

0530213

50-2022-CT-004479-ANB

941

OBT Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile		N	
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number (N.T.A.'s only) 06-22-047609							
Charge Type: Check as many as apply.		☐ 1. Felony ☐ 2. Traffic Felony		☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		Weapon Seized / Type 2 1. Yes 2. No		Multiple Clearance Indicator 01			
Location of Arrest (Including Name of Business) Wellington Trace/ Skipton Ave Wellington, FL 33414						Location of Offense (Business Name, Address) Wellington Trace/ Big Blue Trace Wellington, FL 33414							
Date of Arrest 03/18/2022		Time of Arrest 21:04		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle	
Name (Last, First, Middle) Shrore Scott Barnett						Alias (Name, DOB, Soc. Sec. #, Etc.)							
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex W M		Date of Birth 09/08/1969		Height 507		Weight 170		Eye Color Brown		Hair Color White	
Complexion Light		Build Medium		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TAT on Back		Marital Status Married		Religion CHRISTIAN		Indication of: Alcohol Influence Drug Influence		Y N Unk. ☐ ☐ ☐	
Local Address (Street, Apt. Number) 12593 82nd ST N		(City) West Palm Beach, FL 33414		(State) FL		(Zip) 33414		Phone (954) 448-1038		Residence Type: 1. City 2. County 3. Florida 4. Out of State		1	
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		Address Source FL DL			
Business Address (Name, Street)		(City)		(State)		(Zip)		Phone		Occupation Inspection			
D/L Number, State S630782693280		Sec. Sec. Number		INS Number N/A		Place of Birth (City, State) West Palm Beach, FL		Citizenship US					
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		☐ 1. Arrested ☐ 2. At Large		☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile			
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		☐ 1. Arrested ☐ 2. At Large		☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile			
☐ Parent ☐ Legal Custodian ☐ Other		Address (Street, Apt. Number)		(City)		(State)		(Zip)		Residence Phone			
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 ☐ defendant and / or ☐ 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.		School Attended		Grade									
Property Crime? ☐ Yes ☐ 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. Synthetics		U. Unknown Z. Other					
Charge Description DUI		Counts 1		Domestic Violence ☐ Y ☒ N		Statute Violation Number 316.193(1)(A)		Violation of ORD #					
Drug Activity		Drug Type		Amount / Unit		Offense # 22-047609		Warrant / Capias Number		Bond			
Charge Description		Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number		Violation of ORD #					
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond			
Charge Description		Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number		Violation of ORD #					
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond			
Charge Description		Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number		Violation of ORD #					
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond			
Location (Court, Courtroom, Address) North County Courthouse 3188 PGA Blvd, Room 1203 Palm Beach Gardens, FL 33409													
Court Date and Time Month April Day 25th Year 2022 Time 08:30 (AM) (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.													
Signature of Defendant (or Juvenile and Parent /Custodian) [Signature]													
Date Signed 03/18/2022													
HOLD for other Agency Name:		Signature of Arresting Officer [Signature]				Name Verification (Printed by Arrestee)							
☐ Dangerous ☐ Suicidal		☐ Resisted Arrest ☐ Other:		Name of Arresting Officer (Print) D. Bumgardner				I.D. # 36199				(PRINT)	
Intake Deputy SPM-2801		I.D. #		Pouch #		Transporting Officer D/S D. Bumgardner				ID # 36199			
Agency PBSO						Witness here if subject signed with an "X"				1		OF 1	

OBT Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	Juvenile	N	
ADMIN	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06- 22-047609						
	Charge Type: Check as many as apply.		☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Special Notes:						
DEF	Name (Last, First, Middle) Shrote, Scott, Barnett				Alias		Race W	Sex M	Date of Birth 09/08/1969		
	Charge Description DUI				316.193(1)(A)		Charge Description				
CHARGES	Charge Description				Charge Description						
	Charge Description				Charge Description						
VICTIM	Victim's Name (Last, First, Middle)				Race		Sex	Date of Birth			
	Local Address (Street, Apt. Number)				(City)	(State)	(zip)	Phone		Address Source	
	Business Address (Name, Street)				(City)	(State)	(zip)	Phone		Occupation	
The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The Person taken into custody ☒ committed the below acts in my presence. ☐ confessed to _____ admitting to the below facts. ☐ was observed by _____ who told that he/she saw the arrested person commit the below acts. ☐ was found to have committed the below acts, resulting from my (described) investigation. On the <u>18th</u> day of <u>March</u> 20<u>22</u> at <u>20:44</u> ☐ A. M. ☒ P. M. (Specifically include facts constituting cause for arrest.) On Friday 03/18/2022 at approximately 20:44hrs, while conducting traffic patrol in the Village of Wellington unincorporated Palm Beach County, I observed a blue Ford Mustang (FL ISIY71) pull out at a high rate of speed onto Wellington Trace headed east bound towards Big Blue Trace. Upon arriving at Big Blue Trace the vehicle merged into the left turn lane. The light was green for eastbound and westbound traffic to go. The vehicle stayed in the left turn lane despite traffic being clear for the vehicle to turn left. The vehicle failed to do so. I attempted to gain the drivers attention by honking my horn. The light turned yellow and the vehicle immediately took off and merged right in the middle of the intersection continuing eastbound, only signaling after the move was already down. I followed behind the vehicle and activated my emergency red/blue lights and siren. The vehicle came to a stop at Wellington Trace and Skipton Ln. Upon my approach to the vehicle I observed a W/M, later identified as Scott B. Shrote sitting in the drivers seat. He wore a blue shirt and black shorts. I observed Shrote had glossy and blood shot eyes. His speech was slurred as he spoke. I could detect the strong odor of an unknown alcoholic beverage on his breath. I explained the reason for the stop. He stated that he was headed home. There was a W/F Beverly Baril-Hartley sitting in the passenger side. Shrote stated that Baril-Hartley was looking for directions which was why he did not go when the light turned green. I requested Shrote to step out of the vehicle. Shrote exited the vehicle and slightly stumbled forward. He used the vehicle to keep his balance. I patted him down for officer safety purposes. I asked if he had been drinking this night. Shrote stated that he had a couple of drinks at approximately 5:30PM. While I spoke to Shrote he continued to use the vehicle to keep himself propped up. I asked Shrote if he would be willing to do some roadside test to determine if he was able to operate a vehicle safely. Shrote refused. I explained to him the situation. Shrote refused a second time. I told him at this point I had enough probable cause for an arrest. Shrote turned around and put his hands behind his back stating for me to arrest him. I asked a third time if he would do the road side test, which he refused again. I placed Shrote in handcuffs, double locking and checking for space. He began to sway back and forth and had trouble maintaining his balance. He needed my assistance to walk him to the patrol vehicle. Based off my observations of his delayed reaction at the traffic light, his irratic driving patter, along with the physical observations, I do believe probable cause exist to charge Scott Shrote with one count Driving Under The Influence per FSS. 316.193. Shrote was transported to the Palm Beach County Jail where he was asked to submit to a lawful breath test, which he refused. Shrote was advised that refusing could cause his drivers license to be suspended. Shrote still refused. Based off these facts I believe probable cause also exist to charge Scott Schrote with refusal to submit to breath test per FSS 316.1939 (1). STATE OF FLORIDA COUNTY OF PALM BEACH <i>[Signature]</i> D. Bumgardner (Signature of Arresting/Investigative Officer) The foregoing instrument was sworn to or affirmed and subscribed before me this <u>18th</u> day of <u>March</u> 20<u>22</u> by <u>D/S D. Bumgardner</u> (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced to me by _____ <i>[Signature]</i> Notary Public, Clerk of Court, Officer (F.S.S. 117.10)  SHARI L. O'NEAL Notary Public - State of Florida Commission # GG 972080 My Comm. Expires Jun 25, 2024 PAGE 1 OF 1											
DEPT I.D. CARD PRODUCED											
ADMINISTRATIVE DISTRIBUTION: WHITE - COURT COPY GREEN - STATE AGENCY PINK - AGENCY											

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 18th DAY OF March 20 22 AT 20:44 AM ☒ PM
SUBJECT: Shrote Scott Barnett CASE NUMBER: 22-047609
AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D. Bumgardner

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

I witnessed Shrote driving a Blue Ford Mustang (pulling out onto Big Blue Trace Aggressively Driving at a high rate of speed. Delayed reaction to green light. Cut into traffic last minute.

OBSERVATION OF DRIVER:

I observed a W/M later identified as Scott B. Shrote in the drivers seat. His eyes were glossy and blood shot. I could smell the strong odor of an unknown alcoholic beverage on his breath. His speech was slurred. Shrote got out of the vehicle slightly stumbling. While I conducted my investigation he was using the back of the vehicle to keep himself propped up. Once away from the vehicle he swayed and stumbled, needing my assistance to get him to the patrol vehicle.

DRIVER'S STATEMENTS:

Shrote stated that he had drank two drinks a a couple of hours ago.

ODORS:

Odor of an unknown alcoholic beverage on his breath.

GENERAL OBSERVATIONS

SPEECH: Slurred and slowed

ATTITUDE: Uncooperative when requested roadsides.

CLOTHING: Blue shirt, black shorts

MEDICAL/OTHER: None

STATE OF FLORIDA
COUNTY OF PALM BEACH

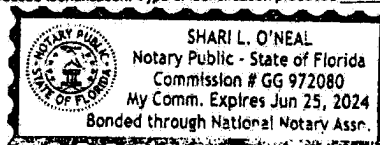
D. Bumgardner

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 18th day of March 20 22 by D. Bumgardner

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced DEPT I.D. CARD PRODUCED

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



SUBJECT Shrote Scott CASE NUMBER 22-047609

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:

Refusal

WALK & TURN:

Refusal

ONE LEG STAND:

Refusal

FINGER TO NOSE:

Refusal

MODIFIED ROMBERG BALANCE:

Refusal

BREATH TEST RESULTS:

1) Refusal	2)	3) N/A	4) N/A
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STATE OF FLORIDA
COUNTY OF PALM BEACH

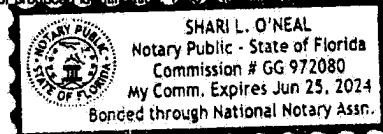
D. Bumgardner

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 18th day of March, 2022 by D. Bumgardner

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced: DEPT ID. CARD PRODUCED

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



SUBJECT Shrote Scott CASE NUMBER 22-047609

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:

Refusal

PALM PAT:

Refusal

HAND COORDINATION:

Refusal

MODIFIED ROMBERG BALANCE:

Refusal

PEN LIGHT TASK:

Refusal

BREATH TEST RESULTS:

1) Refusal	2)	3) N/A	4) N/A
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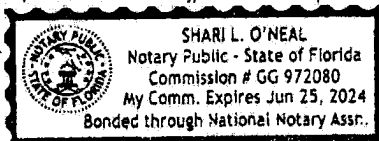
STATE OF FLORIDA
COUNTY OF PALM BEACH

D. Bumgardner
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 18th day of March 2022 by D. Bumgardner

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced DEPT I.D. CARD PRODUCED

Sh. O'Neal
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



WITNESS LIST

CASE NUMBER: 22-047609

ARRESTING OFFICER: D. Bumgardner

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

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

CAN TESTIFY TO: Outcome of the investigation.

NAME: BEVERLY BARIL-HARTLEY

ADDRESS: 12593 82ND STREET N WEST PALM BEACH FL 33412

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: _____

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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: _____

TESTING FACILITY TASK REPORT

AGENCY: **PBSO**

SUBJECT: **SHROTE, SCOTT B**

CASE NUMBER: **22-047609**

DATE: **Mar 18, 2022**

VIDEO DVD NUMBER: **N/A**

BEGINNING TIME: **21:49**

ENDING TIME: **21:53**

BREATH TESTS RESULTS: 1) **R** TIME **21:51** A.M. ☐ P.M. ☒ 2) **N/A** TIME **N/A** A.M. ☐ P.M. ☒
3) **N/A** TIME **N/A** A.M. ☐ P.M. ☐ 4) **N/A** TIME **N/A** A.M. ☐ P.M. ☐

BREATH OPERATOR: **P.POUND #24639**

MAINTENANCE TECHNICIAN: **J. KARLECKE# 6467**

TESTING OFFICER'S OBSERVATIONS

SPEECH: **SLURRED**

ATTITUDE: **TALKATIVE, LOUD, PROFANITY**

CLOTHING: **BLACK SHORTS, TEAL T-SHIRT, BLACK / WHITE SNEAKERS**

MEDICAL CONDITIONS: **NONE**

MEDICATIONS: **NONE**

OTHER:

EYES: GLASSY AND BLOODSHOT

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 21:26 HRS.

SUBJECT: REFUSED TO TAKE TEST

A/O: READ I/C

SUBJECT: STATED HE UNDERSTOOD I/C AND REFUSED TO TAKE TEST

A/O: READ RIGHTS

SUBJECT: STATED HE UNDERSTOOD RIGHTS

A/O: ATTEMPTED QUESTIONS

SUBJECT: INVOKED HIS RIGHTS TO COUNSEL

REFUSED

REFUSED

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

I, D. Bumgardner, a duly certified Law Enforcement Officer or Correctional Officer,
 (Name of Officer reading Implied Consent Warning)

am a member of PBSO, and I do swear
 (Name of law enforcement agency)

or affirm that on or about the 18th day of March, 20 22, at 21:04 ☐ P.M. ☐ A.M.

DRIVER Scott Barnett Shrote
 (Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

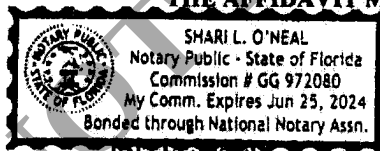
DL# S630782693280, state of Florida, was placed under lawful arrest for
 the offense of DUI by D. Bumgardner and
 (Name of Arresting Officer)
 issued Citation # _____

That on or about the 18th day of March, 20 22, at 21:51 ☒ 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]
 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 18th day of March, 20 22,
 by D. Bumgardner,

who is personally known to me or who has produced
DEPT I.D. CARD PRODUCED as identification

Notary Public [Signature]

HSMV-BAR1001 (REV. 10/2016)

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer _____

Title Deputy Sheriff

Date 03/18/2022

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: MURDER 1071 P CASE NUMBER: 22 047609

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: _____

SUBJECT: HAUTE COURT 12 CASE NUMBER: 22 04 70 09

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) LEND ...



**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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(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.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2022007126	Date: 3/19/2022
	Specialist Name/ID: Chantel Daniels/30347