

0525325

21 CT-13823

1322

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		Juvenile <input type="checkbox"/> <input checked="" type="checkbox"/>												
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06- 21-097404																
Charge Type: Check as many as apply.		1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/>		3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input checked="" type="checkbox"/>		5. Ordinance <input type="checkbox"/> 6. Other <input type="checkbox"/>		Weapon Seized / Type 2. No												
Multiple Clearance Indicator		01																		
Location of Arrest (Including Name of Business) 10TH AVENUE NORTH / BOUTWELL ROAD, CITY OF LAKE WORTH BEACH / FL/33461				Location of Offense (Business Name, Address) 10TH AVENUE NORTH / BOUTWELL ROAD, CITY OF LAKE WORTH BEACH / FL/33461																
Date of Arrest 08/18/2021		Time of Arrest 1855		Booking Date		Booking Time		Jail Date												
Jail Time		Location of Vehicle TOT'D OWNER																		
Name (Last, First, Middle) Cajas Murillo, Mario, A																				
Alias (Name, DOB, Soc. Sec. #, Etc.)																				
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian		Sex W M		Date of Birth 2/2/1981		Height 5'05		Weight 180												
Eye Color BRO		Hair Color BLACK		Complexion MED		Build MED														
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) LEFT CALF AND RIGHT ARM				Marital Status MARRIED		Religion NONE		Indication of: Alcohol Influence Drug Influence												
Local Address (Street, Apt. Number) 1311 ALHO DRIVE, LANTANA / FL / 33462		(City) (State) (Zip)		Phone (646) 945 8998		Residence Type: 1. City 2. County 3. Florida 4. Out of State														
Permanent Address (Street, Apt. Number)		(City) (State) (Zip)		Phone ()		Address Source VERBAL / FL DL														
Business Address (Name, Street)		(City) (State) (Zip)		Phone ()		Occupation HOTEL MANAGEMENT														
D/L Number, State C225541810420, FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) ECUADOR		Citizenship YES												
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth												
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth												
Parent Name (Last, First, Middle)				Residence Phone ()		Business Phone ()														
Address (Street, Apt. Number)				(City) (State) (Zip)		Notified by: (Name) Date Time														
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. <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														
<table border="1"> <tr> <td>Drug Activity N. N/A P. Possess</td> <td>S. Sell B. Buy T. Traffic</td> <td>R. Smuggle D. Deliver E. Use</td> <td>K. Dispense/ Distribute</td> <td>M. Manufacture/ Produce/ Cultivate</td> <td>Z. Other</td> <td>Drug Type N. N/A A. Amphetamine</td> <td>B. Barbiturate C. Cocaine E. Heroin</td> <td>H. Hallucinogen M. Marijuana O. Opium/Deriv.</td> <td>P. Paraphernalia/ Equipment S. Synthetics</td> <td>U. Unknown Z. Other</td> </tr> </table>										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
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Charge Description DRIVING UNDER THE INFLUENCE				Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 316.193(4)		Violation of ORD #										
Drug Activity N				Drug Type N		Amount / Unit		Offense # 21-097404		Warrant / Capias Number										
Bond																				
Charge Description				Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number		Violation of ORD #										
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Drug Activity N				Drug Type N		Amount / Unit		Offense #		Warrant / Capias Number										
Bond																				
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 SEPTEMBER Day 23 Year 2021 Time 0830 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)										Date Signed 08/18/2021										
HOLD for other Agency Name:				Signature of Arresting Officer <i>Inv W Amadon</i>				Name Verification (Printed by Arrestee)												
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:				Name of Arresting Officer (Print) INV. W. AMADON				(PRINT) AUG 19 2021 12:35												
Intake Deputy <i>D. Angler</i>				Transporting Officer INV. W. AMADON				ID # 9440 Agency PBSO												
I.D. #				Pouch #				Witness here if subject signed with an "X" <input type="checkbox"/>												

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 18 DAY OF AUGUST 20 21 AT 1732 AM PM

SUBJECT: Cajas Murillo, Mario, A CASE NUMBER: 21-097404

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV. W. AMADON

PERSONAL CONTACT

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

On Wednesday August 18, 2021 at approximately 1800 hours I was dispatched to the intersection of 10th Avenue North and Boutwell Road, City of Lake Worth Beach, Palm Beach County, Florida. Upon arrival I met with D/S M. Clorclari #27806 who provided me with a supplemental probable cause affidavit stating: "On Wednesday, August 18, 2021 at approximately 1730hrs, I responded to a report of a crash at 10th Avenue N and Boutwell Rd which is located in the City of Lake Worth Beach, Palm Beach County, Florida. Upon arrival I made contact with the driver of vehicle 1, a silver Nissan Sentra (FL tag GSNX79), Mario Cajas Murillo. Mario said he was driving home from picking up his children from school when the crash occurred. As I continued my investigation and continued to speak with Mario I detected an obvious and strong odor of an unknown alcoholic beverage emitting from his person and face area. This odor intensified as he spoke. Mario's speech was slow, and slurred at times. He had a difficult time explaining how the crash took place and then eventually told me he did not know how it happened but it was his fault. I asked Mario several times to provide me with his license, registration and insurance. As Mario attempted to get his phone from his pocket his movements were uncoordinated and it took him approximately 45 seconds to retrieve the phone. Mario got distracted on his phone and only handed me his license. I asked a second time for his insurance and registration. Mario used his phone to show me his Geico insurance application and asked me for assistance to find the ID cards on the app. Mario was wearing a blue shirt, black shorts, and a white and blue hat."

OBSERVATION OF DRIVER:

I observed the driver to be unsteady on his feet, however he was also complaining of an ankle injury sustained in the crash. I had the defendant sit on my patrol cars front push bumper. The defendant's clothing was properly worn. The defendant's speech was slow, slurred, with a noticeable accent. The defendant's eyes were red, glassy, bloodshot. The defendant was fumbling and kept asking if he should stand up. I informed him several times he was to sit on the bumper to avoid putting weight on his ankle. I asked the defendant if he was already seen by Palm Beach County Fire Rescue. The defendant informed me he was already evaluated prior to my arrival.

DRIVER'S STATEMENTS:

The defendant denied consuming alcohol. The defendant stated he was driving and his children were in the car with him at the time.

ODORS:

I immediately detected the odor of an unknown alcoholic beverage coming from the defendants breath, which intensified when the defendant spoke.

GENERAL OBSERVATIONS

SPEECH: slow / slurred / noticeable accent

ATTITUDE: polite / cooperative / respectful

CLOTHING: blue shirt / black shorts / black shoes

MEDICAL/OTHER: none stated

STATE OF FLORIDA
COUNTY OF PALM BEACH

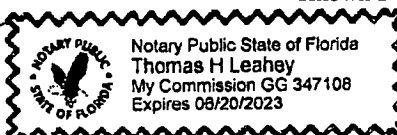
INV. W. AMADON Inv W Amadon
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 18 day of AUGUST 20 21 by INV. W. AMADON

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

Thomas Leahey (#19183) T Leahey

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



SCANNED
AUG 19 2021

SUBJECT: Cajas Murillo, Mario, A

CASE NUMBER 21-097404

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

☒ LT EYE-LACK OF SMOOTH PURSUIT

☒ RT EYE-LACK OF SMOOTH PURSUIT

☒ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

☒ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

☒ LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

☒ RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

The defendant had a noticeable orbital sway during this task.

HAND COORDINATION:

The defendant was placed into the instructional position for the Hand Coordination. The defendant was instructed to not move from the instructional position until told to do so. The defendant was given instructions and a demonstration. The defendant moved his hands from the instructional position prior to being told to do so. The defendant counted the first four movements. He paused and started over. The defendant said "I have to clap" and continued to move his hands in a step like fashion. The defendant incorrectly performed the return motion with his hands. The defendant stated it seemed simple as he struggled to complete the task. The defendant stopped during the task several times.

PALM PAT:

The defendant was placed into the instructional stance for the Palm Pat. The defendant was instructed to not move from the instructional position until told to do so. The defendant was given instructions and a demonstration. The defendant moved his hands from the instructional position prior to be told to do so. The defendant had to be reminded to increase his speed as instructed. The defendant brought his hands together with the lower edge of his hand touching his palm in a chopping or knife hand like motion. The defendant raised his hand and touched it back to his palm without having rotated his hand for the next count as instructed.

FINGER TO NOSE:

The defendant was placed into the instructional position for the Finger to Nose. The defendant was instructed to not move from the instructional position until told to do so. The defendant was given instructions and a demonstration. The defendant searched for his own nose with his finger. The defendant did not touch tip to tip as instructed. The defendant used the wrong hand during the sequence. The defendant touched the bridge of his nose with the fingerprint or pad area of his finger multiple times.

ROMBERG ALPHABET:

The defendant was placed into the instructional position for the Romberg Alphabet. The defendant was instructed to not move from the instructional position until told to do so. The defendant was given instructions and a demonstration. The defendant incorrectly recited the Alphabet.

BREATH TEST RESULTS: 1) 0.178 2) 0.192 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. W. AMADON

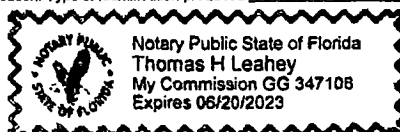
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 18 day of AUGUST 2021 by INV. W. AMADON

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

Thomas Leahey (#19183)

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



SCANNED
AUG 19 2021



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

PBSO CASE # 21-097404 PBSO ZONE 14-23
AGENCY CASE # _____ CRASH CASE # 21-097387
TIME OF STOP/CRASH 1732 DATE 08/18/2021 DAY Wednesday
SUBJECT'S NAME Cajas Murillo, Mario, A RACE W SEX M
HGT 5'05 WGT 180 DOB 2/2/1981
LOCATION 10TH AVENUE NORTH / BOUTWELL ROAD, CITY OF LAKE WORTH BEACH / FL/33461
ARRESTING OFFICER'S NAME & ID INV. W. AMADON (9440) AGENCY Palm Beach County Sheriff's Office
DIVISION: VCD / DUI
NOTIFIED BY COMMO YES
ARRIVAL AT FACILITY 1915
ARREST TIME 1855

BREATH RESULTS:

1)	128
2)	192
3)	/
4)	/

TESTING OFFICER'S ID 3184 PBSO VIDEOTAPE # N/A

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AUG 19 2021

WITNESS LIST

CASE NUMBER: 21-097404

ARRESTING OFFICER: INV. W. AMADON

ADDRESS: 3228 Gun Club Road, West Palm Beach, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) 561 688 3000

CAN TESTIFY TO: DUI Investigation

NAME: D/S M. Ciorciari # 27106

ADDRESS: 3228 Gun Club Road, West Palm Beach, FL 33406

PHONE NUMBERS (HOME) _____ (WORK) 561 688 3000

CAN TESTIFY TO: Crash Investigation

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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AUG 19 2021

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: CAJAS MURILLO, MARIO A.

CASE NUMBER: 21097404

DATE: 08/18/2021

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 1945

ENDING TIME: 2005

BREATH TESTS RESULTS: 1) .178 TIME 1943 A.M. ☐ P.M. ☒ 2) .192 TIME 1947 A.M. ☐ P.M. ☒
3) TIME A.M. ☐ P.M. ☐ 4) TIME A.M. ☐ P.M. ☐

BREATH OPERATOR: S. Owen #3184

MAINTENANCE TECHNICIAN: J. Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE: PLEASANT, CO-OPERATIVE

CLOTHING: TENNIS SHOES, BLACK SHORTS, BLUE ATHLETIC SHIRT

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

DEFENDANT IN ACCIDENT AND UNEMPLOYED

COMMENTS:

A/O AND DEFENDANT ARRIVED AT 1915 HOURS. A/O OBSERVED 20 MINUTES. A/O REQUESTED BREATH TEST, DEFENDANT AGREED. NO PROBLEM WITH TEST. TECH EXPLAINED RESULTS. A/O READ C/W, DEFENDANT UNDERSTOOD RIGHTS. DEFENDANT ANSWERED Q & A. ADMITTED HAVING A COUPLE (3) BEERS WITH STRAW. COULDN'T FEEL EFFECTS.

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AUG 19 2021

**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: 08/18/2021

Date of Last Agency Inspection: 08/13/2021
Observation Period Began: 19:15
Subject's Name: MARIO A CAJAS MURILLO

DOB: 02/02/1981 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	19:41
	Air Blank	0.000	19:41
	Control Test	0.079	19:41
	Air Blank	0.000	19:42
	Subject Sample #1	0.178	19:43
	Air Blank	0.000	19:44
	Air Blank	0.000	19:46
	Subject Sample #2	0.192	19:47
	Air Blank	0.000	19:47
	Control Test	0.080	19:48
	Air Blank	0.000	19:48
	Diagnostics Check	OK	19:48

Cylinder Lot: 02021080A1
Exp: 03/05/2023

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 SUE OWEN, 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: 08/18/21

Sworn to (or affirmed) before me this 18th day of August 2021

Fre W Amador

Signature of Notary Public-State of Florida

D/S W. Amador
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.

SUBJECT: CAJAS Murillo, Mario A. CASE NUMBER: 21-097404

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)? I WAS
WHERE WERE YOU GOING? HOME
WHAT STREET OR HIGHWAY WERE YOU ON? 10TH AVE
DIRECTION OF TRAVEL? S WHERE DID YOU START? SCHOOL
WHAT TIME DID YOU START? 4 PM WHAT TIME IS IT NOW? NO IDEA
WHAT IS TODAY'S DATE? 18TH WHAT DAY OF THE WEEK IS IT? WEDNESDAY
WHAT COUNTY AND CITY ARE YOU IN NOW? / / /
WHEN DID YOU LAST EAT? 2 PM WHAT DID YOU EAT? PIZZA CHEESE STEAK
WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? WITH FRIEND
HOW MUCH DO YOU WEIGH? 180 HAVE YOU BEEN DRINKING? YES WHAT? A couple beers
HOW MUCH? 3 WHERE? ON STREET WITH WHOM? FRIEND
WHEN DID YOU HAVE YOUR FIRST DRINK? NO AND YOUR LAST DRINK? IDK ABOUT 30 BEFORE ACCIDENT
HOW DID YOU CONSUME YOUR LAST TWO DRINKS? SIP
CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? NO ARE YOU UNDER THE INFLUENCE? NO
HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? NO HOW MUCH? /
WHAT? / WHERE? / WHEN? /
WHAT LINE OF WORK ARE YOU IN? UNEMPLOYED WHEN DID YOU LAST WORK? IDK
DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? YES WHAT? ANKLE
ARE YOU SICK OR INJURED? NO WHAT'S WRONG? /
DO YOU LIMP? NO DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? NO
WERE YOU IN AN ACCIDENT TODAY? YES
HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? NO WHEN? /
HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? NO WHO? / WHY? /
ARE YOU TAKING ANY PRESCRIPTION MEDICINES? NO 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? NO
DO YOU TAKE INSULIN? NO IF SO, WHEN WAS YOUR LAST INJECTION? /
HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? YES WHERE? NEW YORK
INTERVIEWER: IMU W. Amador #9440

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL

SCANNED
AUG 19 2021

SUBJECT: CAJAS Murillo, Maria A. CASE NUMBER: 121-097404

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) READ ON CAMERA ON SCENE **SCANNED**



**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	<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"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2021020585	Date: 8/19/2021
	Specialist Name/ID: M. Took #8557

SCANNED
AUG 19 2021