



PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

ADMIN

Agency ORI Number: FLO 500000 Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE Agency Report Number: 06-20-127296

CHARGES

Charge Type: 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other Charge Description: 316.193(1)A

VICTIM

Victim's Name: HERNANDEZ SALAZAR, PATRICIA, CECILIA DEL C Race: W Sex: F Date of Birth: 11/10/1983

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. On the 15 day of NOVEMBER 2020 at 1904 P.M.

On Sunday, November 15, 2020 at approximately 1915 hours, I responded to Southern Boulevard and "B" Road, Loxahatchee (Palm Beach County) Florida to assist Deputy Joshua Brack with a traffic stop that involved a possible drunk driver. The initial complaint was made through a "Mobile Eyes" motorist who called in a reckless driver. Upon my arrival I noticed D/S Brack's patrol car stopped behind a Dodge pick up with his emergency lights activated. Both vehicles were stopped on the north shoulder of Southern Boulevard's westbound lane. I saw two small children sitting in the rear seat of the pick up. Due to a possible language barrier Deputy C. Aguero responded for translation. I made contact with D/S Brack who wrote a sworn witness statement on a probable cause affidavit detailing his involvement with this case. Afterward I met with D/S Aguero who was standing with the driver. She (the driver) was later identified as Patricia Cecilia Del Carmen Hernandez Salazar by her Florida driver license. I noticed her eyes were red, watery and glossy. Her cheeks were flushed and mouth was dry. She was very excited and varied her emotions. At times she began sobbing as she explained her rationale in driving her vehicle the way it was reported. I could smell a strong odor of an unknown alcoholic beverage emanating from her breath that intensified when she spoke. She was wearing a blue pants suit with brown shoes. I told the driver why the deputy stopped her. She was apologetic and said she applied her brakes to discipline her children to keep their seat belts on. I told her I had a suspicion that she had been drinking an unspecified amount of unknown alcoholic beverages. She admitted to drinking. I asked if she would consent to performing Standardized Field Sobriety Evaluations (SFSTs) for the purpose of determining if he was impaired while operating a motor vehicle. She obliged. Prior to her performance I asked if she had any physical problems with her body that would inhibit her from performing light physical exercises. I also asked if she was taking medication. She reported she neither had anything wrong with her physically, nor was she taking medication. I escorted her to a level surface that was smooth and free from obstructions and debris. This area was well lighted by my headlights. I placed a yellow strip of masking tape on the surface that formed a line. The defendant identified the tape by giving its color and placing her left foot on it when prompt to do so. The following SFSTs were explained, demonstrated, translated and acknowledged by him prior to her performance: HGN, The Walk and Turn, The One Leg Stand, The Finger to Nose and The Romberg Alphabet Recitation.

ADMINISTRATIVE

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 15 day of NOVEMBER 2020 by INV E. K. WHITE KNOWN

Notary Public, Clerk of Court, Officer (F.S.S. 117.10) BEVERLY SUE OWEN MY COMMISSION # GG 188278 EXPIRES: May 30, 2022

PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	Juvenile
ADMIN	Agency ORI Number	Agency Name	Agency Report Number						
	FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06-20-127296						
CHARGES	Charge Type: Check as many as apply.		Special Notes:						
	<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								
DEF	Name (Last, First, Middle)			Alias	Race	Sex	Date of Birth		
	HERNANDEZ SALAZAR, PATRICIA, CECILIA DEL				W	F	11/10/1983		
CHARGES	Charge Description		Charge Description						
	DUI 316.193(1)A								
VICTIM	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				
<p>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</p> <p><input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.  <input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the 15 day of NOVEMBER 20 20 at 1904 <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p>Her deficiencies were recorded on another form in this work sheet. At the conclusion of the SFSTs, coupled with the deputy's observation of the defendant's vehicle in motion and my observation of personal indicators of impairment exhibited by the defendant, probable cause was established for DUI. I told the defendant she was being placed under lawful arrest for DUI. I did a cursory search of her outer clothing. Subsequently she was handcuffed (double locked and checked for tightness) prior to being seated into the rear of my patrol car. Her husband arrived on scene and took custody of their children, her personal effects and their vehicle. Meanwhile I began transport to the main jail breath analysis facility for further processing. Upon our arrival I escorted the defendant into the facility and began a 20 minute observation period. During this time the defendant did not ingest anything into her body orally or otherwise. Neither did she regurgitate. I escorted her into the testing room and asked her to provide breath samples for the purpose of determining her alcohol content. She obliged. The defendant gave two adequate breath samples that rendered results of .173 and .164. Due to a language barrier I did not perform Q&amp;A. The defendant was booked into the main jail for the charge of DUI.</p>									
<p>STATE OF FLORIDA          COUNTY OF PALM BEACH</p> <p><i>[Signature]</i>          (Signature of Arresting/Investigative Officer)</p> <p>INV E. K. WHITE</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this 15 day of NOVEMBER 20 20 by INV E. K. WHITE</p> <p>(Print name of Arresting/Investigative Officer who is personally known to you)</p> <p>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p> <p>BEVERLY SUE OWEN          MY COMMISSION # GG 188278          EXPIRES: May 30, 2022          Bonded thru Notary Public Underwriters</p> <p>KNOWN</p> <p>SCANNED</p> <p>PAGE 2 OF 2</p>									

NOT A CERTIFICATE

PROBABLE CAUSE STATEMENT

ADMINISTRATIVE

PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

ADMIN

Agency ORI Number: FLO 500000 Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE Agency Report Number: 06-20-127296

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

DEL

Name (Last, First, Middle): Hernandez-Salazar Patricia Alias: Race: W Sex: F Date of Birth: 11/10/1983

CHARGES

Charge Description: DUI

VICTIM

Victim's Name (Last, First, Middle): State Of Florida 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 [X] 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 15 day of NOVEMBER 20 20 at 1904 [ ] A.M. [X] P.M. (Specifically include facts constituting cause for arrest.)

On November 15, 2020 at approximately 1849 hours, I was patrolling the 14000 block of Southern Boulevard traveling eastbound. I received a BOLO in reference to a dark in color pick up truck driving recklessly. As I approached the intersection of Southern Boulevard and D Road, I saw a gray Ram pick up truck Bearing FL tag# LKCA71 pass another vehicle on the dirt shoulder along the North side of Southern boulevards Westbound lane. Once the vehicle reentered the outside lane of Southern Boulevard I could hear the tires of the vehicle screeching and the vehicle accelerated very rapidly with multiple vehicles having to swerve to avoid collision with the truck. I immediately turned around to not loose sight of the vehicle I accelerated in excess of 70 miles per hour to catch up to the vehicle. Once behind the vehicle it applied its brakes aggressively and accelerated rapidly multiple times almost causing a collision between it and my vehicle while failing to maintain a single lane of travel. I initiated a traffic stop by by activating my lights and sirens with the vehicle failing to immediately stop. The Vehicle stopped in the middle of the outside lane of Southern Boulevard. I approached the Driver's side of the vehicle and made contact with a Hispanic Female, later identified as Patricia Hernandez-Salazar via her FL DL, and she was speaking loudly I could smell the odor of an unknown alcoholic beverage emitting from Salazar's person that intensified when she spoke I suspected the driver to have consumed and unknown amount of alcoholic beverages. I asked for a DUI unit to respond to my location to assess the driver for possibly being impaired.

ADMINISTRATIVE

STATE OF FLORIDA COUNTY OF PALM BEACH Signature of Arresting/Investigative Officer: D/S J. Brack #16035

The foregoing instrument was sworn to or affirmed and subscribed before me this 15 day of NOVEMBER 20 20 by D/S J. Brack #16035 (Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced: D/S WHITE

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

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

ON THE 15 DAY OF NOVEMBER 20 20, AT 1904 AM PM  
SUBJECT: HERNANDEZ SALAZAR, PATRICIA, CECILIA DEL CASE NUMBER: 20-127296

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 HAVE BEEN DRINKING**

ODORS:

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

**GENERAL OBSERVATIONS**

SPEECH: **EXCITED**

ATTITUDE: **INATTENTIVE COOPERATIVE**

CLOTHING: **NORMAL**

MEDICAL/OTHER: **NONE**

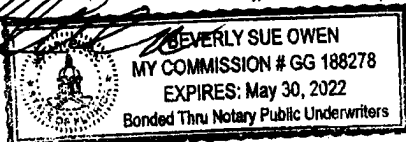
STATE OF FLORIDA  
COUNTY OF PALM BEACH

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

The foregoing instrument was sworn to or affirmed and subscribed before me this 15 day of NOVEMBER 20 20 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, Officer (F.S.S 117.10)



SCANNED  
NOV 17 2020

CERTIFIED COPY

SUBJECT: HERNANDEZ SALAZAR, PATRIC CASE NUMBER 20-127296

**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.

**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 was unable to maintain her balance while placed in the instructional position. She swayed and abandoned the position altogether. She attempted the tasks during the instructional phase. During the task she failed to keep her arms by her side as instructed, she turned improperly, she stepped off the line

**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: The defendant swayed while performing this task, she elevated her leg/foot more than six (6) inches, she failed to keep her arms by her side

**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: The defendant failed to touch the tip of her finger to the tip of her nose on all six attempts. Rather she touched the sides of her nose. She failed to return her arms to her side after making contact with the side of her 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: The defendant failed to recite the alphabet

BREATH TEST RESULTS: 1) .173 2) .164 3) 4)

STATE OF FLORIDA  
COUNTY OF PALM BEACH

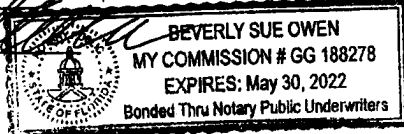
INV E. K. WHITE

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 15 day of NOVEMBER 20 20 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, Officer (F.S.S 117.10)



SCANNED  
NOV 17 2020

# TESTING FACILITY TASK REPORT

AGENCY:

SUBJECT:

DATE:

BEGINNING TIME:

CASE NUMBER:

VIDEO DVD NUMBER:

ENDING TIME:

BREATH TESTS RESULTS: 1)  TIME  A.M.  P.M.  2)  TIME  A.M.  P.M.

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

BREATH OPERATOR:

MAINTENANCE TECHNICIAN:

### TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE:

CLOTHING:

MEDICAL CONDITIONS:

MEDICATIONS:

**OTHER:**  
37 YEARS OF AGE

### COMMENTS:

A/O AND DEFENDANT ARRIVED AT 2115 HOURS. A/O REQUESTED BREATH TEST, DEFENDANT AGREED. NO PROBLEM WITH TEST. DEFENDANT BLEW .173 AND .164. A/O READ C/W. DEFENDANT UNDERSTOOD RIGHTS, BECAUSE OF LANGUAGE DIFFERNCES NO Q & A ATTMEPTED.

SCANNED  
NOV 17 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: 80-006240 Software: 8100.27  
Date of Test: 11/15/2020

Date of Last Agency Inspection: 11/13/2020  
Observation Period Began: 21:15  
Subject's Name: PATRICIA C HERNANDEZ SALAZAR DOB: 11/10/1983 Sex: F

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	21:40
	Air Blank	0.000	21:41
	Control Test	0.080	21:41
	Air Blank	0.000	21:41
	Subject Sample #1	0.173	21:44
	Air Blank	0.000	21:45
	Air Blank	0.000	21:46
	Subject Sample #2	0.164	21:47
	Air Blank	0.000	21:48
	Control Test	0.079	21:48
	Air Blank	0.000	21:49
	Diagnostics Check	OK	21:49

Cylinder Lot: 14020080A1  
Exp: 07/05/2022

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: 11/15/2020  
Signature

Sworn to ( ) (affirmed) before me this 15<sup>th</sup> day of November 2020  
[Signature] JNU, K. White  
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

SCANNED  
NOV 17 2020

SUBJECT: Hernandez Salazar, Patricia Cecilia CASE NUMBER: 20127296

## 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? NOT done

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? TO language

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? different 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?	_____

SCANNED  
NOV 17 2020

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: INV. E. K. WHITE

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

SUBJECT: HERNANDEZ SALAZAR, PATRICIA Cecilia CASE NUMBER: 20127296

## 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  
Allowed to read Spanish text  
SCANNED



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

REVIEW COMPLETED BY

Booking Number: 2020026925	Date: 11/16/2020
	Specialist Name/ID: AM/31562

SCANNED  
 NOV 17 2020