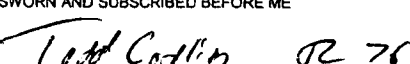
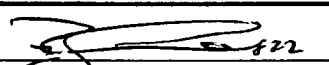


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22CT11546ASB

1172

ADMINISTRATIVE	OBT 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
	Agency ORI Number 0500200		Agency Name Boca Raton Police Department				Agency Report Number (N.T.A.'s only) 3, 2 2022-009102			
	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) 3011 WOODFIELD COUNTRY CLUB DR, BOCA RATON, FL						Location of Offense (Business Name, Address) 3007 W YAMATO RD, BOCA RATON, FL 33434			
DEFENDANT	Date of Arrest 07/17/2022	Time of Arrest 00:32	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle			
	Name (Last, First, Middle) THAU, JOHN WARREN									
	Alias (Name, DOB, Soc. Sec. #, Etc.)									
	Race W - White I - American Indian B - Black O - Oriental/Asian W M									
DEFENDANT	Sex M		Date of Birth 07/24/1964		Height 6'00	Weight 210	Eye Color BROWN	Hair Color GRAY	Complexion LIGHT	Build Medium
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status M		Religion JEWISH	
	Local Address (Street, Apt. Number) 3551 NW CLUBSIDE CIR, BOCA RATON, FL 33496						Phone (561) 989-3626		Residence Type: 1. City 3. Florida 2. County 4. Out of State 1	
	Permanent Address (Street, Apt. Number) 3551 NW CLUBSIDE CIR, BOCA RATON, FL 33496						Phone (561) 989-3626		Address Source FL DL	
DEFENDANT	Business Address (Name, Street) SEPTIC SAVIOR,						Phone (561)		Occupation Sales	
	D/L Number, State T000479642640 / FL		INS Number		Place of Birth (City, State) BRONX, NY, United		Citizenship US			
	Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile			
	Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile			
JUVENILE	☐ Parent ☐ Other: _____		Name (Last, First, Middle)		Residence Phone					
	☐ Legal Custodian		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					
CHARGE	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	
	Drug Activity N. N/A P. Possess						Drug Type N. N/A A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin	
	S. Sell B. Buy T. Traffic						R. Smuggle D. Deliver E. Use		K. Disposes/ Distribute	
CHARGE	Charge Description DUI						Statute Violation Number 316.193(1)A		Violation of ORD #	
	Drug Activity	Drug Type N	Amount / Unit	Offense #	Counts 1	Domestic Violence ☐ Y ☒ N	Warrant / Capias Number		Bond	
	Charge Description						Statute Violation Number		Violation of ORD #	
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence ☐ Y ☐ N	Warrant / Capias Number		Bond	
CHARGE	Charge Description						Statute Violation Number		Violation of ORD #	
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence ☐ Y ☐ N	Warrant / Capias Number		Bond	
	Charge Description						Statute Violation Number		Violation of ORD #	
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence ☐ Y ☐ N	Warrant / Capias Number		Bond	
INTAKE	Health / Apparent Physical Condition of Defendant						Any knowledge of the following: ☐ 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	
	☐ Posted Bond ☐ South County Mental Health						Date Transported		Time Transported	
	Transported By						Date Transported		Time Transported	
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) South County 200 W Atlantic Ave Delray Beach, FL 33444		Court Date and Time 08/22/2022 08:30:00	
	I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.						No Photo Available			
	Signature of Defendant (or Juvenile and Parent/Custodian)						Date Signed			
	HOLD for Other Agency						Signature of Arresting Officer FORBES, R. S.		Name Verification (Printed by Arrestee) SCANNED	
ADMIN	☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other		ID # 822		Agency BRPD		JUL 18 2022		PAGE 1 OF 1	
	Pouch #		Transporting Officer J. PAYNE		ID # 815		Witness here if subject signed with an "X"			
	COURT		STATE ATTORNEY		JUDICIAL RECORDS		JAIL		CIVIL DIVISION	
	PAINE									

OBT Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE	
ADMINISTRATIVE	Agency ORI Number FL FL0500200		Agency Name BOCA RATON POLICE DEPARTMENT		Agency Report Number 3 2 2022-009102					
	Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony		☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		Special Notes:			
DEFENDANT	Name (Last, First, Middle) THAU, JOHN WARREN				Race W		Sex M		Date of Birth 07/24/1964	
	Alias									
CHARGES	Charge Description 316.193(1) DUI				Charge Description					
	Charge Description				Charge Description					
VICTIM	Victim's Name (Last, First, Middle) STATE OF FLORIDA,				Race		Sex		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			
WITNESS	Business Address (Name, Street) (City) (State) (Zip)				Phone		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>16</u> day of <u>July</u>, <u>2022</u> at <u>23:51</u> (Specifically include facts constituting cause for arrest.) On 07/16/2022 at 2301 hours I responded to 3007 W Yamato Rd (Chevron Gas Station), Boca Raton FL in regards to a possible impaired driver, who was in his vehicle at pump number two. Upon arrival, I observed the only vehicle in the gas station leaving the parking, which I believed to be the vehicle in question. As the vehicle exited the gas station onto Woodfield Plaza Rd, the vehicle traveled into my lane of travel, where the vehicle's driver side front tire struck the curb. The driver then corrected the vehicle back into the proper lane of travel, all the while my emergency overhead lights were now activated. The white male driver looked at my vehicle with the emergency lights activated and continued to travel past me. I turned my vehicle around, where it appeared the driver of the vehicle did not want to stop, as it was clear he was trying to exit the plaza prior to me turning my vehicle around. I was able to activate my sirens and immediately get behind the vehicle, which was that of a black 2019 Audi 4 door (FL PA7096) that was attempting to make a west bound turn onto Woodfield Country Club Dr. The vehicle made the west bound turn, where the vehicle traveled toward the gated entrance to the Woodfield Country Club, all the while my emergency lights were activated and my sirens activated. The driver finally stopped the vehicle when the gate arm would not open for his vehicle. The driver, identified as the defendant John Thau, immediately exited the vehicle, where he was stumbling. I made contact with Thau and could immediately smell the odor of an alcoholic beverage emanating from his person. Furthermore, Thau had red glassy eyes, with a blank stare as he looked past me. As I was speaking with Thau in regards to his failing to stop for some time, his speech was slurred and he continued to sway, consistent with that of someone who is under the influence of alcohol.										
ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <u>07/16/2022</u> DATE				 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER FORBES, RYAN SCOTT (822) NAME OF OFFICER (PLEASE PRINT) <u>07/16/2022</u> DATE				PAGE 1 OF 2	

COURT

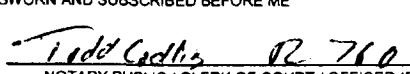
STATE ATTORNEY

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
Agency ORI Number FL FL0500200	Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2022-009102					
Charge Type: Check as many as apply: ☐ 1. Felony ☒ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☐ 4. Traffic Misdemeanor ☐ 6. Other		Special Notes:					
Name (Last, First, Middle) THAU, JOHN WARREN				Race W	Sex M	Date of Birth 07/24/1964	
Based on my observations of Thau's driving pattern, as well as my physical interaction with him, I believed Thau was operating his vehicle under the influence of alcohol. I asked Thau if he was willing to perform standardized roadside sobriety tasks to dispel my alarm that he was driving under the influence. Thau complied, where I attempted to observe Thau during these tasks. The results are as follows; The first roadside task was the walk and turn. Thau could not maintain the starting position, in order for me to give the instructions. He had to be held from the side at time, to ensure he did not fall. I attempted to give the instructions multiple times; however, Thau could not maintain any steady starting position. Thau was unable to perform this task due to his high level of intoxication. The next task was the finger to nose. After giving Thau the starting position and instruting him to not begin until i gave the command, he began placing his finger to his nose, prior to my command. Once I was able to actually explain the instructions, Thau advised he understood, where I gave the first command of "Right", where Thau placed the middle portion of his right index finger on the side of his nose. Thau kept his finger here for an extended period of time, where I then told him to place his hand back down, as I again explained the instructions. Thau stated he understood again, where I gave the command "Right", where Thau placed the middle portion of his right index finger on the side of his nose, and again his finger remained in this manner until I had to tell him to put his finger down. It should be noted, As Thau would close his eyes and tilt his head back he would begin to sway back, as though he was going to fall. The officer standing behind Thau had to assist him during the entirety of the above mentioned task. Thau was unable to perform the remaining tasks due to his high level of intoxication. The remaining tasks were impracticlue without the possiblity of injury to Thau. Based on the fact that Thau could not maintain a stading position without swaying sideways, or falling back, it was clear that he would not be capable of completing the following tasks, at which probable cause was established to charge Thau with (1) count of Driving Under the Influence, pursuant to F.S.S. 316.193(1). Thau was transported to the Boca Raton Police Deaprtment, where he agreed to submit to breath samples. The two samples were above the legal limit of 0.08, with one sample of 0.185 at 0017 hours; and the other sample of 0.178 at 0020 hours. Thau was then processed within the booking facility and finally transported to the Palm Beach County Jail.							
SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 07/16/2022 DATE				 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER FORBES, RYAN SCOTT (822) NAME OF OFFICER (PLEASE PRINT) 07/16/2022 DATE			
				PAGE 2 OF 2			

2022009102

2322

2352

THAV, JOHN

7/24/04

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. FORBES

Name: OFC. FORBES Phone # 561 3686201 Work # _____

Address: 100 NW 2ND AVE, BOCA RATON, FL, 33432

Can testify to: DUI INVESTIGATION

Name: OFC. GINZALEZ Phone # 561 3686201 Work # _____

Address: 100 NW 2ND AVE, BOCA RATON, FL, 33432

Can testify to: SCENE SAFETY

Name: OFC. LEYVA Phone # 561 3686201 Work # _____

Address: 100 NW 2ND AVE, BOCA RATON, FL, 33432

Can testify to: SCENE SAFETY

Name: OFC. COON Phone # 561 3686201 Work # _____

Address: 100 NW 2ND AVE, BOCA RATON, FL, 33432

Can testify to: 10-32,

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 # 2022009102

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is SUNDAY, JULY, 17, 2022.
(day) (month) (date) (year)

B. The time is now approximately 0013 PM.

C. The following is in reference to case number 2022009102.

D. Present at this time is OFF. FORBES of the Boca Raton Police Department.
(Officer's Name)

E. Officer FORBES, have you arrested JOHN THAU 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 THAU, 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 DFC. FORBES of the BOCA RATON PD.

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: SEE VIDEO

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 ☒ Mr. THAN has refused to submit to a breath test.

The date is JULY, 17, 2022, and the time is 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:

- 1) 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.)
- 2) 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.)
- 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. *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.)
- 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. *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.)
- 5) 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.)
- 6) 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.)
- 7) 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.)
- 8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: _____ Date: _____ Time: _____



BOCA RATON POLICE SERVICES DEPARTMENT
TESTING FACILITY TASK REPORT

SUBJECT: THAU, JOHN

CASE #: 2022009102 DATE: 7/17/22

BREATH TEST RESULTS

1) TIME .185 AM/PM 2) TIME .178 AM/PM
3) TIME _____ AM/PM 4) TIME _____ AM/PM

BREATH OPERATOR: OFC. COON

MAINTENANCE TECHNICIAN: OFC. VANCAMP

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLOW, SLIGHTLY SURRED

ATTITUDE: COOPERATIVE

CLOTHING: GREY SHIRT, BLUE JEANS, BLUE SNEAKERS

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: SEE VIDEO Date: 7/17/22 Time: _____

QUESTIONS AND ANSWERS

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

Where were you going? BACK TO HOUSE

What street or highway were you on? DOE TO GO TO CLUBSIDE CIR.

Direction of travel? WEST

Where did you start driving from? GAS STATION

What city (county) were you stopped in? BOCA RATON

What time did you start? NO IDEA AM/PM What time is it now? 0100

What is today's date? 7/16/22 What day of the week is it? SUNDAY

When did you last eat? 3 Hrs Ago What did you eat? PIZZA

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

How much do you weigh? 215 Have you been drinking? Yes What were you drinking? VODKA/CRANBERRY

How much? 2 DRINKS Where? CASINO With whom were you drinking? FRIEND (GARY KRAMZ)

When did you have your first drink? 2130 AM/PM When did you stop drinking? 2230 AM/PM

How did you consume your last two drinks? Sipped

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? Sales

When did you last work? Saturday 7/16/22

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? NO

Have you taken any drugs or smoked marijuana today? NO

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? NO

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? NEW YORK

I am now ending this video recording. The time is now approximately 0628 AM/PM.

The date is JULY, 17, 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: 07/17/2022

Date of Last Agency Inspection: 06/11/2022
Observation Period Began: 23:52
Subject's Name: JOHN W THAU

DOB: 07/24/1964 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	00:16
Air Blank	0.000	00:16
Control Test	0.079	00:16
Air Blank	0.000	00:17
Subject Sample #1	0.185	00:17
Air Blank	0.000	00:18
Air Blank	0.000	00:20
Subject Sample #2	0.178	00:20
Air Blank	0.000	00:21
Control Test	0.080	00:22
Air Blank	0.000	00:22
Diagnostics Check	OK	00:22

Cylinder lot: 15421080A1
Exp: 08/05/2023

State of Florida, County of PAVIA BEACH

Personally appeared before me the undersigned authority, who ☒ is personally known to me or ☐ produced _____ as identification, and who after being placed under oath, states:

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: 7/17/22

Sworn to (or affirmed) before me this 17 day of JULY, 2022

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.



**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)
I/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.	
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Other	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2022018348

Date: 07/17/2022

Specialist Name/ID: C. Smith/39657