50-2021-CT-019708-ANB 344 ARREST / NOTICE TO APPEAR JUVENILE 4. Request for Capias Agency ORI Numbe Agency Report Number (N.T.A.'s only) 0501700 Jupiter Police Department 4 21-004177 5 Charge Type: 1. Felony
2. Traffic Felony 5. Ordin Check as many as apply. Multiple Clearance 4. Traffic Misdemeanor Enter Type UNARMED Location of Arrest (Including Name of Business) Location of Offense (Business Name, Address) 4001 DONALD ROSS RD/S ALT A1A JUPITER 4001 DONALD ROSS RD/S ALT AIA, JUPITER, FL 33410 Booking Time Location of Vehicle 11/25/2021 03:25 Alias (Name, DOB, Soc. Sec. #, Etc.) DELEON, ROBERT II Alias: Date of Birth Height Weight Hair Color W M 10/30/1971 5'09 205 BROWN B - Black O - Oriental/Asian BROW **LIGHT** Large . Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description) Yes 🗖 **OTHER** Unk. Local Address (Street, Ant. Number) (State) (Zip) 7638 PRESIDIO CREEK, BOERNE, TX 78015 (210) 838-8035 int Address (Street, Apt. Number) (State) (Zip) 7638 PRESIDIO CREEK, BOERNE, TX 78015 (210) 838-8035 TX DL (State) (Zip) It Consolt D/L Number, State Soc. Soc. Number INS Number Place of Birth (City, State) Citizer 10622330 / TX SAN ANTONIO, TX US Co-Defendant Name (Last, First, Middle) 5. Juvenile 1. Arrested 3. Felony 2. At Large 4. Misden Co-Defendant Name (Last, First, Middle) Sex Date of Birth 1. Arrested 3. Felony 5. Juvenile 2. At Large 4. Misden Parent Name (Last, First, Middle) Other: (1) Legal Custodian Address (Street, Apt. Number (State) (Zip) Business Phone Notified by: (Name) Time JUVENILE DISPOSITION 2. TOT JAC Department and Rele Released To: (Name) Relationship Date The above address was provided by defendant and/or 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. Description of Property Value of Property Yes, by ☐ Yes 😨 № Drug Activity N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use M. Mansfacture/ Z. Other H. Hallucinogen M. Marijuana O. Opium/Deriv. Drug Type N. N/A Cultivate Statute Violation Number Violation of ORD # **DUI - NORMAL FACULTIES IMPAIRED** 316.193(1)(A) Drug Activity Drug Type Warrant / Capies Number N □y XIN Statute Violation Number Violation of ORD # Drug Activity Drug Type Amount / Unit OfTense # Warrant / Capies Number DY DN Statute Violation Number Violation of ORD # Drug Activity Drug Type Amount / Unit Domestic Violence Warrant / Capias Number DY DN Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries Released O.R. Released to Parent/Guardian T.O.T. County Jail PROPERTY - Received By Released By Posted Bond South County Mental Health Transported By Time Transported INSTRUCTION NO. 1 - Mandatory appearance in court Location (Court Room

North County PALM BEACH GARD ☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2. I AGREE TO APPPAR 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 COMTEMPT OF COURT AND A WARDAMS FOR MY ARREST SHALL BE ISSUED. No Photo Available Signature of Defendant (or Luvenile and Parent/Custodian) Date Signed HOLD for Other Agency Name of Artesting Officer (Print) ☐ Dangerous Resisted Arrest I.D. # Other FANDREY, CHRISTOPHER Suicidal 1182 Transporting Officer
Schoolerbeck 7200 3*10* Witness here if subject signed with ar E COURT STATE ATTORNEY IN AGENCY BEEN WATER CORDS ENDANG PROTECTION OF THE COURT OF A. SCHNADERBECK

A	OBTS Number		PROBABLE CAU	ISE AFFIDAVIT	1. Arrest 2. N.T.A.		st for Warran st for Capias		JUV	ENILE
DM	1	Agency Name		I -	cy Report Number		ŊII.			·-··
1	FL 0501700	JUPITER POLICE	·	T 5		0417	7			
N	Charge Type: Check as many as apply. Charge Type: 1. Felony 2. Traffic Felony	3. Misdemeanor4. Traffic Misdemeanor	5. Ordinance 6. Other		Special N	lotes:				
DEF	Name (Last, First, Middle) DELEON, ROBERT II		Alias			Race	Sex M	Date of Birth		•
c	Charge Description			Charge Description		**	I IAI	10/3	0/197	4
HAR	316.193(1)(A) DUI - NORMA	L FACULTIES IMPAIR	ED							
E	Charge Description			Charge Description						
~	Victim's Name (Lest, First, Middle)			<u> </u>		Race	Sex	Date of Birth	1	
- 0	State Of Florida Local Address (Street, Apt. Number)	(Сну)	(State)	(Zip)	Phone	<u>L</u>	Addr	ess Source		
7										
M	Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	4	Occu	petion		
_	The undersigned certifies and swears tha	at he/she has just and resonable	grounds to believe, and o	loes believe that the above n	I amed Defendant co	ommitted t	he followin	g violation	of law.	
	The Person taken into custody committed the below acts in m	IV presence.	☐ was o	observed by						who told
	confessed to				_that he/she sa	w the an	rested pe	rson com	mitt the b	elow acts.
	admitting to the below facts. On the25 day ofNov	vember 2021		ound to have committed to				lescribed) investiga	ation.
	On the 25 day or 140	veilibei , 202.	1_at03:25	(Specifically include fac	ts constituting ca	use for a	irrest.)			
	On 11/25/2021 at app	proximately 030	2hrs I was	dispatched to	a drive	r pas	sed o	out b	ehind	1
	the wheel call locat	ted at Donald R	oss Rd and	S Alt AlA, Ju	piter, P	alm F	Beach	Coun	ty,	
	Florida. While enrou		dvised that	a male was s	lumped o	ver t	he w	heel	stopp	ed
R	at the light facing	west bound.								
В	Upon arrival to the	area, I was in	full polic	e uniform wit	h my depa	artme	nt is	Saued	Avon	1
A	BWC activated which	clearly identi	fied myself	as a Jupiter	Police (Offic	er.	I obs	erved	
-	silver ford SUV bear	ring TX Tag PSJ	4480 in the	middle lane	stopped a	at th	e st	op ba	r. I	
티	activated my rear em									
c	middle lane. I then passed out behind the									
A	later positively ide									was
s	attempted to wake up	p the driver by	knocking o	n the window	with my l	hand	and w	with :	my	
-	flashlight but both									ı
s	scene and placed a m Deleon's vehicle to									
۱,	oncoming traffic.	prevent the ve.	nicle from .	rolling forwa	ra ana po	cent	Tall	/ Int	0	
T E	-									
	Further attempts to									
	forth caused him to									le.
	into park after having some difficulties. Once the door was opened, I immediately noticed the strong odor of an unknown alcoholic beverage coming from the vehicle. I									
	asked Deleon how much he had to drink tonight and he continually avoided the question.									
	Deleon stated he was	coming from "1	Kirby`s" and	d was on the	way home.	Del	eon d	lenie	d hav	
	any immediate medica									
	drinking. At this po also unsteady on his					compl	ied.	Dele	on wa	.6
		Λ)						•		
\$	SWORN AND SUBSCRIBED BEFORE ME		1	(1)						
	COUNTREPLA		7	SIGNATURE OF A	340 RRESTING/INVES	STIGATIN	G OFFICE	R		
	SCHNADERBEC NOTARY PUBLIC / CLERK OF COL									
	11/25/2	2021		FANDREY, C	HRISTOPH F OFFICER (PLEA		(1182))		_	
	DATE			1	1/25/2021				[PAGE
	·				DATE					1 of 3

COURT

STATE ATTORNEY CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

Second PROBABLE CAUSE AFFIDAVIT 1.000									
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Determination 1 Factor 1 Fa		, ,			1 -				
Deleon eventually admitted to drinking and stated he had 1-2 beers tonight. Deleon stated that he was at a 3 on a scale of 1-10 with 1 being completely sober and 10 being the most drunk he has ever been in his life. Deleon stated that he did not feel the effects of the alcohol and felt ok to be driving a vehicle. Based upon my observations of Deleon, statements made, and the totality of the circumstances, I believed Deleon may be too impaired to safely operate a motor vehicle. I requested that Deleon chudct Standardized Field Sobriety Tasks (SFSTS) to help determine if he was ok to be driving. Deleon intitially refused because he did not want to incriminate himself. I advised Deleon that his refusel could be used against him in any criminal proceeding and he would be forcing me to make a decision on if I believed he was too impaired to be driving based upon my investigation to this point. Deleon agreed to perform SFTs. Deleon stated he was under the care of a doctor because he had back surgery about a year ago and initially stated it could cause him issues with SFSTs but did not elaborate when asked. Deleon stated he did not have any issues with his eyes and did not wear a glasses or contacts. During the Sorizontal Gaze Nystagmus Task, Deleon was swaying. During the instructions I asked Deleon to place his finger on the red light on my red pen light and he asked which light, as if there were two lights. Deleon tried to touch both hights, however it was only one light. Deleon failed to keep his head still during the task. During the Walk and Turn, Deleon failed to majorate in the starting position and had to be reminded to return to that position. Deleon eventually stated he understood the intructions and when told to begin he paused and asked about the task. Deleon were appropriate amount of a tepps. Deleon state used his arise for belance. While walking back beleon stopped and I asked him if he was done. Deleon stated he was and refused to be on the back seat of my patrol vehicle. Deleon was placed into be	!		 		<u> </u>				
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D E F	'	Name (Last, First, Middle) DELEON, ROBERT II			Alias				Race	Sex M	Date of Birth	
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WITNESS LIST

	CASE NUMBER:	21-4177
ARRESTING OFFICER: C Fandrey		
ADDRESS: 196 Military Trl. Jupiter, FL 33458		
PHONE NUMBERS (HOME):	(WORK) <u>(561)</u> 746-63	201
CAN TESTIFY TO: PC		
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SUBJECT:	Deleon	П	Robert
SODICCI	Detenti	ı,	RUDELL

PBSO #61298 REV.11/02i

CASE NUMBER:	21-4177
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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 o chemical or controlled substances. NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST Officer Fandrey I am of the Jupiter Police Department If you refuse to take the test I have requested of you, your driving privilege will be suspended for a period of one (1) year for a FIRST REFUSAL, or eighteen (18) months if your driving privilege has been PREVIOUSLY SUSPENDED, or if you have been PREVIOUSLY FINED under s. 327.35215, for refusing to submit to a lawful test of your breath, urine, or blood. Additionally, if you refuse to take the test I have requested of you, and if your driving privilege has been previously suspended, or if you have been previously fined under s. 327.35215, for a refusal to submit to a lawful test of your breath, urine, or blood, you will be committing a misdemeanor, in addition to any other penalties which can be imposed by law. Refusal to submit to the test I have requested is admissible into evidence in any criminal proceeding. Read on Camea SUBJECT'S SIGNATURE: __ Deleon II, Robert CONSTITUTIONAL WARNINGS I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS: You have the right to remain silent and not answer any questions. Any statement must be freely and voluntarily given. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning. 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. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent. I can make no threats or promises to induce you to make a statement. This must be of your own free will. Any statement can and will be used against you in a court of law. SUSPECT'S SIGNATURE: Not Read Deleon II, Robert

STATE OF FLORIDA AFFIDAVIT OF REFUSAL TO SUBMIT TO BREATH TEST

I, (Name of Of	Officer Fandrey Ficer reading Implied Con	, a duly	certified Law Enf	orcement or Correct	tional Officer, am a
	(Name of I				, and I do swear
	(Name of I	aw Enforcement Agend	cy)		
or affirm that	on or about the 25	day ofNove	mber, 20 <u>21</u>	_, at0325	_ □Р.М. ДА.М
DRIVER	Robert			Deleo	n II
	FIRST NAME	MIDDLE OR	MAIDEN NAME	LAST	NAME
DL #	10622330	, state of	Texas	, was placed und	er lawful arrest for
the offense of	<u>DUI</u>	by	Off	icer Fandrey	and
issued citation	#		(Name of A	Arresting Officer)	
	at on or about the25		oer_, 2021, at	0328 □P.M	I. Z A.M.
in Palm Bea	ech County,				
had been problood test. It to a lawful to or if he or sheet of his or requested.	B) months if his or heviously fined under also informed the dest as requested above has been previous or her breath, urine,	er s. 327.35215, For the state of the state	c.S., for refusing e commits a maleriving privilege 327.35215, F.S. theless, the drivature of Law Enfo	g to submit to a isdemeanor by recent has been previous, for refusal to so ever refused to so exercised to exercise exercise exercised exe	breath, urine, or efusing to submit ously suspended, ubmit to a lawful ubmit to the test
((AFFIX SEAL)	T I	Q	was sworn and sub 3 ure of Attesting Office	0
The foregoing in	strument was sworn and s	ubscribed before	Title	Police Office	er
	day of, 20			11/25/2021	
by O who is personal Notary Public	fficer C Fandrey 34(Ily known to me or who as	has produced identification.	Note: Mail Bureau of A Department Vehicles, w	or hand deliver to the deliver to the deliver to the deliver to the deliver's licer copy of the UTC, a	ews office, and Motor ase, the



Palm Beach County Sheriff's Office - Arrests Only

	х	Florida State Statute	Description	Page Number(s)
		119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
tions		943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
L/E Exemptions		119.071(4)(c)	Undercover personnel.	
1 % E		119.071(2)(f)	Confidential informants (CIs).	
		119.071(2)(e)	Confession.	
suc		985.04(1)	Juvenile offender records.	
mptic		119.071(h)(i)	Assets of a crime victim.	
Public Info. Exemptions		395.3025(7)(a), 456.057(7)(a)	Medical information.	
blic In		394.4615(7)	Mental health information.	
Pu		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.	
	×	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
		(viii) 394.4615(7)	Clinical records under the Baker Act.	
of 23)		(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
(Rule		(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)				
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REVIEW COMPLETED BY

Booking Number: 2021029624	Date:
	Specialist Name/ID: T Howard/7185