

2020153

315

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

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

OBTS Number		Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number (N.T.A.'s only) <b>06- 20-049436</b>					
Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 1. Yes 2. No		Multiple Clearance Indicator							
Location of Arrest (Including Name of Business) <b>5500 BLK OKEECHOBEE BV WEST PALM BEACH FL 33407</b>				Location of Offense (Business Name, Address) <b>5500 BLK OKEECHOBEE BV, WEST PALM BEACH FL 33407</b>							
Date of Arrest <b>03/14/2020</b>	Time of Arrest <b>2025</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle <b>KELLE TOWING</b>					
Name (Last, First, Middle) <b>Douglas, Lawrence, Stanley</b>				Alias (Name, DOB, Soc. Sec. #, Etc.)							
Race W - White I - American Indian B - Black O - Oriental/Asian <b>W</b>	Sex <b>M</b>	Date of Birth <b>10/31/1957</b>	Height <b>5'06</b>	Weight <b>115</b>	Eye Color <b>BLU</b>	Hair Color <b>BRO</b>	Complexion <b>FAIR</b>	Build <b>THIN</b>			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status <b>Single</b>	Religion <b>CHRISTIAN</b>	Indication of Alcohol Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>					
Local Address (Street, Apt. Number) <b>4282 Osha St, Palm Beach Gardens, FL 33410</b>				City <b>( )</b>	State <b>( )</b>	Zip <b>( )</b>	Phone <b>(561) 3798247</b>				
Permanent Address (Street, Apt. Number)				City	State	Zip	Phone				
Business Address (Name, Street) <b>COMMUNITY TV 909 N MILITARY TRAIL PALM BEACH GDNS FL 33410</b>				City	State	Zip	Phone <b>(561) 6221500</b>				
D/L Number, State <b>D242537573910, FL</b>		Soc. Sec. Number		INS Number		Place of Birth (City, State) <b>SYRACUSE, NY</b>	Citizenship <b>USA</b>				
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile						
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile						
Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other		Name (Last) (First) (Middle)		Residence Phone							
Address (Street, Apt. Number)		City		State	Zip	Business Phone					
Notified by: (Name)		Date	Time	Juvenile Disposition 1. Handed/ processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated							
Released To: (Name)				Relationship		Date	Time				
The above address provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parents. The child and / or parent was told to keep the Juvenile Court Clerk (Phone 365-2528) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)				School Attended		Grade					
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property		Value of Property							
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine	B. Barbiturate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other
Charge Description <b>DUI</b>		Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number <b>316.193(1A)</b>		Violation of ORD #					
Drug Activity		Drug Type	Amount / Unit	Offense # <b>20-049436</b>	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #					
Drug Activity		Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #					
Drug Activity		Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #					
Drug Activity		Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
Location (Court, Room Number, Address) <b>3228 GUN CLUB RD WEST PALM BEACH FL 33406</b>											
Court Date and Time Month <b>APRIL</b> Day <b>9</b> Year <b>2020</b> Time <b>0830</b> AM <input checked="" type="checkbox"/> PM											
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED											
Signature of Defendant (or Juvenile and Parent / Custodian) <i>Lawrence Douglas</i>				Date Signed <b>03/14/2020</b>							
HOLD for other Agency Name: <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicide Intake #		Signature of Arresting Officer <i>[Signature]</i>		Name Verification (Printed by Arrestee) <b>INV E. K. WHITE</b>		Date Signed					
Name of Arresting Officer (Print) <b>INV E. K. WHITE</b>		I.D. # <b>7209</b>		(PRINT)		PAGE <b>5</b>					
Transporting Officer <b>INV E. K. WHITE</b>		ID # <b>7209</b>		Agency <b>PBSO</b>		Witness here if subject signed with an "X" <b>1</b>					

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

OBTS Number	Agency ORI Number <b>FL 0500800</b>		Agency Name <b>WEST PALM BEACH POLICE</b>	Agency Report Number <b>9 4 2020-0004924</b>
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 8. Other				Special Notes:

Name (Last, First, Middle) <b>DOUGLASS, LAWERANCE</b>	Alias	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>10/31/1957</b>
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Charge Description <b>316.089(1) FAIL TO DRIVE IN SINGLE LANE</b>	Charge Description <b>CARELESS DRIVING</b>
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Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source	
Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation	

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 14 day of March, 2020 at 20:30 (Specifically include facts constituting cause for arrest.)

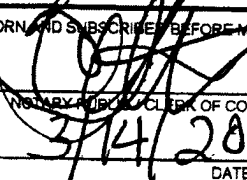
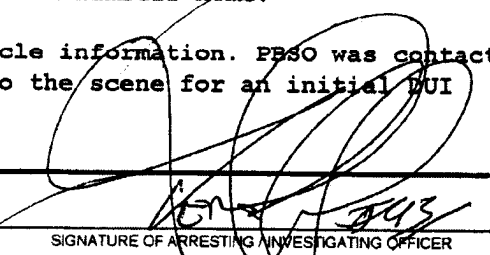
On March 14th, 2020 approximately 1950 hours, I was traveling in the 5100 block of Okeechobee Blvd heading westbound responding to an alarm call in the 7770 block of Okeechobee Blvd when I observed a blue in color Honda Civic (4dr) bearing Florida license plate # HHQ-N38 traveling westbound in front of me in the inside Lane # 1. The vehicle was observed quickly making a right turn into Lane # 2 impeding the normal flow of a vehicle traveling in this same lane. The Honda did not use its proper turning signal to enter this lane of traffic which caused the other vehicle in this lane to suddenly brake to avoid an impact collision.

The driver's vehicle then made another turn in my lane of traffic Lane # 3 without using its turning signal indicators at which point caused me to brake in efforts to avoid colliding into the Honda.

Once the Honda was directly in front of my patrol unit, I witnessed the vehicle accelerate above the posted speed limit (45 mph) at which time was paced at a speed of 58 mph until I conducted a traffic stop on this vehicle in the 5500 block of Okeechobee Blvd. Based on the driving pattern of the vehicle causing hazardous environment for other traffic, I decided to stop the vehicle to check on the driver.

Upon contact with the driver (later identified as the defendant: Douglass, Lawerance) I was able to immediately smell a strong odor of alcohol coming from the interior of the vehicle. When asked, Douglass advised he was coming from the "Blue Boar" Bar and had two alcoholic drinks before driving his friend and himself home.

I retrieved Douglass driver's license and vehicle information. PBSO was contacted for assistance and Deputy White # 7209 responded to the scene for an initial DUI investigation.

SWORN AND SUBSCRIBED BEFORE ME  E.K. WHITE Notary Public / Clerk of Court / Officer (F.S.S. 117.10) <u>3/14/2020</u> DATE	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <b>HARRELL KEVIN A (01637)</b> NAME OF OFFICER (PLEASE PRINT) <u>03/14/2020</u> DATE
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Agency ORI Number <b>FLO 500000</b>	Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>	Agency Report Number <b>06-20-049436</b>
Charge Type: Check as many as apply.		Special Notes:
<input type="checkbox"/> 1. Felony	<input type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance
<input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other

Name (Last, First, Middle) <b>Douglas, Lawrence, Stanley</b>	Alias	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>10/31/1957</b>
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Charge Description <b>DUI</b>	Charge Description <b>316.193(1)A</b>
Charge Description	Charge Description

Victim's Name (Last, First, Middle) " "	Race	Sex	Date of Birth
Local Address (Street, Apt. Number) (City) (State) (zip) Phone	Address Source		
Business Address (Name, Street) (City) (State) (zip) Phone	Occupation		

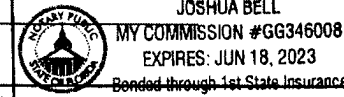
The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.  
 The Person taken into custody  
 committed the below acts in my presence.  was observed by \_\_\_\_\_ who told \_\_\_\_\_ 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 14 day of MARCH 2020 at 0754  A.M.  P.M. (Specifically include facts constituting cause for arrest.)

**On Saturday, March 14, 2020 at approximately 1954 hours, I responded to the 5500 block of Okeechobee Boulevard, West Palm Beach (Palm Beach County) Florida to assist Officer Kevin Harrell #1637, who is employed with the City of West Palm Beach Police Department with a traffic stop that involved a possible drunk driver. Upon my arrival I noticed Ofc. Harrell's patrol vehicle stopped on a service road in front of the Dunkin Donuts Restaurant facing westbound behind a blue Honda Civic, bearing current Florida license plates "HHQN38". Ofc. Harrell had his emergency lights activated and told me he was dispatched to an alarm call and traveled westbound on Okeechobee Bv. While en route to the call he observed a blue vehicle traveling ahead of him failing to drive safely within a single lane. The vehicle slowed and accelerated as it continued to demonstrate an erratic and unsafe driving behavior. Ofc. Harrell activated his emergency lights in an effort to stop the vehicle to check on the driver due to the driving behavior he was witnessing. After making contact with the driver he suspected him to had been drinking an unspecified amount of alcoholic beverages. He summoned for a Palm Beach County DUI unit to respond to his location to assess the driver for being impaired. Ofc. Harrell wrote a sworn statement regarding his involvement with this case.**

**I made contact with the driver who was currently sitting in the driver seat of the previously mentioned vehicle. He was later identified as Stanley Douglas by his Florida driver license. While speaking with him I noticed his eyes were red, watery and glossy. His cheeks were flushed, mouth dry and I could hear smacking as he spoke. I could smell a strong odor of an unknown alcoholic beverage emanating from the inside of his vehicle. A white male subject was sitting inside the front passenger seat of the vehicle. He also appeared to had been drinking an unspecified amount of alcoholic beverages. Focusing my attention back to the driver, who was wearing beige shorts, a black shirt and brown flip flops, I explained that he was stopped by a West Palm Beach Police officer after he observed his vehicle traveling unsafely on the roadway. Moreover, I explained I had a suspicion he had been drinking an unspecified amount of alcoholic beverages. He told me he took his passenger out for a drink and he had two beers. Based on my suspicion I asked if he would consent to performing Standardized Field Sobriety Evaluations (SFSTs) for the purpose of determining if he was impaired while operating a motor vehicle.**

**INV E. K. WHITE**  
 (Signature of Arresting Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 14 day of MARCH 2020 by INV E. K. WHITE 7209  
 (Print name of Arresting Investigative Officer who is personally known to me and/or produced identification. Type of identification produced KNOWN)

**SCANNED**  
 Notary Public, Clerk of Court, Officer (F.S.S. 117.10)  
  
 BONDING: BONDING THROUGH 1ST STATE INSURANCE



**D.U.I. PROBABLE CAUSE AFFIDAVIT**

ON THE 14 DAY OF MARCH 2020, AT 0754 AM  PM

SUBJECT: Douglas, Lawrence, Stanley CASE NUMBER: 20-049436

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV E. K. WHITE

**PERSONAL CONTACT**

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

**SEE PC AFFIDAVIT**

OBSERVATION OF DRIVER:

**SEE PC AFFIDAVIT**

DRIVER'S STATEMENTS:

**I DRANK TWO BEERS**

ODORS:

**STRONG ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM SUBJECT'S BREATH.**

**GENERAL OBSERVATIONS**

SPEECH: **RAPID**

ATTITUDE: **COOPERATIVE AND INATTENTIVE**

CLOTHING: **LOOSE AND UNTIDY**

MEDICAL/OTHER: **NONE**

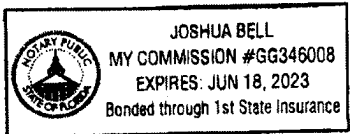
STATE OF FLORIDA  
COUNTY OF PALM BEACH

INV E. K. WHITE  
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 14 day of MARCH 2020 by INV E. K. WHITE

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

Notary Public, Clerk of Court, Office (F.S. 10)  
**MAR 15 2020**



**NOT A CERTIFIED COPY**

SUBJECT: Douglas, Lawrence, Stanley

CASE NUMBER 20-049436

**ROADSIDE TASKS**

**HORIZONTAL GAZE NYSTAGMUS:**

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT                           | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT                           |
| <input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input checked="" type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES          | <input checked="" type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES          |

**Other Observations:**

Subject was asked to stand with their feet together and place their hands by their side. They were asked to focus on the stimulus and follow it with their eyes. Lastly they were told not to move their head to assist in following the stimulus with their eyes. Subject showed equal pupil size that tracked equally. Both eyes lacked a smooth pursuit. I saw distinct and sustained Nystagmus at maximum deviation. I also saw an onset of Nystagmus prior to 45 degrees in both eyes. Subject swayed while performing this task and turned his head to assist his eyes in following the stimulus.

**WALK & TURN:**

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE WALK AND TURN. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject unable to maintain his balance while placed in the instructional position. He swayed, hopped and abandoned the position altogether. During the task he failed to touch heel to toe, stumbled and stopped on his own accord saying aloud that he messed up. On his second attempt he failed to touch heel to toe, he stepped off the line, he lost his balance while walking, he turned improperly and took an incorrect number of steps.

**ONE LEG STAND:**

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE ONE LEG STAND. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject was unable to maintain his balance and began leaning and hopping. He swayed during his performance and dropped his foot on the pavement twice. I ceased in continuing this task for safety concerns.

**FINGER TO NOSE:**

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE FINGER TO NOSE. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject swayed while performing this task. He failed to touch the tip of his finger to the tip of his nose all six times. Rather he touched underneath and the bridge of his nose.

**ROMBERG ALPHABET:**

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE ROMBERG ALPHABET TASK. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject swayed while performing this task but recited the alphabet successfully.

BREATH TEST RESULTS: (1) 46 (2) 34 (3)      (4)     

STATE OF FLORIDA  
COUNTY OF PALM BEACH

INV E. K. WHITE

(Signature of Arresting/Investigative Officer)

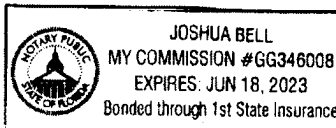
The foregoing instrument was sworn to or affirmed and subscribed before me this 14 day of MARCH 2020 by INV E. K. WHITE

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

Notary Public, State of Florida (F.S.S 117.10)

SCANNED

MAR 15 2020



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: 80-006477 Software: 8100.27  
Date of Test: 03/14/2020

Date of Last Agency Inspection: 02/14/2020  
Observation Period Began: 21:24  
Subject's Name: LAWRENCE S DOUGLAS DOB: 10/31/1957 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	21:50
	Air Blank	0.000	21:50
	Control Test	0.080	21:51
	Air Blank	0.000	21:51
	Subject Sample #1	0.146	21:52
	Air Blank	0.000	21:52
	Air Blank	0.000	21:54
	Subject Sample #2	0.134	21:55
	Air Blank	0.000	21:55
	Control Test	0.081	21:56
	Air Blank	0.000	21:56
	Diagnostics Check	OK	21:56

Cylinder Lot: 28719080A1  
Exp: 12/05/2021

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 JOSHUA J BELL, 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: 3/14/20  
Signature

Sworn to (or affirmed) before me this 14 day of March, 2020

Signature of Notary Public-State of Florida [Signature] Printed Name of Notary Public-State of Florida INV. White #7209

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.

SCANNED

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

MAR 15 2020

# TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: DOUGLAS, LAWRENCE S

CASE NUMBER: 20-049436

DATE: 3/14/20

VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 2148

ENDING TIME: 2203

BREATH TESTS RESULTS: 1) .146 TIME 2152 A.M./P.M. 2) .134 TIME 2155 A.M./P.M.  
3) N/A TIME XX A.M./P.M. 4) N/A TIME XX A.M./P.M.

BREATH OPERATOR: J. BELL #8656

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: COOPERATIVE, TALKATIVE

CLOTHING: BLACK POLO SHIRT, TAN SHORTS, BLACK SANDALS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER: EYES: GLASSY

ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

SUBJECT STATED HE DRANK 5 BEERS (BUDLIGHT) (Q AND A)

COMMENTS: ARRIVED AT CENTER A/O BEGAN 20 MIN OBSERVATION AT 2124 HRS

SUBJECT STATED HE WOULD TAKE BREATH TEST

A/O READ RIGHTS

SUBJECT STATED HE UNDERSTOOD HIS RIGHTS

TECH READ BREATH TEST RESULTS

SUBJECT STATED HE UNDERSTOOD BREATH TEST RESULTS

A/O CONDUCTED Q AND A

SUBJECT ANSWERED QUESTIONS

**SCANNED**

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

PROB-00125A REV.11/02  
MAR 15 2020

SUBJECT: Douglas, Lawrence S CASE NUMBER: 20-049436

**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.

SCANNED

SUSPECT'S SIGNATURE: (X) \_\_\_\_\_  
MAR 15 2020

*Benjamin Cannon*

SUBJECT: Douglas, Lawrence S CASE NUMBER: 20-04436

### QUESTIONS AND ANSWERS

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

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? Yes I was

WHERE WERE YOU GOING? Taking him home

WHAT STREET OR HIGHWAY WERE YOU ON? dec av

DIRECTION OF TRAVEL? W WHERE DID YOU START? W. 1st St / W. 1st Rd

WHAT TIME DID YOU START? 5:00 PM WHAT TIME IS IT NOW? 5:00 PM

WHAT IS TODAY'S DATE? 14th Dec WHAT DAY OF THE WEEK IS IT? Tuesday

WHAT COUNTY AND CITY ARE YOU IN NOW? WDB (DC)

WHEN DID YOU LAST EAT? 6pm WHAT DID YOU EAT? chicken, turkey, etc.

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

HOW MUCH DO YOU WEIGH? 119 HAVE YOU BEEN DRINKING? Yes WHAT? Bud Light

HOW MUCH? 5 beers WHERE? Five Beer Trucks WITH WHOM? Friend

WHEN DID YOU HAVE YOUR FIRST DRINK? At 5pm AND YOUR LAST DRINK? At 8pm

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? At 5pm

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? Not really ARE YOU UNDER THE INFLUENCE? Probably

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

WHAT? No WHERE? No WHEN? No

WHAT LINE OF WORK ARE YOU IN? Truck Driver WHEN DID YOU LAST WORK? Today

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? No WHAT? No

ARE YOU SICK OR INJURED? No WHAT'S WRONG? No

DO YOU LIMP? No DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? No

WERE YOU IN AN ACCIDENT TODAY? No

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN? No

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

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? No WHAT? No WHEN? No

- DO YOU HAVE:
- EPILEPSY? No
  - GLASS EYE? No
  - FALSE TEETH? No
  - EAR INFECTION? No
  - INNER EAR TROUBLE? No
  - DIABETES? No

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? No

DO YOU TAKE INSULIN? No IF SO, WHEN WAS YOUR LAST INJECTION? No

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? No WHERE? No

SCANNED

INTERVIEWER: INV. White #7309

SUBJECT: Douglas, Lawrence S CASE NUMBER: 20-049436

### QUESTIONS AND ANSWERS

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

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP ACCIDENT? YES I WAS

WHERE WERE YOU GOING? Taking him home

WHAT STREET OR HIGHWAY WERE YOU ON? Dee BV

DIRECTION OF TRAVEL? W WHERE DID YOU START? Military Trl / Cherry Rd

WHAT TIME DID YOU START? 1:00 PM WHAT TIME IS IT NOW? 1:10 PM

WHAT IS TODAY'S DATE? 14th MAR WHAT DAY OF THE WEEK IS IT? Saturday

WHAT COUNTY AND CITY ARE YOU IN NOW? WIB (PBC)

WHEN DID YOU LAST EAT? 6pm WHAT DID YOU EAT? Chicken tenders/Fries

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? Playing Pool

HOW MUCH DO YOU WEIGH? 119 HAVE YOU BEEN DRINKING? Yes WHAT? BUD LIGHT

HOW MUCH? 5 BEERS WHERE? Blue Bar Tavern WITH WHOM? Friend

WHEN DID YOU HAVE YOUR FIRST DRINK? Medium AND YOUR LAST DRINK? Medium

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? Medium

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? Not really ARE YOU UNDER THE INFLUENCE? apparently

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

WHAT? No WHERE? No WHEN? No

WHAT LINE OF WORK ARE YOU IN? TV Repair WHEN DID YOU LAST WORK? Friday

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? No WHAT? No

ARE YOU SICK OR INJURED? No WHAT'S WRONG? No

DO YOU LIMP? No DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? No

WERE YOU IN AN ACCIDENT TODAY? No

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN? No

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

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? No WHAT? No WHEN? No

DO YOU HAVE: EPILEPSY? No

GLASS EYE? No

FALSE TEETH? No

EAR INFECTION? No

INNER EAR TROUBLE? No

DIABETES? No

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? No

DO YOU HAVE INSULIN? No IF SO, WHEN WAS YOUR LAST INJECTION? No

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? No WHERE? No

INTERVIEWER: INV. White #7209

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

SCANNED  
MAR 15 2020

SUBJECT: Douglas, Lawrence S CASE NUMBER: 20 049436

**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.

**SCANNED**

MAR 15 2020  
SUSPECT'S SIGNATURE: (X) \_\_\_\_\_

# WITNESS LIST

CASE NUMBER: 20-049436

ARRESTING OFFICER: INV E. K. WHITE

ADDRESS: HQ

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

CAN TESTIFY TO: facts

NAME: OFFICER KEVIN HARRELL ID# 1637

ADDRESS: 600 BANYAN BOULEVARD WPB FL 33401

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) 561 822 1900

CAN TESTIFY TO: SEEING THE DEFENDANT'S VEHICLE IN MOTION

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

ADDRESS \_\_\_\_\_

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

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

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

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (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: \_\_\_\_\_

**SCANNED**  
**MAR 15 2020**

NOT A CERTIFIED COPY



**Palm Beach County Sheriff's Office – Arrests Only**

	X	Florida State Statute	Description	Page Number(s)
I/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 type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<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"/>	539.001(b), 539.003 - F.S.S.	Other: Pawn Broker Information	
	<input type="checkbox"/>	119.071 (3)(A),(3)(B)(1-3C)	Other: Security of locations housed at the jail.	

**REVIEW COMPLETED BY**

Booking Number: 2020008405	Date: 3/15/2020
	Specialist Name/ID: M. Tooks #8557

**SCANNED**  
**MAR 15 2020**