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22CT17798AMB

3879

Marsy's Law CVI FL. Const. Art.1 § 16(b)

Check if Supplement is Attached

ARREST / NOTICE TO APPEAR Juvenile Referral Report

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

Administrative section: OBTS Number, Agency ORI Number (FL 5000000), Agency Name (PALM BEACH COUNTY SHERIFF'S OFFICE), Agency Report Number (06-22121771), Charge Type (1. Felony, 2. Traffic Felony, 3. Misdemeanor, 4. Traffic Misdemeanor, 5. Ordinance, 6. Other), Location of Arrest (10th Ave N / S Military Trail Lake Worth FL 33463), Date of Arrest (10/23/2022), Time of Arrest (0629).

Defendant section: Name (Claros, Cynthia, Escobar), Alias, Race (W - White), Sex (F), Date of Birth (2/20/1990), Height (5'09"), Weight (200), Eye Color (Brown), Hair Color (Black), Complexion (Medium), Build (Medium), Scars/Marks (mole below lip), Marital Status (Married), Religion (CATHOLIC), Local Address (3131 Vassallo Ave, Lake Worth FL 33461), Phone ((561) 215-2054), Residence Type (2. County), Address Source (verbal), Occupation (Unemployed), D/L Number (C-462-105-90-560-0), Soc. Sec. Number, INS Number, Piece of Birth (West Palm Beach, FL), Citizenship (USA).

Co-Defendant section: Co-Defendant (Last, First, Middle), Race, Sex, Date of Birth, Arrested status (1. Arrested, 2. At Large), Felony/Misdemeanor/Juvenile status.

Parent section: Parent Name (Last, First, Middle), Residence Phone, Address (Street, Apt. Number, City, State, Zip), Business Phone.

Juvenile section: Notified by (Name, Date, Time), Juvenile Disposition (1. Handled/Processed within Dept. and Released, 2. TOT HRS/DYS, 3. Incarcerated), Released To (Name, Relationship, Date, Time), School Attended, Grade, Property Crime? (Yes/No), Description of Property, Value of Property.

Charge section: Drug Activity (N. N/A, S. Sell, P. Possess, T. Traffic, R. Smuggle, D. Deliver, E. Use, K. Dispense/Distribute, M. Manufacture/Produce/Cultivate, Z. Other), Drug Type (N. N/A, A. Amphetamine, B. Barbiturate, C. Cocaine, E. Heroin, H. Hallucinogen, M. Marijuana, O. Opium/Deriv., P. Paraphernalia/Equipment, S. Synthetic, U. Unknown, Z. Other), Charge Description (DUI), Counts (1), Domestic Violence (Y/N), Statute Violation Number (316.193(1)), Warrant/Capias Number, Bond, Violation of ORD #.

Notice to Appear section: Location (Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600), Court Date and Time (Month November, Day 17, Year 2022, Time 0830 A.M.), 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 FULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED. Signature of Defendant (or Juvenile and Parent/Custodian), Date Signed (10/23/2022).

Admin section: HOLD for other agency, Signature of Arresting Officer (Cpl J Derby), Name Verification (Printed by Arrestee), Name of Arresting Officer (Print) (Cpl J Derby, I.D. # 16611), Intake Deputy (Hanks, I.D. #, Pouch #), Transporting Officer (Cpl J Derby, I.D. # 16611, Agency PBSO), Witness here if subject signed with an "X", PAGE 1 OF 1.

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 23 DAY OF October 20 22, AT 0600 AM PM

SUBJECT: Claros, Cynthia, Escobar CASE NUMBER: 22121771

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Cpl J Derby

PERSONAL CONTACT

DRIVING PATTERN: Actual physical control (physical evidence or statements putting def. behind wheel of vehicle)

I observed Cynthia Claros driving a Yellow Ford Bronco bearing Florida tag CGRR11. Claros crashed the Bronco into a parked, marked, PBSO issued Ford Explorer that had overhead front and rear red and blue emergency lights activated. D/S Devito Vargas ID 15332 was standing in the roadway, east of the marked police vehicle, directing traffic while wearing his department issued PBSO reflective traffic safety vest, and he moved away from the crash on foot. The crash was partially captured on in car video and was classified under this case.

OBSERVATION OF DRIVER:

I approached the driver side of the vehicle and asked Claros if she needed medical attention which she declined. I could smell the strong and obvious odor of an unknown alcoholic beverage emitting from her breath as she spoke. I observed an opened white claw alcoholic seltzer can (5% alcohol by volume) in plain view on the driver's seat floorboard. Claros' speech was slurred.

DRIVER'S STATEMENTS:

Claros said she did not see the car she crashed into. She was read miranda warnings on scene and again at the BAT. Post miranda confessions include: drinking four corona beers, going to a bar in Jupiter, driving at the time of the crash, and admitting to not being surprised she crashed into a marked PBSO patrol vehicle while an officer in a reflective vest was working the crash.

ODORS:

Unknown Alcoholic beverage coming from breath

GENERAL OBSERVATIONS

SPEECH: Slurring, repeating numbers while providing phone number

ATTITUDE: Compliant and cooperative

CLOTHING: soccer uniform tee shirt

MEDICAL/OTHER: Complaint of anemia and blurry distance vision not corrected by glasses.

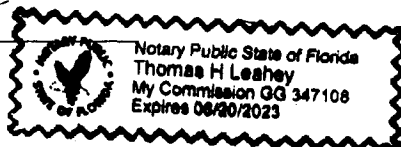
STATE OF FLORIDA
COUNTY OF PALM BEACH

Cpl J Derby
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 23rd day of October 2022 by Cpl J Derby

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

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



SUBJECT: Claros, Cynthia, Escobar

CASE NUMBER 22121771

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

LT EYE-LACK OF SMOOTH PURSUIT

RT EYE-LACK OF SMOOTH PURSUIT

LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

WALK & TURN:

Claros missed several heel-to-toe steps while performing the task, she stepped off the line and used his arms for balance bu putting her hands in her pockets. Claros was stumbling off the line while performing the task. She counter 10-11-8-9, and took too many steps while only going one direction and declaring she was complete with the task. Claros was re-read the instructions and offered the opportunity to complete the task again, and she conducted an improper turn, did not perform the toe-to-heel steps missing heel to toe touching on several steps, she stepped off the line, and counted ten steps aloud on the walk back.

ONE LEG STAND:

Claros was told to take her hands out of her pockets. While performing the task she put her foot down twice, pointed her toe up towards the sky and bent both knees not keeping them straight as instructed.

FINGER TO NOSE:

Claros did not touch the tip of her finger to the tip of her nose on any attempts missing high and low to the side and touching under her nostril. She kept her hand by her nose and did not immediately return her hand to her side as instructed.

ROMBERG ALPHABET:

No noted deficiencies during romberg alphabet exercise

BREATH TEST RESULTS: 1) .130 2) .121 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

Cpl J Derby

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 23rd day of October 2022 by Cpl J Derby

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

T. Sig.

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



WITNESS LIST

CASE NUMBER: 22121771

ARRESTING OFFICER: Cpl J Derby

ADDRESS: 13228 Gun Club Road West Palm Beach Fl 33406

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

CAN TESTIFY TO: Report/wheel/crash witness

NAME: D/S Devito-Vargas #15330

ADDRESS: 13228 Gun Club Road West Palm Beach Fl 33406

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

CAN TESTIFY TO: Report/being in traffic when Claro crashed into his vehicle/wheel witness

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY:

SUBJECT:

DATE:

BEGINNING TIME:

CASE NUMBER:

VIDEO DVD NUMBER:

ENDING TIME:

BREATH TESTS RESULTS: 1) TIME A.M. P.M. 2) TIME A.M. P.M.

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

BREATH OPERATOR:

MAINTENANCE TECHNICIAN:

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE:

CLOTHING:

MEDICAL CONDITIONS:

MEDICATIONS:

OTHER:

eyes were glassy & bloodshot
odor of unknown alcoholic beverage on breath
subject stated she drank 4 Corona beers w/soccer team - Q&A

COMMENTS:

arrived at center A/O conducted 20 observation period at 0651 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 results

A/O conducted Q&A

subject answered questions

SUBJECT: Claros, Cynthia E

CASE NUMBER: 22-121771

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 **SEGOND 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 camera

WHITE: STATE ATTY.

YELLOW: DHSMV

PINK: CENTRAL RECORDS

GOLD: JAIL

SUBJECT: Claves, Cynthia E CASE NUMBER: 22-121771

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? Yes

WHERE WERE YOU GOING? Home

WHAT STREET OR HIGHWAY WERE YOU ON? 10th St

DIRECTION OF TRAVEL? E WHERE DID YOU START? Haverhill

WHAT TIME DID YOU START? 12 AM WHAT TIME IS IT NOW? 1-7 AM

WHAT IS TODAY'S DATE? 10/23/22 WHAT DAY OF THE WEEK IS IT? Sunday

WHAT COUNTY AND CITY ARE YOU IN NOW? West Melm / Pe's Beach

WHEN DID YOU LAST EAT? 9 PM WHAT DID YOU EAT? Soup

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? With Sister then on 30 mins

HOW MUCH DO YOU WEIGH? 220 HAVE YOU BEEN DRINKING? Yes WHAT? Crown

HOW MUCH? 4 WHERE? Bar WITH WHOM? Some 10 min

WHEN DID YOU HAVE YOUR FIRST DRINK? 11 PM AND YOUR LAST DRINK? 12 AM

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? Slowly

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? NO ARE YOU UNDER THE INFLUENCE? NO

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? NO HOW MUCH? NO

WHAT? NO WHERE? NO WHEN? NO

WHAT LINE OF WORK ARE YOU IN? Unemployed WHEN DID YOU LAST WORK? NO

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? NO WHAT? NO

ARE YOU SICK OR INJURED? NO WHAT'S WRONG? NO

DO YOU LIMP? NO DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? NO

WERE YOU IN AN ACCIDENT TODAY? NO but yes

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? NO WHEN? NO

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

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? Yes WHAT? UK WHEN? Yesterday

DO YOU HAVE:

EPILEPSY?	<u>NO</u>
GLASS EYE?	<u>NO</u>
FALSE TEETH?	<u>NO</u>
EAR INFECTION?	<u>NO</u>
INNER EAR TROUBLE?	<u>NO</u>
DIABETES?	<u>NO</u>

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? Yes Cant see far

DO YOU TAKE INSULIN? no IF SO, WHEN WAS YOUR LAST INJECTION? NO

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? NO WHERE? NO

INTERVIEWER: Cap J. Derby #16611



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

PBSO CASE # 22121771 PBSO ZONE 1-44

AGENCY CASE # 22121771 CRASH CASE # 22121766

TIME OF STOP/CRASH 0600 DATE 10/23/2022 DAY Sunday

SUBJECT'S NAME Claros, Cynthia, Escobar RACE W SEX F

HGT 5'09" WGT 200 DOB 2/20/1990

LOCATION 10th Ave N / S Military Trail Lake Worth FL 33463

ARRESTING OFFICER'S NAME & ID Cpl J Derby (16611) AGENCY Palm Beach County Sheriff's Office

DIVISION: Patrol

NOTIFIED BY COMMO 0631

ARRIVAL AT FACILITY 0651

ARREST TIME 0629

BREATH RESULTS:

1) .130

2) .121

3) N/A

4) N/A

TESTING OFFICER'S ID 19183 PBSO VIDEOTAPE # N/A

NOT A CERTIFIED COPY



Palm Beach County Sheriff's Office – Arrests Only

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

REVIEW COMPLETED BY

Booking Number: 2022027690	Date: 10/24/2022
	Specialist Name/ID: T.Howard/7185