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21CT 7222

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE	OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-21-060880	
	Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type <input checked="" type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No		Multiple Clearance Indicator 01			
	Location of Arrest (Including Name of Business) DONLIN DRIVE / THE TWELFT FAIRWAY, WELLINGTON/FL/33411				Location of Offense (Business Name, Address) DONLIN DRIVE / THE TWELFT FAIRWAY, WELLINGTON/FL/33411			
DEFENDANT	Date of Arrest 05/01/2021	Time of Arrest 0028	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle Priority Towing, 7153 Southern Blvd. WPT 33413, (561) 533-5573	
	Name (Last, First, Middle) Denecke, Regina, Martha		Alias (Name, DOB, Soc. Sec. #, Etc.)					
	Race W - White 1 - American Indian B - Black 0 - Oriental/Asian	Sex F	Date of Birth 9/23/1965	Height 5'03	Weight 160	Eye Color BRO	Hair Color BLONDE	Complexion MED
CO-DEF	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) LEFT CHEST		Marital Status DIVORCED		Religion NONE		Indication of Alcohol Influence 1. City 2. County 3. Florida 4. Out of State <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	
	Local Address (Street, Apt. Number) 1168 Jackpine St., Wellington, FL 33414		Phone (561) 670 6100		Residence Type 2			
	Permanent Address (Street, Apt. Number)		Phone		Address Source FL DL			
JUVENILE	Business Address (Name, Street)		Phone		Occupation SURGICAL ASSISTANT			
	D/L Number, State DS20733658430, FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) GERMANY	
	Co-Defendant Name (Last, First, Middle)		Race		Sex		Citizenship YES	
CHARGE	Co-Defendant Name (Last, First, Middle)		Race		Sex		Citizenship	
	Parent Name (Last)		Parent Address (Street, Apt. Number)		Parent City		Parent State	
	Address (Street, Apt. Number)		City		State		Zip	
NOTICE TO APPEAR	Notified by: (Name)		Date		Time		Juvenile Disposition 1. Handled/processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated	
	Released To: (Name)		Relationship		Date		Time	
	The above address provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)		School Attended		Grade			
CHARGE	Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property		Value of Property			
	Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Dispense/ Distribute M. Manufacture/ Produce/ Cultivate Z. Other	
	Charge Description DRIVING UNDER THE INFLUENCE		Counts 1		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 316.193(2a) 9	
CHARGE	Drug Activity N		Drug Type N		Amount / Unit		Offense # 21-060880	
	Charge Description DRIVING UNDER THE INFLUENCE		Counts		Domestic Violence		Statute Violation Number	
	Drug Activity N		Drug Type N		Amount / Unit		Offense #	
CHARGE	Charge Description		Counts		Domestic Violence		Statute Violation Number	
	Drug Activity N		Drug Type N		Amount / Unit		Offense #	
	Charge Description		Counts		Domestic Violence		Statute Violation Number	
CHARGE	Charge Description		Counts		Domestic Violence		Statute Violation Number	
	Drug Activity N		Drug Type N		Amount / Unit		Offense #	
	Charge Description		Counts		Domestic Violence		Statute Violation Number	
NOTICE TO APPEAR	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 MAY Day 27 Year 21 Time 0830 AM X 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.		05/01/2021	
	Signature of Defendant (or Juvenile and Parent / Custodian)		Date Signed		Signature of Arresting Officer INV. W. AMADON #9440		Name Verification (Printed by Arrestee) INV. W. AMADON	
	HOLD for other Agency Name: <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		ID # 9440		(PRINT)	
ADMIN	Transporting Officer INV. W. AMADON		ID # 9440		Agency PERSO		Witness here if subject signed with an "X"	
	DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - MAGISTRATE (N.T.A. ONLY)		PAGE 1		OF 1			
	PMSO 0140 REV. 05/17							

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		Juvenile	
ADMIN	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06- 21-060880				
	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		Special Notes:				
CHARGES	Name (Last, First, Middle) Denecke Regina		Alias		Race W		Sex F		Date of Birth 09/23/1965
	Charge Description D.U.I.		316.193(1)		Charge Description				
VICTIM	Charge Description		Charge Description						
	Charge Description		Charge Description						
	Victim's Name (Last, First, Middle) State of Florida		Race		Sex		Date of Birth		
	Local Address (Street, Apt. Number)		(City)		(State)		(zip)		Phone
PROBABLE CAUSE STATEMENT	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.</p> <p>The Person taken into custody</p> <p><input type="checkbox"/> committed the below acts in my presence.</p> <p><input type="checkbox"/> confessed to _____</p> <p><input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>admitting to the below facts.</p> <p>On the <u>30</u> day of <u>April</u> 20<u>21</u> at _____ <input type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p>On April 30, 2021 at 2306 hours, I responded to the Twelfth Fairway and Donlin Dr, located in the Village of Wellington, Palm Beach County, FL 33414 to investigate a traffic crash. I made contact with the complainant identified as Dylan Brophy (DOB-12/14/02) who advised he saw a red Mazda SUV go off of the roadway from Forest Hill Blvd, onto the sidewalk at Twelfth Fairway, popping it's front left tire. Brophy then stated the driver later identified as Regina Denecke (DOB- 09/23/65) attempted to continue to drive away from the scene when she parked her disabled red mazda FL (Tag#REGINAO) on the side of The Twelfth Fairway and Derby Tr. Brophy advised Denecke exited the vehicle and inspected the tire than sat in the passenger seat of the vehicle. Upon my arrival, I spoke to both the witness and the driver of the red Mazda/Denecke. The witness, Brophy was very clear in his description of the above events. Denecke appeared very flush in the face and slurred her words. Denecke appeared confused when I asked her where she was coming from or where she was trying to go this evening. Denecke's eyes were extremely bloodshot and watery. Denecke swayed from front to back and side to side as we spoke outside her car. Denecke was not making any sense in her answers and seemed confused. Upon further speaking with Denecke I could smell an unknown alcoholic beverage coming from her breath. I then had Denecke sit back in her vehicle for her own safety. I called D/S Amadon to investigate if Denecke was operating a motor vehicle while in an impaired state. This concludes my involvement in this case.</p>									
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH		D/S Bitner		(ID #) 36800				
	(Signature of Arresting/Investigative Officer)								
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>30</u> day of <u>April</u> 20 <u>21</u> by <u>D/S Bitner</u>		36800						
	(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced		<u>KNOWN</u> <u>LEO</u>						
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)		<u>For W Amadon 9490</u>							

SCANNED PAGE 1 OF 1

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 30 DAY OF APRIL 20 21 AT 2307 AM ☒ PM

SUBJECT: Denecke, Regina, Martha

CASE NUMBER: 21-060880

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 Friday April 30, 2021, I was dispatched to the intersection of Donlin Drive and The Twelfth Fairway, Village of Wellington, Palm Beach County, FL regarding a disabled vehicle with a suspected impaired driver. Upon arrival I met with Deputy N. Bitner #36800 who provided me with a sworn written supplemental probable cause affidavit stating: "On April 30, 2021 at 2306 hours, I responded to the Twelfth Fairway and Donlin Dr, located in the Village of Wellington, Palm Beach County, FL 33414 to investigate a traffic crash. I made contact with the complainant identified as Dylan Brophy (DOB-12/14/02) who advised he saw a red Mazda SUV go off of the roadway from Forest Hill Blvd, onto the sidewalk at Twelfth Fairway, popping it's front left tire. Brophy then stated the driver later identified as Regina Denecke (DOB- 09/23/65) attempted to continue to drive away from the scene when she parked her disabled red maza FL (Tag#REGINAO) on the side of The Twelfth Fairway and Derby Tr. Brophy advised Denecke exited the vehicle and inspected the tire than sat in the passenger seat of the vehicle. Upon my arrival, I spoke to both the witness and the driver of the red Mazda/Denecke. The witness, Brophy was very clear in his description of the above events. Denecke appeared very flush in the face and slurred her words. Denecke appeared confused when I asked her where she was coming from or where she was trying to go this evening. Denecke's eyes were extremely bloodshot and watery. Denecke swayed from front to back and side to side as we spoke outside her car. Denecke was not making any sense in her answers and seemed confused. Upon further speaking with Denecke I could smell an unknown alcoholic beverage coming from her breath. I then had Denecke sit back in her vehicle for her own safety."

OBSERVATION OF DRIVER:

I immediately detected the odor of an unknown alcoholic beverage coming from the defendant's breath that intensified when she spoke to me. The defendant's eyes were red, glassy, bloodshot, and watery. The defendant's speech was slurred, slow, with an accent. When the defendant exited the vehicle and walked to my patrol car I noticed that she was very unsteady on her feet and weaved as she walked. The defendant had a noticeable orbital sway when standing still.

DRIVER'S STATEMENTS:

The defendant denied drinking any alcohol but stated that her tire was popped when she "hit the thing on the side". After speaking with her I was able to confirm that was referring to the curb of the roadway. The defendant began telling me about how her legs and feet hurt from working fourteen hour days and that if I was going to ask her to do things that now would not be the right time.

ODORS:

I immediately detected the odor of an unknown alcoholic beverage coming from the defendant's breath.

GENERAL OBSERVATIONS

SPEECH: slurred / slow / accent

ATTITUDE: polite / cooperative /

CLOTHING: black shirt / black leggings / sandals

MEDICAL/OTHER: cancer

STATE OF FLORIDA
COUNTY OF PALM BEACH

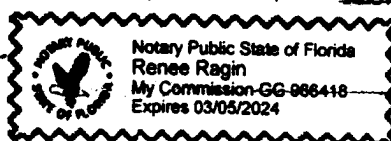
INV. W. AMADON *W. Amadon* #9440
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 1 day of May 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

Renee Ragin (#16877)

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



SCANNED

MAY 02 2021

SUBJECT: Denecke, Regina, Martha

CASE NUMBER 21-060880

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.

WALK & TURN:

I offered the defendant the opportunity to remove her sandals and she said she would prefer to. The defendant voluntarily removed her shoes. The defendant was placed into the instructional stance for the Walk and Turn Task and was told to remain in that position until told to do otherwise. The defendant had a noticeable orbital sway during this task. The defendant was then given instructions and a demonstration. The defendant stated they understood the instructions. The defendant stepped from the instructional stance. The defendant used her arms for balance. The defendant stated that her feet were hurting and that she could not perform this task. I offered her to sit on the front bumper of my patrol car so that she would be more comfortable. Due to her complaint of foot and leg pain I elected to perform the seated battery of SFST's. The first seated task was Hand Coordination Task. The defendant was placed into the instructional position and told to remain there. The defendant moved her hands from the instructional position. I demonstrated the task and the defendant stated she was not sure she understood it all. I offered to repeat the instructions and showed her again. The defendant did not clap. The defendant paused to ask me questions several times. The defendant did not say "done" as instructed.

PALM PAT:

The defendant was placed into the instructional stance for the Palm Pat. I told her to remain in that position until told to do otherwise. The defendant was then given instructions and a demonstration. The defendant stated they understood the instructions. The defendant counted out of sequence. The defendant's hands did not remain lined up as instructed. Her top hand was angled across her bottom hand several times. The defendant made a motion with her hand as if she was opening a book several times.

FINGER TO NOSE:

The defendant was placed into the instructional stance for the seated Finger to Nose Task and was told to remain in that position until told to do otherwise. The defendant was then given instructions and a demonstration. The defendant stated they understood the instructions. The defendant did not touch finger to nose as demonstrated. The defendant missed on several attempts. The defendant searched for their own nose on several attempts. The defendant used the incorrect hand. The defendant touched her right cheek with her right hand on one attempt.

ROMBERG ALPHABET:

The defendant was placed into the instructional stance for the seated Romberg Alphabet Task and was told to remain in that position until told to do otherwise. The defendant was then given instructions and a demonstration. The defendant stated she was not comfortable with the English Alphabet. I asked if she could count in English from One to Twenty-Six and she said she could. The defendant stated she understood the instructions. The defendant had to be reminded to keep her eyes closed. The defendant had to be reminded to keep her head tilted back. The defendant counted correctly.

BREATH TEST RESULTS: 1) REFUSAL 2) REFUSAL 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. W. AMADON *INV W Amadon #9440*
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 1 day of May 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

Renee Ragin (#16877)

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



SCANNED
MAY 02 2021

WITNESS LIST

CASE NUMBER: 21-060880

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 N. BITNER # 36800

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

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

CAN TESTIFY TO: Initial contact / wheel witness

NAME: DYLAN BROPHY

ADDRESS 17371 W SYCAMORE DR , LOXAHATCHEE , FL 33470

PHONE NUMBERS (HOME) 561 800 5806 (WORK) _____

CAN TESTIFY TO: 911 CALLER / WHEEL WITNESS

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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CAN TESTIFY TO: _____

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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: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

SCANNED
MAY 02 2021

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: Denecke, Regina M. CASE NUMBER: 21-060880

DATE: May 1, 2021 VIDEO DVD NUMBER: N/A

BEGINNING TIME: 01:19 ENDING TIME: 01:23

BREATH TESTS RESULTS: 1) Refusal TIME 01:23 A.M. ☒ P.M. ☐ 2) N/A TIME A.M. ☐ P.M. ☐

3) N/A TIME A.M. ☐ P.M. ☐ 4) N/A TIME A.M. ☐ P.M. ☐

BREATH OPERATOR: R. Ragin #16877

MAINTENANCE TECHNICIAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Accent, Mumbled

ATTITUDE: Sleepy, cranky

CLOTHING: Black jeans, black t-shirt, black flip flops

MEDICAL CONDITIONS: High blood pressures, Anxiety

MEDICATIONS: Oxycontin, Codeine, Anxiety meds

OTHER:

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

REFUSED

COMMENTS:

Arrived at center A/O started 20 minute observation period at 00:56 hrs.

Subject refused to perform breath test.

A/O read I/C 2x.

Subject refused to take test.

A/O called refusal.

A/O read rights on scene.

Subject invoked the right to counsel.

No Q&A conducted.

REFUSED

SCANNED
MAY 02 2021

SUBJECT: Denicke, Regina M. CASE NUMBER: 21060740

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) _____

SCANNED

MAY 02 2021

SUBJECT: Deneck, Ruben A. CASE NUMBER: 1-00010

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? X

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: _____

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

SCANNED
MAY 02 2021

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

I, Investigator LE W. AMADON, a duly certified Law Enforcement Officer or Correctional Officer,
(Person reading Implied Consent Warning)
am a member of Palm Beach County Sheriff's Office, and I do swear

or affirm that on or about the FIRST day of May, 2021, at 00:28

DRIVER REGINA MARTHA DENECKE
(Type or Print) FIRST MIDDLE OR MAIDEN LAST

DL # D520733658430, state of FL, was placed under lawful arrest for

the offense of DUI by Investigator LE W. AMADON and
(Name of Arresting Officer)

issued Citation # AEA7G3E

That on or about the FIRST day of May, 2021, at 01:20
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 (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.

Inv. W. Amadon #9440
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 this 01 day of May, 2021

by Inv. W. Amadon

who is personally known to me or who has produced

Known as identification.

Notary Public [Signature]

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**
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: 2021010517

Date: 5/02/21

Specialist Name/ID: J. Beck/9007

SCANNED
MAY 02 2021