US3303) 22

22 CT 11516MB

1218

	OBTS Number ARREST / NOTICE TO APPEAR Juvenile Referral Report			1. An 2. N.		3. Request for 4. Request for		1	Juvenije	N			
TIVE		BEACH COUN	TY SHE	RIFF'S	OFFIC	E ^	gency Repo 06- 22	208800)1	onity)			
ADMINISTRATIVE	ChargeType: 1. Felony as apply. 2. Traffic Felony 🔀	Misdemeanor Traffic Misdem	eanor [5. Ord 6. Ott		4 Offinada	Weapor	Seized / T 1. Yes 2. No			Multiple Clearance Indicator		
AD M	Big Blue Trace and South Shore B	Blvd Wellingt	on FL 3	3414	Big Blue	Trace a	nd South S	Shore Bly	vd Welli	ngton FL	33414		
	Dete of Arrest Time of Arrest 97/15/2022 9240	Booking Date	Booking 1	Time J	sii Date	Jai	l Time	Location	of Vehicle				
	Name (Last, First, Middle) Vittimberga	Ryan		J			Alias (Na		Etc.)				
	Race W - White I - American Indian B - Black 0- Oriental/Asian W - Male	te of Birth 05	/16/1999	Height	5'09	Veight		Cellor OWN	Heir Color BROW	N LIG		Build SMAL	L
	Scars, Marks, Tatoos, Unique Physical Features (Location	, Type, Description)		L	<u>-</u>		tal Status Igle	Religion		ndication of: Alcohol Influence Drug Influence	co []	Ö	Unk.
ANT	Local Address (Street, Apt. Number) 12156 LONGWOOD GREEN DR.	(City) WELLING	(Sta		(Zip)		Phone	09593	R 1.	esidence Type City County		i State	12
DEFEN	Permanent Address (Street, Apt. Number)	(City)	(Sta		(Zip)		Phone			ddress Source		State	
	Business Address (Name, Street)	(City)	(Sta	ate)	(Zlp)		Phone		/	ccupation NVESTMI	FNT AN	IAI IST	
	D/L Number, State V351730991760				INS No	mber	<u></u>		Place of Birth	(City, State)	EIVI AL	Citizenshi	iP .
<u>.</u>	Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of B		U 1. An	ested	[] 3. Fe	USA lony sdemeanor	
CO-DE	Co-Defendant Name (Last, First, Middle)		·· ···· -		Race	Sex	Date of B	rth	2.At		☐ 3. Fe	iony	
\vdash	☐ Parent ☐ Legal Custodian					/)	□ 2.At		☐ 5. Ju sidence P	sdemeanor venile none	
	Legal Custodian Other: Address (Street, Apt. Number)		City)	-/	/	(51	ate)		Zip)	(Bu) siness Pho	ne	
	Notified by: (Name)		De	10	Time		Juvenile C	Disposition d/ processe		(
ENILE	Released To: (Name)	(Setion this			Dept. a	nd Release	ed Witchin ed.	2. TOT HRS 3. Incarcers		Time	1
ş	·	r I defendant's par			~	s told	I School	Attended				Grade	
	The above address provided by Udefendant and / oto keep the Juvenile Court Clerk (Phone 355-2526) inf Uyes, by: (Name) Property Crime? Description of Property	ormed of any char	nge of addr	ess .	/			of Property					
	Yes No			015								- ON (-	
CODE	N. N/A B. Buy D. Deliver Di P. Possess T. Traffic E. Use	stribute Proc	ufacture/ 2 Juce/ ivate		Drug Type N. N/A A. Amphel	amine	B. Barbitura C. Cocaine E. Heroin	M	. Hallucinoge . Marijuana . Opium/Deriv	n P.Pa Eq . S.Sy	raphemalic uipment nthetics	Z. Ot	
RGE	Charge Description DUI	1	Vic	mestic plence Y N	Statute Vi 316.193	(1A)		<u></u>			Viola	tion of ORD)#
S. E.	Drug Activity Drug Type Amount / Unit N N	Offense # 22088001			Werrant I	Capias Ni	mper			_	Bond		
3GE	Charge Description		Vi	omestic olence Y	Statute Vi	olation Ni	umber				Viola	ation of OR	D#
CHARGE	Drug Activity Drug Type Amount / Unit	Offense#			Warrant /	Capias N	umber				Bond		
ag GE	Charge Description	C	Vi	omestic olence Y N	Statute Vi	olation N	umber				Viola	tion of ORI	D#
CHARGE	Drug Activity Drug Type Amount I Unit	Offense #			Warrant /	Capias N	mber				Bond		
30	Charge Description	C	V	omestic iolence Y N	Statute Vi	olation N	ımber				Viol	ation of OF	RD#
CHARGE	Drug Activity Drug Type Amount / Unit	Offense #	JFD		Warrant /	Capias N	umber			* ** *	Bond		
5	I neation (Court Doom Number Address)	IUL 16 20	377							•	f	V 1 *	. ,
APPEAR	Court Date and Time Month AUGUST Day 04		ear 2022		Time	0830		ΔA	$_{\star} \times$	P	и		
CE 10	I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATION TO APPEAR BEFORE THE COURT AS REQUIRED	GNATED TO ANSW BY THIS NOTICE T	ER THE OF	FENSE C			Y THE FINE	SUBSCRI COURT A	BED. I UND			ULD I WILI SHALL BE	LFULLY ISSUED
Š	1/1/1/	() Startes						5/2022 Date Si					15
\vdash	HOLD for other Agency	Signature of Arres	ting Officer	>			Name Ve		Printed by Arr	estee)	16 45	*. :.	
ADMIN	Name: Dangerous Resisted Arrest	X Name of Alresting	Officer (Prin	<u>^ 3, 2,</u> n)		I.D. #	(PRINT)	·			<i>"". "</i> "	e∺ 7:3	
Ē	Suicidal Other:	J. Ramifez Transporting Off	icer	ID#		Agency	Water	here if	ject signed w	ith as Y"		PAG	
L	OSTRIBUTION: WHITE - COURT COPY	J. Ramirez GREEN - STATE	ATTORNEY	3753 YE	7 LLOW - AG	PBSO ENCY		AGENCY	<u> </u>	DEFENDANT	(N.T.A.'s (_F 1

OBTS Number PROBABLE CAUSE AFFIDAVIT			FIDAVIT		equest for equest for		1	Juvenile N
NIM	Agency ORI Number Agency Name FLO 500000 PALM BE	ACH COUNTY SHERIFF'S		ency Report Number				
¥	ChargeType: 1. Felony 3	. Misdemeanor 5. C	rdinance other	Special Notes:				
DEF	Name (Last, First, Middle) Vittimberga, Ryan, John		Alies		Race W	Sex M	Date of Birth 5/16/1999	
GES	Charge Description DUI	316.193(1A)	Charge Description	·				
CHAR	Charge Description		Charge Description					
П	Victim's Name (Last, First, Middle) STATE OF FLORIDA, ,				Race /	Sex /	Date of Birth	
CTIM	Local Address (Street, Apt. Number)	(City)	(State) (zip)	Phone ()		Address	Source	
>	Business Address (Name, Street)	(City)	(State) (zip)	Phone (Occupa	tion	
Ħ	The undersigned certifies and swears that he/she has just a The Person taken into custody	and reasonable grounds to believe, and de	oes believe that the at	bove named Defendant			ving violation of lav	v
	committed the below acts in my presence confessed to		she saw the arres	sted person commit t		acts.)	
	admitting to the below facts.		_	ited the below acts,			7	
	On the 15th day of July			Specifically include t	-			
	On July 15th, 2022 at around 01 Big Blue when I head a loud nois							
	observed a gray vehicle that had							
	QIYQ68.							
	I made contact with the driver w	ho was currently sitti	ng in the dr	iver seat of t	he pre	vious	sly mention	ned
	vehicle. He was later identified a							
	license, registration and proof of watery and glossy. Their cheeks							
	movements were slow, calculate		ing man they	, starrow the	. spec	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ino specie	ing.
EN								
ATEM								
PROBABLE CAUSE STATEMENT								
CAU								
3ABLE								
PRO								
	A Y							
۱۱							*	
		-4278C	4					
	STATE OF FLORIDA	- 112100	1					
	COUNTY OF PALM BEACH	D/S G. Concepcion						
\TIVE	(Signature of Arrestine/Investigative Officer) The foregoing instrument was sworn to be attermed and subscri	bed before me this 15 day of July	<i></i>	20 22	by D/S	Conce	pcion # 278	14
IISTR/	(Print name of Arresting/Investigative Officer), who is personally	y known to me and/or produced identification						
ADMINISTRATIVE	D/S Crispin-Fuentes # 26971 Notary Public, Clerk of Court, Officer (F.S.S. 117.10)	3426	3					PAGE
1	. , :, (' '						\	1 of 1

D.U.I. PROBABLE CAUSE AFFIDAVIT

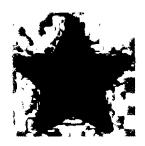
ON THE 15	DAY OF JULY	20 _22 A	T_0154	AM PM	
SUBJECT: Vittimber	ga Ryan	J	CASE N	TUMBER: 22088001	
AGENCY: PALM BEA	ACH COUNTY SHERIFF'S (R: J. Ramirez	
		RSONAL CO			
DRIVING PATTERN:	ACTUAL PHYSICAL CONTROL (PH	YSICAL EVIDENC	E OR STATEMENTS I	UTTING DEF. BEHIND WHEEL OF VEHICLE)	
approaching Big Blu	ue when I head a loud noise ab	ead of him. He	continue to drive	ing eastbound on South Shore Blvd eastbound and shortly after that he was bearing FL tag of QIYQ68.	
was later identified and proof of insurar	as Ryan Vittimberga by his Flo nce. As they retrieved these iter	orida driver lice ms he noticed h	ense. Deputy aske is eyes were red, v	the previously mentioned vehicle. He is him for their license, registration watery and glossy. Their cheeks were ere slow, calculated and lethargic.	
OBSERVATION OF D	DRIVER:	·			
Vittimberga, Ryan eyes were red, wa what happend. Ry him about the silv had used only 20	tery and glossy. his cheeks v yan said he was coming fron er cilinders inside his vehicl	and his shirt were flushed and wome and we le and he said lid the 20 whij	was untuck and nd his speech was as heading to Ta that he had a cappings at around	later identified as Ryan J. wrinkle while talking to Ryan his as slurred and slow. I asked him co Bell for a late snack. I asked se of 24 whippings and that he l 6:00pm that evening 07/14/2022.	
DRIVER'S STATEM Ryan said that he Taco Bell for a lat	used Whip chargers twenty	cylinders at a	approximately 6	00pm. He just wanted to go to	
ODORS:		AL OBSE	RVATIONS		
SPEECH: Slow, S		vo Mood ove	ings Emotion		
ATTITUDE: Calm, Cooperative, Talkative, Mood-swings, Emotional. CLOTHING: Shirt white, blue pants, and, no shoes					
		<u> </u>		·	
<u>IEDICAL/OTHER:</u> b	ipoiar disorder				
ATE OF FLORIDA DUNTY OF PALM BEACH J. Ramirez public of Arresting/investigative Office		day of Jun	ln 2	² by J. Ramirez	
e foregoing instrument was swom to	8	•		Kun	
int name of Arresting/Investinative Officer (F.	Notary Pu K Thomas	Aid office to Josephia ablic State of Florida H Leahey hission GG 347108 6/20/2023	puscation produced		

Notary Public, Clerk of Court, Officer (F.S.S 117.10)

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
Other Observations:	
WALK & TURN:	
that he was to keep his hands at his side and stay in this position until I instruction counting aloud and watching his feet. On the ninth step, he was to keep his fra around before walking nine heel-to-toe steps in the opposite direction countin instructing him on the proper way to complete the task. Ryan starts the exercise before completing my instructions numerous times. I	car with his left foot in front of the right, touching heel to toe. I instructed him cted him to do otherwise. I instructed him to walk nine heel-to-toe steps while out foot on the ground and use his back foot, in a series of small steps, to turn g aloud and watching his feet. I demonstrated the task while I was verbally le used his arms for balance. He took 9 steps up the line and 9 steps back and fail as and could not keep each step in line and numerous times step outside the line.
to lanea, the most strade to may combine the nectorate bet the most serior	is and could not keep each step in the and numerous times step outside the line.
ONE LEG STAND:	
his feet approximately six inches off the ground, point him tow towards me, lool the instructions and demonstration I provided. During the instruction and demostance. While giving the instructions Ryan attempted to start the exercise numer start the task. While raising his foot was not parallel with the ground, he count	rous times. He confirmed he understood the instructions and I instructed him to ed to six then switch his foot and counted to six again. I asked Ryan if he asked Ryan to pay attention to the instructions one more time and not to start until
FINGER TO NOSE:	
lower his arms to his side. I instructed and demonstrated the proper hand and arm position for till his head back and close his eyes while waiting for a verbal command of left or right. On the tip of his nose, then bring the hand immediately back down to his side. During the instruc	nch hand into a fist, extend his index fingers, and place his palms facing up. He was instructed to be him to remain in while I demonstrated the rest of the task. I instructed and demonstrated to him the command of "left" or "right", he would raise the requested hand, touch the tip of his finger to tion and demonstration of the task, he swayed while standing stationary in the instructional stance is I provided and he verbally stated he understood. I instructed him to start the task as explained. tip of his nose, Ryan also hovers numerous times and tilts his head forward.
ROMBERG ALPHABET:	
the English alphabet and I instructed him to place his feet together with his arms at his he was to tilt his head back and close his eyes. Ryan started to sing the alphabet withou	e. I asked if Ryan could recite the entire English alphabet. He stated he was able to recite side and stay in this position until told to do otherwise. I instructed him that upon starting t completing the instructions. I asked him if he understood the instructions and he verbally the instructional stance. I instructed him to start the task as explained. Starting the task, he
BREATH TEST RESULTS: .000 .000	
STATE OF FLORIDA COUNTY OF PALM BEACH	
J. Ramirez (Signature of Arresting/Investigative Officer)	
The foregoing instrument was swom to or amphed and subscribed before me this	
(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification.	ype of identification produced

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



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

PBSO CASE # 220	PBSO	ZONE 8-	12				
AGENCY CASE # _	.			CRASH	CASE #	22087999	1
TIME OF STOP/CF	MASH 0154		DATE	07/15/202	22	DAY	>
SUBJECT'S NAME	Vittimberga	Ryan	J	RACE	White	SEX N	Tale
HGT 5'09	WGT 1		IV.	DOB	05/16/19	99)	
LOCATION Big Blue	Trace and S	South Sho	re Blvd	- Wellington	FL 33414		
ARRESTING OFFICE	R'S NAME &	IDJ. R	amirez	3	7537 A	GENCY PB	SO
DIVISION:	95-3		Á	NOT	IFIED BY	COMMO YES	5
			o` `	ARR	IVAL AT	FACILITÝ	0311
					ARRI	EST TIME	0240
BREATH RESULTS:							
1.000	,						
2,000		/					
3 Urine	RFFII	SFI	1				
4)	VLL					

TESTING OFFICER'S ID 19183 PBSO VIDEOTAPE # WA

WITNESS LIST

CASE NUMBER: 22088001 ARRESTING OFFICER: J. Ramirez ADDRESS: PHONE NUMBERS (HOME): B. Landa _____ (WORK) _____ CAN TESTIFY TO: the interaction with Ryan NAME: D/S Concepcion #27814 ADDRESS: PHONE NUMBERS (HOME) ___ _____ (WORK) <u>561 688 3400</u> CAN TESTIFY TO: initial contact with the defendant NAME: ____ ADDRESS __ PHONE NUMBERS (HOME) _____ (WORK) ____ CAN TESTIFY TO: NAME: _____ ADDRESS ____ PHONE NUMBERS (HOME) 0 (WORK) O CAN TESTIFY TO: NAME: ____ ADDRESS (WORK) _____ PHONE NUMBERS (HOME) CAN TESTIFY TO: NAME: ____ ADDRESS ___ _ (WORK) ____ PHONE NUMBERS (HOME) _____ CAN TESTIFY TO: NAME: _____ ADDRESS ____ (WORK) _____ PHONE NUMBERS (HOME) ____ 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:

STATE OF FLORIDA

AFFIDAVIT OF REFUSAL TO SUBMIT TO

URINE TEST

I, <u>Dep</u>			AMIREZ	, a duly ce	rtified Law Enforcement C	officer or Corr	ectional Officer,
am a member of		eading Implied Consent ch County Sheriffs O					and I do assess
am a memoer or			(Name of enfo	rcement agency)			, and I do swear
or affirm that on o	about the	FIFTEENTH	day of	July	,2022	, at _	2:40 AM
DRIVER	R	YAN		J		VITTIMBE	RGA .
(Type or Print)	FIRS	ST	MID	DLE OR MAIDE	N	LAST	(
DL#	V3517309	91760	, state of	F	L , app	eared for treat	ment at a hospital,
clinic, or other me	dical facility	pursuant to s. 316.193	32(1)(c), Florida	Statutes, and a	breath or urine test was in	possible or in	npractical.
That on or	about the	FIFTEENTH	day of	July	, 2022	, at	3:48 AM
in Palm Beach		County,					
been previous informed the requested abo previously fin	ly fined u driver th ove if his ed under neless, the	nder s. 327.3521 at he or she co or her driving p s. 327.35215, F.: driver refused to	ommits a miprivilege has S., for refusa o submit to t	refusing to s isdemeanor s been prev al to submit he test reque	by refusing to submit to a breath, using to submit to a breath, using to submit to a lawful test of his ested. TTESTED TO (s. 117.1	rine, or bloomit to a or if he or is or her branches or her branches or Conficer or Confic	lawful test as she has been reath, urine, or
		**************************************	I DE NOTAL		·		
The foregoing inst	My Comming Expires 06 (APPLA) urment was s	SEAL) worn and subscribed t	before	The for	Signature of A		
		12 43857	·v <u>·</u> v	Date			
who is personally		or who has produced as identifi	cation.	Daw _	Note: Mail or hand del Bureau of Administrati Department of Highwa Vehicles, with the drive appropriate copy of the cause affidavit.	ve Reviews ly Safety and er's license, f	office, d Motor the

TESTING FACILITY TASK REPORT

AGENCY: PBSO
SUBJECT: Vittimberga, Ryan J CASE NUMBER: 22-088001
DATE: Jul 15, 2022 VIDEO DVD NUMBER: n/a
BEGINNING TIME: 0333 ENDING TIME: 0349
BREATH TESTS RESULTS: 1) .000 TIME 0338 A.M.⊠ P.M. 2) .000 TIME 0341 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, thick
ATTITUDE: talkative, cooperative, fidgety
CLOTHING: blue pants, white I/s shirt, no shoes
MEDICAL CONDITIONS: BiPolar, sleeping
MEDICATIONS: Abilify, Clonapin
OTHER: eyes were glassy
COMMENTS:

arrived at center A/O conducted 20 observation period at 0311 hrs subject agreed to perform breath test

subject completed breath test

tech read breath test results & subject understood I/C

A/O requested urine sample @ 0343

subject refused to provide urine sample @ 0343 - I have the right to refuse and have my license suspended

A/O read I/C 2X & tech explained & subject understood I/C

subject refused to provide urine sample @ 0348 - I would like to consult an attorney

A/O called refusal @ 00348

A/O read rights & subject understood rights

A/O did not attempt Q&A

subject invoked right to counsel

REFUSED

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: 80-006239 Software: 8100.27

Date of Test: 07/15/2022

Date of Last Agency Inspection: 06/03/2022

Observation Period Began: 03:11 Subject's Name: RYAN J VITTIMBERGA

DOB: 05/16/1999 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	03:35
	Air Blank (0.000	03:36
	Control Test (0.080	03:36
	Air Blank (0.000	03:37
	Subject Sample #1 (0.000	03:38
	Air Blank (0.000	03:38
	Air Blank	0.000	03:40
	Subject Sample #2 (0.000	03:41
	Air Blank (0.000	03:41
	Control Test (0.079	03:41
	Air Blank (0.000	03:42
	Diagnostics Check (OK .	03:42

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

State of Florida, County of PalmBlach,

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 THOMAS H LEAHEY , 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 7. (c. 202)

Sworn to (or affirmed) before me this 15 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.

	MPLIED CONSENT FOR DUI IN A MOTOR VEHICLE
_	E: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.
I am no content	w requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol
	OR
	we requesting that you submit to a lawful test of your <i>URINE</i> for the purpose of determining the presence of all or controlled substances.
	NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.
l am	of the
(1) year SUSPE test of y driving refusal to any o	efuse to take the test I have requested of you, your driving privilege will be suspended for a period of one r for a FIRST REFUSAL, or eighteen (18) months if your driving privilege has been PREVIOUSLY ENDED, or if you have been PREVIOUSLY FINED under s. 327.35215, for refusing to submit to a lawful your breath, urine, or blood. Additionally, if you refuse to take the test I have requested of you, and if your privilege has been previously suspended, or if you have been previously fined under s. 327.35215, for a to submit to a lawful test of your breath , urine or blood, you will be committing a misdemeanor, in additional to the test I have requested is admissible into evidence in any criminal proceeding.
	understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO</or></or>
	F THE SUBJECT POSSESSES A COMMERCIAL DRIVER'S LICENSE (CDL), READ THE FOLLOWING,
if you are testing w	e a Commercial Driver License (CDL) holder or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to vill result in the loss of your commercial driving privilege for a period of one year from today. If this is your SECOND AL, you will be permanently disqualified from holding a CDL or operating a CMV.
•	understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO CTS SIGNATURE: (X)</or></or>
SOBJE	
	CONSTITUTIONAL WARNINGS
I AM REC	QUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:
	You have the right to remain silent and not answer any questions.
	Any statement must be freely and voluntarily given.
	You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
	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.
	If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
	I can make no threats or promises to induce you to make a statement. This must be of your own free will.
	Any statement can and will be used against you in a court of law.
	
SUSPE	CT'S SIGNATURE: (X)

WHITE: STATE ATTY.

YELLOW: DHSMV

PINK: CENTRAL RECORDS

GOLD: JAIL

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 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 VOILEVED HAD A DDIVIED'S LICENSE IN ANY OTHER STATE? WHERE?



Palm Beach County Sheriff's Office - Arrests Only

	х	Florida State Statute	Description	Page Number(s)
		119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	_
ions		943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
L/E Exemptions		119.071(4)(c)	Undercover personnel.	
L/E.E.		119.071(2)(f)	Confidential informants (Cls).	
		119.071(2)(e)	Confession.	
ıns		985.04(1)	Juvenile offender records.	
mptio		119.071(h)(i)	Assets of a crime victim.	
Public Info. Exemptions		395.3025(7)(a), 456.057(7)(a)	Medical information.	
olic In		394.4615(7)	Mental health information.	
P.		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.	
	×	(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.	
of 23)		(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
(Rule		(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)				
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es of Judicia				
Florida Rul				
her			Other:	
Other		<i>y</i>	Other:	

REVIEW COMPLETED BY

Booking Number: 2022018138	Date: 07/16/2022
	Specialist Name/ID: C. Smith/39657