0536140 50.2022-CT-019480 AMB 1374

☐ Marsy's Law CVI FL. Const. Art.1 § 16(b) ☐ Check if Supplement is Attached

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number | 1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias: 1 | Juvenile: N

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	0 6 - 22-131540

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

Multiple Clearance Indicator: 0 1

Location of Arrest (including Name of Business)	Location of Offense (Business Name, Address)
9206 150th ct N, Jupiter FL 33478	9206 150th ct N, Jupiter FL 33478

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
11/20/2022	1848					

DEFENDANT

Name (Last, First, Middle): Sposato, Janet, Michelle

Alias (Name, DOB, Soc. Sec. #, Etc.)

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	11/9/1972	5'04	182	Bro	Blo	Light	Large

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)

Marital Status: Married | Religion: CATHOLIC | Indication of: Alcohol Influence ☒ Y ☐ N ☐ Unk; Drug Influence ☐ Y ☐ N ☒ Unk

Local Address (Street, Apt. Number) (City) (State) (Zip): 12445 150th Ct N, Jupiter, fL 33478 | Phone: (561) 703-6521 | Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip) | Phone: ( ) | Address Source: FCIC/NCIC

Business Address (Name, Street) (City) (State) (Zip) | Phone: ( ) | Occupation: Paralegal

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
S123433729090, FL	[redacted]		Minsk, Russia	US

CO-DEF

Co-Defendant (Last, First, Middle)	Race	Sex	Date of Birth	
				☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
Co-Defendant (Last, First, Middle)	Race	Sex	Date of Birth	
				☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other: Name (Last) (First) CIOR (Middle) | Residence Phone ( )

Address (Street, Apt. Number) (City) (State) (Zip) | Business Phone ( )

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

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 (561) 355-6511) informed of any change of address. ☐ Yes, by: (Name) ☐ No (Reason) | 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. 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

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Driving Under the Influence	01	☐ Y ☒ N	316.193(3C1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		22-131540		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

NOTICE TO APPEAR

Location (Court, Room Number, Address): Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600

Court Date and Time: Month December | Day 8 | Year 2022 | Time 0830 | A.M. X | P.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 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.

Signature of Defendant (or Juvenile and Parent/Custodian) | Date Signed: 11/20/2022

ADMIN

HOLD for other agency

☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other:

Intake Deputy: QI HONEA 7206 I.D. # | Pouch #

Signature of Arresting Officer: X

Name of Arresting Officer (Print): Inv. C. Ward 16305 | I.D. #: 16305

Transporting Officer: Inv. C. Ward | I.D. #: 16305 | Agency: PBSO

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X"

PAGE 1 OF 1

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PBSO #0148 REV. 04/22 DISTRIBUTION: WHITE- COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PROBABLE CAUSE AFFIDAVIT

OBTS Number | 1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capias | 1 | Juvenile: N

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	22-131540

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

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
Sposato, Janet, Michelle		W	F	11/9/1972

CHARGES

Charge Description	Charge Description
Driving Under the Influence 316.193(3C1)	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
State of Florida, -, -	-	-	-

Local Address (Street, Apt Number) (City) (State) (Zip)	Phone	Address Source
-, -	( )	
Business Address (Name, Street) (City) (State) (Zip)	**Phone**	**Occupation**
	( )	

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that I have just and reasonable grounds to believe, and do believe that the above named Defendant committed the listed violation(s) of law.
The Person taken into custody:

☐ committed the below acts in my presence.

☐ confessed to _____ admitting to the below facts.

☒ was observed by Inv. J. Cisson who told Me that he/she saw the arrested person commit the below acts.

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

On the 20 day of November 20 22 at 1729 ☐ A.M ☐ P.M (Specifically include facts constituting cause for arrest.)

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

On November 20, 2022 at approximately 2001 hours I responded to the Palm Beach County Jail, Breath Alcohol Testing Center, 3228 Gun Club Rd, unincorporated West Palm Beach, Palm Beach County, in reference to this Driving Under the Influence Case

Upon my arrival I took over of Inv. J. Cisson #24091. He advised me that he responded to the area of 9206 150th Ct N, Unincorporated Jupiter, Palm Beach County in reference to a impaired driver in a traffic collision. He stated that upon his arrival the defendant, Janet Sposato, was still sitting in the vehicle. He stated that she showed signs of impairment. He stated that he advised her that the traffic crash investigation was completed and that he was completed a criminal driving under the influence investigation. He stated that he advised the defendant of their Miranda warnings and she stated that she wanted to speak to a lawyer. He tempted to have her complete field sobriety task and she refused. At this time he believed he had probable cause to charge the defendant with driving under the influence pursuant to Florida State Statute 316.193(3C1). He and a fellow deputy removed the defendant from the vehicle and handcuffed her. He transported the defendant to the Palm Beach County Jail Breath Alcohol Testing Center.

I was supplied a witness statement from the witness, Amy Dechert, which stated the following:

She heard a noise and went outside and saw the car in the ditch, The driver of the vehicle, a female, said she could not find her phone and that she wasn't to leave.

Upon arrival at the Palm Beach County Jail the defendant fell and received cut to the back of her head. According to Agent [redacted] Palm Beach County Fire Rescue responded to the scene and the defendant refused treatment.

At this time I took custody of the defendant while at the Breath Alcohol Testing Center. I placed the defendant in a centrally located position where they could be easily monitored. While monitoring the defendant I could smell the odor of an unknown alcoholic beverage that same from the defendant. I observed the defendant for 20 uninterrupted minutes, starting at 2025 hours, during which time they did not ingest anything and/or regurgitate. After the 20 minute observation period the defendant was escorted into and isolated testing room which was video recorded. The defendant swayed while walking and while standing. Once inside the room I requested a lawful sample of the defendant's breath for the purposes of determining its blood alcohol content. The defendant refused to give a lawful sample of their breath. The defendant was then read implied consent from a pre-printed PBSO implied consent form. The defendant stated that they understood and was again requested to give a lawful sample of their breath to which the defendant refused.

I did not interview the defendant due to her previous request for a lawyer.

NOT A CERTIFIED COPY

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. C. Ward 16305
(Signature of Arresting /Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 20 day of November 20 22 by Inv. C. Ward
(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Known LEO

Thomas Leahey (#19183)
Notary Public, Clerk of Court, Officer (F.S.S). 117.10)

Notary Public State of Florida
Thomas J Leahey
My Commission GG 347108
Expires 06/20/2023

PAGE 1 OF 1

DISTRIBUTION WHITE – Court Copy GREEN – State Attorney YELLOW – Agency PINK – Agency

PBSO 80004 REV. 04/22

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 20 DAY OF November 20 22, AT 1729 AM PM

SUBJECT: Sposato, Janet, Michelle CASE NUMBER: 22-131540

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. C. Ward 16305

PERSONAL CONTACT

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

See Pc.

OBSERVATION OF DRIVER:

see Pc.

DRIVER'S STATEMENTS:

See Pc.

ODORS:

I could smell the odor of an unknown alcoholic beverage, based on my training and life experinces, which came from the defendants breath and intensified as they spoke with me.

GENERAL OBSERVATIONS

SPEECH: **Russian Accent**

ATTITUDE: **Calm, Upset**

CLOTHING: **White Dress Shirt, Gray Slacks, Blue Sandals**

MEDICAL/OTHER:

NOT A CERTIFIED COPY

TATE OF FLORIDA
'OUNTY OF PALM BEACH

Inv. C. Ward 16305
ignature of Arresting/Investigative Officer)

he foregoing instrument was sworn to or affirmed and subscribed before me this 20 day of November 20 22 by Inv. C. Ward 16305

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

Thomas Leahey (#19183)
otary Public, Clerk of Court, Officer (F.S.S 117.10)

Notary Public State of Florida
Thomas H Leahey
My Commission GG 347108
Expires 06/20/2023

SUBJECT: Sposato, Janet, Michelle **CASE NUMBER** 22-131540

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:

See PC:

WALK & TURN:
refused/see pc

ONE LEG STAND:
refused/see pc

FINGER TO NOSE:
refused/see pc

ROMBERG ALPHABET:
refused/see pc

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BREATH TEST RESULTS: **Refused**

TATE OF FLORIDA
OUNTY OF PALM BEACH

Inv. C. Ward 16305
ignature of Arresting/Investigative Officer)

he foregoing instrument was sworn to or affirmed and subscribed before me this 20 day of November 20 22 by Inv. C. Ward 16305

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

Thomas Leahey (#19183)
otary Public, Clerk of Court, Officer (F.S.S 117.10)

Notary Public State of Florida
Thomas H Leahey
My Commission GG 347108
Expires 06/20/2023

WITNESS LIST

CASE NUMBER: **22-131540**

ARRESTING OFFICER: **Inv. C. Ward 16305**

ADDRESS: **3228 Gun Club Rd, West Palm Beach, FL 33406**

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

CAN TESTIFY TO: **DUI Investigation**

NAME: **Inv J. Cisson**

ADDRESS: **3228 Gun Club Rd, West Palm Beah, FL 33406**

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

CAN TESTIFY TO: **DUI Investigaion**

NAME: **Agent** [redacted]

ADDRESS **3228 Gun Club Rd, West Palm Beach, FL 33406**

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

CAN TESTIFY TO: **Refusal of Medical Treatement to PBCFR**

NAME: **Amy Dechert**

ADDRESS **9206 10th Ct N, Jupiter, FL 33478**

PHONE NUMBERS (HOME) **561-262-4233** (WORK) _____

CAN TESTIFY TO: **Wheel Witness**

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

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: PBSO

SUBJECT: Sposato, Janet M

CASE NUMBER: 22-131540

DATE: Nov 20, 2022

VIDEO DVD NUMBER: n/a

BEGINNING TIME: 2047

ENDING TIME: 2049

BREATH TESTS RESULTS: 1) R TIME 2049 A.M. ☒ P.M. ☐ 2) n/a TIME 0 A.M. ☐ P.M. ☐

3) n/a TIME 0 A.M. ☐ P.M. ☐ 4) n/a TIME 0 A.M. ☐ P.M. ☐

BREATH OPERATOR: Thomas H Leahey #19183

MAINTENANCE TECHNICAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: slurred, accent

ATTITUDE: talkative, agitated, repetitive

CLOTHING: gray pants, black/white blouse, blue slip ons

MEDICAL CONDITIONS: blood pressure, sleeping issues

MEDICATIONS: Losartan, Seroquel, Wellbutrin

OTHER:

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

REFUSED

COMMENTS:

arrived at center A/O conducted 20 observation period at 2025 hrs

subject refused to perform breath test

A/O read I/C & subject understood I/C

REFUSED

subject refused to perform breath test

A/O called refusal @ 2150

A/O did not read rights - subject invoked right to counsel

A/O did not attempt Q&A

subject invoked right to counsel

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STATE OF FLORIDA

AFFIDAVIT OF REFUSAL TO SUBMIT TO

BREATH TEST

I, Inv C. WARD (Person reading Implied Consent Warning), a duly certified Law Enforcement Officer or Correctional Officer, am a member of Palm Beach County Sheriffs Office (Name of enforcement agency), and I do swear or affirm that on or about the TWENTIETH day of November, 2022, at 6:48 PM

DRIVER (Type or Print) JANET (FIRST) MICHELLE (MIDDLE OR MAIDEN) SPOSATO (LAST),

DL # S123433729090, state of FL, was placed under lawful arrest for the offense of DUI by Inv C. WARD (Name of Arresting Officer) and issued Citation # AG5ZM6E.

That on or about the TWENTIETH day of November, 2022, at 8:49 PM 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.

Signature of Law Enforcement Officer or Corrctional Officer

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

Notary Public State of Florida
Thomas H Leahey
My Commission GG 347108
Expires 06/20/2023

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this 20 day of November, 2022 by Inv C Ward #16305 who is personally known to me or who has produced Florida 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.

****EFFECTIVE OCTOBER 1, 2021****

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PALM BEACH COUNTY SHERIFF'S OFFICE – **SWORN STATEMENT**

Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.

☐ WITNESS ☐ VICTIM ☐ OTHER

CASE #:	ZONE:	SUSPECT:	DATE & TIME OF ORIGINAL EVENT/OFFENSE:
22-131540	3-16	Sposato, Janet	11/20/22 @ 1800
EVENT TYPE: Dwf	DEPUTY: Dep. C Wats		ID#: 1600

COMPLETE EVERYTHING BELOW – PRINT LEGIBLY

LAST NAME:	FIRST NAME:	MIDDLE INITIAL:	RACE:	SEX:
Dechert	Amy	S	W	F

DATE OF BIRTH: (MM/DD/YYYY)	YOUR HEIGHT:	YOUR WEIGHT:	YOUR HAIR COLOR:	YOUR EYE COLOR:
07/06/1972	5'1"	110	Brown	Brown

YOUR HOME ADDRESS: ☐ CHECK IF HOMELESS	CITY:	STATE:	ZIP:
9206 150th CT N	Jupiter	FL	33478
YOUR WORK NAME & ADDRESS: ☐ CHECK IF UNEMPLOYED OR RETIRED	**CITY:**	**STATE:**	**ZIP:**

WORK PHONE: ☐ CHECK IF NONE	CELL PHONE: ☐ CHECK IF NONE	HOME PHONE: ☐ CHECK IF NONE	EMAIL: ☐ CHECK IF NONE
( )	(561) 202-4233	( )	amydechert@bellsouth.net

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL – PRINT LEGIBLY

I | YOUR NAME: Amy Dechert

DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...

Heard a noise went outside and saw car in the ditch. Saw the tree was hit. Driver was out of car (female). Said she could not find her Phone. Then she wanted to leave. Told her that her car was not drivable.

NOT A CERTIFIED COPY

PAGE _____ OF _____

READ AND SIGN

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:

YOUR SIGNATURE: X Amy Dechert

☒ DEPUTY SHERIFF ☐ NOTARY PUBLIC FSS: 117.10

SWORN TO AND SUBSCRIBED BEFORE ME TODAY:

DATE: 11/22/22 TIME: 2200

SIGNATURE: _____ ID: 1600

*IF YOU **DO NOT WISH TO PROSECUTE**, COMPLETE THE ABOVE STATEMENT, READ THIS DISCLAIMER AND INITIAL BELOW:* I AM OF LEGAL AGE AND I AM THE REPORTED VICTIM OF A CRIME UNDER FLORIDA LAW. I HEREBY STATE THAT I **WILL NOT** COOPERATE ANY FURTHER WITH THE INVESTIGATION OF THE ALLEGED CRIME. I FURTHER RELEASE THE PALM BEACH COUNTY SHERIFF'S OFFICE OF ANY PRESENT OR FUTURE RESPONSIBILITY AS TO MY CASE. I ACKNOWLEDGE THAT I UNDERSTAND MY RIGHTS AS A CRIME VICTIM, **PARTICULARLY REGARDING VICTIM COMPENSATION ELIGIBILITY**, WHICH INCLUDES SUCH BENEFITS AS REIMBURSEMENT FOR: DISABILITY; LOST WAGES; LOSS OF SUPPORT; MEDICAL, DENTAL, MENTAL HEALTH COUNSELING AND FUNERAL EXPENSES. I AM AWARE I MAY BE GIVING UP THESE RIGHTS FOR MY FAMILY AND MYSELF BY INITIALLING BELOW. I AM TAKING THIS POSITION OF MY OWN FREE WILL KNOWING THAT THE CASE CAN ONLY BE FURTHER INVESTIGATED AND PROSECUTED WITH MY COOPERATION. ☐ DO NOT WISH TO PROSECUTE (INITIAL _____)

(PROSECUTION WAIVER NOT TO BE USED FOR CASES INVOLVING DOMESTIC OR DATING VIOLENCE PER G.O. 508.00)

WHITE **- RECORDS COPY** ***CANARY*** **- STATE ATTORNEY COPY** ***PINK*** **- OFFICER'S COPY** ***GOLD*** **- WITNESS / VICTIM COPY**

PBSO #0134 REV. 12/11

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

PBSO CASE # 22-131540 PBSO ZONE 3-16

AGENCY CASE # _____ CRASH CASE # 22-131544

TIME OF STOP/CRASH 1729 DATE 11/20/2022 DAY Sunday

SUBJECT'S NAME Sposato, Janet, Michelle RACE W SEX F

HGT 5'04 WGT 182 DOB 11/9/1972

LOCATION 9206 150th ct N, Jupiter FL 33478

ARRESTING OFFICER'S NAME & ID Inv. C. Ward 16305 (16305) AGENCY Palm Beach County Sheriff's Office

DIVISION: CID-DUI

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 1937

ARREST TIME 1848

BREATH RESULTS:

Refused

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

SUBJECT: _____ CASE NUMBER: _____

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE:
- EPILEPSY? _____
- GLASS EYE? _____
- FALSE TEETH? _____
- EAR INFECTION? _____
- INNER EAR TROUBLE? _____
- DIABETES? _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: _____

NOT A CERTIFIED COPY

SUBJECT:_____ CASE NUMBER:_____

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your ***BREATH*** for the purpose of determining its alcohol content.

OR

I am now requesting that you submit to a lawful test of your ***URINE*** for the purpose of determining the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am _____ of the _____

If you refuse to take the test I have requested of you, your driving privilege will be suspended for a period of one (1) year for a FIRST REFUSAL, or eighteen (18) months if your driving privilege has been PREVIOUSLY SUSPENDED, or if you have been PREVIOUSLY FINED under s. 327.35215, for refusing to submit to a lawful test of your breath, urine, or blood. Additionally, if you refuse to take the test I have requested of you, and if your driving privilege has been previously suspended, or if you have been previously fined under s. 327.35215, for a refusal to submit to a lawful test of your ***breath, urine*** or blood, you will be committing a misdemeanor, in addition to any other penalties which can be imposed by law.

Refusal to submit to the test I have requested is admissible into evidence in any criminal proceeding.

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

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

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

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

SUBJECTS SIGNATURE: (X)_____

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X)_____

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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.	3, 7
	☐	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:	

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REVIEW COMPLETED BY

Booking Number: 2022030153	**Date:** 11/21/2022
	Specialist Name/ID: M. Tooks #8557