

0519028

20 CT - 12826

1324

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

1
1
N

OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-20-115473		
Charge Type: Check as many as apply.		1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/>		3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input checked="" type="checkbox"/>		5. Ordinance <input type="checkbox"/> 6. Other <input type="checkbox"/>		
Location of Arrest (Including Name of Business) 13837 Via Flora Delray Beach, FL 33484		Location of Offense (Business Name, Address) 13837 Via Flora Delray Beach, FL 33484		Weapon Seized / Type 2. <input type="checkbox"/> 1. Yes 2. No <input checked="" type="checkbox"/> NONE		Multiple Clearance Indicator 1		
Date of Arrest 10/10/2020	Time of Arrest 2218	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle Priority Towing		
Name (Last, First, Middle) Riccio Victor				Alias (Name, DOB, Soc. Sec. #, Etc.)				
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian	Sex M	Date of Birth 12/08/1954	Height 5-09	Weight 150	Eye Color Blue	Hair Color Gray	Complexion Light	Build Medium
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) None				Marital Status Divorced		Religion CATHOLIC		Indication of: Alcohol Influence <input type="checkbox"/> Drug Influence <input type="checkbox"/>
Local Address (Street, Apt. Number) 929 White Pines Rd 372		(City) (State) (Zip) Trumbull, FL 06611		Phone (203) 521-9058		Residence Type: 1. City <input type="checkbox"/> 2. County <input type="checkbox"/> 3. Florida <input type="checkbox"/> 4. Out of State <input checked="" type="checkbox"/>		
Permanent Address (Street, Apt. Number)		(City) (State) (Zip)		Phone		Address Source Connecticut License		
Business Address (Name, Street)		(City) (State) (Zip)		Phone		Occupation Real estate		
D/L Number, State [REDACTED], Connecticut		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) Bridgeport, CT,		Citizenship Yes
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 <input type="checkbox"/> Other:		Address (Street, Apt. Number)		(City)	(State)	(Zip)	Residence Phone ()	
Notified by: (Name)		Date	Time	Juvenile Disposition 1. Handed/processed within Dept. and Released.		2. TOT HRS / DYS 3. Incarcerated		1
Released To: (Name)		Relationship		Date	Time			
The above address provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parents. The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)				School Attended		Grade		
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property			Value of Property			
Drug Activity N. N/A R. 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. Amphetamines	
B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetics		U. Unknown Z. Other		
Charge Description DRIVING UNDER THE INFLUENCE		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)(C)		Violation of ORD #		
Drug Activity N	Drug Type N	Amount / Unit .178 .182	Offense # 20-115473	Warrant / Capias Number		Bond		
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #		
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond		
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #		
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond		
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #		
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond		
Location (Court Room Number, Address) CRIMINAL JUSTICE COMPLEX / 3228 GUN CLUB ROAD, WPB, FL 33406								
Court Date and Time Month November Day 5 Year 2020 Time 8:30 AM <input checked="" type="checkbox"/> 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)						Date Signed 10/10/2020		
HOLD for other Agency Name:		Signature of Arresting Officer [Signature]			Name Verification (Printed by Arrestee)			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) D/S C. Abbott		I.D. # 36122		
Intake Deputy [Signature]		Pouch #		Transporting Officer D/S C. Abbott		ID # 36122		
Agency PBSO		Witness here if subject signed with an "X"		PAGE 1		OF 1		

DISTRIBUTION: WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - AGENCY

GOLD - DEFENDANT (N.T.A. ONLY)

SCANNED
OCT 12 2020

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Copies	1	Juvenile	N	
ADMIN	Agency ORI Number FLO 500000	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06-20-115473						
	Charge Type: Check as many as apply.		Special Notes:						
DEF	Name (Last, First, Middle) RICCIO, VICTOR,		Alias	Race W	Sex M	Date of Birth 12/08/1954			
	Charge Description DRIVING UNDER THE INFLUENCE		Charge Description						
CHARGES	Charge Description		Charge Description						
	Charge Description		Charge Description						
VICTIM	Victim's Name (Last, First, Middle) STATE OF FLORIDA , ,		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	
<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. The Person taken into custody</p> <p><input checked="" 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 type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>10</u> day of <u>OCTOBER</u> 20<u>20</u> at <u>9:10</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p>									
*****SUPPLEMENTAL PC*****									
<p>On the above date and time, I was dispatched to the area of Atlantic Drive, and Sims Road, in reference to a possible impaired driver operating a black Audi driving all over the road way. The caller then advised PBSO Communications that the vehicle had pulled into 13831 Via Flora, Unincorporated Delray Beach, Palm Beach County FL, 33484.</p> <p>Upon my arrival, I noticed a black 2D Audi A5 bearing CT Tag AJ-887765 sitting in the parking lot with its lights on. As soon as I pulled behind the vehicle, it started to drive, and parked in a parking spot in front of building 13837.</p> <p>I made contact on the driver side of the vehicle with driver Victor Riccio (DOB 12/08/1954). As I was speaking with Victor, I could smell a strong odor of an unknown alcoholic beverage emanating off of his breath. I also noticed that Victor's eyes were blood shot, and he was slurring his words. Victor stated that he was in the city of Delray Beach drinking with his friends. He then spontaneously uttered that he did not even have that much to drink, only about 7 alcoholic beverages.</p> <p>Victor was slurring his words throughout the incident, and starting to not make sense. Due to the odor of an unknown alcoholic beverage emanating from Victor's breathe, his blood shot eyes, and his speach, I called for a DUI Investigator to respond to the scene.</p>									
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH		D/S B. SANZ						
	(Signature of Arresting Investigative Officer)								
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>10</u> day of <u>October</u> 20 <u>20</u> by <u>D/S B.SANZ</u>								
(Print name of Arresting Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced		KNOWN LEO							
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)									
		PAGE 1 OF 1							

SCANNED
OCT 12 2020

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 10 DAY OF October 2020, AT 2115 AM PM

SUBJECT: Riccio Victor CASE NUMBER: 20-115473

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S C. Abbott

PERSONAL CONTACT

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

On 10/10/2020 at approximately 2145 hrs, I was called to the scene of a traffic stop at 13837 Via Flora, which is located in the unincorporated Palm Beach County, Florida. I arrived at the scene at approximately 2152 hrs. D/S Sanz #30565 relayed to me, and completed a written signed sworn supplemental Probable Cause Affidavit, stating the following "On the above date and time, I was dispatched to the area of Atlantic Drive, and Sims Road, in reference to a possible impaired driver operating a black Audi driving all over the road way. The caller then advised PBSO Communications that the vehicle had pulled into 13831 Via Flora, Unincorporated Delray Beach, Palm Beach County FL, 33484.

Upon my arrival, I noticed a black 2D Audi A5 bearing CT Tag AJ-887765 sitting in the parking lot with its lights on. As soon as I pulled behind the vehicle, it started to drive, and parked in a parking spot in front of building 13837.

I made contact on the driver side of the vehicle with driver Victor Riccio (DOB 12/08/1954). As I was speaking with Victor, I could smell a strong odor of an unknown alcoholic beverage emanating off of his breath. I also noticed that Victor's eyes were blood shot, and he was slurring his words. Victor stated that he was in the city of Delray Beach drinking with his friends. He then spontaneously uttered that he did not even have that much to drink, only about 7 alcoholic beverages.

Victor was slurring his words throughout the incident, and starting to not make sense. Due to the odor of an unknown alcoholic beverage emanating from Victor's breathe, his blood shot eyes, and his speech", D/S Sanz #30565 noticed that the defendant had articulable indicators of impairment, so he called for a DUI unit to conduct a possible DUI investigation. D/S Sanz identified the defendant, to me, as the driver and sole occupant of the vehicle, at the time of the stop.

OBSERVATION OF DRIVER:

Upon making contact with the driver who was identified by their Connecticut Driver License as Victor Roccio, I immediately detected an obvious and strong odor of an unknown alcoholic beverage emitting from his person and face area. This odor intensified as I spoke to Roccio. Roccio had glassy, glazed, and blood shot eyes. Roccio's speech was slurred, slow, thick, and at times difficult to understand. Roccio's movements were slow and deliberate. Roccio was lethargic in his movements with poor coordination. Roccio had an unsteady gait while walking to my patrol vehicle and had difficulty following directions given to him. Roccio was wearing a Blue t-shirt, Khaki shorts, and sandals. Clothes appeared urine soaked and vomit on his shirt and shorts.

DRIVER'S STATEMENTS:

Victor Riccio stated pre Miranda he wasn't intoxicated and was not driving his vehicle at the time deputies arrived. Riccio stated he believes he might have drove on the wrong side of the road but he did not kill anybody.

ODORS:

obvious and strong odor of an unknown alcoholic beverage emitting from his person and face area.

GENERAL OBSERVATIONS

SPEECH: Slurred, Stutter, Thick

ATTITUDE: Agitated, Anxious, Insulting, Moodswings

CLOTHING: Blue t-shirt, Khaki shorts, and sandals (covered in urine and vomit)

MEDICAL/OTHER: See BAT report

STATE OF FLORIDA
COUNTY OF PALM BEACH

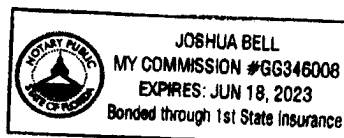
D/S C. Abbott

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 10 day of October 2020 by D/S C. Abbott

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced PERSONALLY KNOWN LEO

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



SCANNED
OCT 12 2020

SUBJECT: REC'D V. CASE # CASE NUMBER: 20-115473

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

SUBJECT: Riccio, Victor F CASE NUMBER: 20-115473

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? NO

WHERE WERE YOU GOING? Home

WHAT STREET OR HIGHWAY WERE YOU ON? 1383 7C Via Flora Delray Beach, FL

DIRECTION OF TRAVEL? North WHERE DID YOU START? Delray Beach

WHAT TIME DID YOU START? 7:00 Pm WHAT TIME IS IT NOW? I dont know

WHAT IS TODAY'S DATE? October 11th 2020 WHAT DAY OF THE WEEK IS IT? Saturday

WHAT COUNTY AND CITY ARE YOU IN NOW? Palm Beach County FL

WHEN DID YOU LAST EAT? 5:12 WHAT DID YOU EAT? cant remember

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? under Arrest

HOW MUCH DO YOU WEIGH? 150 HAVE YOU BEEN DRINKING? yes WHAT? Rum

HOW MUCH? cant remember WHERE? IN Florida WITH WHOM? By myself

WHEN DID YOU HAVE YOUR FIRST DRINK? 5:38 AND YOUR LAST DRINK? 8:00

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? SIP normally

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? Realestate WHEN DID YOU LAST WORK? Today

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? yes WHAT? insetalitus

ARE YOU SICK OR INJURED? yes WHAT'S WRONG? memory loss

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? yes WHEN? At night

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

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? yes WHAT? AntiDepressants WHEN? everyday

DO YOU HAVE:

EPILEPSY?	<u>NO</u>
GLASS EYE?	<u>NO</u>
FALSE TEETH?	<u>yes</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? CT

INTERVIEWER: D/S C. Abbott #36122

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:

Riccio would sway roughly in a side to side front to back pattern throughout the task. Riccio was reminded numerous times to track the pen with his eyes only. Riccio failed to keep his head still while tracking the stimulus.

WALK & TURN:

I explained and demonstrated the instructions for the "Walk & Turn" to Riccio who stated that he understood. During the task, I observed Riccio to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Riccio could not maintain his balance while listening to instructions. Riccio stepped out of the instructional stance during the demonstration to catch his balance. Riccio started the task before being instructed to do so. Riccio used his arms for balance by raising them more than six inches. Riccio could not perform the task.

ONE LEG STAND:

I explained and demonstrated the instructions for the "One Leg Stand" to Riccio who stated that he understood. During the task, I observed Riccio to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Riccio began the task before he was instructed to begin. Riccio continued to sway while balancing on one leg. Riccio started hopping in an attempt to maintain balance. Riccio's foot hit the ground 3 times before the 30 seconds has elapsed. Riccio was not able to complete the task.

FINGER TO NOSE:

Non compliant

ROMBERG ALPHABET:

Non compliant

BREATH TEST RESULTS: 1) .178 2) .182 3) 4)

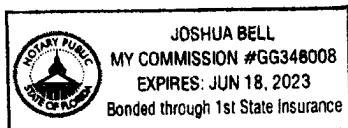
STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S C. Abbott
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 10 day of October 2020 by D/S C. Abbott

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced PERSONALLY KNOWN LEO

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



SCANNED
OCT 12 2020

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: 80-006477 Software: 8100.27
Date of Test: 10/10/2020

Date of Last Agency Inspection: 09/18/2020
Observation Period Began: 23:05
Subject's Name: VICTOR F RICCIO DOB: 12/08/1954 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	23:37
	Air Blank	0.000	23:37
	Control Test	0.079	23:38
	Air Blank	0.000	23:38
	Subject Sample #1	0.178	23:39
	Air Blank	0.000	23:40
	Air Blank	0.000	23:42
	Subject Sample #2	0.182	23:43
	Air Blank	0.000	23:43
	Control Test	0.078	23:44
	Air Blank	0.000	23:44
	Diagnostics Check	OK	23:44

Cylinder Lot: 14020080A1
Exp: 07/05/2022

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 JOSHUA J BELL, 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: *Joshua J Bell* Date: 10/10/2020
Signature

Sworn to (or affirmed) before me this 10 day of October, 2020
[Signature] D/S C. Abbott #36122
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.

WITNESS LIST

CASE NUMBER: 20-115473

ARRESTING OFFICER: D/S C. Abbott

ADDRESS: 3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406

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

CAN TESTIFY TO: SEE DUI PROBABLE CAUSE AFFIDAVIT, OFFENSE REPORT, & IN-CAR VIDEO

NAME: D/S. Sanz

ADDRESS: 3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406

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

CAN TESTIFY TO: See DUI probable cause affidavit

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

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PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

SCANNED OCT 12 2020

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: RICCIO, VICTOR F

CASE NUMBER: 20-115473

DATE: Oct 11, 2020

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 2330

ENDING TIME: 2357

BREATH TESTS RESULTS: 1) .178 TIME 2339 A.M. P.M. 2) .182 TIME 2343 A.M. P.M.
3) N/A TIME XX A.M. P.M. 4) N/A TIME XX A.M. P.M.

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: TALKATIVE, ARGUMENTATIVE, REPEATITIVE

CLOTHING: BLUE POLO SHIRT, TAN SHORTS (URINATED), BLACK FLIP FLOPS

MEDICAL CONDITIONS: ENCEPHALITIS, DEPRESSION

MEDICATIONS: ANTIDPERESSANTS, MEDICATION FOR ENCEPHALITIS

OTHER:

EYES: GLASSY

ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

SUBJECT STATED HE DRANK AN UNKNOWN AMMOUNT OF RUM (Q AND A)

COMMENTS:

ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 2305 HOURS

SUBJECT ASKED IF HE HAD TO TAKE BREATH TEST

A/O READ I.C AND EXPLAINED

SUBJECT STATED HE UNDERSTOOD I.C AND STATED HE WOULD TAKE BREATH TEST

A/O READ RIGHTS

SUBJECT STATED HE UNDERSTOOD HIS RIGHTS

TECH READ BREATH TEST RESULTS AND EXPLAINED

SUBJECT ACKNOWLEDGED HE UNDERSTOOD BREATH TEST RESULTS

A/O CONDUCTED Q AND A

SUBJECT ANSWERED Q AND A

SCANNED
OCT 12 2020



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"/>	119.071 (2)(j)1	Other: Address, telephone numbers and personal assets of domestic violence and other specified crime victims	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2020024034	Date: 10/11/2020
	Specialist Name/ID: L.Rouse #6673

**SCANNED
OCT 12 2020**