

Marsy's Law invoked - CVI present

0535 785

22 CT 186920 AMB
2702

ARREST / NOTICE TO APPEAR

O. On-View
S. Surrender
3. Request for Warrant
T. Taken into Custody

JUVENILE

A D M I N I S T R A T I O N	OBTS Number		Agency ORI Number 0500800		Agency Name West Palm Beach Police Department		Agency Report Number (N.T.A.'s only) 9, 4 2022-0017642		O. On-View S. Surrender		3. Request for Warrant T. Taken into Custody		JUVENILE								
	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) N HAVERHILL RD/ LEEPER DR, WPB						Location of Offense (Business Name, Address) 4499 45TH ST/N MILITARY TRL, WEST PALM BEACH, FL														
	Date of Arrest 11/05/2022		Time of Arrest 03:01		Booking Date 11/05/2022		Booking Time 03:11		Jail Date		Jail Time		Location of Vehicle								
	Name (Last, First, Middle) WELCH, BRANDON LEWIS												Alias:		Alias (Name, DOB, Soc. Sec. #, Etc.)						
	Race W - White B - Black A - Asian		Sex M		Date of Birth 08/24/1991		Height 6'01		Weight 180		Eye Color BROWN		Hair Color BROWN		Complexion FAIR		Build Medium				
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status		Religion		Indication of Alcohol Influence Yes <input type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>		Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>								
	Local Address (Street, Apt. Number) 1440 LAKE CRYSTAL DR, WEST PALM BEACH, FL 33411						(City)		(State)		(Zip)		Home Phone (561) 324-6856		Residence Type: 1. City 3. Florida 2. County 4. Out of State 1						
	Permanent Address (Street, Apt. Number) 1440 LAKE CRYSTAL DR, WEST PALM BEACH, FL 33411						(City)		(State)		(Zip)		Mobile Phone		Address Source VERBAL						
	Business Address (Name, Street)						(City)		(State)		(Zip)		Work Phone		Occupation						
D/L Number, State W420072913040 / FL		SSN Number		Place of Birth (City, State) WEST PALM BEACH, FL		Citizenship US															
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		Legal Custodian		Name (Last, First, Middle)		Address (Street, Apt. Number)		(City)		(State)		(Zip)		Residence Phone							
Notified by: (Name)		Date		Time		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated															
Released To: (Name)		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?		Description of Property		Value of Property													
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Seize D. Deliver E. Use		K. 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. Synthetic		U. Unknown Z. Other	
Charge Description DUI INFLUENCE OF ALCOHOL OR DRUGS						Statute Violation Number 316.193(1A)						Violation of ORD #									
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond							
Charge Description						Statute Violation Number						Violation of ORD #									
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond							
Charge Description						Statute Violation Number						Violation of ORD #									
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias 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 Explain:															
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 checked="" type="checkbox"/> T.O.T. County Jail						PROPERTY - Received By OFC E HOWARD									
Transported By OFC E HOWARD						Date Transported 11/05/2022						Time Transported 03:47									
Released By OFC E HOWARD						Released To PBC JAIL															
<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) Criminal Justice CRIMINAL JUSTICE COMPLEX						Court Date and Time 12/08/2022 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.												No Photo Available									
Signature of Defendant (or Juvenile and Parent/Custodian)												Date Signed									
I CONSENT TO RECEIVE REMINDERS OF COURT DATE(S) AND TIMES FOR THIS CASE BY TEXT MESSAGE TO THE NUMBER IDENTIFIED HERE. I UNDERSTAND THAT STANDARD TEXT MESSAGE RATES MAY APPLY AND THAT I MAY REVOKE THIS CONSENT VIA THE TEXT MESSAGE SYSTEM IF I CHOOSE.												(561) 324-6856									
HOLD for Other Agency						Signature of Arresting Officer ECB #2201						Name Verification (Printed by Arresting Officer)									
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Repeated Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) HOWARD, EDWARD		I.D. # 02201		(PRINT)													
Initials Dwight		I.D. #		Pouch #		Transporting Officer OFC E HOWARD		I.D. # 2201		Agency WPB		Witness here if subject signed with arrest		PAGE OF 1							

JOSEPH...
PALM BEACH...
NOV 5 2022
AM 7:43

DUI PROBABLE CAUSE AFFIDAVIT

On the 5th Day of November at 0301 A.M. P.M.

Subject: Brandon Welch Case Number: 20220017642

Agency: West Palm Beach Police Department Arresting Officer: Ofc. E Howard

Personal Contact

Driving Pattern	Actual physical control (physical evidence putting the driver behind the wheel)
<p>The driver was heading westbound on 45th Street from the area in front of Walmart. The vehicle did not have any tail or tag lights while driving at night. The driver was the sole occupant of the vehicle.</p>	

Observation of Driver
<p>The driver had slurred speech along with reddened and glassy eyes. He was swaying while standing up.</p>

Drivers Statements:
<p>The driver stated he was coming from a restaurant. He did not want to advise how much he had to drink. Several times when the driver was asked a question, he would begin to answer and then trail off, needing questions repeated.</p>

Odors:
<p>A strong odor of an unknown alcoholic beverage could be smelled emanating from the driver, which grew stronger the more he spoke with me.</p>

General Observations

Speech: Slurred
Attitude: Cooperative, then belligerent
Clothing: Orange shirt, black shorts, blue shoes.
Medical Problems/Medications: None stated on scene.
Other:

DUI PROBABLE CAUSE AFFIDAVIT

Subject: _____

Brandon Welch

Case Number: 20220017642

Roadside Tasks

Horizontal Gaze Nystagmus

<input type="checkbox"/> Left Eye Does Not Follow Smoothly	<input type="checkbox"/> Right Eye Does Not Follow Smoothly
<input type="checkbox"/> Left Eye Jerks at 45 Degree Angle or Less	<input type="checkbox"/> Right Eye Jerks at 45 Degree Angle or Less
<input type="checkbox"/> Distinct Jerking Left Eye at Maximum Deviation	<input type="checkbox"/> Distinct Jerking Right Eye at Maximum Deviation

The driver was instructed to stand with his feet together with his arms at his sides. He was then asked if he could identify the color of the stimulus I placed in front of his eyes; in which he advised was blue (which was correct). He was reminded to track the stimulus with his eyes only. He failed to keep his head still while tracking the stimulus. I observed the driver swaying during the instructional and practical portion of this exercise.

Walk and Turn Task

The driver was asked to place his left foot on the line (yellow duct tape) with his right foot directly in front of it and then with his heel touching his toe, then place his arms at his sides and stay in this position while I demonstrated this task. I observed the driver swaying during the instructional portion of this exercise. He started the task before being instructed. On the first set of heel to toe steps he stepped off the line several times, paused, and took over 15 steps. He performed the turn other than the way it was demonstrated. On the second set of heel to toe steps, the driver stepped off the line, paused, and took over 15 steps.

One Leg Stand

I had the driver stand with his feet together and hands down at his side as I explained the exercise. I explained and demonstrated the exercise and he stated he understood the instructions. He could not maintain his balance while listening to the instructions and stepped out of the stance during the demonstration to catch his balance. He started the task before being instructed. When told to begin, the driver lifted his right foot off the ground. He used his arms to balance by raising them more than six inches from his sides. I observed the driver swaying during the instructional and practical portion of this exercise. The driver did not count out loud as instructed and did not watch the elevated foot. The driver did not keep his foot raised 6 inches above the ground.

Finger To Nose

I had the driver stand with his feet together and hands down at his sides as I explained the exercise. I explained and demonstrated the exercise and he stated he understood the instructions. The driver demonstrated that he knew his right from his left. I asked the driver to tilt his head back and close his eyes. The sequence performed was: L, R, L, R, R, L. The driver performed the sequence in the correct order and touched the correct part of his nose. I observed the driver swaying during the instructional and practical portion of this exercise. The driver failed to return his arms to his side after each sequence.

Romberg Balance

I had the driver stand with his feet together and hands down at his sides as I explained the exercise. I explained and demonstrated the exercise and he stated he understood the instructions. I had the driver tilt his head back and close his eyes and estimate the passage of 30 seconds. He advised he finished this exercise at an internal clock of 27 seconds when the actual time was 56 seconds. I observed the driver swaying during this exercise.

Breath Results from Instrument

1st Result **Refused** 2nd Result 3rd Result
If Applicable

State of Florida
County of Palm Beach

The Following Instrument was notarized or sworn before me this 11/05/22 (DATE)

Personally Known Produced Identification Notary Public

Notary Public State of Florida
Renée Raglin
Notary / Clerk of Courts / Officer (F.S. 117.10) Commission GG 966418
Expires 03/05/2024

Signature of Arresting Officer: #2201



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

PBSO CASE # 22-126438 PBSO ZONE 3-23

AGENCY CASE # 2022-17612 CRASH CASE # _____

TIME OF STOP/CRASH 0226 DATE 11/5/22 DAY Saturday

SUBJECT'S NAME Brandon Welch RACE W SEX M

HGT 6'1 WGT 220 DOB 8/24/1991

LOCATION N Haverhill / Keeper Dr

ARRESTING OFFICER'S NAME & ID Edward Howard #2201 AGENCY WPB

DIVISION: PAT NOTIFIED BY COMMO _____

ARRIVAL AT FACILITY 0331

BREATH RESULTS:

Arrest Time 0301

1. _____
2. _____
3. _____
4. _____

TESTING OFFICER'S ID 16877

NOT A CERTIFIED COPY

REFUSED

**STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST**

I, Officer Edward Howard, a duly certified Law Enforcement or Correctional Officer, am a
(Name of Officer reading Implied Consent Warning)

member of West Palm Beach Police Department, and I do swear
(Name of Law Enforcement Agency)

or affirm that on or about the 5th day of November, 2022, at 0301 P.M. A.M.

DRIVER Brandon L. Welch
FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL # W420072913940, state of Florida, was placed under lawful arrest for
the offense of Driving Under the Influence by Officer Edward Howard and
(Name of Arresting Officer)
issued citation # AGVPKVE.

That on or about the 5th day of November, 2022, at 0355 P.M. A.M.
in Palm Beach County,

I requested that the driver submit to a **BREATH** test for the purpose of determining its alcohol content. I informed the driver that the refusal to submit to such test 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, or if he or she had been previously fined under s. 327.35215, F.S., 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, or if he or she has been previously fined under s. 327.35215, F.S., for refusal to submit to a lawful test of his or her breath, urine, or blood. Nonetheless, the driver refused to submit to the test requested.

E. Howard
Signature of Law Enforcement Officer or Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (s. 117.10, F.S.)



The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

The foregoing instrument was sworn and subscribed before me this 5th day of November, 2022, by E. Howard, who is personally known to me or who has produced _____ as identification.
Notary Public [Signature]

Title _____
Date _____

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.

TESTING FACILITY TASK REPORT

AGENCY: WPB

SUBJECT: Welch, Brandon L.

CASE NUMBER: 22-126438

DATE: Nov 5, 2022

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 03:53

ENDING TIME: 03:58

BREATH TESTS RESULTS: 1) Refusal TIME 03:55 A.M. P.M. 2) N/A TIME A.M. P.M.

3) N/A TIME A.M. P.M. 4) N/A TIME A.M. P.M.

BREATH OPERATOR: R. Ragin #16877

MAINTENANCE TECHNICIAN: Jason Karlecke #6467

REFUSED

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Calm, agitated

CLOTHING: Black shorts, red t-shirt, black sneakers

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER:

Eyes are red
odor of unknown alcoholic beverage on breath

REFUSED

COMMENTS:

Arrived at center A/O started 20 minute observation period at 03:31 hrs.

Subject refused to perform breath test.

A/O read I/C 2x and subject stated he understood I/C.

Subject refused to take test.

A/O read rights.
Subject stated he understood rights.

A/O conducted Q&A.
Subject answered Q&A.

SUBJECT: W. L. ...

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) Read on ...

WHITE: STATE ATTY.

YELLOW: DHSMV

PINK: CENTRAL RECORDS

GOLD: JAIL



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

REVIEW COMPLETED BY

Booking Number: 2022028940	Date: 11/06/2022
	Specialist Name/ID: C. Smith/39657