

0537029 22 CT 21582-50 399

AD M I N I S T R A T I O N	OBTS Number	ARREST / NOTICE TO APPEAR		1. Arrest (No Warrant) 3. Request for Warrant 6. Arrest (Warrant) 4. Request for Capias 2. N.T.A. 5. Juvenile Referral		1	JUVENILE	
D E F E N D A N T	Agency ORI Number	Agency Name		Agency Report Number (N.T.A.'s only)				
	0500200	Boca Raton Police Department		3, 2 2022-016637				
	Charge Type: Check as many as apply	1. Felony 2. Traffic Felony		3. Misdemeanor 4. Traffic Misdemeanor		5. Ordinance 6. Other		
	Location of Arrest (Including Name of Business)		Location of Offense (Business Name, Address)		If Weapon Seized		Multiple Clearance Indicators	
	799 NW SPANISH RIVER BLVD, BOCA RATON, F, 799 NW		799 NW SPANISH RIVER BLVD, BOCA RATON, FL 33431		UNARMED			
	Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle	
	12/28/2022	22:11	12/28/2022	22:21	12/28/2022	22:22	EMERALD TOWING	
	Name (Last, First, Middle)		Alias:		Alias (Name, DOB, Sex, Sec. #, Etc.)			
	ST GERMAIN, EMMANUEL M							
	Race		Sex	Date of Birth	Height	Weight	Eye Color	Hair Color
W - White B - Black O - Oriental/Asian		W M	09/18/1978	5'09	195	BLUE	BROWN	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status		Religion		Indication of: Alcohol Influence Drug Influence		
		S		CATHOLIC		Yes ☐ No ☐ Unk. ☐		
Local Address (Street, Apt. Number)		(City)		(State)		(Zip)		
385 E CANNERY ROW CIR, DELRAY BEACH, FL 33444								
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		
385 E CANNERY ROW CIR, DELRAY BEACH, FL 33444								
Business Address (Name, Street)		(City)		(State)		(Zip)		
CHOICE MORTGAGE GROUP, 2424 N FEDERAL HWY STE#100 BOCA RATON,								
DL Number, State		Sec. Sec. Number		DNS Number		Place of Birth (City, State)		
S326213783380 / FL						SHERBROOKE, OC.		
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		
Parent ☐ Other: _____		Name (Last, First, Middle)		Residence Phone				
Legal Custodian ☐								
Address (Street, Apt. Number)		(City)		(State)		(Zip)		
1 - O.R.								
Notified by: (Name)		Date		Time		JUVENILE DISPOSITION		
						1. Handled/Processed within Department and Released 2. TOT JAC 3. Incorporated		
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.		School Attended		Grade				
☐ Yes, by: _____ ☐ No: _____		Property Crime?		Description of Property		Value of Property		
		☐ Yes ☒ No						
Drug Activity		S. Sell	R. Sample	K. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type	
N. N/A	B. Buy	D. Deliver	E. Use				N. N/A	
P. Possess	T. Traffic						A. Amphetamine	
Charge Description		Statute Violation Number		Violation of ORD #				
DUI		316.193(4) 1A FAL						
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond	
N				1	☐ Y ☒ N			
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 Description		Statute Violation Number		Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond	
					☐ Y ☐ N			
Health / Apparent Physical Condition of Defendant		Any knowledge of the following:		Explain:				
GOOD HEALTH		☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries						
Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail		PROPERTY - Received By		Released By		Released To		
☐ Posted Bond ☐ South County Mental Health								
Transported By		Date Transported		Time Transported		Other		
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)		Court Date and Time				
		South County 200 W Atlantic Ave Delray Beach, FL 33444		01/31/2023 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.		Date Signed		12-28-22		No Photo Available		
Signature of Defendant (or Juvenile and Parent/Custodian)		Signature of Arresting Officer		Name Verification (Printed by Arrestee)				
		783						
Name of Arresting Officer (Print)		LD #		(PRINT)				
CALHOUN, K.		783						
Transporting Officer		LD #		Agency				
CALHOUN		783		BRPD				
Intake Deputy		Folio #		Witness here if subject signed with an "X".				
TK 9383		399						

OETS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Copies		1	JUVENILE
A D M I N I S T R A T I V E	Agency ORI Number FL FLO500200		Agency Name BOCA RATON POLICE DEPARTMENT		Agency Report Number 3 2 2022-016637				
	Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony		☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		Special Notes:		
D E F E N D E N T	Name (Last, First, Middle) ST GERMAIN, EMMANUEL M				Race W	Sex M	Date of Birth 09/18/1978		
	Charge Description 316.193(1) DUI				Charge Description				
V I C T I M	Victim's Name (Last, First, Middle) STATE OF FLORIDA,				Race B	Sex M	Date of Birth		
	Local Address (Street, Apt. Number) (City) (State) (Zip) 100 NW 2ND AVE, BOCA RATON, FL 33432				Phone (561) 338-1234		Address Source		
B U S I N E S S	Business Address (Name, Street) (City) (State) (Zip)				Phone (561) -		Occupation		
	The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The Person taken into custody . . . ☐ committed the below acts in my presence. ☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. ☐ confessed to _____ admitting to the below facts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the <u>28</u> day of <u>December</u>, <u>2022</u> at <u>22:11</u> (Specifically include facts constituting cause for arrest.)								
P R O B A B L E	MVR is available. On Wednesday December 28th, 2022, at approximately 2148 hours, Officer G. Cox (ID 873) and I responded to the area of 799 NW Spanish River Rd in reference to a welfare check for an unresponsive driver. Once we arrived on scene, Officer Cox and I made contact with the driver who was seated in the front driver seat of a black 2021 Range River bearing Florida tag BOUNCE3. The driver was later identified as Emmanuel St Germain by his Florida driver license.								
	BRFR and I began tapping onto the driver side window when St Germain awoke. Once St Germain awoke, I asked him to place his vehicle in "park". St Germain stated that it was in "park". I looked at the gear indicator and noted that the car was still in drive. I asked for St Germain to place his vehicle in "park", and he again stated that it was in "park". I asked St Germain again to place his vehicle in "park". St Germain then placed the vehicle in park after placing it in reverse. I opened the front driver side door and asked St Germain to exit the vehicle. I immediately noted a strong odor of alcohol protruding from St Germain's person. I also noted that St Germain had red glossy eyes. While St Germain was speaking to BRFR, I noted that he was unable to maintain his balance and began leaning onto the rear driver side of his vehicle. BRFR medically cleared him from the scene.								
C A U S E	I then asked St Germain for an identification card. While St Germain was retrieving his ID from his wallet, he dropped two credit cards on two separate occasions. I walked St Germain onto the sidewalk and out of the roadway to finish my investigation. I asked St Germain where he was coming from which he replied, "Loch Bar". St Germain stated that the bar was located in East Boca Raton in Mizner Park. When asked where he was going, St Germain said he was on his way home in Delray. I asked St Germain what the current time was which he replied, "12 or 1". I explained to St Germain that it was								
	SWORN AND SUBSCRIBED BEFORE ME <u>CARNEY, DANIEL CHARLES</u> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <u>12/28/2022</u> DATE <u>[Signature]</u> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <u>CALHOUN, KEVIN (783)</u> NAME OF OFFICER (PLEASE PRINT) <u>12/28/2022</u> DATE								
A D M I N I S T R A T I V E	PAGE 1 OF 2								
	COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.								

OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
A D M I N I S T R A T I V E	Agency ORI Number	Agency Name	Agency Report Number						
	FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 2 2022-016637						
	Charge Type: Check as many as apply.		☐ 1. Felony ☐ 2. Traffic Felony		☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		Special Notes:
D E F I N E	Name (Last, First, Middle)							Race	Sex
	ST GERMAIN, EMMANUEL M							W	M
							Date of Birth	09/18/1978	
around 10pm. When asked what road St Germain was facing (Spanish River Rd), he replied, "I don't know." I explained to St Germain that based on the strong odor of alcohol protruding from his person, his glossy eyes, and the fact that he was observed unresponsive in the driver seat of his black 2021 Range Rover, I had reasons to believe that he was driving under the influence of an unknown substance. I then asked St Germain if he wanted to partake in a series of Field Sobriety Task to dispel my alarm that he was driving under the influence of an unknown substance. St Germain declined. I then read St Germain his Taylor Warnings stating that I would have to make a determination based on the reasons I previously stated. I asked St Germain again if he would like to partake in a series of Field Sobriety Task to dispel my alarm that he was driving under the influence of an unknown substance. St Germain declined again. At 2211 hours, I placed Emmanuel Maxime St Germain under arrest for DUI per F.S.S. 316.193(1). Officer Cox placed St Germain into handcuffs that were checked for tightness and double locked. St Germain was then transported to the Boca Raton booking facility where he was processed. Officer Timoney (ID 854) arrived at the booking facility and conducted the Intoxilizer. I asked St Germain to provide a lawful test of his breath. St Germain declined. I then read St Germain implied consent. I then asked St Germain to provide a lawful test of his breath. St Germain declined again. I read St Germain his Constitutional Warnings before he refused to answer any further questions. St Germain was transported to the Palm Beach County Jail for processing with a issued court date of January 31st, 2022 at 0830 hours.									
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								
	CARNEY, DANIEL CHARLES NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 12/28/2022 DATE  SIGNATURE OF ARRESTING / INVESTIGATING OFFICER CALHOUN, KEVIN (783) NAME OF OFFICER (PLEASE PRINT) 12/28/2022 DATE								
	PAGE 2 of 2								

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

Observation time - 2230

Arrest time - 2211

DUI INFLUENCE REPORT



BOCA RATON POLICE SERVICES DEPARTMENT
100 NW 2nd Avenue
Boca Raton, FL 33432



BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT - PART I

On the _____ day of _____, at _____ AM/PM:

Subject: _____ Case Number: _____

PERSONAL CONTACT

Driving Pattern: _____

Observation of Driver: _____

Driver's Statement: _____

Odors: _____

GENERAL OBSERVATIONS

Speech: _____

Attitude: _____

Clothing: _____

Medical Problems: _____

Medications: _____

Other: _____

Horizontal Gaze Nystagmus:

- | | |
|--|---|
| ☐ Left eye does not follow smoothly | ☐ Right eye does not follow smoothly |
| ☐ Left eye jerks at 45 degrees angle or less | ☐ Right eye jerks at 45 degrees angle or less |
| ☐ Distinct jerking left eye maximum deviation | ☐ Distinct jerking right eye maximum deviation |

Can not do, Why? _____

Walk and turn: _____

Can not do, Why? _____

One leg stand: _____

Can not do, Why? _____

Finger to nose: _____

Can not do, Why? _____

Alphabet (speech pattern): _____

Can not do, Why? _____

Breath/Blood test results: _____

State of Florida, County of Palm Beach,

Sworn and subscribed before me this _____ (date) by _____

Notary/Clerk of Court/ Officer (FSS 117.10)

Date

Signature of Arresting Officer

Name of Officer (print)

ARRESTING OFFICER: Ofc. Calhoun # 783

Name: Ofc. Calhoun Phone # 561-368-1234 Work # _____

Address: 100 NW 2nd Ave Boca Raton FL 33432

Can testify to: DUI

Name: Ofc. Cox, G Phone # 561-368-1234 Work # _____

Address: 100 NW 2nd Ave Boca Raton FL 33432

Can testify to: DUI

Name: Ofc Timoney Phone # 561-368-1234 Work # _____

Address: 100 NW 2nd Ave Boca Raton FL 33432

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____



BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT - PART II

To be filled out at testing facility

Agency Case # 2022-016637

I. INTRODUCTION (Instrument Operator faces video camera)

- A. The day is Wednesday, December, 28, 2022.
(day) (month) (date) (year)
- B. The time is now approximately 1:51 AM/PM. PM
- C. The following is in reference to case number 2022-016637
- D. Present at this time is Ofc. Timoney, Ofc. Cox, Ofc. Calhoun of the Boca Raton Police Department.
(Officer's Name)
- E. Officer Calhoun, have you arrested Emmanuel M. St Germain in violation of
Florida State Statute 316.193? (Defendant's name)
- F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida? Yes
- G. Mr/Mrs./Ms. St Germain, I am required to inform you these
proceedings are being video recorded.

Operator Note: Video record breath request, breath sample, and interview.

II. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.

Note: Read only the paragraph applicable to the type of test you are requesting.

- A. I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.
- B. 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.
- C. I am now requesting that you submit to a lawful test of your **BLOOD** for the purpose of determining its alcohol content and the presence of chemical or controlled substances.

IMPLIED CONSENT WARNINGS

Note: Read only if the subject does not comply with your request.

I am Calhoun of the Boca Raton Police Department

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine, or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine, or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

Subject Signature: X- [Signature] 1783

Note: Also read for CDL holders:

IN ADDITION, your refusal to submit will result in the loss of your commercial privileges for one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from operating a commercial motor vehicle.

Note: After reading the implied consent warning, the arresting officer must request a breath sample again.

(IF REFUSAL THEN)

At this time St Germain Mr./Mrs./Ms. has refused to submit to a breath test.

The date is December, 28, 2022, and the time is 2258 AM/PM

(month) (day) (year)

A refusal form will be completed by the arresting officer.



BOCA RATON POLICE SERVICES DEPARTMENT
JUVENILE CONSTITUTIONAL WARNINGS

Rights of suspects prior to custodial questioning.
Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

You have the right to remain silent and not answer any questions. *Tell me in your own words what you think this means.*
(You do not have to talk to me or answer any questions about this offense. You can be quiet if you want.)

Any statement you make must be freely and voluntarily given. *Tell me in your own words what you think this means.*
(If you do talk to me it has to be because you want to and not because anyone is forcing you to speak.)

You have a right to the presence and representation of a lawyer of your choice before you make any statement and during any questioning. *Tell me in your own words what you think this means.*

(You can talk to a lawyer before we ask you any questions and you can have him/her with you now, during our questioning.)

If you cannot afford a lawyer, you are entitled to the presence and representation of a court appointed lawyer before you make any statement and during any questioning. *Tell me in your own words what you think this means*

(If you do not have money for a lawyer and you want one, a lawyer will be given to you for free.)

If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent. *Tell me in your own words what you think this means.*

(If you decide to talk to me then change your mind, you can stop answering my questions at any time.)

I can make no threats or promises to induce you to make a statement. This must be of your own free will. *Tell me in your own words what you think this means*

(I am not allowed to threaten you or make you any promises to get you to talk to me. If you decide to talk, it must be because you want to.)

Any statement can be and will be used against you in a court of law. *Tell me in your own words what you think this means*

(Anything you say to me can and will be told to the judge or a jury in court. A judge is a person who decides if you have done something wrong. Sometimes a group of people called a jury decide this, but the Judge is the person who decides what punishment you get.)

Do you understand these rights as I have read them to you, and do you wish to speak to me?

med: _____

Date: 12-28-22

Time: 1055 PM



BOCA RATON POLICE SERVICES DEPARTMENT
TESTING FACILITY TASK REPORT

SUBJECT: Emmanuel M. St Germain

CASE #: 2022-016637 DATE: 12-28-22

BREATH TEST RESULTS

1) TIME 22:58 Refusal AM/PM 2) TIME _____ AM/PM
3) TIME _____ AM/PM 4) TIME _____ AM/PM

BREATH OPERATOR: Ofc. Timoney #854

MAINTENANCE TECHNICIAN: Ofc. Crawford

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Good

CLOTHING: Blue jeans, Blue sweatshirt

MEDICAL CONDITION: None

OTHER: _____

COMMENTS: _____

Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

- (1) You have the right to remain silent and not answer any questions.
- (2) Any statement you make must be freely and voluntarily given.
- (3) You have a right to the presence and representation 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 and representation of a court appointed lawyer before you make any statement 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 be and will be used against you in a court of law.
- (8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: _____ Date: _____ Time: _____

QUESTIONS AND ANSWERS

Were you operating a motor vehicle at the time of the accident/stop? _____

Where were you going? _____

What street or highway were you on? _____

Direction of travel? _____

Where did you start driving from? _____

What city (county) were you stopped in? _____

What time did you start? _____ AM/PM What time is it now? _____

What is today's date? _____ What day of the week is it? _____

When did you last eat? _____ What did you eat? _____

What have you been doing the past three hours prior to this stop/accident? _____

How much do you weigh? _____ Have you been drinking? _____ What were you drinking? _____

How much? _____ Where? _____ With whom were you drinking? _____

When did you have your first drink? _____ AM/PM When did you stop drinking? _____ AM/PM

How did you consume your last two drinks? _____

Are you under the influence of alcohol now? ☐ Yes ☐ No

Can you feel the effects of alcohol? ☐ Yes ☐ No

Have you consumed alcohol since the accident? ☐ Yes ☐ No

Can you feel the effects of alcohol? ☐ Yes ☐ No

Have you consumed alcohol since the accident? ☐ Yes ☐ No How much? _____

What? _____ Where? _____

What line of work are you in? _____

When did you last work? _____

Do you have any physical defects or injuries? ☐ Yes ☐ No If yes, explain: _____

Are you sick or injured? ☐ Yes ☐ No If yes, explain: _____

Do you limp? ☐ Yes ☐ No Did you get a bump on the head? ☐ Yes ☐ No

Were you in an accident today? _____

Have you taken any drugs or smoked marijuana today? _____

What? _____ When? _____

Have you seen a doctor or dentist today? ☐ Yes ☐ No Who? _____

Are you taking any prescription medications? ☐ Yes ☐ No What? _____ When? _____

Do you have: Epilepsy? ☐ Yes ☐ No Inner ear trouble? ☐ Yes ☐ No

Glass eye? ☐ Yes ☐ No Ear infection? ☐ Yes ☐ No

False teeth? ☐ Yes ☐ No Diabetes? ☐ Yes ☐ No

Any problems not correctable by glasses or contact lenses? _____

Do you take insulin? ☐ Yes ☐ No If yes, when was your last injection? _____

Have you ever had a driver's license in any other state? _____

I am now ending this video recording. The time is now approximately 1057 AM/PM.

The date is December 28 2022
(month) (day) (year)

**FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT**

Instrument Type: Intoxilyzer 8000
Instrument Registered To: BOCA RATON PD
Instrument Serial Number: 80-006622 Software: 8100.27
Date of Test: 12/28/2022

Date of Last Agency Inspection: 12/15/2022

Observation Period Began: 22:30

Subject's Name: EMMANUEL M ST GERMAIN

DOB: 09/18/1978 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	22:57
	Air Blank	0.000	22:57
	Control Test	0.079	22:57
	Air Blank	0.000	22:58
	Subject Sample #1	REF*	22:58
	Air Blank	0.000	22:58
	Control Test	0.080	22:59
	Air Blank	0.000	22:59
	Diagnostics Check	OK	22:59

*Subject Test Refused

Cylinder Lot: 02422080A1
Exp: 02/05/2024

State of Florida, County of Palm Beach,

Personally appeared before me the undersigned authority, who (___) is personally known to me or (___) produced FL DL as identification, and who after being placed under oath, stated:

I, _____, 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: [Signature] Date: 12-28-22
Signature

Sworn to (or affirmed) before me this 28 day of December, 2022

X- [Signature] 783 OFC Callhoun
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

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

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

am a member of Boca Raton Police Services Department, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 28th day of December, 2022, at 1058 ☒ P.M. ☐ A.M.

DRIVER Emmanuel Maxime St Germain

(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# S326213783380, state of Florida, was placed under lawful arrest for

the offense of 316.193 by Calhoun and

issued Citation # A6LQKXE (Name of Arresting Officer)

That on or about the 28th day of December, 2022, at 1048 ☒ P.M. ☐ A.M.

in Palm Beach County,

I requested that the driver submit to a ☒ 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]
Signature of Law Enforcement Officer or
Correctional Officer

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

The foregoing instrument was sworn and subscribed before me:

[Signature]
Signature of Attesting Officer

Title Breath Tech Operator

Date 12-28-2022

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before

me this _____ day of _____, 20____,

by _____,

who is personally known to me or who has produced

_____ as identification

Notary Public _____

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.



**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: 2022033426

Date: 12/29/2022

Specialist Name/ID: Chantel Daniels/30347