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Company Comp	A D M	OBTS Number					AR	REST/N	OTI	CE TO	APPE	EAR			ucst for War		1	JUVENILE /	V
Comparison 1 Pales 2 Pales	M I N	Agency ORI Nu			1		a Danaetm	ant				_ T_		Number (N.T.A.'s only)		/	JJ.	<u>.</u>	_
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Down of Animal	RA	Location of Arre	st (Including Nar	nc of Business)			- Arcanica							iress)			n 11/01	100000	_
HUFFMAN, TOTAI MARE	0	Date of Arrest		Time of A	rrest B			Booking T	Time			IVIER) I/LU				o, Juri	IEK, FL	_
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Section Continue		Race								Weight	E	-						Baild An 4 11	_
	D	B - Black C	- Oriental/Asian				7/1971	5'03		120	A					Indication	of:	R n	
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Description		H15	5813716		Soc. Se	c. Number		INS Number			· · · · ·	COVI	NGT		US			<u></u>	_
Comparison Date Description D	1 -	Co-Defendant N	ime (Last, First. !	Middle)						Race	Sex								k
Comment Comm		Co-Defendant N	ame (Last, First.)	Middle)						Race	Sex	Date of i	Birth						le
Name (Jeeps) Date Town Date	7	Parceri Local Custo	Other:				Name (Last.	First Viiddle)									Residence Ph	one	
Address for five five Does	V					1.	Cipr		(Star	(e)	(Z	ip)					Business Pho	ne	
Readout Fig. Plane Doe	N I L	Notified by: (Na	ime)	······································		-(*-		0		Date	7	7	ime	1. Handled/Pr	occased wit				_
The child and/or parent was told to keep the Juvenile Court-Ciffer's Office (Phone 35-52-26) informed of any change of address. Property Stime? Description of Property Value of Value Va	E	Roleased To: (N	ame)				Relationship	女人		Date		ī	ime	Debattmen	and Keles	204	3. Incarcina		_
Cheer Dress Property Clined Property Descriptions of Property St. 000		The above	address wa	s provided by	y de	fendant a	end/or de	elendant's	paren	ls.		School	oi Atlendo	- 				Grade	_
Dig Activity S. Self R. Songalis K. Digercond District		(Phone 35	5-2526) inf	formed of any	change o	f address	Competences	Office	Á		·/							1	
P. P. Nomes T. Titoffic E. Use Column		Drug Activity		R. Sanuggic	K. Dis	perses/		Z. Other		Drug	Туре	B. Bar	biturate	H. Hallucinogen				nown	U
Dig Activity Drog Type Associat Unit Offence # County Domestic Violence Warrant / Capian Number Bood	D	P. Possess	T. Traffic		Dia	iribute		0						O. Oplum/Deriv.	S. Syn	ulpment thetic			_
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Health / Apparent Physical Condition of Defendant	R G	Drug Activity	Drug Type	Amount / Unit		Offense #		Counts D			Warrant /	Capias Numb	CT				Bond		_
Check which applies: Released O.R. Released To Protect Bond South County Mental Health T.O.T. County Jail PROPERTY - Received By Released To	Ī	Health / Apparez	t Physical Condit	ion of Defendant		/			<u> </u>		-	viedge of the fe	ollowing:	☐ Montal ☐ E	cape Risk	☐ Medi	ication D	Deformities Injurie	=
Transported By Dake Transported Time Transported Time Transported Coher	I.	Check which app						T. County Jail	PRO				Rele	ased By		Rele	ased To		
INSTRUCTION NO. 1 - Mandatory appearance in Court North County PALM BEACH GARD	E	Transported By		L Book Dole	South Cou	nty Mental Hea	ith		Date	Transported	, T	ime Transporte	ed Othe						_
but must comply with instructions on Page 2. Court Date and Time 08/31/2022 08:30:00 1 AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD 1 WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN COMTEMPT OF COURT AND AWARRANT AVAILable 1 WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN COMTEMPT OF COURT AND AWARRANT AVAILable 1 Object	2 2	INSTR	UCTION	NO. 1 - Mano	iatory ap	earance i	n court		1		_			44 M DE 4614			62		_
A A RATE 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 AWARRANT FOR MY ARREST SHALL BE ISSUED. HOLD for Other Agency	Ť	□ INSTE	RUCTION					Page 2	ŀ		d Time				GAKE f		13		
A FOR MY ARREST SHALL BE ISSUED. A Signature of Defendant (or Invenile and Parent/Custodian) Date Signed Dat	r	I AGREE TO	APPEAR AT	THE TIME AND	PLACE DE	SIGNATED	TO ANSWER TH	IE OFFENSE	CHAR	GED OR TO	PAY 1	THE FINE S	UBSCR	BED. I UNDERSTA	: AHT CIVI	T SHOU	LD		
HOLD for Other Agency Signature of Arresting Officer Name Verification (Printed by Arrestee)	1 1				THE COUR	T AS REQU	IRED BY THIS N	NOTICE TO A	APPEAF	that I	MAY BE	HELD IN	COMTE	MPT OF COURT AN	D A WA	RRANT		for all the	
HOLD for Other Agency Signature of Arresting Officer Name Verification (Printed by Arrestee)	P E A				* *									D	9		_		
Dangerous Resisted Arrest Name of Arresting Officer (Print) 1.D.# (PRINT)	H	HOLD for Other	Agency	Signature of De	rendant (or	nivenile and			2	1					rrestec)				_
Intake Deputy I.D. # Pouch # NOBLE, RILEY 1226 Intake Deputy I.D. # Agency I.D. # Agency I.D. # Agency I.D. # Transporting Officer I.D. # Transport	Å M	☐ Dan	gerous	Resisted Arm	est		Name of Arresting	Officer (Print)	V	<u>V</u>	·	1.D. #	(PRI	NT)	J.A	_ (*)	er g is	- Val	
Witness here if subject signed with an "X".	N	☐ Suik	_	Other .		h #			•	<u>1.D</u> . (Agency			r		=		1
COANNED	Ц	Uun	15 CE	N				Kile	. \	124	. لو	TPO	Witne	ss here if subject signed w		.	LILII		_

A	OBTS Number	P	ROBABLE CAU	SE AFFIDAVIT	1. Arrest 2. N.T.A.	3. Request 4. Request	for Warran for Capias		JUVENILE
D M	Agency ORI Number Agency Nam FL 0501700 JUPI	TER POLICE I	NEDARTMEN		y Report Number	12021	,		•
N	Charge Type: 1 Felony 3	Misdemeanor	5. Ordinance	1 13	4 22-00 Special No				
Ц	Check as many as apply. 2. Traffic Felony 4. Name (Last, First, Middle)	Traffic Misdemeanor	6. Other					Date of Birth	
DEF	HUFFMAN, TONI MARIE		ARIS			Race	Sex F		7/1971
UΞ	Charge Description			Charge Description					
AR GE	316.193(3)(C)(1) DUI - DAMAGE TO Charge Description	PERSON/PROF	PERTY	843.02 RESIST/OI Charge Description	BSTRUCT OF	FICER	W/O V	IOLENC	E
S									_
٧	Victim's Name (Last, First, Middle) State Of Florida					Race	Sex	Date of Birth	
C		ity)	(State)	(Zip)	Phone		Addi	ress Source	
*	Business Address (Name, Street) (C	ity)	(Slate)	(Zip)	Phone		Occ	upation	
	The undersigned certifies and swears that he/she had the Person taken into custody	e	□ was for at	observed by ound to have committed the (Specifically include face	that he/she same below acts, rests constituting care	w the arresulting frouse for a	ested pe om my (rrest.)	erson com described	who told mitt the below acts. i investigation.
PROBABLE CAUSE STATEMENT	On Friday July 29th, 2022 at approximately 2327 hours. I was dispatched to the area of Center Street/Loxahatchee River Road in reference to a single vehicle crash that struck a bridge wall. 3 Upon arrival, I made contact with PFC. Albano who was standing next to a black mustang bearing FL (Tag#QPPX46), and the driver/registered owner, Toni Huffman (W/F 04/27/1971). PFC. Albano advised that when he arrived on-scene, Huffman was still in the driver seat and was stumbling getting out. I spoke with Huffman who was sitting on the curb and asked her what happened. While speaking with Huffman, the strong odor of an unknown alcoholic beverage emanated from her breath that intensified as she spoke and her eyes were blood-shot/glassy. I also observed that Huffman had urinated all over herself while speaking with her. Ofc. Fandrey arrived on-scene and conducted a crash investigation finding Huffman at fault for the aforementioned crash and issued her a citation for careless driving. I advised Huffman that the crash investigation had concluded and I was going to be conducting a criminal DUI investigation. I read Huffman her Miranda Warnings from a pre-printed card to which she stated she understood. Before I began, I asked Huffman on a scale of 1-10, I being completely sober with nothing to drink, and 10 being completely "blacked out" drunk where she would place herself. She advised she would put herself at						struck ustang 7/1971). er seat and own r eyes lf while tion for be m a fman on mpletely self at ong odor ed her d have		
ADM-N-STRAT->	SWORN AND SUBSCRIBED BEFORE ME ON CHARACTER OF COURT OF THE TOTAL COU	FICED (F.S.S. 117.10)		NOBL NAME (ARRESTING / INVE	(1226 ASE PRIN	i)	CER	PAGE 1 OF 2
E					DATE	- 3		4141,	<u> にリナ。~</u>

JAIL

A	OBTS Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1.7.1.7001 0.110					
D	Agency ORI Number A	ency Name	Agency Report Number	Vurnber				
M		UPITER POLICE DEPARTMENT	5 4 22-0029					
N	Charge Type: 1. Felony Check as many 2. Traffic Felony	■ 3. Misdemeanor □ 5. Ordinance ■ 4. Traffic Misdemeanor □ 6. Other	Special Notes:					
D	Name (Last, First, Middle)	4. Trainc Misdernearror L. 6. Other	R	Race Sex Date	of Birth			
E F	HUFFMAN, TONI MARII		1	W F 0	4/27/1971			
PROBABLE CAUSE STATEMENT	Based on my investigations to believe the under the influence point where her norm. Huffman was then trawalking into the Hoswalked her inside. As away as Ofc. Smith a double-cuffed to bot behavior. Huffman as having any injuries. lawful test of her himplied consent from Huffman was then trapaperwork. While at patrol car and demand to exit the vehicle refused to listen to car and continued to Based on the fact the vehicle multiple time and holding area, I pursuant to F.S.S. St. Huffman was subsequed criminal court date. The above incident was not purported to be	ation, observations, and totality of an alcoholic beverage, chemical, al faculties were impaired, contrainsported to the Jupiter Medical Cerpital, Huffman attempted to tense, fiter getting into ER Room#15, Huffman I attempted to secure her onto it is sides of the hospital bed due her vised all the hospital staff she was After being medically cleared, I is reath from a pre-printed card/forms a pre-printed card, however, still insported to the Jupiter Police Department holding area, ded her handcuffs be taken off. She and was advised she would be escort my lawful order. Huffman was ultimated to comply with mean thuffman refused to comply with mean braced, tensed, pushed, and puffind probable cause to charge her vision. The property of the Topical Police Department holding area, braced, tensed, pushed, and puffind probable cause to charge her vision braced, tensed, pushed, and puffind probable cause to charge her vision braced on Body Worn Camera. The verbatim.	of circumstance cal control of or controlled or to F.S 316.1 Inter for medical push, and pull man continued to the hospital better erratic and keep to the first at the second compartment to compartment	es, I hav a vehicl d substan 193. al cleara l away fr to tense ed. She h belligere ash and d Huffman clined an plete all sed to ex ltiple op hicle if d out of Wyatt. r to exit me at th ficer W/O County Ja ry of the	re probable e while ce, to the nce. While om me as I and pull and to be nt enied submit to a d was read necessary it my portunities she the patrol the patrol the patrol e hospital Violence til with a			
ADM: 2-STRATIVE	SWORN AND SUBSCRIBED BEFOREM I. KODICHED NOTARY PUBLIC / CLERK OF CO 7/30/22 DATE	SIGNATURE OFFICER F.S.S. 117.10)	RE OF ARRESTING / INVESTIG	226)	ANNED 2			

COURT

JAIL

STATE OF FLORIDA DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES AFFIDAVIT OF REFUSAL TO SUBMIT TO BREATH AND/OR URINE TEST

I, Officer Noble	, a duly certified Law Enforcement Officer or Correctional Officer,					
(Name of Officer reading Implied Consent Warning)						
am a member of Jupiter Police	Department , and I do swear					
(Name of law en	forcement agency)					
or affirm that on or about the 29th day of July	, 20 <u>22</u> , at <u>1138</u>					
DRIVER	arie Huffman ,					
(Type or Print) FIRST NAME MIDDLE OR M	MAIDEN NAME LAST NAME					
DL# H155-813-71-647-0 , state of	FL , was placed under lawful arrest for					
the offense of DUI - DAMAGE TO PERSON/PROPERTY	by Officer Noble and					
issued Citation # ADB9ICE .	(Name of Arresting Officer)					
That on or about the 30th day of July	, 20 22 , at 1213 P.M A.M.					
in Palm Beach County,						
	r urine test to determine his or her blood alcohol level					
	es. I informed the driver that the refusal to submit to such					
	g privilege for a period of one (1) year for a first refusal, or					
	ng privilege had been previously suspended for refusing to					
	e driver that he or she commits a misdemeanor by refusing					
	her driving privilege has been previously suspended for					
	ine, or blood. Additionally, I informed the driver that if he					
or sne noids a CDL, or was operating a CMV, refusal w	ill result in the disqualification of the Commercial Driver's					
	the case of a first refusal or permanently if he or she has					
refused to submit to the test(s) requested.	submit to any such lawful test. Nonetheless, the driver					
refused to submit to the test(s) requested.	(1)					
	1/W/12h					
× V *	Signature of Law Enforcement Officer or					
	Correctional Officer					
THE AFFIDAVIT MUST BE NOTA	ARIZED OR ATTESTED TO (F.S. 117.10)					
	The foregoing instrument was sworp and subscribed before me:					
T. Vahichard Val						
	Signature of Attesting Officer					
(AFFIX SEAL) The foregoing instrument was sworn and subscribed before	Title Officer					
me this 30th day of July , 20 2022 ,	Date 7/30/22					
by Officer Noble 1226						
<u> </u>	Note: Mail or hand deliver to the designated Bureau of Administrative Reviews office,					
who is personally known to me or who has produced	Department of Highway Safety and Motor					
Personally Known as identification	Vehicles, with the driver's license, the appropriate copy of the US (and NED)					
Notary Public // /276	probable cause affidavit.					
I TOURS I	IIII 3 N 2022					

PBSO #0129B REV.11/02i

CASE NUMBER: 22002921

1111 3 0 2022

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 detecting the presence of chemical or controlled substances. -OR-I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence o chemical or controlled substances. NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST Officer Noble Jupiter Police Department of the Iam 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. Read on Camea SUBJECT'S SIGNATURE: CONSTITUTIONAL WARNINGS I AM REQUIRED 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. **SCANNED** Read on Camera SUSPECT'S SIGNATURE:

WITNESS LIST

22002921 CASE NUMBER: ARRESTING OFFICER: OFC. Noble ADDRESS: 196 Military Trl. Jupiter, FL 33458 PHONE NUMBERS (HOME): ______ (WORK) (561) 746-6201 CAN TESTIFY TO: PC NAME: PFC. Albano ADDRESS: 196 Military Trl. Jupiter, FL 33458 PHONE NUMBERS (HOME) ___ (WORK) <u>(561)</u> 746-6201 CAN TESTIFY TO: First officer on-scene/wheel witness NAME: OFC. Wyatt ADDRESS 196 Military Trl. Jupiter, FL 33458 PHONE NUMBERS (HOME) _____ _____ (WORK) <u>(561) 746-6201</u> CAN TESTIFY TO: back-up officer on-scene 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 ____ (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) _____ SCANNED CAN TESTIFY TO: _____ NAME: ___ III 3 0 2022 ADDRESS __ _____ (WORK) _____ PHONE NUMBERS (HOME) _____ CAN TESTIFY TO:



Palm Beach County Sheriff's Office - Arrests Only

	x	X 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.	
tions		943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
L/E Exemptions		119.071(4)(c)	Undercover personnel.	
ı⁄E E		119.071(2)(f)	Confidential informants (CIs).	
		119.071(2)(e)	Confession.	
Suc		985.04(1)	Juvenile offender records.	
Public Info. Exemptions		119.071(h)(i)	Assets of a crime victim.	
fo. Ex		395.3025(7)(a), 456.057(7)(a)	Medical information.	
blic In		394.4615(7)	Mental health information.	
2		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.	
ation 2.420				
Florida Rules of Judicial Administration 2.420 (Rule of 23)		3.		
les of Judici				
Florida Rui				
her			Other:	
Other		,	Other:	

REVIEW COMPLETED BY

	Date: 7/30/2022
Booking Number: 2022019589	Specialist Name/ID: Chantel Daniels/30347

SCANNED

JUL 3 0 2022