50-2022 · CT-008168 · ASB

3446

ARREST/NOTICE TO APPEAR 1. Arrest (No Warrant) 3. Request for Warrant 4. Request for Capias

A D M	OBTS Number								equest for Capias evenile Referral	1 JUVENILE
M 1 N	Agency ORI Number 0500200	Agency Name  Boca I	Raton Police Dep	artment			Agency R	eport Number (N.T.A.'s only 2 2022-006		
S T	Charge Type: 1. Felony Check as many 2. Traffic Felony	رد 🛘	Misdemeanor	5. Ordinance 6. Other				If Weapon Seized Enter Type U	NARMED	Multiple Clearance Indicator
₽	as apoly.  Location of Arrest (Including Name of Business)  100 N DIXIE HWY, 800 N	NIVIE UI	WV POCA PATON	J EI 334	1.		ense (Business Name	, Address) Y, BOCA RATO	N FI 33432	
VΙ	Date of Arrest Time o	Arrest Box	oking Date	Booking Tim	e Ja	il Date		Jail Time	Location of Vehicle	,
N	Name (Last, First, Middle)		05/23/2022	02:5	3	03/	23/2022 Ali	05:18 as (Name, DOB, Soc. Sec. #,	WESTWAY Etc.)	
-	DE BARROS, LIENE TA		ate of Birth	Height	Alia		Eye Color	Hair Color	Complexio	on_ Build
Ь	W - White I - American Indian B - Black O - Oriental/Asian  Scars, Marks, Tatoos, Unique Physical Features (Le	M	06/05/1985	5'09		168	BROWN Marital Status Re	BLAC	K L Indication	<u>6</u>
E	TATT R ARM / CHINES	SE				i	S		Alcohol Ir	rfluence Yes No W Unk.
E N D	Local Address (Street, Apt. Number) 137 PLEASANT ST 2, W		EA 01801	(State)	(Z	űρ)		Phone	Residence 1. City 2. County	3. Florida 4. Out of State
Ā	Permanent Address (Street, Apt. Number)  137 PLEASANT ST 2, W	((	City)	(State)	(2	(qi		Phone	Address S	ource
1	Business Address (Name, Street)		City)	(State)	(2	ʻip)		Phone	Occupation	s Self
	CONSTRUCTION, D/L Number, State	Soc. Sec.	Number	INS Number			Place of Birth (C		Citizenship	Seij
c	Y6853793 / Co-Defendant Name (Last, First, Middle)				Race	e Sex	Date of Birt	, Brazil	BZ ☐ 1. Arrested	3. Felony 5. Juvenile
O D	Co-Defendant Name (Last. First, Middle)				Race	e Sex	Date of Birt			4. Misdemeanor 5. Juvenile
E F			Mana (f	t, First, Middle)				- Inf		4. Misdemeanor
j	Parent Other: Legal Custodian			r irst, wilddie)	<i>-</i>		125	Dut L	<u></u>	
ě	Address (Street, Apt, Number)		(City)		(State)		(Alp)	Stut		Business Phone
N L	Notified by: (Name)				$\Box$	Date	Time	1. Handles	SPOSITION VProcessed within ment and Released	2. TOT JAC 3. Incarcerated
E	Released To: (Name)		Relationship		X	Date	Time		Cit and Released	7.114.331.33
	The above address was provided	by □ de	fendant and/or	lefendant's p	arents.		School A	Litended		Grade
	The child and/or parent was told (Phone 355-2526) informed of a			S Office		Property Crie		ion of Property		Value of Property
C	Yes, by: Drug Activity S. Sell R. Smug		No:  M. Manufacture/	Z. Other		Yes Drug Type	X No B. Barbit	urate H. Hallucinogen	P. Paraphernalia	√ U. Unknown
0 D E	Drug Activity   S. Sell   R. Smug   N. N/A   B. Buy   D. Deliv   P. Possess   T. Traffic   E. Use		ribute Produce/ Cultivate	2. Galci		N. N/A A. Amphet	C. Cocair	ne M. Marijuana	Equipment	Z. Other
r C	Charge Description	NCE ALC		) "				Statute Violation N 316.193(1		Violation of ORD #
RGE	DRIVE UNDER INFLUE Drug Activity Drug Type Amount / Uni		Offense #	1	mestic Viole		int / Capins Number	1 310.173(1	<i>A.</i> )	Bond
E	N Charge Description				□ Y 🔼	N		Statute Violation N	umber	Violation of ORD #
H A R	Drug Activity Drug Type Amount / Uni		Offense #	Counts Do	mestic Viole	nce Warra	unt / Capias Number			Bond
E	Charge Description		L		U Y .	N		Statute Violation N	umber	Violation of ORD #
C H A R	Can ge Description	"	1			- Lav				Bond
GE	Drug Activity Drug Type Amount / Uni		Offense #		mestic Viole		ınt / Capias Number			
ι	Health / Apparent Physical Condition of Defendar  GOOD	t				Any i	mowledge of the follo un:	owing: Mental C	Escape Risk Mo	dication Deformities Dinjuri
N T A	Check which applies: Released O.R.	_	Parent/Guardian X T.  nty Mental Health	O.T. County Jail	PROPERT	TY - Received I	Ву	Released By		lessed To BCJ
E	Transported By 868		TO THE PARTY OF TH		Date Tran	sported 3/2022	Time Transported 05:18	Other		
N O	INSTRUCTION NO. 1 - M	andatory app	pearance in court		Location (	Court, Room)		mudia Aug Dalas	Parah El	22444
T	$\square$ Instruction no. 2 - Ye	ou need not a	appear in Court ly with instructions or	- Daga 2		e and Time		antic Ave Delra	y Beach, FL	33444
CE	I AGREE TO APPEAR AT THE TIME A	<u>'</u>			CHARGET		<u>/20/2022 08</u> V THE FINE SII		-2°-0	No No
Ò	I WILLFULLY FAIL TO APPEAR BEFO FOR MY ARREST SHALL BE ISSUED.	RE THE COUR	T AS REQUIRED BY THIS	NOTICE TO A	PPEAR, T	HAT I MAY	BE HELD IN CO	OMTEMPT OF COURT	AND A WARRANT	Photo Available
PE									\$2.7 m	
A R		f Defendant (or	Juvenile and Parent/Custodian					Date Signed	2	N
Å	HOLD for Other Agency		Signature of Arre					Name Verification (Printed	WATER HAY 2	3 AM 7:35
М	Dangerous Resiste	d Arrest	Name of Arrestin				LD.# <b>868</b>	(PRINT)	# 27.	O PAGE
"	Intake/Departy I.D. #	Pouc	ch# Transporting Off		)	I.D. #	Agency BOCA	Witness here if subject sign	ed, spitely an "X".	OF OF
	1 1 2010	1 ( 1 ( S. 1907)	and the second s	0688	r romando en labo				64	100 mm 22 mm
£	COURT STATE ATTO	HENEY :	■ AGENCY ■	CENTRAL	KECOR	ux √L	JAIL L	CRIME ANAL'	KSIS 🔲 P. I	LO. 🗌 DEFENDAN

A	DBTS Number	PR	OBABLE CAU	SE AFFIDAVIT	1. Arrest 2. N.T		t for Warm		NILE
1	<b>**********</b>	cy Name			gency Report Number				I
<u>"</u>		CA RATON POLI		MENT		22-006. cial Notes:	745		
- 1	Check as many		5. Ordinance 6. Other	•	3,00				l
'	mapply. 2. Traffic Felony  Name (Last, First, Middle)	4. Trainc Misgemeanor	Alias			Race	Sex	Date of Birth	
E	DE BARROS, LIENE TAVA	RES JR				w	M	06/05/1985	
С	Charge Description			Charge Description					
시	316.193(1A) DUI							····	
Ĝ	Charge Description			Charge Description					
s	Victim's Name (Last, First, Middle)			<u> </u>		Race	Sex	Date of Birth	
v	STATE OF FLORIDA,					U	U		
;	Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone		^	ddress Source	7
T	100 NW 2ND AVE, BOCA RA	TON, FL 33432				338-123			
Ä	Business Address (Name, Street)	(City)	(State)	(Zip)	Phone		0	ccupation	
$\perp$						61) -			
, 1	The undersigned certifies and swears that he	/she has just and resonable gro	ounds to believe, and o	does believe that the abo	ove named Defend	ant committed	the follow	wing violation of law.	ł
iÌ	The Person taken into custody  Committed the below acts in my pi	resence.	☐ was	observed by					who told
	confessed to							person committ the be	
	admitting to the below facts.							(described) investiga	ition.
	On the day of Ma	ay 2022	_at <b>02:43</b>	(Specifically include	e facts constitution	ng cause for	arrest.)		
					V				
	MVR Available								
PROBABLE CAUSE STATEMENT	I asked De Barros to	as directly be at a red light 3 316.075(1C1). in the left in ane.  ency equipment top at approximate with the drivers JR. As I appeared by a serious as a sell as bloods of the from to which is plied 4 Beers Barros partices ted as follows	and conductately 800 yer who was opposited to obsort watery he vehicle he replied ". Based upipate in F	lver in cold ft inside la light turns . While trans cted a traf: N Dixie Hw s identified the window, ng from the serve the s eyes. and walk b , "a bar".	or Dodge ane withing and green veling I  fic stop y. I wall d by Cal: I was in interior trong small ack to my When ask bination	(NV 03 in the the ve observe on the sed up ifornia mediate of the sell of of Presented if the sell of	5M97 mark hich ed t to t lely le ve alco	che continued che vehicle micle where che driver's y 6853793) presented whicle. As a chol emanation sked De Barrank any d Post stop	ed k it s as with ing
	HOLIZONICAL GAZE MYSCA	ramas (man)							
	The defendant identify	fied the stimu	lus as red	. The defen	dant had	equal	pup	il size and	
A O M	SWORN AND SUBSCRIBED BEFORE ME	X I		l l	/	<b></b>			
- 1 1	1	15WTHOMAS		SIGNAPOR	E OF ARRESTING	/ INVESTIGA	TING OF	FFICER	
N I STEP	NOTARY PUBLIC / CLERK OF COO		)	1817	LITAME P	AVTD 4	8E6,		
1	05/33/3	022			LLIAMS, D		<b>868)</b> RINT)		
	05/23/20 DATE						•		PAGE
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_	OBTS Number		٦	PR∩RA	BLE CAUSE A	FFIDAVIT		9	. Request	for Manne	. [	7	
_				TRODA.	SUPPLEMENT	Γ		2. N.T.A.	4. Request			l ju	/ENILE
М	Agency ORI Number  FL FL0500200	Agency Name		) ICF I	DEPARTMEN		Agency Report N	lumber <b>2022-</b> (	2067	45			
Z	Charge Type: 1. Felony		Misdemeanor		Ordinance	<u> </u>	-1-1	Special Note					
	check as many as apply. 2. Traffic Felony	4.	Traffic Misdemeano	6.0	Other				Race	Sex	Date of B	Dietto.	
Ē	Name (Last, First, Middle)  DE BARROS, LIENE TA	VARES	S JR		Ales				w	M		05/198	5
PROBABLE CAUSE STATEMENT	equal tracking in a follow the stimulus pursuit, Distinct a prior to 45 degrees continued to sway.  Walk and Turn  The surface was flat the line used was a would be using and demonstrating to the defendant failed defendant walked and Heal-to-Toe.  One Leg Stand  The surface was flat the defendant raise and was only able balance.  Finger to nose  The surface was flat defendant failed to During the exercise.  Time Approximation  The surface was flat defendant failed to During the exercise, the completion of the Due to the totalit defendant was unab I felt the defenda was placed under a placed in handcuff.  The vehicle was to	at and a pain the cone defend to hold at and defend exercity of the cone is that wed by	hard. The ted white olor of the endant has stay in the oper number of the day in the day	g the ystage Nystage N	exercise, mus at Maxagmus. Whise admits at the complete of arting possible steps, may be endant at the corresponding the corresponding the corresponding to sway. See and my tasks due to operate for drive for tight	tempted sure the gan the exercise imately anducted to the sway.  Inducted training the a motor ing under the ses and the ses a	to do defendexercion de defendexercion de	the exdant he se by While duction r turn the exdefend onds he sercise his recise influence is a simple color of the sercise color of th	ercipoth instruction of the control	he a last ons.  se include the second factor of the	with with tinucosin hoes tipl	shoese and ruction ise, to do to we shoese ed to be shoese ed	to oth us dant he he has the walk saway
4 D 3 -	SWORN AND SUBSCRIBED BEFOR	FF 7	١¬ ،					_					
1	RADFORD, ST		THOMAS		_	SIGNATUR	E OF ARRES	STING / INVE	STIGAT	ING OFF	ICER		
N I ST F	NOTARY PUBLIC / OLERK OF			7.10)		W	ILLIAMS	, DAVIC	(8	68)			
	05/23	3/2022		···	_		NAME OF OF						PAGE
	,	ATE			_		05/	23/202	2				2 of 3

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

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1	OBTS Number		] F	PROBABLE CAUSE AFFIL SUPPLEMENT	DAVIT	1. Arrest 2. N.T.A.	3. Request 4. Reques			JUVE	NILE
	Agency ORI Number	Agency Name			h	port Number				1	
M	FL FL0500200			LICE DEPARTMENT	3.	2 2022 Special N		45	·		
7 6	Charge Type:		fisdemeanor raffic Misdemeanor	5. Ordinance 6. Other							
D	Name (Last, First, Middle)			Alias			Race	Sex	Date of Bir		
F	DE BARROS, LIENE TA	WARES	JR				W	M	06/0	<u> </u>	
	Officer Madotta.  Rogers was transposobservation and operwere (.175,.169)	erated	the Intox	tilyzer. Reference	Intoxil	Rua cor yzer 80	iducte )00 si	ed t #80-	h <b>e</b> 20 00662	-minuto 2 resu	e lts
PROBABLE CAUSE STATEMENT	De Barros was trans	sported	i to Palm	Beach County Jail							
Â	SWORN AND SUBSCRIBE	EME	<del> </del>								
ADM I NISTRATIVE		$\sim$ /:	771		SIGNATURE OF AF	DESTINO / IN	VESTICAT	ING OF	EICED	<del></del>	
N I S	RADFORD, ST NOTARY PUBLIC / CLERK OF								FILEK		
R	05/2	3/2022	,		WILLIA NAME OF	MS, DAV	LD (	3 <b>68)</b> NT)			
Ť	<u> </u>	DATE	·····			5/23/20					PAGE
Ę						DATE					3 of 3

COURT STATE ATTORNEY

**CENTRAL RECORDS** 

JAIL

**CRIME ANALYSIS** 

P. I. O.

2022 -006745 Airest: 0243 observation: 0253

### DUI INFLUENCE REPORT



BOCA RATON POLICE SERVICES DEPARTMENT 100 NW 2<sup>nd</sup> Avenue Boca Raton, FL 33432



# BOCA RATON POLICE SERVICES DEPARTMENT DUI INFLUENCE REPORT - PART I

On the 23 day of May	, at <u>02は3</u> AM/PM:
Subject: De Barros, Liene	, at <u>0243</u> AM/PM: Case Number: <u>2022-6745</u>
	RSONAL CONTACT
Driving Pattern:	
<b>\</b>	
	See P/C
	- See (16
(2)	
Observation of Driver:	
	W.)
	<u> </u>
	/
Driver's Statement:	
AY	
Odors:	
040101	
G772	TO A CONCENSION OF THE PROPERTY OF THE PROPERT
GEN	IERAL OBSERVATIONS
Speech:	
Speech:	
Attitude:	
Clothing:	
Modical Problems:	
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:	
	See Plan
Can not do, Why?	
One leg stand:	
Can not do, Why?	
Finger to nose:	
30	
Can not do, Why?	
Alphabet (speech pattern):	
Can not do, Why?	
Breath/Blood test results: 175 /	1.169
State of Florida, County of Palm Beach, Sworn and subscribed before me this	3/20 (date) by Of (v, cions D 86)
Q -	5/23/22
Notary/Clerk of Court/ Officer (FSS 117.10)	Date
	Willows David
Signature of Arresting Officer	Name of Officer (print)

Page 2 PART ONE

_		-1234 Work#
-	•	n, FL 3743L
an testify to: Breath	Ted	
ame:	Phone #	Work #
ddress:		
an testify to:		- 0
ame:	Phone #	Work #
.ddress:		<u> </u>
an testify to:		<u></u>
•		3371 Ш
Name:	Phone #	Work #
Address:		
Can testify to:		
Jame:	Phone #	Work #
Address:		
Can testify to:		
		Work #
Address:		
Can testify to:		



## BOCA RATON POLICE SERVICES DEPARTMENT DUI INFLUENCE REPORT – PART II

To be filled out at testing facility

Agency Case # 2022-066745 (Instrument Operator faces video camera) L INTRODUCTION A. The day is \_ AM/PM. C. The following is in reference to case number 22-6745 D. Present at this time is OFC Uillians of the Boca Raton Police Department. (Officer's Name) E. Officer have you arrested Lience De Sallos in violation of Florida State Statute 316.193? (Defendant's name) Florida State Statute 316.193? F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida? \_\_\_\_, I am required to inform you these proceedings are being video recorded. Video record breath request, breath sample, and interview. Operator Note:

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

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./Mrs./Ms has refused to submit to a breath test.  The date is,, and the time isAM/PM.		
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	Note:	Read only the paragraph applicable to the type of test you are requesting.
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	(A)	I am now requesting that you submit to a lawful test of your <b>BREATH</b> for the purpose of determining its alcohol content.
IMPLIED CONSENT WARNINGS  Note: Read only if the subject does not comply with your request.  I am	В.	I am now requesting that you submit to a lawful test of your <u>URINE</u> for the purpose of determining the presence of chemical or controlled substances.
I am	C.	I am now requesting that you submit to a lawful test of your <b>BLOOD</b> for the purpose of determining its alcohol content and the presence of chemical or controlled substances.
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:  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/Mrs/Ms. has refused to submit to a breath test.  The date is, and the time isAM/PM.	,	IMPLIED CONSENT WARNINGS
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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/Mrs/Ms has refused to submit to a breath test.  The date is,,, and the time isAM/PM.		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
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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./Mrs./Ms has refused to submit to a breath test.  The date is,, and the time isAM/PM.	Note:	Also read for CDL holders:
(IF REFUSAL THEN)  At this time Mr/Mrs/Ms has refused to submit to a breath test.  The date is,, and the time isAM/PM.		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.
At this time Mr/Mrs/Ms has refused to submit to a breath test.  The date is,, and the time isAM/PM.	Note.	After reading the implied consent warning, the arresting officer must request a breath sample again.
The date is,, and the time isAM/PM.		(IF REFUSAL THEN)
		At this time Mr/Mrs/Ms has refused to submit to a breath test.
(month) (day) (year)		The date is,, and the time isAM/PM.  (month) (day) (year)

Page 5 PART TWO

A refusal form will be completed by the arresting officer.



### BOCA RATON POLICE SERVICES DEPARTMENT INVENILE 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:	<del>\</del>



# BOCA RATON POLICE SERVICES DEPARTMENT TESTING FACILITY TASK REPORT

SUBJECT: De Barros, Liene
CASE #: 22-6745 DATE: 5/23/22
BREATH TEST RESULTS
1) TIME . 175 9+ 0342 AMPM 2) TIME . 169 9+ 0327 AMPM
3) TIME AM/PM 4) TIME AM/PM
BREATH OPERATOR: B- DC La Ray
MAINTENANCE TECHNICIAN: 5. Un CAMP
TESTING OFFICER'S OBSERVATIONS
SPEECH: Stur
ATTITUDE: CALM
CLOTHING: Black Shirt: Blue Jens,
MEDICAL CONDITION: 1 UA
OTHER: Blastshot eyes, oder of alcohol
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?

QUES	STIONS AND ANSWERS
Were you operating a motor vehicle at the	time of the accident/stop?
Where were you going?	<u> </u>
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?	
What is today's date?	\
When did you last eat?	What did you eat?
	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?
	AM/PM When did you stop drinking?AM/PM

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PART TWO

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?	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 t	today?
What?	When?
Have you seen a doctor or dentist today? Yes	s No Who?
Are you taking any prescription medications?	Yes No What? When?
Do you have: Epilepsy? Tyes No	Inner ear trouble?  Yes  No
Glass eye?  Yes No	Ear infection? Yes No
False teeth? Yes No	Voiabetes? ☐ Yes ☐ No
Any problems not correctable by glasses or cont	tact lenses?
Do you take insulin? Yes No If yes	s, when was your last injection?
Have you ever had a driver's license in any other	er state?
I am now ending this video recording. The time	e is now approximatelyAM/PM.
The date is(month)	

## 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: 05/23/2022

Date of Last Agency Inspection: 05/18/2022

Observation Period Began: 02:53 Subject's Name: LIENE T DE BARROS

DOB: 06/05/1985 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	03:22	
	Air Blank	0.000	03:23	A
	Control Test	0.079	03:23	
	Air Blank	0.000	03:23	
	Subject Sample #1	0.175	03:24	
	Air Blank	0.000	03:25	
	Air Blank	0.000	03:27	
	Subject Sample #2	0.169	03:27	7
	Air Blank	0.000	03:28	
	Control Test	0.079	03:28	
	Air Blank	0.000	03:29	
	Diagnostics Check		03:29	

Cylinder Lot: 15421080A1 Exp: 08/05/2023 State of Florida, County of Dim Beach Personally appeared before me the undersigned authority, who ( $\underline{V}$ ) is personally known to me or ( ) produced as identification, and who after being placed under oath, states: \_\_\_\_\_, hold a valid Breath Test Operator permit issued by the Florida I BRYAN A DS LA RUA 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: affirmed) before me this  $\frac{23}{2}$  day of  $\frac{40}{2}$ 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.

User: BDELARUA

#### **BOCA RATON POLICE DEPARTMENT**

05/23/2022 03:36

#### Name: DE BARROS, LIENE TAVARES JR

Name: LIENE TAVARES DE BARROS JR

Home Phone:

Work:

Cell #:857-318-2914

Alias:

Attach Photo Here

DOB: 06/05/1985

Age: 36

Race: W

Sex: Male

Height: 5'09 Wgt: 168 Hair: BLA

Eye: BRO

POB: BRAZIL

SSN #:

Name #: 1341950

DL/ State: Y6853793

Eth:

Skin:

Local #:

State Id:

Cautions:

FBI #:

NCIC:

Henry 1:

Henry 2:

Address History:

137 PLEASANT ST 2 WOBURN MA 01801

Employment History:

CONSTRUCTION

SMT:

TATT R ARM / CHINESE

Physical Char:

Comments: