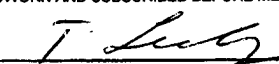
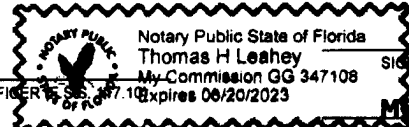



0522787		50-2021-CT-004468 ANB		2992	
ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias	
Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 5, 4 21-001324	
Charge Type: Check as many as apply: <input type="checkbox"/> 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 UNARMED		Multiple Clearance Indicator	
Location of Arrest (Including Name of Business) 101 S SEAS DRIVE, #101, JUPITER, FL		Location of Offense (Business Name, Address) 4060 S US HIGHWAY 1, JUPITER, FL 33477			
Date of Arrest 04/18/2021	Time of Arrest 20:05	Booking Date 04/18/2021	Booking Time 23:37	Jail Date	Jail Time
Name (Last, First, Middle) ARMSTRONG, RODERICK BARTHOLOMEW		Alias:		Alias (Name, DOB, Soc. Sec. #, Etc.)	
Race W - White B - Black	I - American Indian O - Oriental/Asian	Sex W M	Date of Birth 01/10/1967	Height 6'01	Weight 220
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status S	Religion	Complexion LIGHT	Build Medium
Local Address (Street, Apt. Number) 101 S SEAS DR 101, JUPITER, FL 33477		(City) (State) (Zip)		Phone	
Permanent Address (Street, Apt. Number) 101 S SEAS DR 101, JUPITER, FL 33477		(City) (State) (Zip)		Phone	
Business Address (Name, Street) OLD MARSH GOLF CLUB,		(City) (State) (Zip)		Phone	
D/L Number, State A652722670100 / FL		Soc. Sec. Number		INS Number	
Place of Birth (City, State) BRONXVILLE, NY,		Citizenship US		Occupation Caddy	
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"/> Other		Name (Last, First, Middle)			Residence Phone
<input type="checkbox"/> Legal Custodian		Address (Street, Apt. Number) 1. OR (City) (State) (Zip)			Business Phone
Notified by: (Name) 2. OR		Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated	
Released To: (Name) 3. OR		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	
<input type="checkbox"/> Yes, by: <input type="checkbox"/> No:		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 D. Deliver T. Traffic	R. Smuggle K. Dispense/ Distribute E. Use	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
Charge Description DUI - BAC/BRAC OVER .15 -OR- MINOR IN VEHICLE		Statute Violation Number 316.193(4)		Violation of ORD #	
Drug Activity N	Drug Type N	Amount / Unit /	Offense # 21-001324	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Charge Description DUI - DAMAGE TO PERSON/PROPERTY		Statute Violation Number 316.193(3)(C)(I)		Violation of ORD #	
Drug Activity N	Drug Type N	Amount / Unit /	Offense # 21-001324	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Charge Description CRASH - HIT & RUN FAILURE TO PROVIDE INFO TO UNATTENDED VEH		Statute Violation Number 316.063(1)		Violation of ORD #	
Drug Activity N	Drug Type N	Amount / Unit /	Offense # 21-001324	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Health / Apparent Physical Condition of Defendant		Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries			
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health		<input checked="" type="checkbox"/> T.O.T. County Jail		PROPERTY - Received By Released By Released To	
Transported By		Date Transported / /	Time Transported	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) North County PALM BEACH GARD		Court Date and Time 05/19/2021 08:30:00	
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.		Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed	
HOLD for Other Agency		Signature of Arresting Officer MCGILLICUDDY, STEVEN		Name Verification (Printed by Arrestee) (PRINT)	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal Intake Deputy ID. # 698		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other POUCH #		ID. # 1216 Agency JUPITE	
Witness here if subject signed with an "X"		PAGE 1			

OBT Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
A D M I N I S T R A T I V E	Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 5 4 21-001324				
	Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other					Special Notes:			
D E F E N D A N T	Name (Last, First, Middle) ARMSTRONG, RODERICK BARTHOLOMEW				Race W	Sex M	Date of Birth 01/10/1967		
	Charge Description 316.193(3)(C)(1) DUI - DAMAGE TO PERSON/PROPERTY				Charge Description 316.063(1) CRASH - HIT & RUN FAILURE TO PROVIDE IN				
C H A R G E S	Charge Description 316.193(4) DUI - BAC/BRAC OVER .15 -OR- MINOR IN V				Charge Description				
	Victim's Name (Last, First, Middle) NOVEMBRE, LUINEL				Race B	Sex M	Date of Birth 09/15/1980		
V I C T I M	Local Address (Street, Apt. Number) (City) (State) (Zip) 3734 BAHAMA RD, PALM BEACH GARDENS, FL 33410				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.</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 <u>18</u> day of <u>April</u>, <u>2021</u> at <u>19:05</u> (Specifically include facts constituting cause for arrest.)</p>									
<p>On 4/18/2021 at approximately 1905 hrs, Northern Communications received multiple calls in reference to a hit and run crash that had just occurred in the parking lot of Publix, located at 4060 S US Highway 1. Details of the call stated that a white male in a silver Chrysler struck another vehicle and then parked one row over. Soon after, the call was updated to state that the Chrysler was leaving the parking lot.</p> <p>Caller/witness, Justin Capela, was able to provide a description of the driver and also the license plate of the vehicle (872PXG/FL, VEHICLE-1). A records check of that license plate returned to Roderick Armstrong (DEFENDANT), with an address just down the road from the Publix. While I was en route to the Publix to meet with PFC Albano and Mr. Capela, K-9 Officer Hobby went to the registered owner's address, 101 S Seas Drive, and located the suspect vehicle parked nose-in, with front damage and white paint transfer, unoccupied.</p> <p>I responded directly to the Publix and spoke with Capela. Capela advised me that he was at the front of the Publix and heard a loud crash. He looked toward the sound and observed VEHICLE-1 with its front bumper on top of the rear bumper of a white Lexus (IN43SV/FL, VEHICLE-2). Capela was able to photograph the vehicle, including the license plate. He then observed VEHICLE-1 drive to the next row of cars to the south and idle there for several minutes. The vehicle then drove northbound and passed Capela, at which time he was able to get a look at the driver. He described the driver as a middle aged male wearing a white shirt, short dark hair and flushed red cheeks. Capela advised me that he believed he would be able to identify the driver. Capela advised me that at no time did he observe the driver of VEHICLE-1 exit the car and look at the damage or attempt to leave a note.</p> <p>I then met with K-9 Officer Hobby at the address registered to the suspect (401 S Seas Drive, Jupiter, FL 33477). I observed VEHICLE-1 parked nose-in at a guest spot. I observed heavy front left damage with white paint transfer. I then made contact with</p>									
A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT / OFFICER OF THE COURT 04/18/2021 DATE				 Notary Public State of Florida Thomas H. Leakey My Commission GG 347108 Expires 06/20/2023				
					SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  McGILlicuddy, STEVEN (1216) NAME OF OFFICER (PLEASE PRINT) 04/18/2021 DATE				
PAGE 1 OF 4									

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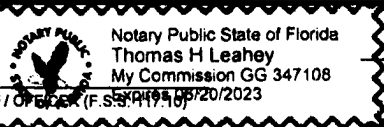
STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 5 4 21-001324			
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other						Special Notes:	
Name (Last, First, Middle) ARMSTRONG, RODERICK BARTHOLOMEW				Race W	Sex M	Date of Birth 01/10/1967	
<p>Armstrong at his residence. When Armstrong opened the door I immediately observed that he matched the description of the driver. As I spoke to Armstrong I detected a strong odor of unknown alcoholic beverage emitting from her person, which intensified as he spoke. He spoke with heavily slurred speech. He had red, glassy bloodshot eyes. I asked Armstrong to come outside to his vehicle with me and he did so voluntarily. I pointed out the damage on his vehicle to him and he advised me that it was from a previous crash. Armstrong continually denied being involved in a crash. I asked Armstrong a series of very specific questions regarding how he exited the plaza once he was in his vehicle and his story did not make sense.</p> <p>I read Armstrong his Miranda rights from a prepared card and he stated that he understood. I explained to Armstrong the facts surrounding the case up to this point and explained to him that he was observed during and after fleeing the scene. He then stated, "I may have hit a car in the parking lot". I asked him why he wasn't honest about it before and he apologized. He stated he went to Publix to buy a steak and may have hit a car on the way out. He confirmed for me that he knew he was required to leave a note and that he did not. He stated that he panicked. I asked him what he was doing for the several minutes that he sat in his car, prior to leaving the scene. He stated that he was having a conversation with the person that he hit. I advised Armstrong that we (the police) had not even made contact yet with the vehicle owner and he again apologized. I asked him how much he had to drink today and he said "three drinks". I asked him on a scale from 1-10 how drunk he felt and he said "I'm fine". I then asked him to give me a number and he said he was first a 7, then a 6 and finally a 5. He then told me he caddied 36 holes today, had two drinks and then came home to make a steak. He advised me that he did not believe his alcohol consumption contributed to the crash.</p> <p>Shortly thereafter, PFC Albano arrived with Capela for the purposes of a show up. Capela positively identified Armstrong as the driver. I then asked for Armstrong to submit to field sobriety exercises and he consented. He advised me that he had neuropathy in his feet. I therefore elected to conduct the transitional seated battery on Armstrong. While attempting to sit down in the chair that I provided for Armstrong, he fell backwards and completely over out of the chair. The following are the results of the exercises.</p> <p>HORIZONTAL GAZE NYSTAGMUS (HGN)</p> <ul style="list-style-type: none"> - No resting nystagmus in either eye - Equal tracking and pupil size - Lack of smooth pursuit in both eyes - Distinct and sustained nystagmus at maximum deviation in both eyes - Onset of nystagmus prior to forty-five degrees in both eyes - No vertical nystagmus in either eye - 6 of 6 clues 							
SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT / OFFICIAL (F.S. § 117.10) 04/18/2021 DATE		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  MCGILlicuddy, STEVEN (1216) NAME OF OFFICER (PLEASE PRINT) 04/18/2021 DATE					
PAGE 2 of 4							

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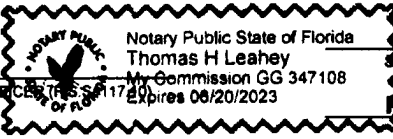
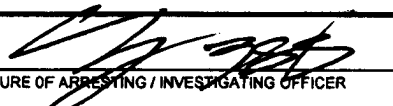
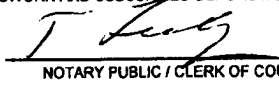
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Name (Last, First, Middle) ARMSTRONG, RODERICK BARTHOLOMEW								Race W	Sex M	Date of Birth 01/10/1967
<p>HAND CORDINATION</p> <p>TASK 1</p> <p>- Improper touch</p> <p>TASK 2</p> <p>- Improper count</p> <p>TASK 3</p> <p>- Improper touch</p> <p>TASK 4</p> <p>- Did not perform</p> <p>4 clues displayed (3 minimum)</p> <p>PALM PAT</p> <p>- Chopped pat</p> <p>- Double pat</p> <p>- Stopped before being told to do so</p> <p>- Did not increase speed</p> <p>- 4 clues displayed (2 minimum)</p> <p>FINGER TO NOSE</p> <p>1L - Pad to tip, DNP</p> <p>2R - Pad to tip</p> <p>3L - Pad to tip</p> <p>4R - Pad to tip</p> <p>5R - Pad to tip</p> <p>6L - Pad to tip</p> <p>RHOMBERG ALPHABET (B TO X)</p> <p>B C E D E F H G X Y L M N O P Q X E Y</p> <p>Based on my investigation I have probable cause to believe that Roderick Armstrong was in actual physical control of a vehicle while under the influence of an alcoholic beverage, chemical or controlled substance to the point that his normal faculties were impaired, and during such operation, did cause a crash causing damage to property, contrary to F.S.S. 316.193(3)(C)(1). Armstrong did, knowingly having been involved in a crash, did flee the scene of the crash, without making any attempt to contact the owner, contrary to F.S.S. 316.063(1). I placed Armstrong under arrest at 2005 hrs. Due to his being involved in a crash, I then transported him to Jupiter Medical Center, where I had him medically cleared for jail. I then transported Armstrong to the Palm Beach County Breath Alcohol Testing (BAT) center, arriving at 2150 hrs. I placed him under a 20 minute observation period, during which I did not observe him consume nor regurgitate anything. We then went on video with BAT Technician Leahey (ID #19183) where I requested that he submit to a breath test. He refused. I then read him implied</p>										
SWORN AND SUBSCRIBED BEFORE ME				 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER MCGILLICUDDY, STEVEN (1216) NAME OF OFFICER (PLEASE PRINT)						
 NOTARY PUBLIC / CLERK OF COURT / OFFICE OF THE CLERK OF THE COURT 04/18/2021 DATE		04/18/2021 DATE								
PAGE 3 of 4										

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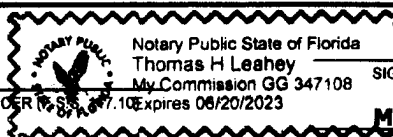

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P.I.O.

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	Charge Type: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		Special Notes:				
Name (Last, First, Middle) ARMSTRONG, RODERICK BARTHOLOMEW				Alias	Race W	Sex M	Date of Birth 01/10/1967
consent and he ultimately consented. He provided breath samples of .163 BrAC and .160 BrAC. He was therefore additionally charged with DUI BrAC over .150. He was issued a court date of 5/19/2021 at 0830 hrs. BWC.							
NOT A CERTIFIED COPY							
A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT / OFFICER				SIGNATURE OF ARRESTING / INVESTIGATING OFFICER 		
	04/18/2021 DATE		MEGILlicuddy, STEVEN (1216) NAME OF OFFICER (PLEASE PRINT)		04/18/2021 DATE		

WITNESS LIST

CASE NUMBER: 21-001324

ARRESTING OFFICER: MCGILlicuddy

ADDRESS: 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME): _____ (WORK) (561) 746-6201

CAN TESTIFY TO: PC

NAME: JUSTIN CAPELA

ADDRESS: 401 S SEAS DRIVE, APT #505, JUPITER, FL 33477

PHONE NUMBERS (HOME) (386)302-2615 (WORK) _____

CAN TESTIFY TO: WITNESS TO CRASH/LEAVING THE SCENE

NAME: PFC ALBANO

ADDRESS 196 MILITARY TRAIL, JUPITER, FL 33458

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: BACKUP ON STOP/SHOW UP OFFICER

NAME: K9 OFC HOBBY

ADDRESS 196 MILITARY TRAIL, JUPITER, FL 33458

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: BACKUP ON STOP

NAME: LUINEL NOVEMBRE

ADDRESS 3734 BAHAMA RD, PALM BEACH GARDENS, FL 33410

PHONE NUMBERS (HOME) (561)513-7132 (WORK) _____

CAN TESTIFY TO: VICTIM OF HIT/RUN

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: _____

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: _____



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

PBSO CASE # 21-056834 PBSO ZONE 3-14

AGENCY CASE # 21-001324 CRASH CASE # _____

TIME OF STOP/CRASH 1905 DATE 04/18/2021 DAY SUNDAY

SUBJECT'S NAME ARMSTRONG RODERICK B RACE W SEX M
LAST FIRST MID

HGT 6'2 WGT 215 DOB 1/10/1967

LOCATION 4060 S US HIGHWAY 1, JUPITER, FL

ARRESTING OFFICER'S NAME & ID MCGILLICUDDY 388 AGENCY JUPITER PD

DIVISION: RP - TRF

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 2150

ARREST TIME 2005

BREATH RESULTS:

1)	.163
2)	.160
3)	N/A
4)	N/A

TESTING OFFICER'S ID 19183 PBSO VIDEOTAPE # N/A

TESTING FACILITY TASK REPORT

AGENCY: JPD

SUBJECT: Armstrong, Roderick B

CASE NUMBER: 21-056834

DATE: Apr 18, 2021

VIDEO DVD NUMBER: n/a

BEGINNING TIME: 2213

ENDING TIME: 2229

BREATH TESTS RESULTS: 1) .163 TIME 2222 A.M. ☐ P.M. ☒ 2) .160 TIME 2225 A.M. ☐ P.M. ☒
3) n/a TIME 0 A.M. ☐ P.M. ☐ 4) n/a TIME 0 A.M. ☐ P.M. ☐

BREATH OPERATOR: Thomas H Leahey #19183

MAINTENANCE TECHNICIAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: slurred, thick

ATTITUDE: cooperative, talkative

CLOTHING: gray shorts, white polo shirt, no shoes (socks)

MEDICAL CONDITIONS: none

MEDICATIONS: none

OTHER:

eyes are glassy & bloodshot
odor of unknown alcoholic beverage on breath
subject stated he drank 4-5 cocktails at Abacoa - Q&A

COMMENTS:

arrived at center A/O conducted 20 minute observation period at 2150 hrs

subject refused to perform breath test

A/O read I/C & subject understood I/C

subject agreed to perform breath test

tech read breath test results & subject understood breath test results

A/O read rights on scene & subject understood rights from on scene

A/O conducted Q&A

subject answered questions

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: 80-006027 Software: 8100.27
Date of Test: 04/18/2021

Date of Last Agency Inspection: 04/09/2021
Observation Period Began: 21:50
Subject's Name: RODERICK B ARMSTRONG

DOB: 01/10/1967 Sex: M

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		22:20
Air Blank	0.000	22:20
Control Test	0.079	22:21
Air Blank	0.000	22:21
Subject Sample #1	0.163	22:22
Air Blank	0.000	22:23
Air Blank	0.000	22:25
Subject Sample #2	0.160	22:25
Air Blank	0.000	22:26
Control Test	0.078	22:26
Air Blank	0.000	22:26
Diagnostics Check OK		22:26

Cylinder Lot: 22620080A2
Exp: 10/05/2022

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 THOMAS H LEAHEY, 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: T Leahy

Signature

Date: 04/18/21

Sworn to (or affirmed) before me this 18 day of April, 2021

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.

SUBJECT: Armstrong, Robert D

CASE NUMBER: _____

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) _____

SUBJECT: Don King, Rodrick B 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? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

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

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE: EPILEPSY? _____
 GLASS EYE? _____
 FALSE TEETH? _____
 EAR INFECTION? _____
 INNER EAR TROUBLE? _____
 DIABETES? _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

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

INTERVIEWER: _____



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

REVIEW COMPLETED BY

Booking Number: 2021009425	Date: 4/19/2021
	Specialist Name/ID: M. Tookes #8557