0534645 22CT-1574 ANJ 1441

ARREST / NOTICE TO APPEAR

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

ADMINISTRATION

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
0501700	Jupiter Police Department	54 22-003562

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)	Location of Offense (Business Name, Address)
4699 S CENTRAL BLVD/UNIVERSITY BLVD Jupiter FL, 33458	4699 S CENTRAL BLVD/UNIVERSITY BLVD, JUPITER, FL, 33458

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
09/17/2022	00:31	09/17/2022	00:41			

DEFENDANT

Name (Last, First, Middle): ZUCKERBROD, STEPHANIE LAUREN — Alias (Name, DOB, Soc. Sec. #, Etc.): Alias: ZUCKERBROD, STEPHANIE LAUREN

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	09/14/1997	5'02	125	BROWN	BROWN	LIGHT	SMALL

Scars, Marks, Tatoos, 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)	Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State
3000 VIA ROYALE 3001, JUPITER, FL 33458				(561) 713-6946	1

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
3000 VIA ROYALE 3001, JUPITER, FL 33458				(561) 713-6946	

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
Z261792978340 / FL	[redacted]		MANHATTAN, NY,	

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

Charge Description	Statute Violation Number	Violation of ORD #
DUI - NORMAL FACULTIES IMPAIRED	316.193(1)(A)	

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. ☐ Posted Bond ☐ Released to Parent/Guardian ☐ South County Mental Health ☒ T.O.T. County Jail

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: 10/19/2022 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.

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

SEP 18 2022

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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	JUPITER POLICE DEPARTMENT	5 4 22-003562

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
ZUCKERBROD, STEPHANIE LAUREN	ZUCKERBROD, STEPHANIE	W	F	09/14/1997

CHARGES

Charge Description	Charge Description
316.193(1)(A) DUI - NORMAL FACULTIES IMPAIRED	
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 resonable 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 _____ 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 17 day of September, 2022 at 02:17 (Specifically include facts constituting cause for arrest.)

At approximately 00:04 hours on 09/17/2022, I observed a beige SUV bearing Florida tag BPSC46 traveling eastbound on Donald Ross Road in the turn lane to go northbound on South Central Blvd. While the vehicle was in front of me it had the green light to turn left and it took an unusual amount of time to accelerate from its stop and make the turn. The vehicle ultimately made the left-hand turn onto South Central Blvd and while it was traveling it appeared to have extreme difficulty maintaining a single lane. The vehicle drifted over the solid white line into the bicycle lane and traveled approximately 200 feet in the bicycle lane. The vehicle continued northbound on South Central Blvd after the roundabout. The vehicle then drifted several times from the outside northbound lane over the dashed lane divider into the inside lane before correcting its course back to the outside lane. I observed a pattern of weaving within the lane. While I followed, the vehicle continued this driving pattern several different times.

I understand the case law that pertains to weaving within a lane, without affecting other traffic, for distances ranging from one-quarter of a mile to over one mile. I am aware of a case where a traffic stop was found to be justified when the officer observed the defendant`s vehicle weaving within its lane multiple times. I was following the vehicle for approximately half a mile. The driving pattern I observed was between the distance of the aforementioned cases I`m familiar with regarding weaving for a particular distance. Based on my observations I conducted a traffic stop on South Central Blvd and University Blvd. When the vehicle came to a stop the driver, later identified as, Stephanie Lauren Zuckerbrod; W/F; 09/14/1997 (561-713-6946); parked the vehicle slanted approximately halfway in the outside lane and halfway in the bicycle lane, a reasonable person would have pulled completely over to the side of the road.

I then approached the driver`s side window, I introduced myself and asked Zuckerbrod if she was having any medical problems or has diabetes, she stated no and blurted she had

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER

9/17/22
DATE

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

1240
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

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

09/17/2022
DATE

PAGE 1 OF 2

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

SCANNED
SEP 18 2022

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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 | 22-003562

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
ZUCKERBROD, STEPHANIE LAUREN	ZUCKERBROD, STEPHANIE	W	F	09/14/1997

PROBABLE CAUSE STATEMENT

one drink. I asked Zuckerbrod for her driver`s license, insurance, and registration. Zuckerbrod handed me her driver`s license and stated she knew it was expired. I then had to remind Zuckerbrod multiple times I need her other documents I previously asked for. Based on my observations, I asked Zuckerbrod to exit her vehicle.

I then asked Zuckerbrod if she could perform Standardized Field Sobriety Tasks so I know she could safely drive tonight. Zuckerbrod consented to perform the Standardized Field Sobriety Tasks.

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

I placed Zuckerbrod under arrest, I placed handcuffs on her and double-locked them. I then placed Zuckerbrod in the back right seat of my patrol vehicle.

I transported Zuckerbrod to the Palm Beach County Breath Alcohol Testing Facility where I conducted a 20 minute observation period to ensure Zuckerbrod did not ingest or regurgitate anything. At the conclusion of the observation period, I requested Zuckerbrod provide a lawful sample of her breath for the purpose of determining the alcohol content. Zuckerbrod consented and provided two breath samples of .000. Based on the fact that the impairment I observed at roadside being inconsistent with the breath alcohol content, I requested Zuckerbrod provide a lawful sample of her urine for the purpose of detecting the presence of chemical and/or controlled substances. Zuckerbrod agreed and I collected a urine specimen from her at 02:34 hours. I contacted Officer Yochum, a Drug Recognition Expert, who responded and conducted a Drug Influence Evaluation (see report).

As a result of the above investigation, Zuckerbrod was charged for driving under the influence pursuant to Florida State Statute 316.193(1)(A).

The urine sample Zuckerbrod provided was submitted to the Jupiter Police Evidence Department.

The above incident was captured on my department-issued Axon BWC.

NOT A CERTIFIED COPY

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

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

9/17/22
DATE

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

1240
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

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

09/17/2022
DATE

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

SCANNED
SEP 18 2022

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

PBSO CASE # 22-109834 PBSO ZONE 3-14

AGENCY CASE # 22-003562 CRASH CASE #

TIME OF STOP/CRASH 00:04 DATE 09/17/2022 DAY Saturday

SUBJECT'S NAME Zuckerbrod (LAST) Stephanie (FIRST) Lauren (MID) RACE W SEX F

HGT 5'2 WGT 125 DOB 09/14/1997

LOCATION S Central Blvd/ University Blvd

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

DIVISION:

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 01:03

ARREST TIME 00:31

BREATH RESULTS:

1) .000
2) .000
3) N/A
4) N/A

URINE

TESTING OFFICER'S ID 8656 PBSO VIDEOTAPE #

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SCANNED
SEP 18 2022

SUBJECT: Zukerbrod, Stephanie L CASE NUMBER: 22-10542

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 Officer Degid of the Juno Police Department

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) Read on camera

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) Read on camera

SCANNED SEP 18 2022

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

SUBJECT: Zurkowski, Stephanie L CASE NUMBER: 22-00[illegible]

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? Home

WHAT STREET OR HIGHWAY WERE YOU ON? [illegible]

DIRECTION OF TRAVEL? [illegible] WHERE DID YOU START? [illegible]

WHAT TIME DID YOU START? [illegible] WHAT TIME IS IT NOW? 1:15

WHAT IS TODAY'S DATE? 9/16/22 WHAT DAY OF THE WEEK IS IT? Friday

WHAT COUNTY AND CITY ARE YOU IN NOW? Pasco

WHEN DID YOU LAST EAT? [illegible] WHAT DID YOU EAT? [illegible]

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? [illegible]

HOW MUCH DO YOU WEIGH? 175 lbs HAVE YOU BEEN DRINKING? YES WHAT? [illegible]

HOW MUCH? 1 WHERE? [illegible] WITH WHOM? [illegible]

WHEN DID YOU HAVE YOUR FIRST DRINK? [illegible] AND YOUR LAST DRINK? [illegible]

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? [illegible]

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? [illegible] ARE YOU UNDER THE INFLUENCE? [illegible]

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? NO WHAT? _____

ARE YOU SICK OR INJURED? NO WHAT'S WRONG? _____

DO YOU LIMP? NO DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? NO

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? [illegible] WHEN? [illegible]

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? NO WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? YES WHAT? _____ WHEN? [illegible]

DO YOU HAVE:

EPILEPSY?	NO
GLASS EYE?	NO
FALSE TEETH?	NO
EAR INFECTION?	NO
INNER EAR TROUBLE?	NO
DIABETES?	NO

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? NO

SCANNED SEP 18 2022

DO YOU TAKE INSULIN? NO IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? NO WHERE? _____

INTERVIEWER: Cpl. R. Picard #1240

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

PBSO #0129C REV. 9/93

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: 80-006029 Software: 8100.27
Date of Test: 09/17/2022

Date of Last Agency Inspection: 09/16/2022
Observation Period Began: 01:03
Subject's Name: STEPHANIE L ZUCKERBROD DOB: 09/14/1997 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	01:33
Air Blank	0.000	01:33
Control Test	0.080	01:33
Air Blank	0.000	01:34
Subject Sample #1	0.000	01:35
Air Blank	0.000	01:35
Air Blank	0.000	01:37
Subject Sample #2	0.000	01:38
Air Blank	0.000	01:38
Control Test	0.079	01:38
Air Blank	0.000	01:39
Diagnostics Check	OK	01:39

Cylinder Lot: 08622080A1
Exp: 06/05/2024

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 JOSHUA J BELL, 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: _____ Date: 09/17/22
Signature

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

_____ OFC. R. 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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SCANNED SEP 18 2022

PALM BEACH COUNTY
SHERIFF'S OFFICE
RIC L. BRADSHAW, SHERIFF

TOXICOLOGY ANALYSIS REQUEST

This Form Must Be Included With the Property Receipt and Accompany the Evidence Submitted for Toxicology Analysis
PRINT LEGIBLY OR TYPE

Agency: **Jupiter Police Department** Case #: **22-003562**

Officer: **R.Picard** ID#: **1240** Email: **1240@jupiter.fl.us**

Specimen Collected By: **Picard** Date: **09/17/2022** Time: **02:34**

Specimen Collected From: **Stephanie Zuckerbrod** Age: **25** Sex: **F** Hgt: **5'2** Wgt: **125**

Specimen Type: ☐ Blood ☑ Urine ☐ Beverage ☐ Other-Describe

Type of Case: ☐ Traffic Crash ☐ Fatality ☑ DWI/DUI ☐ Other Date: **09/17/2022** Time: **00:04**

Potential Felony? ☐ Yes ☑ No

Was any medication administered by medical personnel prior to sample being drawn: ☐ Yes ☑ No

If yes, name of Medication(s):

Subject Arrested: ☑ **Yes** ☐ **No**

Breath Test Performed? ☑ Yes ☐ No Results: **.000**

Tests requested: ☐ Blood Alcohol ☐ Blood Drug Screen ☑ Urine Drug Screen

NOTE: Blood Alcohol analysis is performed on all DUI blood specimens. Requested Blood Drug Screen may not be performed based on the laboratory protocol. If you have any questions, please contact the Toxicology Unit at 561-688-4814 or toxicologyrequest@pbso.org.

DRE exam performed: ☑ Yes ☐ No DRE Officer: **C. Yochum** Agency: **Jupiter**

DRE Opinion: **CNS Stimulant** DRE Email: **1185@jupiter.fl.us**

Drug History and Signs of Impairment (Please list any drugs, medications, or prescriptions the subject may have taken or were in his/her possession.)

Driving pattern, confusion, and clues from Standardized Field Sobriety Tasks.

SCANNED
SEP 18 2022

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WITNESS LIST

CASE NUMBER: 22-003562

ARRESTING OFFICER: R.Picard

ADDRESS: 196 Military Trl. Jupiter, FL 33458

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

CAN TESTIFY TO: PC

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: _____

NOT A CERTIFIED COPY

SCANNED
SEP 18 2022

TESTING FACILITY TASK REPORT

AGENCY: JPD

SUBJECT: ZUCKERBROD, STEPHANIE LAUREN

CASE NUMBER: 22-109834

DATE: Sep 17, 2022

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0131

ENDING TIME: 0150

BREATH TESTS RESULTS: 1) .000 TIME 0135 A.M. ☒ P.M. ☐ 2) .000 TIME 0138 A.M. ☒ P.M. ☐

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

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: FAST

ATTITUDE: EMOTIONAL, REPETITIVE, COOPERATIVE

CLOTHING: BROWN CROP TOP, BLUE JEANS, NO SHOES

MEDICAL CONDITIONS: NONE

MEDICATIONS: LEXAPRO, ABILIFY, CITALOPRAM, WELBUTRIN

OTHER:

EYES: BLOODSHOT, WATERY

SUBJECT STATED SHE DRANK 1 ALCOHOLIC BEVERAGE WITH DINNER (Q AND A)

COMMENTS:

A/O ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0104 HOURS

SUBJECT STATED SHE WOULD TAKE BREATH TEST

TECH READ BREATH TEST RESULTS
SUBJECT STATED SHE UNDERSTOOD BREATH TEST RESULTS

A/O REQUESTED A URINE SAMPLE / SUBJECT STATED SHE WOULD PROVIDE A URINE SAMPLE

A/O READ I.C / SUBJECT STATED SHE UNDERSTOOD I.C

A/O READ RIGHTS / SUBJECT STATED SHE UNDERSTOOD HER RIGHTS

A/O CONDUCTED Q AND A / SUBJECT ANSWERED Q AND A

SUBJECT PROVIDED A URINE SAMPLE AT 0234 HOURS

D.R.E. EVALUATION DONE BY OFC. C. YOCHUM JPD

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SCANNED
SEP 18 2022

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:	

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REVIEW COMPLETED BY

Booking Number: 2022024392	**Date:** 9/17/2022
	Specialist Name/ID: Pinkneya/7796

SCANNED
SEP 18