

J# 0524773

21CT12043 NB per 2085

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request For Warrant 4. Request For Capias		1		Juvenile		N					
Agency ORI Number FL 0503100		Agency Name TEQUESTA POLICE DEPARTMENT				Agency Report Number 92 21-000194											
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 type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized		Enter Type		Multiple Clearance Indicator											
Location of Arrest (Including Name of Business) 113 N US HIGHWAY 1, TEQUESTA, FL 33469						Location of Offense (Including Name of Business) 113 N US HIGHWAY 1, TEQUESTA, FL 33469											
Date of Arrest 07/22/2021		Time of Arrest 00:11		Booking Date 07/22/2021		Booking Time		Jail Date		Jail Time		Location of Vehicle 113 N US HIGHWAY 1, TEQUESTA					
Name (Last, First, Middle) MCKOY PAIGE ALESE						Alias (Name, DOB, Soc. Sec. # Etc.)											
Race W - White B - Black O - Oriental/Palest		Sex W F		Date of Birth 01/09/1997		Height 5'0		Weight 115		Eye Color BROWN		Hair Color BROWN		Complexion FAIR		Build SMALL	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status		Religion		Indication of Alcohol Influence Drug Influence		Y N		Unit 4			
Local Address (Street, Apt. Number) 17 CHURCH ST		City PHELPS		State NY		Zip 14532		Phone 315-759-3490		Residence Type: 1. City 2. County 3. Florida 4. Out of State		Address Source NY DL		Occupation UNKNOWN		Citizenship UNITED STATES	
DIL Number, State 165939772 NY		INS Number		Place of Birth NEW YORK, Phelps		Citizenship UNITED STATES											
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		1. Arrested 2. At Large		3. Felony 4. Misdemeanor 5. Juvenile							
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		1. Arrested 2. At Large		3. Felony 4. Misdemeanor 5. Juvenile							
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other		Name (Last, First, Middle)		Address (Street, Apt. No.) 1. OR		State		Zip		Business Phone							
Notified By (Name)		Date		Time		Juvenile Disposition: 1. Handled/Processed within Dept. and Released 2. TOT HRSDOYS 3. Incorporated											
Released To (Name)		Relationship		Date		Time											
The above address was provided by <input type="checkbox"/> defendant and/or <input type="checkbox"/> defendant's parents. These individuals were told to keep the Juvenile Court Clerk's Office (Phone 581 355-2526) informed of any address change.		School Attended		Grade													
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property													
Drug Activity N. N/A P. Possession		S. Sell B. Buy T. Traffic		R. Struggle D. Deliver E. Use		K. Dispense/ Distribute		M. Manufacture/ Produce Cultivate		Z. Other		Drug Type N. N/A A. Amphetamines B. Barbiturates C. Cocaine E. Heroin H. Hallucinogen M. Marijuana P. Pharmaceutical/ Equipment U. Unknown Z. Other		Violation or ORD. #			
Charge Description DUI		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 316.193 (1) (A)		Warrant/Capias Number		Bond							
Drug Activity N		Drug Type N		Amount/Unit		Offense #		Statute Violation Number 322.34 (2) (a)		Warrant/Capias Number		Bond					
Charge Description DRIVING WHILE LICENSE REVOKED		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number		Warrant/Capias Number		Bond							
Drug Activity N		Drug Type N		Amount/Unit		Offense #		Statute Violation Number		Warrant/Capias Number		Bond					
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number		Warrant/Capias Number		Bond							
Drug Activity		Drug Type		Amount/Unit		Offense #		Statute Violation Number		Warrant/Capias Number		Bond					
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number		Warrant/Capias Number		Bond							
Drug Activity		Drug Type		Amount/Unit		Offense #		Statute Violation Number		Warrant/Capias Number		Bond					
Location (Court, Address, Room Number) North County Courthouse - 3188 PGA Blvd, Palm Beach Gardens, FL 33410																	
Court Date and Time Month AUGUST Day 26 Year 2021 Time 8:30 AM <input checked="" type="checkbox"/> PM																	
I AGREE TO APPEAR AT THE ABOVE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT I SHOULD FULLY 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/Guardian)														Date Signed			
Name J. PALMERI														ID # 1226			
Transcribing Officer J. PALMERI														ID # 1226			
Agency														Page 1 of 1			

# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 22 DAY OF JULY 20 21 AT \_\_\_\_\_ AM PM  
SUBJECT: MCKOY PAIGE ALESE CASE NUMBER: 21-000194  
AGENCY: Tequesta Police Department ARRESTING OFFICER: J. PALMERI

## PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

MCKOY WAS THE SOLE OCCUPANT OF HER VEHICLE. THE VEHICLE WAS OBSERVED DRIVING NORTH ON US HIGHWAY ONE BY AN OFF DUTY TEQUESTA POLICE OFFICER. THE VEHICLE STRUCK THE GUARD RAIL ON THE US ONE BRIDGE AND CAUSED SEVERE FRONT END DAMAGE TO THE PASSENGER SIDE. THE TIRE OF THE VEHICLE WAS HEAVILY DAMAGED AND SEIZED UP CAUSING IT TO SMOKE. THE VEHICLE PULLED OFF US HIGHWAY 1 AND WAS INTERCEPTED BY AN ON DUTY TEQUESTA POLICE SGT. THE SGT OBSERVED THE VEHICLE COME TO A STOP IN FRONT OF DOLLAR TREE (113 N US HIGHWAY 1), IN THE MIDDLE OF THE DRIVE LANE. MCKOY EXITED HER VEHICLE AND TOLD THE SGT SHE BELIEVED SHE HIT A GUARD RAIL.

## OBSERVATION OF DRIVER:

MCKOY WAS UNABLE TO STAND, PRESENTING WITH AN ORBITAL SWAY. MCKOY WAS ADVISED TO SIT ON THE GROUND BECAUSE SHE WAS UNABLE TO STAND SAFELY. MCKOY WAS LOUD AND BOISTEROUS AND REPEATEDLY STATED SHE WAS NOT DRUNK. MCKOY AGREED TO THE DUI TASKS STATING "I'VE HAD DUI BEFORE" "I KNOW WHAT IM DOING"

## DRIVER'S STATEMENTS:

"I FUCK JUDGES IN PALM BEACH COUNTY", "I BELIEVE I HIT A GUARD RAIL"

## ODORS:

UNKNOWN ALCOHOLIC BEVERAGE COMING FROM THE BREATH OF MCKOY

## GENERAL OBSERVATIONS

SPEECH: SLURRED, STUDDERING, REPEDITIVE, PROFANITY

ATTITUDE: RUDE, OBNOXIOUS, PROFANITY, COMBATIVE, DISRESPECTFUL

CLOTHING: LONG GREEN SHIRT, WHITE SLIDE SANDALS

MEDICAL/OTHER: STATED SHE HAS A PAST NECK INJURY.

STATE OF FLORIDA  
COUNTY OF PALM BEACH

(Signature of Arresting Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 22 day of JULY 20 21 by J. PALMERI

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

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

SCANNED  
JUL 22 2021

SUBJECT: PAIGE

MCKOY

CASE NUMBER 21-000194

### ROADSIDE TASKS

#### HORIZONTAL GAZE NYSTAGMUS:

☒ LT EYE-LACK OF SMOOTH PURSUIT

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

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

☒ RT EYE-LACK OF SMOOTH PURSUIT

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

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

#### Other Observations:

LACK OF CONVERGENCE

#### WALK & TURN:

UNABLE TO STAND AND REPEATEDLY RAISING ARMS FOR SUPPORT DURING THE INSTRUCTION PHASE, STARTED EARLY. ON STEPS 3,4,5,6,7,8,9 MCKOY STEPPED OFF LINE, MCKOY CONTINUED PAST THE 9TH STEP AND CONTINUED 5 MORE STEPS. ON EACH STEP MCKOY FAILED TO TO STAY ON THE LINE. UPON RETURN MCKOY WALKED 7 STEPS, STEPPED OFF LINE STEPS 1 AND 2 AND FAILED TO WALK HEEL TO TOE ON ALL RETURN STEPS.

#### ONE LEG STAND:

MCKOY STOOD WITH HER FEET TOGETHER AND WAS EXPLAINED THE TASK. MCKOY STARTED EARLY AND FAILED TO RAISE HER RIGHT FOOT TO THE MINIMUM 6 INCHES. MCKOY BEGAN TO HOP ON HER FOOT UNTIL SHE SET HER FOOT DOWN AND DISCONTINUED THE TASK STATING "I CANT DO THIS".

#### FINGER TO NOSE:

MCKOY WAS UNABLE TO STAND PRESENTING WITH AN ORBITAL SWAY. LEFT - PAD OF FINGER TO BRIDGE OF NOSE, RIGHT - PAD OF FINGER TO BRIDGE OF NOSE, LEFT - TIP OF FINGER TO SIDE OF NOSE, RIGHT - TIP OF FINGER TO BRIDGE OF NOSE, RIGHT - LEFT FINGER PAD TO TOP NOSE, LEFT - RIGHT PAD OF FINGER TO TOP OF NOSE.

#### ROMBERG ALPHABET:

MCKOY BEGAN THE ALPHABET WITHOUT SINGING STATING A,B,C,D,E,H,I,F,H,I,K,F,P,Y,S,Y,Z,X,O AND THEN BEGAN TO SING A,B,C,W,S,L THEN STOPPED.

#### BREATH TEST RESULTS:

1)  2)  3)  4)

STATE OF FLORIDA  
COUNTY OF PALM BEACH

Signature of Arresting Investigative Officer

I, foregoing instrument was sworn to or affirmed and subscribed before me this 22 day of JULY 2021 by J. PALMERI

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

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

SCANNED  
JUL 22 2021

\_\_\_\_\_, a duly certified Law Enforcement Officer or Correctional Officer,  
(Name of Officer reading Implied Consent Warning)

am a member of Tequesta Police Department

(Name of law enforcement agency)

, and I do swear

or affirm that on or about the 22 day of JULY, 20 21, at \_\_\_\_\_ ☒ P.M. ☐ A.M.

**ALESE**

**MCKOY**

(Type or Print)

**FIRST NAME**

MIDDLE OR MAIDEN NAME

**LAST NAME**

DL# 165939772

state of NY

## the offense of DUI

by **J. PALMERI**

800

issued Citation # **A5U4XEE**

(Name of Arresting Officer)

That on or about the 22 day of JULY, 20 21, at 0234

☐ P.M.    ☒ A.M.

in PALM BEACH County.

I requested that the driver submit to a **X 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 of Law Enforcement Officer or  
Correctional Officer

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

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

~~Title~~ CPL J FRANKLIN

Date **7/22/21**

**(AFFIX SEAL)**

The foregoing instrument was sworn and subscribed before

me this 22 day of JULY, 20 21

by J.PALMERI

who is personally known to me or who has produced

**POLICE ID**

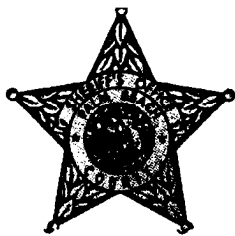
as identification

**Notary Public**

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.

HSMY-BAR1001 (REV. 10/2016)

SCANNED  
JUL 22 2021



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

PBSO CASE # 21-088165 PBSO ZONE 3-14  
AGENCY CASE # 21-000194 CRASH CASE # \_\_\_\_\_  
TIME OF STOP/CRASH 2342 DATE 07/21/21 DAY WED  
SUBJECT'S NAME MCKOY, PAIGE ALESE RACE W SEX F  
HGT 5'0 WGT 110 DOB 01/09/1997  
LOCATION 113 N. HIGHWAY 1 TEQUESTA  
ARRESTING OFFICER'S NAME & ID J. PALMERI #1226 AGENCY TEQUESTA PD  
DIVISION: \_\_\_\_\_  
NOTIFIED BY COMMO YES  
ARRIVAL AT FACILITY 0159  
Arrest Time 0011  
BREATH RESULTS:  
1. REFUSED  
2. REFUSED  
3. REFUSED  
4. REFUSED  
TESTING OFFICER'S ID BELL 8656

SCANNED  
JUL 22 2021

# TESTING FACILITY TASK REPORT

AGENCY: TPD

SUBJECT: MCKOY, PAIGE ALESE

CASE NUMBER: 21-088165

DATE: Jul 22, 2021

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0232

ENDING TIME: 0235

BREATH TESTS RESULTS: 1) R TIME 0234 A.M. ☒ P.M. ☐ 2) N/A TIME XX A.M. ☐ P.M. ☐  
3) N/A TIME XX A.M. ☐ P.M. ☐ 4) N/A TIME XX A.M. ☐ P.M. ☐

**REFUSED**

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: TALKATIVE, RUDE, UNCOOPERATIVE

CLOTHING: BLUE LONG SLEEVE SHIRT

MEDICAL CONDITIONS: UNKNOWN

MEDICATIONS: UNKNOWN

## OTHER:

EYES: BLOODSHOT

## COMMENTS:

ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0159 HOURS

SUBJECT WOULD NOT STATE CAMERA FORMAT INFO  
SUBJECT STATED SHE WOULD NOT TAKE BREATH TEST

A/O READ I.C 2 TIMES  
SUBJECT TALKED OVER A/O  
SUBJECT STATED SHE WOULD NOT LISTEN TO A/O

A/O CALLED A REFUSAL AT 0234 HOURS

A/O READ RIGHTS  
SUBJECT STATED SHE DID NOT UNDERSTAND

Q AND A NOT CONDUCTED

SCANNED  
JUL 22 2021

**REFUSED**

SUBJECT: McKey, Jorge Alese

CASE NUMBER: 21-000194

## 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) \_\_\_\_\_

Read on camera

## 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

SCANNED  
JUL 22 2021

SUBJECT: McKey, Page Alise

CASE NUMBER: 21-00194

## 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?	_____
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: OFC. J. Palmeri #1726

SCANNED  
JUL 22 2021



# WITNESS LIST

CASE NUMBER: 21-000194

ARRESTING OFFICER: J.PALMERI

ADDRESS: 357 Tequesta Drive, Tequesta, FL 33469

PHONE NUMBERS (HOME): 561-768-0500 (WORK) (561) 768-0500

CAN TESTIFY TO: INTERACTIONS WITH MCKOY, DUI TASKS, BAT INTERACTIONS,

NAME: SGT R KORKOWSKI

ADDRESS: 357 TEQUESTA DR, TEQUESTA, FL 33469

PHONE NUMBERS (HOME) 561-768-0500 (WORK)

CAN TESTIFY TO: DRIVING PATTERN DAMAGE TO THE VEHICLE.

NAME: SGT M MUNIZ

ADDRESS 357 TEQUESTA DR. TEQUESTA FL. 33469

PHONE NUMBERS (HOME) 561-768-0500 (WORK)

CAN TESTIFY TO: DRIVER BEHIND THE WHEEL, DRIVER EXITING THE VEHICLE.

NAME: CPL J FRANKLIN

ADDRESS 357 TEQUESTA DR. TEQUESTA FL 33469

PHONE NUMBERS (HOME) 561-768-0500 (WORK)

CAN TESTIFY TO: SFSTS, INTERACTIONS WITH MCKOY AT THE JAIL.

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

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CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

SCANNED  
JUL 22 2021



**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)
<b>L/E Exemptions</b>	<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.	
<b>Public Info. Exemptions</b>	<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.	
<b>Florida Rules of Judicial Administration 2.420 (Rule of 23)</b>	<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"/>			
<b>Other</b>	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

**REVIEW COMPLETED BY**

Booking Number: 2021018169

Date: 07/22/2021

Specialist Name/ID: T Howard/7185