22CT20026VB

ARREST / NOTICE TO APPEAR

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

ADMINISTRATION

OBTS Number

Agency ORI Number: 0501700 | Agency Name: Jupiter Police Department | Agency Report Number (N.T.A.'s only): 5 | 4 | 22-004525

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): 2902 N BISMARK LN JUPITER FL 33458 | Location of Offense (Business Name, Address): 2902 N BISMARK LN, JUPITER, FL 33458

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
11/30/2022	23:34	11/30/2022	23:44	/ / : :		

DEFENDANT

Name (Last, First, Middle): LEE, RYAN ELIZABETH | Alias: | 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	04/17/1999	5'05	138	BROWN	BROWN	LIGHT	SMALL

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) | Marital Status | Religion: UNKNOWN | Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 749 SE AUTUMN TER, PORT ST LUCIE, FL 34983 | Phone: (270) 519-8815 | Residence Type: 1. City 2. County 3. Florida 4. Out of State

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 749 SE AUTUMN TER, PORT ST LUCIE, FL 34983 | Phone: (270) 519-8815 | Address Source

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

DL Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
L000725996370 / FL	[redacted]		PADUCAH, KY, United	US

CO-DEF

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

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

JUVENILE

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

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

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

CODE

Drug Activity: N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Disperses/ 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 (1)

Charge Description	Statute Violation Number	Violation of ORD #
DUI - BREATH .08 OR ABOVE	316.193(1)(C)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE

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

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant | Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health | PROPERTY - Received By | Released By | Released To

Transported By | Date Transported | Time Transported | Other

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): North County PALM BEACH GARD
Court Date and Time: 01/04/2023 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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian) | Date Signed

No Photo Available

ADMIN

HOLD for Other Agency
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Intake Deputy | I.D. # | Pouch #

Signature of Arresting Officer: 1240
Name of Arresting Officer (Print): PICARD, RONNIE | I.D. #: 1240
Transporting Officer: PICARD | I.D. #: 1240 | Agency: JUPITE

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X".

PAGE 1 OF 1

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05 36354

3608

PROBABLE CAUSE AFFIDAVIT

OBTS Number:

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

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FL 0501700	JUPITTER POLICE DEPARTMENT	5 4 22-004525

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

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
LEE, RYAN ELIZABETH		W	F	04/17/1999

CHARGES

Charge Description	Charge Description
316.193(1)(C) DUI - BREATH .08 OR ABOVE	
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 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.

☒ confessed to MYSELF admitting to the below facts.

☒ was observed by WITNESS DISPATCH who told that he/she saw the arrested person committ the below acts.

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

On the 1 day of December, 2022 at 01:37 (Specifically include facts constituting cause for arrest.)

At approximately 23:03 hours on 11/30/2022, Dispatch transmitted a reckless driver BOLO over the radio. The BOLO was for a yellow jeep with a black soft top. The caller advised dispatch that the yellow jeep tried to run the caller off the road while on Interstate 95 and kept swerving. The caller stated the yellow jeep was driving eastbound on Indiantown Road and then turned southbound on Central Blvd.

I located a yellow jeep traveling southbound on Central Blvd approaching Dakota Dr in the Town of Jupiter, Palm Beach County, FL. While I was traveling behind the aforementioned vehicle in my marked Jupiter Police Department patrol vehicle (vehicle 1408), I observed the vehicle having difficulty maintaining a single lane. The vehicle drifted from the outside lane to the inside lane approximately 3 times before turning westbound on Dakota Dr. The vehicle then turned northbound on N Bismark Ln, failed to stop at the stop sign at N Williston Dr, and then turned back on N Bismark Ln facing southbound. At approximately 23:09 hours I activated my lights and siren and initiated a traffic stop on the yellow jeep bearing TN tag 60TT52.

The vehicle stopped, then began to reverse, I activated my vehicle`s horn and siren again in an attempt to get the vehicle to stop reversing. The vehicle did not stop and I had to reverse my patrol vehicle to avoid a traffic crash. The vehicle was backing into a parallel parking spot next to 2902 N Bismark Ln. I exited my patrol vehicle and told the driver to stop moving her vehicle. The driver, later found to be the offender, Ryan Elizabeth Lee; W/F; 04/17/1999, was confused as to why I was stopping her and when I approached the driver`s side door I could smell an odor of an unknown alcoholic beverage coming from the vehicle. I asked Lee to provide me with her driver`s license, registration, and insurance. Lee handed me her driver`s license but had difficulty finding her registration and insurance. Lee asked if she could exit her vehicle to go to the passenger side and look for the documents. I told Lee she could exit her vehicle and when she walked to the passenger side she stumbled. While Lee looked for her

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)

12-01-22
DATE

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # GG 972080
My Comm. Expires Jun 25, 2024
Bonded through National Notary Assn.

1240
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

PICARD, RONNIE (1240)
NAME OF OFFICER (PLEASE PRINT)

12/01/2022
DATE

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

ADMIN

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	Agency Name	Agency Report Number
FL 0501700	JUPITER POLICE DEPARTMENT	5 | 4 | 22-004525

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☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
LEE, RYAN ELIZABETH		W	F	04/17/1999

PROBABLE CAUSE STATEMENT

documents and spoke to officers on scene it was at this time I could smell the odor of an unknown alcoholic beverage coming from Lee`s breath. I asked Lee if she had been drinking tonight to which she responded she had 1 drink.

Based on my observations, I asked Lee if she could perform Standardized Field Sobriety Tasks, Lee consented to perform the tasks.

As a result of the Standardized Field Sobriety Tasks, Lee gave me clues that indicated impairment (see DUI probable cause affidavit).

I placed Lee under arrest, I placed handcuffs on her and I placed her in the back right seat of my patrol vehicle.

I transported Lee to the Palm Beach County Breath Alcohol Testing Facility where I conducted a 20 minute observation period to ensure Lee did not ingest or regurgitate anything. At the conclusion of the observation period, I requested Lee provide a lawful sample of her breath for the purpose of determining the alcohol content. Lee consented and provided two, adequate breath samples of .128, and .122 both well over the legal, per se, limit of .08. The results of the breath were stated to Lee and she said she understood the test results.

As a result of the above investigation, Lee was charged with driving under the influence pursuant to Florida State Statute 316.193 (1)(C).

Lee was booked into the Palm Beach County Jail without incident.

My department-issued Axon BWC was activated during the above investigation.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)

12-01-22
DATE

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # GG 972080
My Comm. Expires Jun 25, 2024
Bonded through National Notary Assn.

1240
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

PICARD, RONNIE (1240)
NAME OF OFFICER (PLEASE PRINT)

12/01/2022
DATE

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

TESTING FACILITY TASK REPORT

AGENCY: JPD OFC. PICARD #1240

SUBJECT: LEE, RYAN E.

CASE NUMBER: 22-134785

DATE: 12-01-22

VIDEO DVD NUMBER:

BEGINNING TIME: 00:32 HRS

ENDING TIME: 00:49 HRS

BREATH TESTS RESULTS: 1) .122 TIME 00:38 A.M. ☒ P.M. ☐ 2) .128 TIME 00:41 A.M. ☒ P.M. ☐

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

BREATH OPERATOR: S.O'NEAL #6212

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SOFT SPOKEN, SLUR

ATTITUDE: EMOTIONAL, CRYING, COOPERATIVE

CLOTHING: SWEATER- TAN & WHITE FLOWER PATTERN DRESS- MULIT. COLORED/PRINT

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: VERY RED, WATERY FROM CRYING
ODOR OF UNKNOWN ALCOHOLIC BEVERAGE.

COMMENTS:

20 MIN. OBSERVATION DONE BY A/O PICARD #1240
A/O REQUESTED THE BREATH TEST.
D SUBMITTED TO THE REQUEST.
D COMPLETED THE TEST CORRECTLY.
C/W READ ON CAMERA.
EXPLAINED THE BREATH RESULTS TO THE D.
Q&A CONDUCTED.

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SUBJECT: [illegible] 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 [illegible] of the [illegible]

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) [illegible]

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WHITE: STATE ATTY. YELLOW: DHSMV PINK: CENTRAL RECORDS GOLD: JAIL

SUBJECT: Lee, Tyron 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? YES

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: _____

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WITNESS LIST

CASE NUMBER: 22-004525

ARRESTING OFFICER: R. Picard

ADDRESS: 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME): _____ (WORK) (561) 746-6201

CAN TESTIFY TO: PC

NAME: Katie

ADDRESS: _____

PHONE NUMBERS (HOME) 561-427-4524 (WORK) _____

CAN TESTIFY TO: Caller to Dispatch

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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

PBSO CASE # 22-134785 PBSO ZONE 3-14

AGENCY CASE # 22-004525 CRASH CASE #

TIME OF STOP/CRASH 23:09 DATE 11/30/2022 DAY Wednesday

SUBJECT'S NAME Lee (LAST) Ryan (FIRST) Elizabeth (MID) RACE W SEX F

HGT 5'5 WGT 138 lbs DOB 04/17/1999

LOCATION 2902 N Bismark Ln

ARRESTING OFFICER'S NAME & ID R. Picard 1240 AGENCY Jupiter

DIVISION:

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 00:10

ARREST TIME 23:34

BREATH RESULTS:

1)	.122
2)	.128
3)	
4)	

TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # /

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006238 Software: 8100.27
Date of Test: 12/01/2022

Date of Last Agency Inspection: 11/18/2022
Observation Period Began: 00:10
Subject's Name: RYAN E LEE DOB: 04/17/1999 Sex: F

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	00:36
Air Blank	0.000	00:37
Control Test	0.079	00:37
Air Blank	0.000	00:37
Subject Sample #1	0.122	00:38
Air Blank	0.000	00:39
Air Blank	0.000	00:41
Subject Sample #2	0.128	00:41
Air Blank	0.000	00:42
Control Test	0.079	00:42
Air Blank	0.000	00:43
Diagnostics Check	OK	00:43

Cylinder Lot: 29821080A4
Exp: 12/05/2023

State of Florida, County of Palm 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 SHARI L O'NEAL, 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: S. O'Neal Date: 12-01-22
Signature

Sworn to (or affirmed) before me this 01 day of December, 2022

_____ Ofc. Picard #1240
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.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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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.	
	☐	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:	

NOT A CERTIFIED COPY

REVIEW COMPLETED BY

Booking Number: 2022030950	**Date:** 12/01/2022
	Specialist Name/ID: T.Howard/7185