defendant's paren	ts. The child and / or perent was told	School Attended Grade
	The above address was provided by defendant and / or defendant's paren to keep the Juvanile Court Clark's Office (Phone (561) 355-8511) informed of any class by: (Name) No (Ressort Property Orime? Description of Property	change of address.	Value of Property
L	☐ Yes ☐ No	V 2 Otto 1 Day 5 to	B. Barbiturate H. Halfucinogen P. Paranhernalis/ U. Unknown
8	N. N/A B. Buy D. Deliver Distribute Produ P. Possess T. Traffic E. Use Cultive		C. Cocaine M. Marijuena Equipment Z. Other E. Heroin C. Oplum/Derjs. S. Synthetic
y y	Charge Description CLASH-PLOPELTY DAMAGE COU	ots Domestic Statute Violetion No.	17 9 3 3 (A TATE C I I) Violation of ORD #
Š	Drug Activity Drug Type Amount / Unit / Offense 2021 - O	00692 Warrant/Calis N	Umber Bond
W W	Charge Description Cour		mber Violation of ORD #
CHARGE	Drug Activity Drug Type Amount / Unit Offense #	Warrant / Capies N	
<u></u>	Charge Description Cour	Violence 1	mber Violation of ORD #
CHARGE	Drug Activity Drug Type Amount / Unit Offense #	Warrant / Capias N	umber Bond
٢	Charge Description Cour	nts Domestic Statute Violation No Violence	
CHARGE	Drug Activity Drug Type Amount / Unit Offense #	Warrant / Caples N	umber Bond
F	Location (Court, Room Number, Address)		
COURT Date and Time OC Day ZY Year ZOZI Time 630 (A.M.) SPM. JUN 08 2021			// IIIN 0.8 2021
TO AP			A.M. P.M.
NOTICE	I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER TO APPEAR, BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR.	THAT I MAY BE HELD IN CONTEMPT OF	COURT AND A WARRANT TO MY ARREST SHALL BE ISSUED
Ž	Signatule of Defendant (or Juvenile and Perent/Custodian		G/7/24-
	HOLD for other agency Signature of Aresting	Officer	Name/Vehit/dajjan (Printel/fg/America)
ADMIN	Dengerous Resisted Arrest Nerne of Arresting Off Suicides Diser: Mac Hat He C	CASTINALLAS DIBS - PSP	PAGE _
	Transporting Officer M CASTING	I.D. # Agency	1/4/1/2
PB6	PBSO 40146 REV. 02/13 DISTRIBUTION: WHITE - COURT COPY OFFEEN ATATE		
	/'II (A	ノーノルで、一番に代づ	

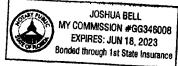
D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 7 DAY OF JUNE 20 DOB, AT 0/57 AM PM
SUBJECT: JOHN & HUSFRLO CASE NUMBER: ZOLL-CCO 692
AGENCY: PSPD ARRESTING OFFICER: CASTING OLS OLS
DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL BYIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)
VAHICLA WAS FOUND RENGASING OUT OF A MADIAN , DAMAGE TO
TOWN POLE AND SUBSRCT'S VEHILLE, SKID MARKS SHOWING
VEHICLE LOSING CONTACL WHICE ATTEMPTING TO TURN RIGHT
IN THE INTERSPETION.
OBSERVATION OF DRIVER:
DRIVER HOD GLASSY EYRS, SLUNGED SPACE IT, DOOR OF ALCOHOL EMITTY
NOM HIS BEAFTH. DELVER COULD NOT RACKE THE CLASH OR EXPENIEN
IS DIRECTION OF TRAVEL.
SWRATY, SWAYING BACK & FOURTH
DRIVER'S STATEMENTS: DRIVER STATED HE HAD 2 BREEL AT CHEATAH'S
GRATLAMAN'S CLUB. SAD HE JUST WHATED TO GO HOME BUT HE WAS
LOOKING FOR FRIENDS,
ODORS:
ALCOHOL FROM BREATH
GENERAL OBSERVATIONS
SPEECH: SLUIRES SPEECH
ATTITUDE: CONFUSED ON SCENE, AGGRESING AFTER
CLOTHING: DEUR SHIRT BURR JOHNS WHITE SNEAKERS
MEDICAL/OTHER:
CATE OF FLORIDA OUNTY OF PALM BEACH
ignature of Areating/frives(gallive (iffice))
to foregoing Instrument was sworn to or affirmed and subscribed before me this 07 day of JONE 20 21 by OFC CCS + IN C. ILS PO 1 1 C TD
Mill tellus of Allesand Investigate Cascell, And is bestoring stricture of the surgery bronders assistance of the surgery bronders as a surgery bronders
JOSHUA BELL MY COMMISSION #GG346008 PVDIES: IIIN 19, 2023
EXPIRES: JUN 18, 2023 Ronded through 1st State Insurance

SUBJECT: JOHN & HOSFELD CASE NUMBER: 2021-200 692

SIDE TASKS
· volter *
RT EYE-LACK OF SMOOTH PURSUIT
RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION
RT EYE- ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
STIMULUS UITH HEAD, FAILED TO KARP HEAD
IMEJ
STAPRO ON LINK AND SAID "LATS GO"
cu off una
9, COUNTRO 64+65 TWICE







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

PBSO CASE # 2`1-073402		PBSO	ZONE	1-11	
AGENCY CASE # 2021-000692		CRASH	CASE #		1
TIME OF STOP/CRASH 0153	DATE	06/07/21		DAY	MONDAY
SUBJECT'S NAME HOSFELD, JO	HN ERIC	RACE	W	SEX 1	М
HGT 5'9 WGT 170		DOB	07/14/19	76)	
LOCATION ROYAL PALM WAY	/ S COUN	TY RD P	ALM BE.	ACH FLO	ORIDA 33470
ARRESTING OFFICER'S NAME & ID	MICHAEL	CASTINEIR	AS #0183 _A	GENCY P	BPD
DIVISION: PATROL		NOT	IFIED BY (COMMO YE	S
		ARR	IVAL AT F	ACILITY	0311
BREATH RESULTS:			Ar	rest Time	0234
1183					
2184					
3. N/A					
4. N/A					
TESTING OFFICER'S ID BELI	L 8656				

WITNESS LIST

CASE NUMBER: 2021.00692 ARRESTING OFFICER MICHAEL CASTINAILAS Palm SANH IL 37470 ADDRESS 345 S TOWNY RD PHONE NUMBERS (HOME) 561 838 5757 (WORK) NAME: OF LAMON LAR ADDRESS JUS & COUNTY RD PALM SAME EL 33470 PHONE NUMBERS (HOME) SELL 875 5451/ (WORK) CAN TESTIFY TO: ON SCORE I VALUE O / S/57 NAME: ADDRESS PHONE NUMBERS (HOME) _____ (WORK) ____ CAN TESTIFY TO: NAME: ADDRESS PHONE NUMBERS (HOME) _____ (WORK) CAN TESTIFY TO: NAME: ADDRESS (WORK) PHONE NUMBERS (HOME) CAN TESTIFY TO: NAME: _____ ADDRESS ____ (WORK) PHONE NUMBERS (HOME) 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: PB\$C #0128C REV. 09/93 WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

TESTING FACILITY TASK REPORT

	AGENCY: PBPD		
SUBJECT: HOSFELD, JOHN ERIC	CASE NUMBER: 21-073402		
DATE: Jun 7, 2021	VIDEO DVD NUMBER: N/A		
BEGINNING TIME: 0340	ENDING TIME: 0354		
BREATH TESTS RESULTS: 1) .183 TIME 0347 A.M.⊠ F	P.M.		
3) N/A TIME XX A.M. A.M.	P.M. 4) N/A TIME XX A.M. P.M.		
BREATH OPERATOR: JOSHUA J BELL #8656			
MAINTENANCE TECHNICAN: J. KARLECKE #6467			
TESTING OFFICER'S OBSERVATIONS			
SPEECH: SLURRED			
ATTITUDE: TALKATIVE, RUDE, ARGUMENTATIVE, REPETITIVE			
CLOTHING: BLUE TEE SHIRT, BLUE JEANS, WHITE SHOES			
MEDICAL CONDITIONS: NONE			
MEDICATIONS: NONE			
OTHER: EYES: BLOODSHOT, GLASSY			
COMMENTS: ARRIVED AT DUI TESTING FACILITY AND BEGAN THE	20 MINUTE OBSERVATION AT 0311 HOURS		
SUBJECT STATED HE WOULD TAKE BREATH TEST TECH READ BREATH TEST RESULTS AND EXPLAINED SUBJECT STATED THAT HE WAS FINE			
A/O READ RIGHTS SUBJECT STATED HE DID NOT UNDERSTAND HIS RIGHT AGAIN	rs and he did not want the a/o to read them		

Q AND A NOT CONDUCTED

SUBJECT: HOSFELD	John	Er.C

CASE NUMBER: 221 200 697

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. 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. of the I am 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)_ 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. 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. 7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X)

lead on camera

SUBJECT: HOSfold John	Er.C	CASE NUMBER: _	271 00, 697
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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? WHEN DID YOU LAST WORK?
WHAT LINE OF WORK ARE YOU IN? WHEN DID YOU LAST WORK?
DO YOU HAVE ANY PHYSICAL DEFECTS OR MIURIES? 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 TODAYY
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: Of C. M. Castineiras # 0183
WHITE STATE ATTY. YELLOW DHSMV PINK CENTRAL RECORDS GOLD IAIL
PBSO #0129C REV. 9/93

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006476 Software: 8100.27
Date of Test: 06/07/2021

Date of Last Agency Inspection: 05/14/2021

Observation Period Began: 03:11 Subject's Name: JOHN ERIC HOSFELD

DOB: 07/14/1976 Sex: M

The state of the state of the Bridge of

n (1965) e Nobel (1965) e Paris (1965) Paris (1965) e Paris (1965) e Paris (1966) e Paris

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		03:43	
•	Air Blank	0.000	03:44	
1	Control Test	0.079	03:44	
.	Air Blank	0.000	03:45	
	Subject Sample #1		03:47	y
	Air Blank Air Blank	0.000	03:48	
	Subject Sample #2		03:49	
	Air Blank	0.000	03:50	
	Control Test	0.079	03:51	
	Air Blank	0.000	03:52	
	Diagnostics Check	OK	03:52	
The service of the se				The second process of the second process of the second process of the second
and Market State (1997) and the state of the				
State of the second of the sec			Marine Marine and	Section 19
4				
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			* * * * * * * * * * * * * * * * * * *	Mark Contraction
The second secon			• · · · · · · · · · · · · · · · · · · ·	وسيوسين براد در در مهود المعادة العادة المادة ا
			*	
Guldenberg Total Gorgeonean			*	
Cylinder Lot: 22620080A2				
Exp: 10/05/2022			1.	
<u> </u>	Palas Bas	× 11:		
State of Florida, County of	alm Bec	<u>u</u> n	4.	
			1	
Personally appeared before me	the undersigned	authority, who (_	is persona	ally known to me or
() produced	as identi	fication, and who	after being	placed under oath,
states:	· · · · · · · · · · · · · · · · · · ·	•		
_				
I JOSHUA J BELL	_, hold a valid :	Breath Test Opera	tor permit is	sued by the Florida
Department of Law Enforcement,	I administered	the above breath	test to the s	ubject named above in
accordance with Chapter 11D-8,	Florida Adminis	trative Code, and	this form is	a true and accurate
report of that breath test.) 21 1		
		////	m la	-101
Breath Test Operator:		-1.1	Date: 06/0) <i>[[2 </i>
	Signature			
	^ ^ ¬	1000	2011	
Sworn to (or affirmed) before	me this U/ d	ay of JUNE	, <u>+UX</u>	_
mell !	<u>~</u> (C M C C	1 ' 0 0 1 2 5	+ 1197
		L. /11. Las	TIMENTA	5 #U 05
Signature of Notary Public-State	of Florida Prin	ted Name of Notary	Public-State of	Florida
and the second of the second o				
Note: Pursuant to section 117.10	, Florida Statutes,	law enforcement of	ficers, correct	tional officers, traffic
accident investigation officers as	nd traffic infracti	on enforcement off	cers are notar	or public when energies

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.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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Palm Beach County Sheriff's Office - Arrests Only

	x	Florida State Statute	Description	Page Number(s)
		119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
L/E Exemptions		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.	
ıns		985.04(1)	Juvenile offender records.	
mptic		119.071(h)(i)	Assets of a crime victim.	
Public Info. Exemptions		395.3025(7)(a), 456.057(7)(a)	Medical information.	
blic In		394.4615(7)	Mental health information.	
nd		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.	
	×	(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.	
of 23)		(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
(Rule		(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)				
I Administr				
es of Judiciz				
Florida Rul				
Other			Other:	
ర్			Other:	

REVIEW COMPLETED BY

Booking Number: 2021013831	Date: 06/07/2021
BOOKING NUMBER: 2021013631	Specialist Name/ID: C. Denzel/8691