



Arrest Report

0523839 21CT-9451 3261
FLORIDA HIGHWAY PATROL
P.O. BOX 540007, GREENACRES, FL 33454

Report Date / Time 6/8/2021 10:32 PM	Report Number FHP99ARR841703	Case Number/Cad Number FHPL21OFF036693 / LWRC21CAD103497	Reporting Officer Name GONZALEZ, MARQUIS
Originating Agency ORI	Occur Date Time Range 06/08/2021 21:34:01 -	Jurisdiction	Clearance

Location of Occurrence

County PALM BEACH	Location Type PUBLIC PLACE	Location Description SR 9 NB NOF SR 706
Street Number I-95 NB	Street	Apt/Lot/Bldg JUPITER
City JUPITER	State FL	Zip Code 33458

Defendant

First Name MARY	Middle Name FAITH	Last Name STRAUSS	Suffix	Race WHITE	Sex FEMALE	Height 411	Weight 140	Hair BRO	Eyes BLU
MNI #	SSN	Date of Birth 12/18/1975	Age 45	ID Type E	Drivers License or other ID S362586759580	State FL	OCA / Agency ID		
Place of Birth: UNKNOWN-UK-UNKNOWN Clewiston, Idaho US									
Address * RESIDENCE / 317 SW RIDGE LN, STUART, FL 34994 /									

Arrest

Arrest Date/Time 6/8/2021 10:24:16 PM	Arrest Location Type PUBLIC PLACE	Arrest Location Description SR 9 NB NOF SR 706
Street Number	Street	Apt/Lot/Bldg
County PALM BEACH	City JUPITER	State FL
Zip Code 33458		

Charge : S

Counts 1	Charge 316.193.1a	Bond Amount \$0.00	<input type="checkbox"/> No Bond
Charge Degree S	Charge Level MISDEMEANOR	General Offense Code DUI-UNLAW BLD ALCH	
Charge Description DUI INFLUENCE OF ALCOHOL OR DRUGS			

Bond Set by Court

Bond Amount	<input type="checkbox"/> No Bond
Bond Type(s)	

Probable Cause

On June 8, 2021, the Lake Worth Communications Center gave out a call (BOLO) of a suspicious vehicle traveling northbound on State Road 9 (Interstate 95) south of State Road 706 (Indiantown Rd). There were several calls from outside witness

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stating that this vehicle was unable to maintain its lane, almost causing several collisions with several vehicles. The witness was able to follow the vehicle until they eventually pulled over onto the right outside shoulder of State Road 9 northbound just north of Indiantown Rd. The witness advised that driver appeared to be anxious and was stumbling when she exited the vehicle. I proceeded to assign myself to the call. The vehicle description was a Burgundy Ford Fusion with a Florida Tag of JEPA40. When I arrived on scene shortly after, the witness advised me that the driver of the Ford, later identified as Mary Faith Strauss through her Florida driver license: S362-586-75-958-0, seemed to be disoriented. The witness also advised that prior to pulling over to right shoulder, the vehicle drifted off in a northeast direction, resulting in a collision with an orange construction barricade located on the right outside shoulder. I proceeded to locate the vehicle and the driver of the vehicle shortly after speaking with the witness. The vehicle had damage to the rear right portion and front portion as if it were involved in crash. As I spoke with Ms. Strauss, I immediately detected the odor of an unknown alcoholic beverage was emitting from her breath as she talked. I also observed the driver's blood shot watery eyes and slurred speech. I proceeded to ask Ms. Strauss if she drank any alcoholic beverages today. Ms. Strauss advised "Yes I did at happy hour, over my friend's house around pm". Based on my observations, I proceeded to advise Ms. Strauss that I believe that she was under the influence of an unknown alcoholic beverage or chemical control substance. I then proceeded to ask her if she was willing to voluntarily perform Field Sobriety Exercises. Ms. Strauss could not give me a yes or no answer at this time. I proceeded to advise Ms. Strauss that If she refuses to perform the exercises, I will have to proceed with the criminal investigation for DUI solely based on my interaction with her. Ms. Strauss agreed to Voluntary perform the Field Sobriety Exercises.

Due to the unsafe location and for the safety of Ms. Strauss and I, I proceeded to place Ms. Strauss in the back of patrol car and transported her to the Shell Gas Station located on Indiantown Rd eastbound just east of State Road 9. FSEs were conducted in the empty lot of the gas station. The ground was leveled and free of debris. A red-light pen was used as a stimulus for the Horizontal Gaze Nystagmus. A yellow taped line was used for the Walk and Turn.

Before beginning the exercises, I checked to see if Ms. Strauss was wearing

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glasses. It was determined that Ms. Strauss did not wear glasses. I then proceeded to ask Ms. Strauss if she had any injuries that would prevent her from performing the exercises. Ms. Strauss advised me she had pain in her toes and a broken finger. Ms. Strauss advised that she was still willing to perform the voluntary Field Sobriety Exercises. Ms. Strauss was instructed to place her feet together and place her hands down at her side. She then was instructed to keep her head still and follow the stimulus with her eyes and her eyes only. She was also instructed to keep looking at the stimulus until told not to. Ms. Strauss verbally indicated that she understood all the instructions above.

Horizontal Gaze Nystagmus: performed by Trooper Gonzalez and understood by defendant.

- Equal tracking and equal pupil size.
- During the exercise I observed the defendant with lack of pursuit in both eyes.
- Distinct and sustained nystagmus at maximum deviation in Both eyes
- Nystagmus prior to 45 degrees in both eyes

Walk and Turn: performed by Trooper Gonzalez.

The defendant advised she understood the instructions explained.

During the walk and turn I observed

- Unable to maintain balance in the beginning of the exercise
- Driver performed 9 steps forward missing several heel to toe and an improper turn (Twice).
- Driver used arms for balance
- Driver lost balance during turn

One Leg Stand: performed by Trooper Gonzalez.

The defendant advised she understood the instructions explained.

During the one leg Stand I observed

- The driver lifted her right foot off the ground
- The driver did not keep her leg extended during the one leg stand. The right leg was positioned in what appeared to be a 90-degree angle during the entire exercise.
- Driver did not count out loud
- Driver looked up throughout the whole exercise
- Driver used arms for Balance
- Driver put foot down before finishing the exercise.

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Due to the totality of circumstances, I believed that Ms. Strauss was under the influence of an unknown alcohol beverage or chemical substance. Ms. Strauss was placed under arrest for DUI at 10:24 P.M and was transported to the Palm Beach County Breath test center. Once I arrived, I conducted a 20-minute observation. At no time did She regurgitate or take anything by mouth. Ms. Strauss refused to provide a breath sample. Implied consent was read, and Ms. Strauss understood. Ms. Strauss refused to provide a breath sample again. Constitutional Warnings were read, Ms. Strauss understood and refused to answer any questions. Ms. Strauss was then booked and processed at the Palm Beach County Jail.

The above incident occurred in Palm Beach County.

Jail Booking Facility

Booking Date/Time	Booking County PALM BEACH	Booking Facility PALM BEACH COUNTY CORRECTIONS	Booking Facility Phone (561) 688-4400
Booking Facility Location 3228 GUN CLUB ROAD WEST PALM BEACH, FLORIDA 33406		Booking Number	
Booking Comments			

Court

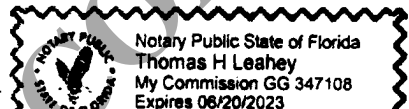
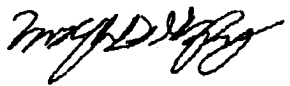
Court County PALM BEACH	Court Location 200 WEST ATLANTIC AVE. DELRAY BEACH, FL 33444		
Court PALM BEACH SOUTH COUNTY COURTHOUSE	Court Phone 561-274-1530	Court Apperance Date / Time 07/08/2021 8:30AM	Court Fine
Comments			

Officer Name Rank / ID # GONZALEZ, MARQUIS TPR	Involvement On Report / Reporting Role REPORTING OFFICER	Officer Agency Org/Unit FLORIDA HIGHWAY PATROL FHPLILWRCCIPALM BEACHBROW LN TO SR804
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The undersigned certifies and swears that he/she has just and reasonable grounds to believe that the above named Defendant, committed violation(s), of law, on the below date(s) and time(s), as listed in the probable cause associated with this report:

Reporting Officer

Officer Name GONZALEZ, MARQUIS	Office Rank TPR	Officer ID No 4520	Sworn and subscribed before me, the undersigned authority This the <u>08</u> day of <u>June</u> , <u>2021</u> DEPUTY OF THE COURT, NOTARY OR LAW ENFORCEMENT
Officer Agency FLORIDA HIGHWAY PATROL			
Officer Signature 			

☐ No Bill / Petition
 ☐ Issue Warrant
 ☐ Prosecution Approved

Signature of Assistant State Attorney

Date

Arrest Report

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

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

am a member of FLORIDA HIGHWAY PATROL, and I do swear

(Name of law enforcement agency)
or affirm that on or about the 8 day of June, 2021, at 10:24 ☒ P.M. ☐ A.M.

DRIVER MARY FAITH STRAUSS
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# S362586759580, state of FL, was placed under lawful arrest for

316.193(1)
the offense of D.U.I. - ALCOHOL OR DRUGS (MISDEMEANOR) by GONZALEZ, MARQUIS and
(Name of Arresting Officer)

issued Citation # A7728DE

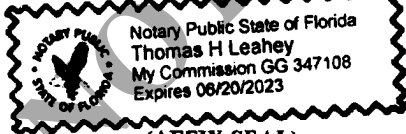
That on or about the 8 day of June, 2021, at 11:29 ☒ P.M. ☐ A.M.
in palm beach County,

I requested that the driver submit to a ☒ breath and/or ☐ urine test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test (s) would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended for refusing to submit to a breath, urine or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.

[Signature]

Signature of Law Enforcement Officer or
Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)



(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before
me this 08 day of June, 2021.
by Trp M Gonzalez #4519,
who is personally known to me or who has produced
Known as identification.

Notary Public T. July

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title

Date

Note: Mail or hand deliver to the designated
Bureau of Administrative Reviews office,
Department of Highway Safety and Motor
Vehicles, with the driver's license, the
appropriate copy of the UTC, and the
probable cause affidavit.



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

PBSO CASE # 21-074066 AGENCY CASE# FHPL21OFF036693
AGENCY ZONE 3-14 CRASH CASE # _____
TIME OF STOP/CRASH 9:34PM DATE 6/8/21 DAY TUESDAY
SUBJECT'S NAME MARY, FAITH, STRAUSS RACE WHITE SEX FEMALE
HGT 411 WGT 140LBS DOB 12/18/75
LOCATION SR 9 NB NOF SR 706 INDIANTOWN RD
ARRESTING OFFICER'S NAME & ID TPR. MARQUIS GONZALEZ 4519 AGENCY FHP
DIVISION: TROOP L
NOTIFIED BY COMMO yes
ARRIVAL AT FACILITY 22:03 PM
BREATH RESULTS: ARREST TIME 10:24PM
1. **REFUSED**
2. _____
3. _____
4. _____
TESTING OFFICER'S ID 19183 PBSO VIDEOTAPE # N/A

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TESTING FACILITY TASK REPORT

AGENCY: FHP-L

SUBJECT: Strauss, Mary F

CASE NUMBER: 21-074066

DATE: Jun 8, 2021

VIDEO DVD NUMBER: n/a

BEGINNING TIME: 2325

ENDING TIME: 2330

BREATH TESTS RESULTS: 1) R TIME 2329 A.M. ☐ P.M. ☒ 2) n/a TIME 0 A.M. ☐ P.M. ☐
3) n/a TIME 0 A.M. ☐ P.M. ☐ 4) n/a TIME 0 A.M. ☐ P.M. ☐

BREATH OPERATOR: Thomas H Leahey #19183

MAINTENANCE TECHNICIAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: slurred, thick

ATTITUDE: talkative, repetitive

CLOTHING: tan/rust skirt, rust shirt, tan flip flop

MEDICAL CONDITIONS: none

MEDICATIONS: none

OTHER:

eyes are glassy & bloodshot
odor of unknown alcoholic beverage on breath

REFUSED

COMMENTS:

arrived at center A/O conducted 20 minute observation period at 2303 hrs

subject refused to perform breath test

A/O read I/C 3X & subject understood I/C

subject refused to perform breath test

A/O read rights & subject understood rights

A/O attempted Q&A

subject declined to answer questions - invoked right to counsel

REFUSED

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CASE NUMBER: F-000000000000000000

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?** _____

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?

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?

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? **SCANNED**

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? WHERE? JUN 09 2021

INTERVIEWER:

SUBJECT:

Stevens, Mary E.

CASE NUMBER:

10124650611

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 10124650611 of the State of Illinois

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 in presence

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

REVIEW COMPLETED BY

Booking Number: 2021014005	Date: 6/9/2021
	Specialist Name/ID: M. Took #8557

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