

0502300 10399117

22CT-18961ANB
1502

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

| | | |
|---|--|--|
| Agency ORI Number 0502300 | Agency Name North Palm Beach Police Department | Agency Report Number (N.T.A. only) 7 0 22-000794 |
| Charge Type: Check as many <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Offenses <input type="checkbox"/> 6. Other | Multiple Clearance Indicator <input type="checkbox"/> | Weapon Status Enter Type UNARMED |
| Location of Arrest (Including Name of Business) US HIGHWAY /NORTHLAKE BLVD. 299 US HIGHWAY 33403 | | Location of Office (Business Name, Address) 299 US HIGHWAY /NORTHLAKE BLVD. NORTH PALM BEACH |
| Date of Arrest 11/12/2022 | Time of Arrest 19:25 | Jail Date 11/12/2022 |
| Name (Last, First, Middle) GUNDERSON, ARLIN ESTEBAN | | Alias (Name, DOB, Soc. Sec. #, Etc.) Alias: GUNDERSON, ARLIN ESTEBAN |
| Sex M | Date of Birth 07/23/1989 | Height 5'08 |
| Weight 165 | Eye Color BLACK | Hair Color BLACK |
| Complexion LIGHT | Build Medium | |
| Local Address (Street, Apt. Number) 8665 URANUS TER, WEST PALM BEACH, FL 33403 | | Phone (561) 436-5169 |
| Permanent Address (Street, Apt. Number) 8665 URANUS TER, WEST PALM BEACH, FL 33403 | | Phone (561) 436-5169 |
| Business Address (Name, Street) | City | Phone |
| DL Number, State G536005892630 / FL | Soc. Sec. Number | INB Number |
| Place of Birth (City, State) USA, FL | Citizenship US | |
| Co-Defendant Name (Last, First, Middle) | Rate | Sex |
| Date of Birth | <input type="checkbox"/> 1. Arrested | <input type="checkbox"/> 3. Felony |
| | <input type="checkbox"/> 2. At Large | <input type="checkbox"/> 4. Misdemeanor |
| | <input type="checkbox"/> 1. Arrested | <input type="checkbox"/> 3. Felony |
| | <input type="checkbox"/> 2. At Large | <input type="checkbox"/> 4. Misdemeanor |
| <input type="checkbox"/> Parent <input type="checkbox"/> Other | Name (Last, First, Middle) | |
| Address (Street, Apt. Number) | City | State |
| Zip | Business Phone | |
| Notified by: (Name) | Date | Time |
| 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. | | Grade |
| Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No | Description of Property | Value of Property |
| Drug Activity N. N/A P. Poison | S. Sell T. Traffic | R. Receive D. Deliver E. Use |
| K. Distribute | M. Manufacture/ Produce/ Cultivate | Z. Other |
| Drug Type N. N/A A. Amphetamine | S. Barbiturate C. Cocaine E. Heroin | H. Hallucinogen M. Marijuana O. Opioid/deriv. |
| P. Paraphernalia/ Equipment | F. Synthetic | U. Unknown Z. Other |
| Charge Description DUI - BAC/BAC OVER .15 OR MINOR IN VEHICLE | State Violation Number 316.193(4) | Violation of ORD # |
| Drug Activity N | Drug Type | Amount / Unit |
| Offense # 22000794 | Counts | Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N |
| Warrant / Copies Number | Bond | |
| Charge Description | State Violation Number | Violation of ORD # |
| Drug Activity | Drug Type | Amount / Unit |
| Offense # | Counts | Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N |
| Warrant / Copies Number | Bond | |
| 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"/> Posted Bond | <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health | <input type="checkbox"/> T.O.T. County Jail |
| PROPERTY - Received By | Released By | Released To |
| Transported By | Date Transported | Time Transported |
| <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 |
| 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. | | Court Date and Time 12/14/2022 08:30:00 |
| Signature of Defendant (or juvenile and Parent/Custodian) | | Date Signed |
| HEAD OF CHARGE NO BETAHER | Signature of Arresting Officer (Print) MILORD, J. | Name Verification (Printed by Arrestee) |
| <input type="checkbox"/> Dangerous <input type="checkbox"/> Restricted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other | ID.# 9905 | (PRINT) |
| Name of Arrestee D'S HARK 28801 | ID.# 9905 | Agency NBPDP |
| Pouch # | Transporting Officer MILORD | Witness here if subject signed with an "X" |

12/13/2022

PROBABLE CAUSE AFFIDAVIT

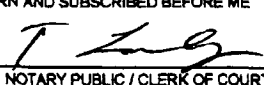
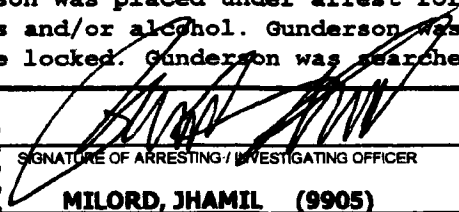
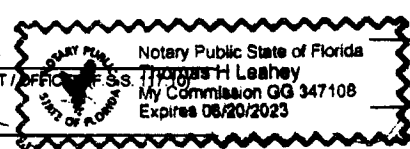
1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Copies

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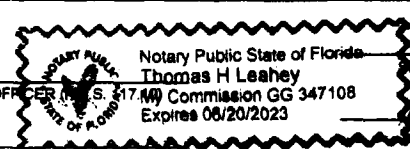

JUVENILE

| | | | | | | | | | |
|--|---|--|---|-------|--|-------|--|-----------------|------------------------------------|
| A D M I N I S T R A T I V E | OBTS Number | | Agency ORI Number FL FL0502300 | | Agency Name NORTH PALM BEACH POLICE | | Agency Report Number 7 0 22-000794 | | |
| | Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony | | <input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor | | <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other | | Special Notes: | | |
| D E F E N D A N T | Name (Last, First, Middle) GUNDERSON, ARLIN ESTEBAN | | | | Alias GUNDERSON, ARLIN ESTEBAN | | Race W | Sex M | Date of Birth 07/23/1989 |
| | Charge Description 316.193(4) DUI - BAC/BRAC OVER .15 -OR- MINOR IN VEHICLE | | Charge Description | | Charge Description | | Charge Description | | Charge Description |
| V I C T I M | Victim's Name (Last, First, Middle) FLORIDA, STATE OF | | | | Race | Sex | Date of Birth | | |
| | Local Address (Street, Apt. Number) 560 US HIGHWAY 1, NORTH PALM BEACH, FL 33408 | | City | State | Zip | Phone | | Address Source | |
| | Business Address (Name, Street) | | City | State | Zip | Phone | | Occupation | |
| P R O B A B L E | <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>12</u> day of <u>November</u>, <u>2022</u> at <u>21:53</u> (Specifically include facts constituting cause for arrest.)</p> | | | | | | | | |
| | <p>On November 12, 2022 at approximately 1907 hours, I was dispatched to US Highway 1 and Northlake Blvd North Palm Beach FL, 33408 in reference to a welfare check. Dispatch advised me that there was a male that was passed out in the driver's seat at the stoplight.</p> <p>Upon arrival to the scene, there was a blue vehicle (FL Tag 42GJR) sitting in lane two waiting to turn left to go Westbound on Northlake Blvd. In the vehicle there was a white male who was later identified as Arlin Gunderson (w/m 07/23/1989) passed out at the wheel in the driver's seat. As I approached the vehicle, Gunderson awoken and started the vehicle. I instructed Gunderson to shut off the vehicle two times and he complied after the second time. I asked Gunderson to step out of the vehicle so he would not attempt to start it up again. While coming out of the vehicle Gunderson was having a hard time maintaining his balance. I asked Gunderson what he was doing and he said that he was just driving home. I asked Gunderson why he was at the light for so long, and he stated to me that his key fob battery died so his car would no longer move. It should be noted that Gunderson did turn his car on when I approached the vehicle as mentioned earlier. While talking to Gunderson I noticed that he had red eyes, slurred speech, swaying from side to side, and had the scent of an unknown alcoholic beverage coming off his breathe. I asked Gunderson if he would be willing to submit to several Standardized Field Sobriety Tasks (SFSTs), and he stated that he would. I asked Gunderson if he had any medical problems and he stated that he does not have any.</p> <p>I explained the first SFST Horizontal Gaze Nystagmus (HGN) to Gunderson and he stated that he understood. I placed the stimulus (a black pen) in front of Gunderson and advised him to follow the pen with his eyes only. Gunderson swayed from left to right, was unable to keep his balance, and was not able to maintain the starting position. As I began to move the pen, Gunderson moved his head to follow the pen. I had to remind Gunderson to follow the pen with his eyes only, two times. Gunderson was eventually able</p> | | | | | | | | |
| S T A T E M E N T | <p>SWORN AND SUBSCRIBED BEFORE ME</p> <p><i>[Signature]</i> NOTARY PUBLIC / CLERK OF COURT / OFFICE # 117 DATE <u>11/12/2022</u></p> <p>Notary Public State of Florida Thomas H Leahy My Commission GO 347108 Expires 08/20/2023</p> <p><i>[Signature]</i> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER MILORD, JHAMIL (9905) NAME OF OFFICER (PLEASE PRINT) DATE <u>11/12/2022</u></p> | | | | | | | | |
| | <p>PAGE 1 OF 4</p> | | | | | | | | |

NOV 13 2022

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|---|--|--|------------------|-----------------|
| OBT3 Number A D M I N C H E R G E N D E R S O N A R L I N E S T E B A N | PROBABLE CAUSE AFFIDAVIT SUPPLEMENT | 1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Copies | 1 | JUVENILE |
| Agency ORI Number FL FL0502300 | Agency Name NORTH PALM BEACH POLICE | Agency Report Number 7 0 22-000794 | | |
| 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) GUNDERSON, ARLIN ESTEBAN | | Alias GUNDERSON, ARLIN ESTEBAN | Race W | Sex M |
| Date of Birth 07/23/1989 | | | | |
| <p>to follow the pen, and his eyes showed the following signs: a Lack of Smooth Pursuit in both the right and left eyes, Distinct Nystagmus at Maximum Deviation in both the right and left eyes, and Onset of Nystagmus Prior to 45 degrees in both the right and left eyes.</p> <p>I explained and demonstrated the second SFST, Walk and Turn, to Gunderson. Gunderson stated that he understood the instructions. Gunderson was instructed to get into the proper starting position (left foot on line with right foot in front, touching heel to toe). Gunderson kept swaying back and forth, kept stumbling, kept trying to begin the tasks before told to do so, and was unable to maintain the starting position. Gunderson was instructed that he could begin. Gunderson took nine steps the first time and took nine steps the second time. Gunderson missed every heel to toe step, stepped off the line on all of his steps, was not able to maintain his balance, did an improper turn, used his arms to balance multiple times, stopped while walking, and did an incorrect number of steps.</p> <p>I explained and demonstrated the third SFST, One Leg Stand to Gunderson, Gunderson stated that he understood. I instructed Gunderson to begin. Gunderson raised his right foot, he was not able to maintain his balance, used his arms to balance multiple times, and was swaying from side to side. Gunderson almost fell over while performing this task. I ended this task in fear that Gunderson would injure himself.</p> <p>I explained and demonstrated the fourth task, Finger to Nose to Gunderson. Gunderson stated that he understood and began the task. On the first right (R1) Gunderson brought the tip of his finger to the tip of his nose and held it there. I had to remind Gunderson to bring his finger back down. On the first left (L1) Gunderson brought the tip of his finger to the tip of his nose and held it there. I had to remind Gunderson to bring his finger back down. On the second right (R2) Gunderson brought both of his arms up to touch his nose. Gunderson brought his left arm down and touch the tip of his nose with the tip of his right finger and held it there. I had to remind Gunderson to bring his arm right back down. On the second left (L2) Gunderson brought the tip of his left finger and touch the tip of his nose and brought it right back down. On the third right (R3) Gunderson began to bring his left arm up and quickly put it down and brought the tip of his right finger to the tip of his nose and brought it right back down.</p> <p>I explained the Rhomberg Alphabet to Gunderson. Gunderson stated that he understood and began the task. Gunderson recited the alphabet as follows: A, B, C, D, E, F, G, H, I, J, K, L, M, N, O, P, U, R, S, T, U, V, W, X, Y, Z.</p> <p>After completion of the Rhomberg alphabet Gunderson was placed under arrest for suspicion of driving under the influence of drugs and/or alcohol. Gunderson was handcuffed, which were checked for fit and double locked. Gunderson was searched before</p> | | | | |
| SWORN AND SUBSCRIBED BEFORE ME | | | | |
|  NOTARY PUBLIC / CLERK OF COURT DATE 11/12/2022 | |  SIGNATURE OF ARRESTING / INVESTIGATING OFFICER MILORD, JHAMIL (9905) NAME OF OFFICER (PLEASE PRINT) | | |
|  | | DATE 11/12/2022 | | |
| PAGE 2 OF 4 | | | | |

10/13/2022

| | | | |
|--|---|---|--|
| OBTN Number A D M I N Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other Special Notes: | PROBABLE CAUSE AFFIDAVIT SUPPLEMENT | 1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias 1 | JUVENILE |
| Agency ORI Number FL FL0502300 | Agency Name NORTH PALM BEACH POLICE | Agency Report Number 7 0 22-000794 | |
| Name (Last, First, Middle) GUNDERSON, ARLIN ESTEBAN | | Alias GUNDERSON, ARLIN ESTEBAN | Race Sex Date of Birth W M 07/23/1989 |
| <p>being placed into my patrol vehicle. Gunderson was wearing a pink shirt, blue shorts, and red and white shoes.</p> <p>I transported Gunderson to PBSO Breath Alcohol Testing Center (BAT) without incident. Gunderson was observed for 20 minutes. During the 20 minute observation he did not consume or regurgitate anything.</p> <p>I asked Gunderson if he was willing to provide a sample of his breath to determine his blood alcohol content. Gunderson stated that he will provide a sample. At 2027 hours Gunderson blew a .208, and at 2032 hours Gunderson blew a .206.</p> <p>Based on my investigation, probable cause exists to charge Gunderson with the following:</p> <p>Arlin Gunderson during the course of driving a vehicle while under the influence of alcoholic beverages, or chemical substances as set forth in Florida Statute 877.111, or a controlled substance as set forth in Chapter 893 or any combination thereof, was accompanied in the vehicle by a person under the age of 18 years or did have a blood alcohol level of .15 or more grams of alcohol per 100 milliliters of blood or breath alcohol level of .15 or more grams of alcohol per 210 liters of breath, contrary to Florida Statute 316.193(1) and (4).</p> <p>Gunderson was issued citations for the following: Driving Under the Influence (AG3WCAE).</p> <p>Gunderson was turned over to Palm Beach County Jail Personnel without incident.</p> <p>Contact was made with witness Jahn Hepp (w/m 03/17/1987) stated that he was driving North on US Highway 1, and was behind a blue vehicle waiting at the red light. Hepp then stated that the light turned green and Gunderson did not move his vehicle, and the light went red again. Hepp then stated that he got out of the vehicle to check on Gunderson and saw that he was passed out and slumped over at the wheel. Hepp stated that he banged on the window several times in order to get Gunderson's attention.</p> <p>After speaking with Hepp, contact was made with another witness Ryan Sanchez (w/m 02/08/1978). Sanchez stated that he was two cars behind a blue vehicle that was not moving when the light turned green. Sanchez then stated that he moved his vehicle to the left of the blue vehicle to check on Gunderson. Sanchez then stated that he seen Gunderson passed out and slumped over in the driver's seat. Sanchez stated that he and Hepp knocked on the window multiple times, however the driver was not responding.</p> <p>Both the witnesses filled out witness statements which were turned into North Palm Beach Police Records Division.</p> | | | |
| P R O B A B L E C A U S E S T A T E M E N T | SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT / OFFICER 11/12/2022 DATE | | |
| |  | | SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  MILORD, JHAMIL (9905) NAME OF OFFICER (PLEASE PRINT) 11/12/2022 DATE |
| A D M I N I S T R A T I V E | PAGE 3 OF 4 | | |

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

COPIED
 11/13/2022

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1 JUVENILE

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| Name (Last, First, Middle) GUNDERSON, ARLIN ESTEBAN | Alias GUNDERSON, ARLIN ESTEBAN | Race W | Sex M | Date of Birth 07/23/1989 |

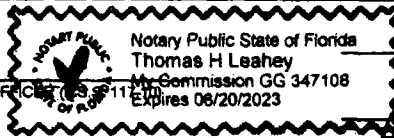

No further information.

NOT A CERTIFIED COPY

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|---|---|--|
| SWORN AND SUBSCRIBED BEFORE ME |  |  SIGNATURE OF ARRESTING / INVESTIGATING OFFICER |
| NOTARY PUBLIC / CLERK OF COURT / OFFICER (P.S. 112.01) <u>11/12/2022</u> DATE | | |

NOV 13 2022



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

PBSO CASE # 22-128932 PBSO ZONE 3-13

AGENCY CASE # 22000794 CRASH CASE # N/A

TIME OF STOP/CRASH 1910 DATE 11/12/2022 DAY Saturday

SUBJECT'S NAME Arlin Gunderson RACE W SEX M

HGT 5'8 WGT 105 DOB 7/23/1989

LOCATION US highway 1 / Northlake Blvd

ARRESTING OFFICER'S NAME & ID Milord #9905 AGENCY NPBPD

DIVISION: PATROL

NOTIFIED BY COMMO y

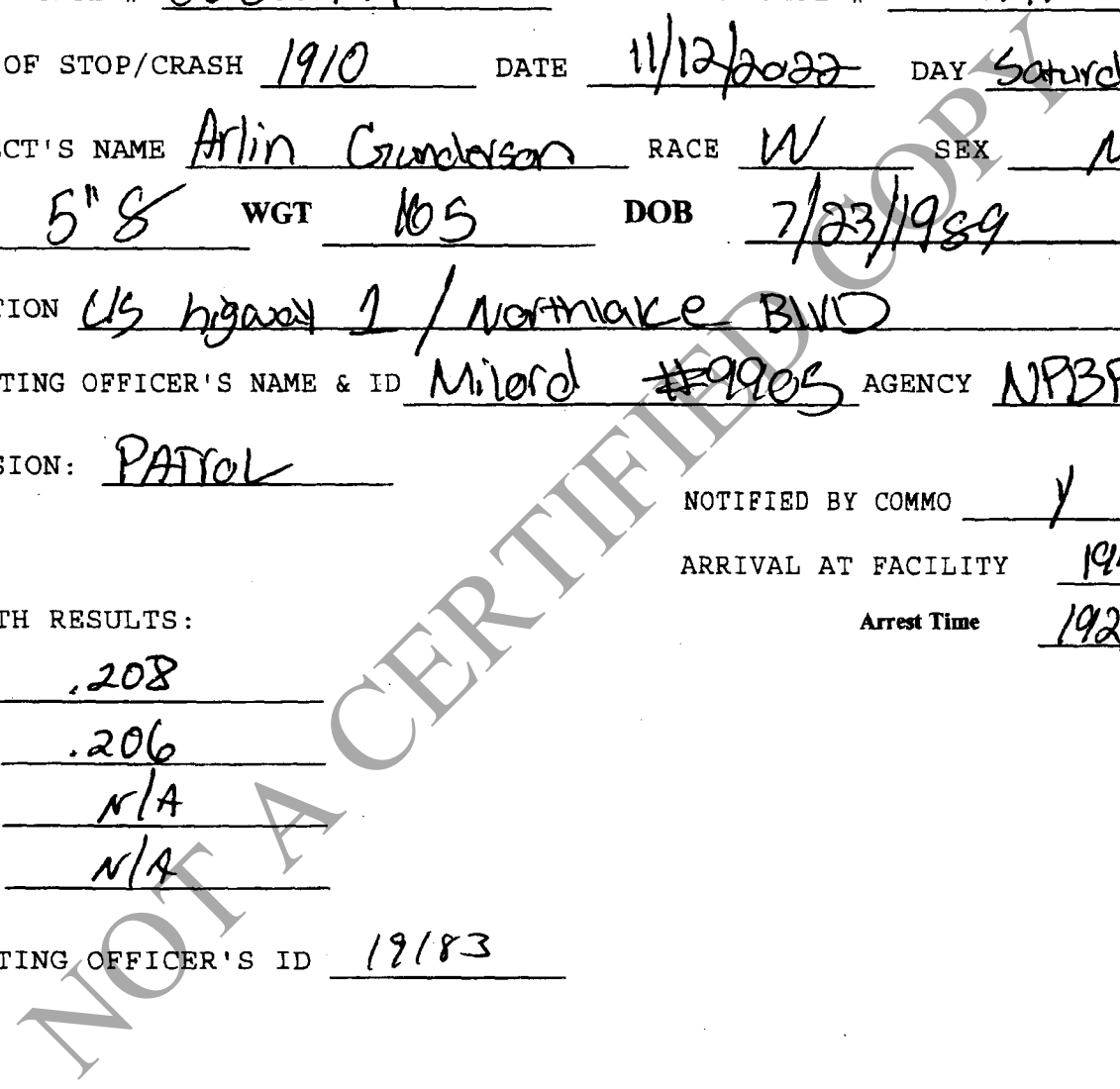
ARRIVAL AT FACILITY 1959

Arrest Time 1925

BREATH RESULTS:

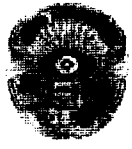
- 1. .208
- 2. .206
- 3. N/A
- 4. N/A

TESTING OFFICER'S ID 19183



10715

D.U.I. PROBABLE CAUSE AFFIDAVIT



ON THE 12th DAY OF November 20 22, AT 1907 AM PM

SUBJECT: Gunderson Arlin E CASE NUMBER: 22-000794

AGENCY: North Palm Beach Police Department ARRESTING OFFICER: J.Milord

PERSONAL CONTACT

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

Gunderson was passed out in the driver's seat at the stoplight.

OBSERVATION OF DRIVER:

**Unable to maintain balance
Swaying back and forth**

DRIVER'S STATEMENTS:

N/A

ODORS:

Strong odor of an unknown alcoholic beverage

GENERAL OBSERVATIONS

SPEECH: **slurred and slow**

ATTITUDE: **angry and frustrated**

CLOTHING: **Pink shirt, Blue shorts, Red and White shoes**

MEDICAL/OTHER:

STATE OF FLORIDA
COUNTY OF PALM BEACH

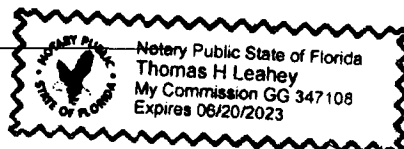
J.Milord

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of November 20 22 by J.Milord

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

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



CERTIFIED COPY

SUBJECT Gunderson

Arlin

CASE NUMBER 22-000794



ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|---|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT |
| <input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input checked="" type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input checked="" type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

WALK & TURN:

I explained and demonstrated the second SFST, Walk and Turn, to Gunderson. Gunderson stated that he understood the instructions. Gunderson was instructed to get into the proper starting position (left foot on line with right foot in front, touching heel to toe). Gunderson kept swaying back and forth, kept stumbling, kept trying to begin the tasks before told to do so, and was unable to maintain the starting position. Gunderson was instructed that he could begin. Gunderson took nine steps the first time and took nine steps the second time. Gunderson missed every heel to toe step, stepped off the line on all of his steps, was not able to maintain his balance, did an improper turn, used his arms to balance multiple times, stopped while walking, and did an incorrect number of steps.

ONE LEG STAND:

I explained and demonstrated the third SFST, One Leg Stand to Gunderson, Gunderson stated that he understood. I instructed Gunderson to begin. Gunderson raised his right foot, he was not able to maintain his balance, used his arms to balance multiple times, and was swaying from side to side. Gunderson almost fell over while performing this task. I ended this task in fear that Gunderson would injure himself.

FINGER TO NOSE:

I explained and demonstrated the fourth task, Finger to Nose to Gunderson. Gunderson stated that he understood and began the task. On the first right (R1) Gunderson brought the tip of his finger to the tip of his nose and held it there. I had to remind Gunderson to bring his finger back down. On the first left (L1) Gunderson brought the tip of his finger to the tip of his nose and held it there. I had to remind Gunderson to bring his finger back down. On the second right (R2) Gunderson brought both of his arms up to touch his nose. Gunderson brought his left arm down and touch the tip of his nose with the tip of his right finger and held it there. I had to remind Gunderson to bring his arm right back down. On the second left (L2) Gunderson brought the tip of his left finger and touch the tip of his nose and brought it right back down. On the third right (R3) Gunderson began to bring his left arm up and quickly put it down and brought the tip of his right finger to the tip of his nose and brought it right back down.

ROMBERG ALPHABET:

I explained the Romberg Alphabet to Gunderson. Gunderson stated that he understood and began the task. Gunderson recited the alphabet as follows: A, B, C, D, E, F, G, H, I, J, K, L, M, N, O, P, U, R, S, T, U, V, W, X, Y, Z.

BREATH TEST RESULTS: 1) .208 2) .206 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

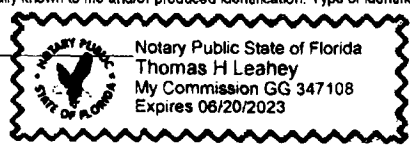
J. Milord

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of November 2022 by J. Milord

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

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



[Handwritten notes and stamps]

SUBJECT: _____

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 determining 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 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.

Do you understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO

NOTE: IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER'S LICENSE (CDL), READ THE FOLLOWING,

If you are a Commercial Driver License (CDL) holder or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privilege for a period of one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from holding a CDL or operating a CMV.

Do you understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO

SUBJECTS 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) _____

WHITE: STATE ATTY.

YELLOW: DHSMV

PINK: CENTRAL RECORDS

GOLD: JAIL

SUBJECT: _____ 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: _____

TESTING FACILITY TASK REPORT

AGENCY: NPPD

SUBJECT: Gunderson, Arlin E

CASE NUMBER: 22-128932

DATE: Nov 12, 2022

VIDEO DVD NUMBER: n/a

BEGINNING TIME: 2022

ENDING TIME: 2035

BREATH TESTS RESULTS: 1) .208 TIME 2027 A.M. P.M. 2) .206 TIME 2032 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: talkative, fidgety

CLOTHING: blue jean shorts, pink t-shirt, red sneakers

MEDICAL CONDITIONS: anxiety, Insomnia

MEDICATIONS: medical marijuana

OTHER:

eyes were glassy & bloodshot
odor of unknown alcoholic beverage on breath

COMMENTS:

arrived at center A/O conducted 20 observation period at 1959 hrs

subject agreed to perform breath test

subject completed breath test

A/O read rights & subject understood rights

tech read breath test results & subject understood breath test result

A/O attempted Q&A

subject declined to answer questions

NOT A CERTIFIED COPY

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: 80-006240 Software: 8100.27
Date of Test: 11/12/2022

Date of Last Agency Inspection: 10/21/2022
Observation Period Began: 19:59
Subject's Name: ARLIN E GUNDERSON

DOB: 07/23/1989 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 | 20:24 |
| | Air Blank | 0.000 | 20:24 |
| | Control Test | 0.080 | 20:25 |
| | Air Blank | 0.000 | 20:25 |
| | Subject Sample #1 | 0.208 | 20:27 |
| | Air Blank | 0.000 | 20:28 |
| | Air Blank | 0.000 | 20:30 |
| | Subject Sample #2 | 0.206 | 20:32 |
| | Air Blank | 0.000 | 20:33 |
| | Control Test | 0.079 | 20:33 |
| | Air Blank | 0.000 | 20:33 |
| | Diagnostics Check | OK | 20:34 |

Cylinder Lot: 08622080A1
Exp: 06/05/2024

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 Date: 11/12/2022
Signature

Sworn to (or affirmed) before me this 12 day of November, 2022
Signature of Notary Public-State of Florida [Signature] Printed Name of Notary Public-State of Florida Ofc J Milord # 9905

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.



Palm Beach County Sheriff's Office – Arrests Only

| | X | Florida State Statute | Description | Page Number(s) |
|---|-------------------------------------|---|--|----------------|
| I/E Exemptions | <input type="checkbox"/> | 119.071(2)(d) | Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations. | |
| | <input type="checkbox"/> | 943.053, 943.0525 | NCIC/FCIC/FBI and in-state FDLE/DOC. | |
| | <input type="checkbox"/> | 119.071(4)(c) | Undercover personnel. | |
| | <input type="checkbox"/> | 119.071(2)(f) | Confidential informants (CIs). | |
| | <input type="checkbox"/> | 119.071(2)(e) | Confession. | |
| Public Info. Exemptions | <input type="checkbox"/> | 985.04(1) | Juvenile offender records. | |
| | <input type="checkbox"/> | 119.071(h)(i) | Assets of a crime victim. | |
| | <input type="checkbox"/> | 395.3025(7)(a), 456.057(7)(a) | Medical information. | |
| | <input type="checkbox"/> | 394.4615(7) | Mental health information. | |
| | <input type="checkbox"/> | 119.071(4)(d)(2)(a) | Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children. | |
| Florida Rules of Judicial Administration 2.420 (Rule of 23) | <input checked="" type="checkbox"/> | (iii) 119.0714(1)(i)-(j), (2)(a)-(e) | Social Security, bank account, charge, debit, and credit card numbers. | 2 |
| | <input type="checkbox"/> | (viii) 394.4615(7) | Clinical records under the Baker Act. | |
| | <input type="checkbox"/> | (xii) 741.30(3)(b) | The victim's address in a domestic violence action on petitioner's request. | |
| | <input type="checkbox"/> | (xiii) 119.071(2)(h), 119.0714(1)(h) | Protected information regarding victims of child abuse or sexual offenses. | |
| | <input type="checkbox"/> | | | |
| | <input type="checkbox"/> | | | |
| | <input type="checkbox"/> | | | |
| | <input type="checkbox"/> | | | |
| Other | <input type="checkbox"/> | | Other: | |
| | <input type="checkbox"/> | | Other: | |

REVIEW COMPLETED BY

| | |
|----------------------------|---|
| Booking Number: 2022029471 | Date: 11/13/2022 |
| | Specialist Name/ID: Chantel Daniels/30347 |