

20CT7267 SB

ARREST / NOTICE TO APPEAR

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

OBTS Number	Agency ORI Number 0500200		Agency Name Boca Raton Police Department	Agency Report Number (N.T.A.'s only) 3, 2 2020-006530
Charge Type: Check as many as apply	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	If Weapon Seized Enter Type None/not Applicable
Location of Arrest (Including Name of Business) 2401 S DIXIE HWY		Location of Offense (Business Name, Address) 2401 S DIXIE HWY, BOCA RATON, FL 33432		
Date of Arrest 06/06/2020	Time of Arrest 02:07	Booking Date 06/06/2020	Booking Time 02:50	Jail Date 06/06/2020
Jail Time 02:50		Location of Vehicle EMERALD TOWING		

Name (Last, First, Middle) DE MENEZES, RENATA FERNADES		Alias: Alias (Name, DOB, Soc. Sec. #, Etc.)	
Race W - White B - Black	Sex W	Date of Birth 03/15/1982	Height 5'06
Weight 161	Eye Color BROWN	Hair Color BLACK	Complexion MEDIUM
Build Medium	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT R FOOT / BLESSED BY GOD; TATT M BACK / VERTICAL	Marital Status M	Religion CATHOLIC
Local Address (Street, Apt. Number) 731 SE 1ST WAY 26, DEERFIELD BCH, FL 33441	Phone (954) 756-4545	Residence Type: 1. City 2. County 3. Florida 4. Out of State	Address Source FL DL
Permanent Address (Street, Apt. Number) 731 SE 1ST WAY 26, DEERFIELD BCH, FL 33441	Phone (954) 756-4545	Business Address (Name, Street) RICE AND BEANS, 599 E SAMPLE RD	Phone (954) 756-4545
DL Number, State D552726825950 / FL	INS Number	Place of Birth (City, State) ESPIRITU SANTO, FF,	Citizenship US
Occupation Bartender			

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large	<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor	<input type="checkbox"/> 5. Juvenile
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large	<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor	<input type="checkbox"/> 5. Juvenile
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian	Name (Last, First, Middle)		Residence Phone			
Address (Street, Apt. Number)		(State)	(Zip)	Business Phone		
Notified by (Name)	Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated			
Released To (Name)	Relationship	Date	Time			
The above address was 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's Office (Phone 355-2526) informed of any change of address.			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 Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine	B. Barbiturate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ Equipment	S. Synthetic	U. Unknown Z. Other
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Charge Description DUI	Statute Violation Number 316.193(1)A	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit
	N	
Offense #	Counts	Domestic Violence
	1	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Warrant / Capias Number	Bond	

Health / Apparent Physical Condition of Defendant GOOD	Any knowledge of the following: Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries <input type="checkbox"/>
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Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond	<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health	<input checked="" type="checkbox"/> T.O.T. County Jail	PROPERTY - Received By CASAS, J 818	Released By CASAS, J 818	Released To TOT CJ
Transported By CASAS, J 818	Date Transported 06/06/2020	Time Transported 02:18	Other		

<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.	Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444	Court Date and Time 07/13/2020 08:30:00
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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.

Renata Menezes
Signature of Defendant (or Juvenile and Parent/Custodian)

06/06/20
Date Signed

No Photo Available

HOLD for Other Agency	Signature of Arresting Officer <i>BRP</i>	Name Verification (Printed by Arrestee) RENATA MENEZES
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suscible	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other	I.D. # 818
Intake Deputy <i>SPANN 8101</i>	Transporting Officer CASAS, J	I.D. # 818
Pouch #	Agency BRPD	Witness here if subject signed with an "X"

05/16/20

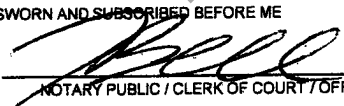

SCANNED JUN 07 2020 449

PAGE 1 OF 1

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

A D M I N I S T R A T I V E	OBTS Number	Agency ORI Number FL 0500200		Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2020-006530
	Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes:	
D E F	Name (Last, First, Middle) DE MENEZES, RENATA FERNANDES				Alias
		Race W	Sex F	Date of Birth 03/15/1982	
C H A R G E S	Charge Description	Charge Description			
	316.193(1) DUI				
V I C T I M	Victim's Name (Last, First, Middle) STATE OF FLORIDA,				Race
	Local Address (Street, Apt. Number) (City) (State) (Zip) 100 NW 2ND AVE, BOCA RATON, FL 33432				Phone (561) -
	Business Address (Name, Street) (City) (State) (Zip)				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. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><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 6 day of June, 2020 at 02:07 (Specifically include facts constituting cause for arrest.)</p> <p>On 6/6/2020, at approximately 0130 hours, I was driving southbound in the area of 600 S Federal Hwy when I observed a 2019 white Subaru Impreza driving southbound in the far-right lane. I witnessed the vehicle veer to the right of the lane, violating the traffic control device (solid white line), and partially enter the bicycle lane. The driver of the vehicle corrected the vehicle and continued southbound. While I continued observing the vehicle's driving pattern, I witnessed the vehicle veer to the right and enter the bicycle lane two more times. A traffic stop was conducted on the vehicle in the area of 1800 S Federal Hwy and the vehicle came to a final stop t 2401 S Federal Hwy.</p> <p>I approached the vehicle from the driver's side and identified the driver as Renata De Menezes by her FL DL. I immediately observed that De Menezes eyes were red and glossy, and she had a strong odor of alcoholic beverage emanating from her breath. I asked De Menezes where she was coming from and she stated she was on her way home from The Locale which is a local late-night restaurant/bar. I observed that De Menezes was wearing an entry wristband from the bar. I asked De Menezes if she had anything to drink while at The Locale and she informed me she consumed 2 Gin and Tonics.</p> <p>Based on by observations and De Menezes statements I asked her to step out of the vehicle and requested that she submit to Standardized Field Sobriety Exercises. De Menezes agreed to participate. Due to De Menezes wearing high heels at the time of the stop, I afforded her the opportunity to change her footwear into something more comfortable. She chose to wear sandals while performing the exercises.</p> <p>I asked De Menezes a series of questions prior to beginning the exercises. I asked De Menezes if she had any medical conditions or injuries that would affect her ability to perform the exercises and she stated "no". She advised she did not limp, did not have a glass eye or false teeth, and was not diabetic. She also claimed to not be taking any</p>					
A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME		JOSHUA BELL MY COMMISSION #GG346008 EXPIRES: JUN 18, 2023 Bonded through 1st State Insurance		
	 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER CASAS, JAVIER (818) NAME OF OFFICER (PLEASE PRINT)		
DATE 06/06/2020		DATE 06/06/2020			PAGE 1 OF 3

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

OBTS Number	Agency ORI Number FL 0500200		Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2020-006530
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	Special Notes:
	<input type="checkbox"/> 2. Traffic Felony	<input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other	

Name (Last, First, Middle) DE MENEZES, RENATA FERNANDES	Alias	Race W	Sex F	Date of Birth 03/15/1982
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prescription medications. I asked her if she had seen a doctor or a dentist today and she said "no". De Menezes also informed me that she was not in a car accident today and did not hit her head recently. I then proceeded with the exercises.

The first exercise was Horizontal Gaze Nystagmus. I administered the instructions and De Menezes stated that she understood. I observed that De Menezes stopped following the stimulus to look at me at one point during the exercise. She also began conversing while the exercise was still being conducted.

At this time Menezes confessed to also consuming a shot of tequila prior to leaving The Locale, moments before the stop.

The second exercise was the Walk and Turn. I administered the instructions and demonstrated how the exercise should be completed. De Menezes stated that she understood. It should be noted that De Menezes had trouble getting into the starting position and broke the starting position while the instructions were being administered. She also began the exercise before being instructed to do so. While taking her steps, I observed that De Menezes would bring the back foot a few inches past the front foot and then move the foot back until the heel touched her toes. De Menezes also stepped off of the line twice.

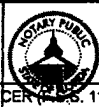

The third exercise was the One-Leg Stand. I administered the instructions and demonstrated how it should be completed. De Menezes stated she understood. De menses tarted the exercise before being instructed to do so. De Menezes also placed her foot on the floor several time during the exercise, swayed, and used her arms for balance.

The fourth exercise was the Finger to Nose. I confirmed that De Menezes knew her left from her right by asking her to show me her left hand and then her right hand. I then administered the instructions. The pattern was L-R-L-L-R-L-R. De Menezes completed the exercise properly.

The fifth exercise was the modified romberg balance test. I asked De Menezes if she felt comfortable estimating the passage of 30 seconds and she stated yes. I demonstrated the passage of 30 seconds using a stop watch. The instructions were administered, and the exercise was conducted. De Menazes estimated the passage of 30 seconds in 26 seconds.

The final exercise was the Romberg alphabet. De Menezes was informed that she would need recite the English alphabet in a non-rhythmic manner. She was also told she would have her eyes closed and head tilted backwards during the exercise. De Menezes informed me that she went to English classes in the United States and felt confident that she could complete the exercise. De Menezes skipped from the letter "I" to the letter "L".

Based on the totality of the circumstances, I found probable cause to believe that De

SWORN AND SUBSCRIBED BEFORE ME	 <p>JOSHUA BELL MY COMMISSION #GG346008 EXPIRES: JUN 18, 2023 Notary Public / Clerk of Court / Officer (F.S. 110) Bonded through 1st State Insurance</p>	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER CASAS, JAVIER (818) NAME OF OFFICER (PLEASE PRINT)
06/06/2020 DATE		06/06/2020 DATE

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

DBTS Number

Agency ORI Number
FL 0500200

Agency Name
BOCA RATON POLICE DEPARTMENT

Agency Report Number
3 | 2 | 2020-006530

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

Special Notes:

Name (Last, First, Middle)
DE MENEZES, RENATA FERNANDES

Alias
Race: **W** Sex: **F** Date of Birth: **03/15/1982**

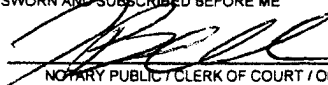
Menezes was operating a motor vehicle while under the influence of drugs or alcohol. she was placed under arrest for DUI per F.S.S 316.193(1). she was transported to the Palm Beach County Sheriff's Office DUI Testing Facility where Breath Operator J. Bell (#8656) completed the BAT room procedures. De Menezes refused to provide a breath sample. I informed De Menezes of implied consent and she once again refused to provide a breath sample. she was advised of her constitutional warnings, advised she understood, and chose to answer some of my questions. Her answers were documented on the DUI influence report.


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SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER
06/06/2020
DATE


JOSHUA BELL
MY COMMISSION #GG346006
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance


SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
CASAS, JAVIER (818)
NAME OF OFFICER (PLEASE PRINT)
06/06/2020
DATE

PAGE
3 OF 3

TESTING FACILITY TASK REPORT

AGENCY: BRPD

SUBJECT: DE MENEZES, RENATA F

CASE NUMBER: 20-075385

DATE: Jun 6, 2020

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0313

ENDING TIME: 0324

BREATH TESTS RESULTS: 1) R TIME 0315 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 TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: ACCENT, SLURRED

ATTITUDE: TALKATIVE, COOPERATIVE, POLITE

CLOTHING: YELLOW/BLACK TOP, BLACK SKIRT, BLACK SANDALS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES:

ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

SUBJECT STATED SHE DRANK 2 GIN AND TONIC AND 1 SHOT OF TEQUILA (Q AND A)

COMMENTS:

ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0250 HOURS

SUBJECT STATED SHE WOULD NOT TAKE BREATH TEST

A/O READ I.C

SUBJECT STATED SHE UNDERSTOOD I.C AND AGAIN STATED SHE WOULD NOT TAKE BREATH TEST

A/O READ RIGHTS

SUBJECT STATED SHE UNDERSTOOD HER RIGHTS

A/O CONDUCTED Q AND A

SUBJECT ANSWERED QUESTIONS

REFUSED



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

PBSO CASE # 20-075385 PBSO ZONE 7-11

AGENCY CASE # 20-6530 CRASH CASE # _____

TIME OF STOP/CRASH 0132 DATE 6-6-20 DAY Saturday

SUBJECT'S NAME De Menezes, Renata RACE W SEX F

HGT 526 WGT 161 DOB 3-15-82

LOCATION 2401 S Federal Hwy Boca Raton FL 33432

ARRESTING OFFICER'S NAME & ID J. CASAS 818 AGENCY BRPD

DIVISION: Field Services

NOTIFIED BY COMMO 0218

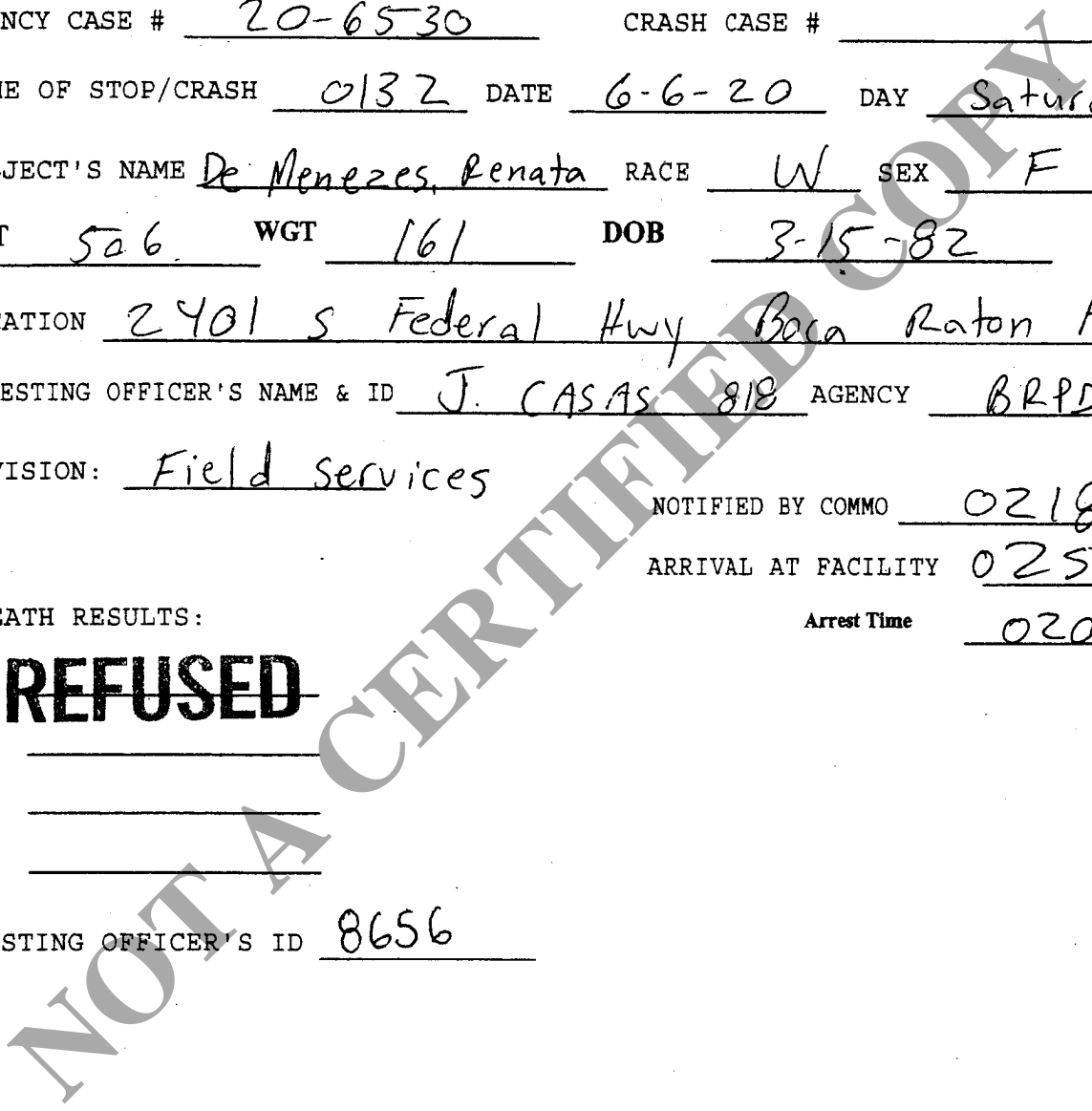
ARRIVAL AT FACILITY 0250

BREATH RESULTS:

Arrest Time 0207

- 1. **REFUSED**
- 2. _____
- 3. _____
- 4. _____

TESTING OFFICER'S ID 8656



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

I, OFFICER J. CASAS, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of BOCA RATON POLICE SERVICES DEPARTMENT, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 6TH day of JUNE, 20 20, at 0207 P.M. A.M.

DRIVER RENATA FERNANDES DE MENEZES
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# D552726825950, state of FLORIDA, was placed under lawful arrest for

the offense of DUI by J. CASAS and
(Name of Arresting Officer)

issued Citation # A6LQAOE

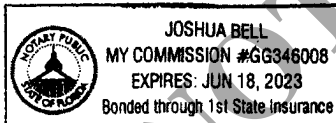
That on or about the 6TH day of JUNE, 20 20, at 0315 P.M. A.M.

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] 818
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 6 day of JUNE, 20 200,

by OFC. CASAS #818,

who is personally known to me or who has produced
KNOWN LEO as identification

Notary Public [Signature]

HSMV-BAR1001 (REV. 10/2016)

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.

SUBJECT: De Menezes, Renata F CASE NUMBER: _____

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? Yes

WHERE WERE YOU GOING? Home

WHAT STREET OR HIGHWAY WERE YOU ON? Federal

DIRECTION OF TRAVEL? SE WHERE DID YOU START? Boca Raton - The Locale

WHAT TIME DID YOU START? 0240 WHAT TIME IS IT NOW? 3 something

WHAT IS TODAY'S DATE? June 6th WHAT DAY OF THE WEEK IS IT? Saturday

WHAT COUNTY AND CITY ARE YOU IN NOW? West palm

WHEN DID YOU LAST EAT? 0010 WHAT DID YOU EAT? Sandwich

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? Party

HOW MUCH DO YOU WEIGH? 161 HAVE YOU BEEN DRINKING? Yes WHAT? 2 gin & tonic - Tequila shot

HOW MUCH? 3 WHERE? The Locale WITH WHOM? Friend

WHEN DID YOU HAVE YOUR FIRST DRINK? 0120 AND YOUR LAST DRINK? 0250

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? slow - Shot fast

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? NO ARE YOU UNDER THE INFLUENCE? NO

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? NO HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? Bartender WHEN DID YOU LAST WORK? Tonight

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? NO WHAT? _____

ARE YOU SICK OR INJURED? NO WHAT'S WRONG? _____

DO YOU LIMP? NO DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? NO

WERE YOU IN AN ACCIDENT TODAY? NO

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? NO WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? NO WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? NO WHAT? _____ WHEN? _____

DO YOU HAVE:

EPILEPSY?	<u>NO</u>
GLASS EYE?	<u>NO</u>
FALSE TEETH?	<u>NO</u>
EAR INFECTION?	<u>NO</u>
INNER EAR TROUBLE?	<u>NO</u>
DIABETES?	<u>NO</u>

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? NO

DO YOU TAKE INSULIN? NO IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? Yes WHERE? NJ

INTERVIEWER: OFC. Casas #818

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

SUBJECT: De Menezes, Renata F CASE NUMBER: 20-6530

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



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: 2020014288	Date: 06/07/2020
	Specialist Name/ID: AM/31562