J# 0531905 22CT 8577 WB PH 546

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0502300

Agency Name: North Palm Beach Police Department

Agency Report Number (N.T.A.'s only): 7 0 22-000389

Charge Type: Check as many as apply — 1. Felony; 2. Traffic Felony; ☑ 3. Misdemeanor; 4. Traffic Misdemeanor; 5. Ordinance; 6. Other

If Weapon Seized — Enter Type: UNARMED

Multiple Clearance Indicator

Location of Arrest (Including Name of Business): 767 NORTHLAKE BLVD, 767 NORTHLAKE BLVD, NORTH PALM

Location of Offense (Business Name, Address): 767 NORTHLAKE BLVD, NORTH PALM BEACH, FL 33408

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
05/28/2022	05:49	05/28/2022	03:39			

DEFENDANT

Name (Last, First, Middle): MALVERTY, BRIANNE S

Alias:

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	10/25/1979	5'02	101	BLACK	BLACK	LIGHT	MEDIUM

Marital Status: S

Religion: ATHEIST

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description):

Indication of: Alcohol Influence ☑ Yes ☐ No ☐ Unk.; Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 817 CINNAMON RD, NORTH PALM, FL 33408

Phone: (561) 627-7395

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 1

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 817 CINNAMON RD, NORTH PALM, FL 33408

Phone: (561) 627-7395

Address Source: FL DL

Business Address (Name, Street) (City) (State) (Zip): SELF,

Phone: (561) 622-7100

Occupation: Beautician

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
M418077798850 / FL	[redacted]		QUEENS, NY, United	US

CO-DEF

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

JUVENILE

☐ Parent ☐ Other: ☐ Legal Custodian — Name (Last, First, Middle) — Residence Phone

Address (Street, Apt. Number) (City) (State) (Zip) — Business 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 ☐ defendant and/or ☐ 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.
☐ Yes, by: ☐ No:

School Attended — Grade

Property Crime? ☐ Yes ☑ No — Description of Property — Value of Property

CODE

Drug Activity: N. N/A; P. Possess; S. Sell; B. Buy; T. Traffic; R. Smuggle; D. Deliver; E. Use; K. Disperses/ 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

Charge Description: DUI - NORMAL FACULTIES IMPAIRED — Statute Violation Number: 316.193(1)(A) — Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☑ N		

CHARGE

Charge Description — Statute Violation Number — Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

CHARGE

Charge Description — Statute Violation Number — Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant — Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries — Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By — Released By — Released To

Transported By — Date Transported — Time Transported — Other: MAY 28 AM 4:22

NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court
☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): North County PALM BEACH GARD

Court Date and Time: 06/15/2022 09:00:00

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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

X

Signature of Defendant (or Juvenile and Parent/Custodian) — Date Signed

No Photo Available

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Signature of Arresting Officer

Name of Arresting Officer (Print): MILORD, J. — I.D. #: 9905

Name Verification (Printed by Arrestee) (PRINT)

Intake Deputy — I.D. # — Pouch #

Transporting Officer: MILORD — I.D. #: 9905 — Agency: NPBPD

Witness here if subject signed with an "X"

PAGE 1 OF 1

☐ COURT ☐ STATE ATTORNEY ☐ SUPPORT ☐ CENTRAL RECORDS ☐ JAIL ☐ OTHER AGENCIES ☐ P.I.C. ☐ DEFENDANT

PROBABLE CAUSE AFFIDAVIT

ADMIN

OBTS Number:

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 22-000389**

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)	Alias	Race	Sex	Date of Birth
MALVERTY, BRIANNE S		W	F	10/25/1979

CHARGES

Charge Description	Charge Description
316.193(1)(A) DUI - NORMAL FACULTIES IMPAIRED	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
FLORIDA, STATE OF	U	U	

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
560 US HIGHWAY 1, NORTH PALM BEACH, FL 33408	(561) 848-2525	
Business Address (Name, Street) (City) (State) (Zip)	**Phone**	**Occupation**

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable 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 committ the below acts.

☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 28 day of May, 2022 at 03:24 (Specifically include facts constituting cause for arrest.)

On May 28th, 2022 at approximately 0029 hours, I observed a black Volkswagen (FL tag KQWM31) swerving back and forth from lane two and lane three in the 700 block of Northlake Blvd, North Palm Beach, FL 33408. Also, the driver hit the curb two times and was driving very slowly. I activated my emergency red and blue lights on my marked North Palm Beach police vehicle. The driver stopped at 767 Northlake Blvd, North Palm Beach FL, 33408.

I made contact with the driver, and sole occupant of the vehicle Brianne Malverty (w/f 10/25/1979). I asked Malverty where she was coming from, and she stated that she was coming from her boss`s house from a work party, that she would not tell me where exactly it was. While talking to Malverty I noticed that she had bloodshot red eyes, watery eyes, and a strong odor of an unknown alcoholic beverage coming off her breath. I asked Malverty if she consumed any alcohol, and she stated to me that she had two glasses of wine at the party. I asked Malverty to step out of the vehicle, as she stepped out of her vehicle she was having trouble maintaining her balance and almost fell over. I asked Malverty if she would be willing to complete several Standardized Field Sobriety Tasks (SFSTs), and she stated that she will not. I advised Malverty of her Taylor warnings and she stated that she would do the tasks.

I explained the first SFST, Horizontal Gaze Nystagmus (HGN), to Malverty. Malverty stated that she understood. I placed the stimulus (a black pen) in front of Malverty and advised her to follow the pen with her eyes only. Malverty swayed from left to right, was unable to keep her balance, and was not able to maintain the starting position. As I began to move the pen, Malverty moved her head to follow the pen. I had to remind Malverty to follow the pen with her eyes only several times. Malverty then would not follow the pen with her eyes and just keep her eyes straight. I had to remind Malverty to follow the pen again with her eyes only multiple times. Malverty was able to follow the pen, and her eyes showed the following signs: a Lack of Smooth Pursuit in both the

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)

05/28/22
DATE

Notary Public State of Florida
Renee Ragin
My Commission GG 966418
Expires 03/05/2024

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

MILORD, JHAMIL (9905)
NAME OF OFFICER (PLEASE PRINT)

05/28/2022
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

ADMIN

OBTS Number

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 | 22-000389

Special Notes:

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

DEF

Name (Last, First, Middle) — Alias

MALVERTY, BRIANNE S

Race	Sex	Date of Birth
W	F	10/25/1979

PROBABLE CAUSE STATEMENT

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.

I explained the second SFST, Walk and Turn, to Malverty. While explaining the instructions, Malverty kept swaying back and forth, and was unable to maintain the starting position. Malverty stated that she understood the instructions. Malverty was instructed to get into the proper starting position (left foot on line with right foot in front, touching heel to toe). Malverty was instructed that she could begin. While conducting the task Malverty stated that she does not want to do this task and refused to complete it.

I explained the third SFST, One Leg Stand to Malverty. While explaining the instructions Malverty swayed back and forth. Malverty stated that she understood the instructions. Malverty began the task, she was not able to maintain her balance, she also did not count out loud and had to be reminded numerous times to count, when she was able to bring her foot up, she almost fell over numerous times. This tasks was stopped in fear of Malverty falling and injuring herself.

I explained the fourth SFST, the Finger to Nose, to Malverty and she stated that she understood. On the first right (R1), Malverty brought the tip of her finger to her forehead and brought it back down. On the first left (L1), Malverty brought the tip of her finger to the bridge of her nose. On the second right (R2), Malverty brought the tip of her finger to the side of her nose. On the second left (L2), Malverty brought the tip of her finger to the tip of her nose. On the third left (L3), Malverty began to bring her right hand up then she switched to her left.

I explained the Rhomberg Alphabet to Malverty. Malverty stated that she understood. Malverty kept trying to say the alphabet in a rhythmic manner. I explained to her that she needs to say it in a non-rhythmic manner. Malverty stated "the only way I know my alphabet is to sing it." I asked Malverty if she would like to count from 1-100 instead, and she stated that she would like to. As she began to count she counted in a rhythmic manner. Malverty counted as follows
"1,2,3,4,5,6,7,8,9,10,11,12,13,14,15,16,17,18,19,20,21,22,23,24,25,26,27,28,29,30,31,32,33,34,35,36,37,38,39,40,41,42,43,44,45,46,47,48,49,50,51,52,53,54,55,56,57,58,59,60,61,62,63,64,65,66,67,68,69,70,71,72,73,74,75,76,77,78,79,80,81,82,83,84,85,86,87,88,89,80,81,82,83,84,85,86,87,88,89,90,91,92,93,94,97,98,99,100.

After completion of the number counting, Malverty was placed under arrest for suspicion of driving under the influence of drugs and/or alcohol. Malverty was handcuffed, which were double locked and checked for fit. Malverty was searched by Police Officer Trimble (ID# 9900) before being placed into my patrol vehicle. Malverty was wearing a white shirt, green shorts, and brown sandals.

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)

05/25/22
DATE

Notary Public State of Florida
Renee Ragin
My Commission GG 966418
Expires 03/05/2024

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

MILORD, JHAMIL (9905)
NAME OF OFFICER (PLEASE PRINT)

05/28/2022
DATE

PAGE 2 OF 3

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1 JUVENILE

ADMIN

OBTS Number

Agency ORI Number: FL FL0502300

Agency Name: NORTH PALM BEACH POLICE

Agency Report Number: 7 0 22-000389

Special Notes:

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

DEF

Name (Last, First, Middle): MALVERTY, BRIANNE S

Alias

Race	Sex	Date of Birth
W	F	10/25/1979

PROBABLE CAUSE STATEMENT

A search incident to arrest of Malverty`s vehicle found that she had a green cup in the side door of her vehicle. The cup had a strong unknown alcoholic odor emanating from it. Also, the cup had an unknown alcoholic beverage inside of it.

I transported Malverty to PBSO Breath Alcohol Testing Center (BAT) without incident. Malverty was observed for 20 minutes. During the 20 minute observation she did not consume or regurgitate anything.

I asked Malverty if she was willing to provide a sample of her breath to determine her blood alcohol content. Malverty stated that she will not provide a sample. I read the implied consent to Malverty, and asked her once more if she is willing to provide a sample. Malverty stated that she understood the implied consent and still declined to provide a sample of her breath at approximately 0202 hours.

Based on my investigation, probable cause exists to charge Malverty with the following:

Brianna Malverty did drive or was in actual physical control of 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, and was affected to the extent that his or her normal faculties were impaired; or while having a blood alcohol level of .08 or more grams of alcohol per 100 milliliters of blood or breath alcohol level of .08 or more grams of alcohol per 210 liters of breath, contrary to Florida Statute 316.193(1).

Malverty was issued citations for the following Driving under the influence (AG3VI7E), and Open container while operating vehicle (AG3VI8E).

A warning for failure to maintain lane (13402) was also issued.

Malverty was turned over to Palm Beach County Jail Personnel without incident.

No further information.

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER

Notary Public State of Florida
Terence Regn
My Commission GG 966418
Expires 03/05/2024

05/28/22
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

MILORD, JHAMIL (9905)
NAME OF OFFICER (PLEASE PRINT)

05/28/2022
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

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

PBSO CASE # **22-071974** PBSO ZONE **3-13**

AGENCY CASE # **22-000389** CRASH CASE #

TIME OF STOP/CRASH **0029** DATE **05/28/2022** DAY

SUBJECT'S NAME **Malverty** (LAST) **Brianne** (FIRST) **S** (MID) RACE **W** SEX **Female**

HGT **5"2** WGT **101** DOB **10/25/1979**

LOCATION 767 Northlake Blvd, North Palm Beach FL, 33408

ARRESTING OFFICER'S NAME & ID **J.Milord** **9905** AGENCY **North Palm Beach PD**

DIVISION: **Patrol**

NOTIFIED BY COMMO **Y**

ARRIVAL AT FACILITY **0136**

ARREST TIME **0051**

BREATH RESULTS:

1) **Refused**
2) **Refused**
3)
4)

TESTING OFFICER'S ID **16877** PBSO VIDEOTAPE #

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 28 DAY OF May 20 22, AT 0029 ✔ AM PM

SUBJECT: Malverty Brianne S CASE NUMBER: 22-071974

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)
I observed a black Volkswagen (FL tag KQWM31) swerving back and forth from lane two and lane three in the 700 block of Northlake Blvd, North Palm Beach, FL 33408. Also, the driver hit the curb two times and was driving very slowly.

OBSERVATION OF DRIVER:
While talking to Malverty I noticed that she had bloodshot red eyes, watery eyes, and a strong odor of an unknown alcoholic beverage coming off her breath.

DRIVER'S STATEMENTS:
Malverty stated that she had two glasses of wine

ODORS:
A strong odor of an unknown alcoholic substance

GENERAL OBSERVATIONS

SPEECH: **Regular**

ATTITUDE: **Anxious**

CLOTHING: **White shirt, Green shorts, Brown sandals**

MEDICAL/OTHER: **N/A**

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 28 day of May 2022 by J.Milord

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

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

Notary Public State of Florida
Renee Ragin
My Commission GG 966418
Expires 03/05/2024

SUBJECT Malverty Brianne **CASE NUMBER** 22-071974

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

)ther Observations:

WALK & TURN:

I explained the second SFST, Walk and Turn, to Malverty. While explaining the instructions, Malverty kept swaying back and forth, and was unable to maintain the starting position. Malverty stated that she understood the instructions. Malverty was instructed to get into the proper starting position (left foot on line with right foot in front, touching heel to toe). Malverty was instructed that she could begin. While conducting the task Malverty stated that she does not want to do this task and refused to complete it.

ONE LEG STAND:

I explained the third SFST, One Leg Stand to Malverty. While explaining the instructions Malverty swayed back and forth. Malverty stated that she understood the instructions. Malverty began the task, she was not able to maintain her balance, she also did not count out loud and had to be reminded numerous times to count, when she was able to bring her foot up, she almost fell over numerous times. This tasks was stopped in fear of Malverty falling and injuring herself.

FINGER TO NOSE:

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ROMBERG ALPHABET:

I explained the Rhomberg Alphabet to Malverty. Malverty stated that she understood. Malverty kept trying to say the alphabet in a rhythmic manner. I explained to her that she needs to say it in a non-rhythmic manner. Malverty stated " the only way I know my alphabet is to sing it. " I asked Malverty if she would like to count from 1-100 instead, and she stated that she would like to. As she began to count she counted in a rhythmic manner. Malverty counted as follows "
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BREATH TEST RESULTS: 1) 2) 3) 4)

TATE OF FLORIDA
'OUNTY OF PALM BEACH

J.Milord
iignature of Arresting/Investigative Officer)

ne foregoing instrument was sworn to or affirmed and subscribed before me this 28 day of May 2022 by J.Milord

'rint name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Known

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

Notary Public State of Florida
Renee Ragin
My Commission GG 966418
Expires 03/05/2024

WITNESS LIST

CASE NUMBER: 22-071974

ARRESTING OFFICER: J.Milord
ADDRESS: 560 US Highway 1, North Palm Beach, FL, 33408
PHONE NUMBERS (HOME): 5618482525 (WORK)
CAN TESTIFY TO: facts of the case

NAME: J.Tonkin
ADDRESS: 560 US Highway 1, North Palm Beach, FL, 33408
PHONE NUMBERS (HOME) 5618482525 (WORK)
CAN TESTIFY TO: facts of the case

NAME: M.Fiorento
ADDRESS 560 US Highway 1, North Palm Beach, FL, 33408
PHONE NUMBERS (HOME) 5618482525 (WORK)
CAN TESTIFY TO: facts of the case

NAME: D.Bussek
ADDRESS 560 US Highway 1, North Palm Beach, FL, 33408
PHONE NUMBERS (HOME) 5618482525 (WORK) 0
CAN TESTIFY TO: facts of the case

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

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ADDRESS
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CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

22-0719'4

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

I, **J.Milord** , a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of **North Palm Beach PD** , and I do swear
(Name of law enforcement agency)

or affirm that on or about the **28** day of **May** , 20 **22** , at **0051** ☐ P.M ☑ A.M.

DRIVER **Brianne** **S** **Malverty** ,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# **M416060798850** , state of **Florida** , was placed under lawful arrest for

the offense of **Driving Under the Influence** by **J.Milord** and
(Name of Arresting Officer)

issued Citation # AG3VI7E .

That on or about the **28** day of **May** , 20 **22** , at **0202** ☐ P.M ☑ A.M.

in **PALM BEACH** County,

I requested that the driver submit to a X **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 of Law Enforcement Officer or Correctional Officer

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

Notary Public State of Florida
Renee Ragin
My Commission GG 966418
Expires 03/05/2024

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this **28** day of **May** , 20 **22** , by **J.Milord** , who is personally known to me or who has produced _____ as identification.

Notary Public _____

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

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.

HSMV-BAR1001 (REV. 10/2016)

SUBJECT: Mulvehy, Brianne 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) 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

WHITE: STATE ATTY. YELLOW: DHSMV PINK: CENTRAL RECORDS GOLD: JAIL

SUBJECT: Mulvey, Brianne 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: NPB

SUBJECT: Malverty, Brianne

CASE NUMBER: 22-071974

DATE: May 28, 2022

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 01:59

ENDING TIME: 02:04

BREATH TESTS RESULTS: 1) Refusal TIME 02:02 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 TECHNICAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Crying, talkative, fidgety, agitated, uncooperative

CLOTHING: Light blue shorts, LS white shirt, gold sandals

MEDICAL CONDITIONS: No

MEDICATIONS: Adderall

OTHER:

Eyes are red
odor of unknown alcoholic beverage on breath

REFUSED

COMMENTS:

Arrived at center A/O started 20 minute observation period at 01:36 hrs.

Subject refused to answer if she would perform breath test and stated I'm not sure.

A/O read I/C and subject stated she understood I/C.

Subject refused to answer if she would perform breath test.

A/O called refusal.

REFUSED

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

A/O attempted Q&A.
Subject refused to answer Q&A.

WARNING CITATION

YOU ARE HEREBY OFFICALLY WARNED OF THE BELOW DESCRIBED VIOLATION.
YOUR ONLY REQUIRED ACTION IS TO EXERCISE SAFER DRIVING HABITS IN THE FUTURE.

NORTH PALM BEACH POLICE DEPARTMENT

COUNTY OF: PALM BEACH	13402
CITY (IF APPLICABLE): NORTH PALM BEACH	

DAY OF WEEK	MONTH	DAY	YEAR	
SATURDAY	05	28	2022	02:47 ☒ A.M. ☐ P.M.

NAME (PRINT): FIRST: BRIANNE MIDDLE: SASHA LAST: MALVERTY

STREET: 817 CINNAMON RD — IF DIFFERENT THAN ONE ON DRIVER LICENSE "X" HERE ▶

CITY: NORTH PALM — STATE: FL — ZIP CODE: 33408

TELEPHONE NUMBER	DATE OF BIRTH MO	DAY	YR	RACE	SEX	HGT
	10	25	1979	W	F	502

DRIVER LICENSE NUMBER: M416060798850

STATE	CLASS	CDL LICENSE	YR LICENSE EXP.	IF COMMERCIAL MTR. VEH. "X" HERE
FL	E	☐	2030	▶ ☐

YR. VEHICLE	MAKE	STYLE	COLOR	IF PLACARDED HAZARDOUS MATERIAL "X" HERE
2022	VOLK	UT	BLK	▶ ☐

VEHICLE LICENSE NO.	TRAILER TAG NO.	STATE	YEAR TAG EXPIRES	IF COMPANION CITATION(S) "X" HERE
KOWM31		FL	2022	▶ ☐

UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY:
NORTHLAKE BLVD (Block 700), NORTH PALM BEACH

VIOLATIONS

☐ UNLAWFUL SPEED _____ MPH SPEED APPLICABLE _____ MPH

☐ CARELESS DRIVING	☐ SAFETY BELT VIOLATION	☐ NO PROOF OF INSURANCE
☐ VIOLATION OF TRAFFIC CONTROL DEVICE	☐ IMPROPER OR UNSAFE EQUIPMENT	☐ EXPIRED DRIVER LICENSE
☐ VIOLATION OF RIGHT-OF-WAY	☐ EXPIRED TAG	☐ FOUR (4) MONTHS OR LESS
☒ IMPROPER CHANGE OF LANE OR COURSE	☐ SIX (6) MONTHS OR LESS	☐ MORE THAN FOUR (4) MONTHS
☐ IMPROPER PASSING	☐ MORE THAN SIX (6) MONTHS	☐ NO VALID DRIVER LICENSE
☐ CHILD RESTRAINT	☐ IMPROPER OR NO SIGNAL	☐ PEDESTRIAN VIOLATION
☐ IMPROPER PARKING	☐ IMPROPER TURN	☐ DRIVING TOO SLOWLY
☐ BICYCLE VIOLATION	☐ DRIVING WITHOUT LIGHTS	☐ OPEN CONTAINER

☐ OTHER:

COMMENTS PERTAINING TO VIOLATION:

X SIGNATURE OF VIOLATOR

J. MILORD
RANK - SIGNATURE OF OFFICER — BADGE NO. — ID NO. — TROOP UNIT

WARNING CITATION

Case # 22000389

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: 2022013850	**Date:** 5/28/2022
	Specialist Name/ID: Chantel Daniels/30347