0530197 50-2022-CT-004472-AMB 2946

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Juvenile: N

ADMINISTRATIVE

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
	FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 22047332

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Weapon Seized / Type (1. Yes 2. No): 2 N/A

Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): MELALEUCA LANE / S MILITARY TRL, LAKE WORTH, FL 33461

Location of Offense (Business Name, Address): MELALEUCA LANE / S MILITARY TRL, LAKE WORTH, FL 33461

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
03/18/2022	0355					GARDENS TOWING

DEFENDANT

Name (Last, First, Middle): Stowell, Joshua, Ryan

Alias (Name, DOB, Soc. Sec. #, Etc.):

Race (W - White I - American Indian B - Black 0- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	5/22/1997	6'01	190	BLUE	BRN	MED	MED

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description): NONE

Marital Status: Single

Religion: JEWISH

Indication of: Alcohol Influence: Y ☒ N ☐ Unk. ☐; Drug Influence: Y ☐ N ☐ Unk. ☒

Local Address (Street, Apt. Number) (City) (State) (Zip): 885 Malcolm Chandler Ln Apt 305, West Palm Beach, FL 33401

Phone: (407) 701-2699

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip): ,

Phone: ( )

Address Source: VERBAL

Business Address (Name, Street) (City) (State) (Zip):

Phone: ( )

Occupation: Motor Sports Marketing

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
S340436971820, FL	[redacted]		ALTAMONTE SPRINGS, FL	YES

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth		
				☐ 1. Arrested ☐ 2. At Large	☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
				☐ 1. Arrested ☐ 2. At Large	☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other: Name (Last) (First) (Middle) (1) OK Residence Phone ( )

Address (Street, Apt. Number) (City) (State) (Zip) Business Phone ( )

Notified by: (Name) Date Time

Juvenile Disposition: 1. Handled/ processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated

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. ☐ Yes, by: (Name) ☐ No: (Reason)

School Attended Grade

Property Crime? ☐ Yes ☐ No Description of Property Value of Property

CODE

Drug Activity: N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Dispense/ Distribute M. Manufacture/ Produce/ Cultivate Z. Other

Drug Type: N. N/A A. Amphetamine B. Barbiturate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/ Equipment S. Synthetics U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Driving Under the Influence	1	☐Y ☒N	316.193(1)(A)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		22047332		

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

NOTICE TO APPEAR

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 APRIL Day 14th Year 2022 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

X [signature] Signature of Defendant (or Juvenile and Parent /Custodian)

03/18/2022 Date Signed

ADMIN

HOLD for other Agency Name:

☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other:

Signature of Arresting Officer: x [signature]

Name of Arresting Officer (Print): Inv. Cisson ID# 24091 I.D. #: 24091

Name Verification (Printed by Arrestee) (PRINT)

Intake Deputy: 01 HONeA (7200) I.D. # Pouch #

Transporting Officer: Inv. Cisson ID #: 24091 Agency: PBSO

Witness here if subject signed with an -X"

PAGE 1 OF 1

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PBSO #148 REV. 8/97

PROBABLE CAUSE AFFIDAVIT

OBTS Number

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

Juvenile

ADMIN

Agency ORI Number: FLO 500000

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 06- 22-047332

Charge Type: Check as many as apply. 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
Stowell, Joshua,		W	M	5/22/1997

CHARGES

Charge Description

Charge Description

Charge Description

Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
State of Florida, ,			

Local Address (Street, Apt. Number) (City) (State) (zip) Phone ( ) Address Source

,

Business Address (Name, Street) (City) (State) (zip) Phone ( ) Occupation

PROBABLE CAUSE STATEMENT

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

- [x] committed the below acts in my presence.
- [ ] confessed to _____ admitting to the below facts.
- [ ] was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
- [x] was found to have commited the below acts, resulting from my (described) investigation.

On the 18 day of March 2022 at 0317 [x] A.M. [ ] P.M. (Specifically include facts constituting cause for arrest.)

I was in my marked PBSO patrol vehicle, with my emergency lights on in the westbound lane 4 of Melaleuca Ln at the intersection of S Military Trl, waiting on a tow truck. I observed headlights very close to the rear of my vehicle and proceeded to step out. I observed a gray Volkswagen with a W/M in the driver's seat. I asked the driver, later positively identified as Joshua Stowell (W/M DOB 05/22/1997) to roll down his windows.

At this time I initiated a traffic stop on foot on Melaleuca Ln and S Military Trl on the gray Volkswagen bearing FL tag GCLG79. As Stowell rolled down his window, I could smell an unknown alcoholic beverage emanating from his person. I observed his eyes to be bloodshot red, and droopy. His speech was slow and slurred. Stowell stated he was trying to make a u-turn on Palmetto Rd. I asked Stowell where he was coming from to which he kept answering "Boca". I asked him where he was going, he stated "Delray", which are south of our location. I asked Stowell if he has had any alcoholic beverages to which he stated that he did around 6pm, I then asked what time he thought it was, to which he stated 1am.

Based on the above facts, I requested for a DUI to respond. Investigator J Cisson 24091 responded and took over investigations.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

37986
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 18 day of March 2022 by D/S Y Agaoglu

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

Inv. Cisson 24091

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

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

PBSO CASE # 22047332 PBSO ZONE 1-34

AGENCY CASE # _____ CRASH CASE # _____

TIME OF STOP/CRASH 0317 DATE 03/18/2022 DAY Friday

SUBJECT'S NAME Stowell, Joshua, Ryan RACE W SEX M

HGT 6'01 WGT 190 DOB 5/22/1997

LOCATION MELALEUCA LANE / S MILITARY TRL, LAKE WORTH, FL 33461

ARRESTING OFFICER'S NAME & ID Inv. Cisson ID# 24091 (24091) AGENCY Palm Beach County Sheriff's Office

DIVISION: CID / DUI

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0413

ARREST TIME 0355

BREATH RESULTS:

.162
.167

TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # 1

WITNESS LIST

CASE NUMBER: 22047332

ARRESTING OFFICER: Inv. Cisson ID# 24091
ADDRESS: 3228 Gun Club Rd, West Palm Beach, FL 33406
PHONE NUMBERS (HOME): (WORK) 561 688 3000
CAN TESTIFY TO: Facts of the case

NAME: Deputy Agaoglu ID# 37986
ADDRESS: 3228 Gun Club Rd, West Palm Beach, FL 33406
PHONE NUMBERS (HOME) (WORK) 561 688 3000
CAN TESTIFY TO: Traffic Stop

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

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ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

TESTING FACILITY TASK REPORT

AGENCY: PBSO INV. CISSON #24091

SUBJECT: STOWELL, JOSHUA R.

CASE NUMBER: 22-047332

DATE: 03-18-22

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 04:35 HRS

ENDING TIME: 04:46 HRS

BREATH TESTS RESULTS: 1) .162 TIME 04:39 A.M. ☒ P.M. ☐ 2) .167 TIME 04:42 A.M. ☒ P.M. ☐

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

BREATH OPERATOR: S.O'NEAL #6212

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE: CALM, QUIET, COOPERATIVE

CLOTHING: SHIRT- GREEN PANTS- LIGHT BLUE JEANS

MEDICAL CONDITIONS: ALLERGIC TO TREE NUTS

MEDICATIONS: NONE

OTHER:

EYES: RED, GLASSY
ODOR OF UNKNOWN ALCOHOLIC BEVERAGE.

COMMENTS:

20 MIN. OBSERVATION DONE BY A/O CISSON #24091
A/O REQUESTED THE BREATH TEST.
D SUBMITTED TO THE BREATH REQUEST.
D COMPLETED THE TEST CORRECTLY.
BREATH RESULTS EXPLAINED TO THE D.
C/W READ ON CAMERA, NO Q&A, D WANTED HIS ATTORNEY.

SUBJECT: _____ CASE NUMBER: _____

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.

-OR-

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances.

-OR-

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence of chemical or controlled substances.

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

I am _____ of the _____.

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.
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)_____

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

SUBJECT: _____ CASE NUMBER: _____

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? REFUSED 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? REFUSED

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: _____

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: 80-006029 Software: 8100.27
Date of Test: 03/18/2022

Date of Last Agency Inspection: 02/04/2022
Observation Period Began: 04:13
Subject's Name: JOSHUA R STOWELL DOB: 05/22/1997 Sex: M

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	04:38
Air Blank	0.000	04:38
Control Test	0.080	04:38
Air Blank	0.000	04:39
Subject Sample #1	0.162	04:39
Air Blank	0.000	04:40
Air Blank	0.000	04:42
Subject Sample #2	0.167	04:42
Air Blank	0.000	04:43
Control Test	0.080	04:43
Air Blank	0.000	04:44
Diagnostics Check	OK	04:44

Cylinder Lot: 19021080A2
Exp: 09/05/2023

State of Florida, County of Palm Beach.

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

I SHARI L O'NEAL, 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: S. O'Neal Date: 03-18-22
Signature

Sworn to (or affirmed) before me this 18 day of March, 2022

_____ Inv. Cisson # 24091
Signature of Notary Public-State of Florida Printed Name 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.

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

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 18th DAY OF March 20 22, AT 0317 ✓AM PM

SUBJECT: Stowell, Joshua, Ryan CASE NUMBER: 22047332

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. Cisson ID# 24091

PERSONAL CONTACT

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

On Friday March 18th 2022 at approximately 0317 hours, I responded to a traffic stop at Melaleuca Lane and S. Military Trail in unincorporated Lake Worth, FL 33461 (Palm Beach County). Upon arrival Deputy Agaoglu ID# 37986 relayed the following to me: On March 18, 2022 at approximately 0317 hours, I was in my marked PBSO patrol vehicle, with my emergency lights on in the westbound lane 4 of Melaleuca Ln at the intersection of S Military Trl, waiting on a tow truck. I observed headlights very close to the rear of my vehicle and proceeded to step out. I observed a gray Volkswagen with a W/M in the driver's seat. I asked the driver, later positively identified as Joshua Stowell (W/M DOB 05/22/1997) to roll down his windows. At this time I initiated a traffic stop on foot on Melaleuca Ln and S Military Trl on the gray Volkswagen bearing FL tag GCLG79. As Stowell rolled down his window, I could smell an unknown alcoholic beverage emanating from his person. I observed his eyes to be bloodshot red, and droopy. His speech was slow and slurred. Stowell stated he was trying to make a u-turn on Palmetto Rd. I asked Stowell where he was coming from to which he kept answering "Boca". I asked him where he was going, he stated "Delray", which are south of our location. I asked Stowell if he has had any alcoholic beverages to which he stated that he did around 6pm, I then asked what time he thought it was, to which he stated 1am. This concludes her supplement.

OBSERVATION OF DRIVER:

I observed the defendant, Joshua Ryan Stowell who was wearing a green tee shirt, blue jean pants and white shoes. The defendant was sitting inside the vehicle. He was the sole occupant. I asked the defendant to walk over to the front of my vehicle and speak with me. While walking over to my vehicle, the defendant was unsteady on his feet and staggered as he walked. While standing stationary the defendant swayed. I could see the defendants eyes were bloodshot and glossy. He had an obvious odor of an unknown alcoholic beverage emitting from his breath that grew stronger as he spoke. The defendants speech was slow and slurred.

DRIVER'S STATEMENTS:

The defendant said he did not have any physical defects. He said he had knee pain from working out and an older ankle issue. He said they did not affect his ability to walk. He said he bumped his head on the interior of his vehicle getting in and out. The defendant said he had 3 Guinness beers to drink. The defendant said he was coming from Boca Raton and going home to West Palm Beach. He said he was driving on Federal Hwy and the cross street was Atlantic Ave. He changed Atlantic to Linton Blvd. He was on Melaleuca Lane at S. Military Trail. He said he was driving the vehicle. I asked the defendant to submit to roadside field sobriety tasks to which he agreed.

ODORS:

An obvious odor of an unknown alcoholic beverage

GENERAL OBSERVATIONS

SPEECH: **Slow, Slurred**

ATTITUDE: **Calm, Compliant**

CLOTHING: **Neat, Clean**

MEDICAL/OTHER: **None**

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. Cisson ID# 24091
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 18th day of March 20 22 by Inv. Cisson ID# 24091

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

Shari O'Neal (#6212)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # GG 972080
My Comm. Expires Jun 25, 2024
Bonded through National Notary Assn.

SUBJECT: Stowell, Joshua, Ryan CASE NUMBER 22047332

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

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

Other Observations:

The defendant swayed while standing stationary. I had to remind the defendant to not turn his head. I had to remind him to follow the red light. He looked at me and was not following the red light.

WALK & TURN:

The task was explained and demonstrated. The defendant stated he understood the instructions. During the task the defendant failed to maintain the instructional stance. The defendant swayed while standing stationary. The defendant did not touch heel to toe multiple times, stepped off the line, stopped to regain balance, and took the incorrect number of steps. He took 14 steps on the first set of 9 and 15 steps on the second set of 9.

ONE LEG STAND:

The task was explained and demonstrated. The defendant stated he understood the instructions. The defendant swayed while standing stationary. During the task the defendant used arms for balance, put his foot down multiple times before 30 seconds elapsed.

FINGER TO NOSE:

The task was explained and demonstrated. The defendant stated he understood the instructions. The defendant swayed while standing stationary. During the task the defendant failed to touch the tip of finger to the tip of his nose, he missed several times. He raised his left hand when I called for right. He failed to return his hand to his side after touching his nose. He smashed his nose with the pad of his finger.

ROMBERG ALPHABET:

The task was explained and demonstrated. The defendant stated he understood the instructions. The defendant swayed while standing stationary. During the task the defendant said G in place of J, 8 in place of L, IKJ, O in place of U, U in place of W, PSIUVWRYSTUR.

BREATH TEST RESULTS: **0.162** **0.167**

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. Cisson ID# 24091
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 18th day of March 2022 by Inv. Cisson ID# 24091

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

Shari O'Neal (#6212)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # GG 972080
My Comm. Expires Jun 25, 2024
Bonded through National Notary Assn.

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: 2022007061	**Date:** 3/18/2022
	Specialist Name/ID: 8Chantel Daniels/30347