22CT9345MD

☐ Marsy's Law CVI FL. Const. Art.1 § 16(b)

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

☐ Check if Supplement is Attached

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

Juvenile: 1 N

ADMINISTRATIVE

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
	FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	0 6 -| 22076390

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: N/A

Multiple Clearance Indicator: 0 1

Location of Arrest (including Name of Business)	Location of Offense (Business Name, Address)
7715 FOREST HILL BLVD WEST PALM BEACH FL, 33415	7715 FOREST HILL BLVD , WEST PALM BEACH FL, 33415

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
06/10/2022	2146					PALM BEACH FINEST TOWING

DEFENDANT

Name (Last, First, Middle): STEINMETZ, VALERIA, VICTORIA

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	2/26/1995	5'02	130	BLUE	BLONDE	LIGHT	SMALL

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)

Marital Status: SINGLE — Religion: CATHOLIC — Indication of: Alcohol Influence (Y ☒ N ☐ Unk ☐) Drug Influence (Y ☐ N ☐ Unk ☒)

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State
260 FALL CIRCLE, PALM BEACH GARDENS, FL 33410	(561) 635-2256	2
Permanent Address (Street, Apt. Number) (City) (State) (Zip)	( )	Address Source: FL DL
Business Address (Name, Street) (City) (State) (Zip)	( )	Occupation: T-MOBILE

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
S353878955660, FL	[redacted]		PERU	NON US

CO-DEF

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

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other: 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 Dept. and Released. 2. TOT HRS/DYS 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 (561) 355-6511) informed of any change of address. ☐ Yes, by: (Name) ☐ No (Reason)

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. Dispense/ 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	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DUI- PROPERTY DAMAGE	1	☐Y ☒N	316.193(3)(C)(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	N/A	22076390		

1.

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
	1	☐Y ☒N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	N/A			

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
				JUN 11 2022	

SCANNED

NOTICE TO APPEAR

Location (Court, Room Number, Address): Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600

Court Date and Time: Month JUNE Day 30TH Year 2022 Time 0830 A.M. ☒ P.M. ☐

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 (For Juvenile and Parent/Custodian) — Date Signed: 06/10/2022

ADMIN

HOLD for other agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Intake Deputy: Bonello I.D. # 18342 Pouch #

Signature of Arresting Officer: X

Name of Arresting Officer (Print): INV. A. TEJEDA I.D. # 31814

Transporting Officer: INV. A. TEJEDA 31814 Agency: PBSO

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X"

JUN 11 AM 12:22 PBSO

1 OF 1

PBSO #0148 REV. 04/22 DISTRIBUTION: WHITE- COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

0532215

3623

PROBABLE CAUSE AFFIDAVIT

OBTS Number:

1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capias: 1

Juvenile:

ADMIN

Agency ORI Number: FLO.5.0.0.0.0.0

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 22016390

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
Steinmetz, Valeria, Victoria		W	F	2/26/1995

CHARGES

Charge Description	Charge Description
DUI	316.193(1)
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**
	( )	

The undersigned certifies and swears that I have just and reasonable grounds to believe, and do believe that the above named Defendant committed the listed violation(s) of law.
The Person taken into custody:

☐ committed the below acts in my presence.

☐ confessed to _____ admitting to the below facts.

☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.

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

On the _____ day of _____ 20 ____ at _____ ☐ A.M ☐ P.M (Specifically include facts constituting cause for arrest.)

PROBABLE CAUSE STATEMENT

☐ Marsy's Law CVI
FL. Const. Art.1 § 16(b)

On 6/10/2022 at approximately 20:45 hours, I was dispatched to the area of Forest Hill Blvd and Pinehurst Drive, in unincorporated West Palm Beach, Florida, in reference to a crash.

Upon arrival, I made contact with the driver and sole occupant of a gray Nissan Sentra bearing FL tag NDFH47, Valeria Steinmetz (DOB: 02/26/1995). While speaking with Steinmetz I immediately perceived an odor of an unknown alcoholic beverage emanating from her person. Steinmetz eyes were also extremely glossy which I know through training and experience to be associated with consumption of alcohol. When I asked Steinmetz to exit the vehicle while we waited for Palm Beach County Fire Rescue to arrive she was having trouble maintaining her balance. At this time, for her safety as well as other drivers I advised her to take a seat near the curb of the road.

Later, PBSO DUI investigators arrived on scene to further evaluate Steinmatz for a DUI.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer) #36796

The foregoing instrument was sworn to or affirmed and subscribed before me this 10th day of June 20 22 by D/S A. Lermond

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Known LEO

D/S A. Guerin #36803

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

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 10TH DAY OF JUNE 20 22, AT 2045 AM PM

SUBJECT: STEINMETZ, VALERIA, VICTORIA CASE NUMBER: 22076390

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV. A. TEJEDA

PERSONAL CONTACT

DRIVING PATTERN: Actual physical control (physical evidence or statements putting def. behind wheel of vehicle)

On 6/10/2022 at approximately 20:45 hours, I was dispatched to the area of Forest Hill Blvd and Pinehurst Drive, in unincorporated West Palm Beach, Florida, in reference to a crash.

Upon arrival, I made contact with the driver and sole occupant of a gray Nissan Sentra bearing FL tag NDFH47, Valeria Steinmetz (DOB: 02/26/1995). While speaking with Steinmetz I immediately perceived an odor of an unknown alcoholic beverage emanating from her person. Steinmetz eyes were also extremely glossy which I know through training and experience to be associated with consumption of alcohol. When I asked Steinmetz to exit the vehicle while we waited for Palm Beach County Fire Rescue to arrive she was having trouble maintaining her balance. At this time, for her safety as well as other drivers I advised her to take a seat near the curb of the road.

Later, PBSO DUI investigators arrived on scene to further evaluate Steinmatz for a DUI.

OBSERVATION OF DRIVER:

Upon making contact with the defendant who was seated on the floor beside her vehicle. I immediately smelled an obvious odor of an unknown alcoholic beverage coming from within the vehicle and her person. I observed the defendant's eyes to be glassy, watery, and blood shot. I also observed the defendant to have a slow and slurred speech. The defendant had a pale and flushed face. The defendant was also lethargic. The defendant was asked to step in front of my patrol car, as she stepped towards my patrol car she staggered to the side and had an unstable balance. I also observed the defendant to have a sway as she stood normally without walking.

DRIVER'S STATEMENTS:

The defendant stated she has no physical defects or injuries. She stated she has no medical conditions. She stated she is not taking any medications. She stated she has not hit her head recently. She stated she was on her way to her friend's house to get her eyelashes done. She stated today's date was Friday, June 9th, 2022. She stated the current time was 10PM, it was actually 929PM. She stated she was driving on Wellington St going norhtbound. She was acutally going westbound on Forest Hill Blvd. She stated she has not smoked any marijuana or used any illegal drugs today. She stated she has not drank any alcohol tonight She stated she was the driver and sole occupant of the vehicle. She stated she has a broken right ankle from 5 years ago but does workout every day and runs every day or atleast 5 times a week.

ODORS:

An obvious odor of an unknown alcoholic beverage coming from his breath which intensified as he spoke with me.

GENERAL OBSERVATIONS

SPEECH: **Slow and slurred**

ATTITUDE: **Calm and cooperative, very talkative**

CLOTHING: **Black t-shirt, black shorts, gray shoes**

MEDICAL/OTHER: **No medical conditions**
All roadsides captured on in car camera

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. A. TEJEDA
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 10th day of June 20 22 by INV. A. TEJEDA

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced PERSONALLY KNOWN LEO

Renee Ragin (#16877)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

Notary Public State of Florida
Renee Ragin
My Commission GG 966418
Expires 03/05/2024

SUBJECT: STEINMETZ, VALERIA, VICTORI CASE NUMBER 22076390

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- [x] RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

The defendant was placed into the instructional stance for the Horizontal Gaze Nystagmus. She verbally identified the blue stimulus that I was holding up. She was told to follow the stimulus with her eyes only and not move her head. I checked her eyes for equal pupil size, equal tracking, and resting nystagmus. I observed a lack of smooth pursuit in both eyes. I observed distinct and sustained nystagmus at maximum deviation in both eyes. I also observed onset of nystagmus prior to 45 degrees in both eyes. She was reminded several times not to move her head. I did not observe any vertical nystagmus in either eye. She swayed from side to side.

WALK & TURN:

I explained and demonstrated the instructions for the Walk & Turn to her. She stated she understood the instructions and had no questions for me. She failed to maintain the instructional stance by separating her feet to help steady herself. She swayed from side to side. She stepped of the line several times. She did not walk heel to toe as instructed. She used her arms to help steady herself. She did not count each step out loud as instructed. She then stopped the task and stated to just arrest her and take her to jail. I explained to the defendant if She refused to submit to the roadside tasks that I was asking her, I would be forced to conclude my investigation and determine whether or not to arrest her based on the totality of my investigation. I also explained to her that her refusal could be used against her in court. She verbally stated she understood. I then asked her if she was willing to do the roadside tasks with that in mind, she agreed. She did not walk back the 9 steps as instructed.

ONE LEG STAND:

I explained and demonstrated the instructions for the One Leg Stand to her. She stated she understood the instructions and had no questions for me. She failed to maintain the instructional stance by separating her feet to help steady herself. She swayed from side to side. She used her arms for balance. She raised her right leg. She began to hop. This task was then terminated early for her safety so she would not hurt herself.

FINGER TO NOSE:

I explained and demonstrated the instructions for the Finger to Nose task to her. She stated she understood the instructions and had no questions for me. She failed to maintain the instructional stance by separating her feet to help steady herself. She swayed from side to side. She did not keep her eyes closed as instructed. She never touched her finger to her nose. Instead she turned her head to each side that I called.

RHOMBERG ALPHABET:

I explained and demonstrated the instructions for the Rhomberg Alphabet task to her. She stated she understood the instructions and had no questions for me. She failed to maintain the instructional stance by separating her feet to help steady herself. She swayed from side to side. She did not keep her eyes closed as instructed. She incorrectly recited the English Alphabet.

BREATH TEST RESULTS: 1) .300 | 2) .292 | 3) — | 4) —

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. A. TEJEDA
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 10th day of June 2022 by INV. A. TEJEDA

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced PERSONALLY KNOWN LEO

Renee Ragin (#16877)
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

Notary Public State of Florida
Renee Ragin
My Commission GG 966418
Expires 03/05/2024

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: 80-006477 Software: 8100.27
Date of Test: 06/10/2022

Date of Last Agency Inspection: 06/03/2022
Observation Period Began: 22:16
Subject's Name: VALERIA V STEINMETZ DOB: 02/26/1995 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	22:40
Air Blank	0.000	22:40
Control Test	0.079	22:41
Air Blank	0.000	22:41
Subject Sample #1	0.300	22:42
Air Blank	0.000	22:43
Air Blank	0.000	22:45
Subject Sample #2	0.292	22:45
Air Blank	0.000	22:46
Control Test	0.077	22:46
Air Blank	0.000	22:47
Diagnostics Check	OK	22:47

Cylinder Lot: 19021080A2
Exp: 09/05/2023

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 RENEE M RAGIN, 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: 06/10/22
Signature

Sworn to (or affirmed) before me this 10 day of June, 2022

_____ Inv. A. Tejeda #31814
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

WITNESS LIST

CASE NUMBER: 22076390

ARRESTING OFFICER: INV. A. TEJEDA
ADDRESS: 3228 GUN CLUB ROAD WEST PALM BEACH FL 33406
PHONE NUMBERS (HOME): (WORK) 561 688 3400
CAN TESTIFY TO: FACTS OF THE CASE AND DUI INVESTIGATION

NAME: D/S A. LERMOND#36796
ADDRESS: 3228 GUN CLUB ROAD WEST PALM BEACH FL 33406
PHONE NUMBERS (HOME) (WORK) 561 688 3400
CAN TESTIFY TO: PLACING DEFENDANT BEHIND THE WHEEL// CRASH INVESTIGATOR

NAME: CARLOS BRIONES
ADDRESS 114 MARGUERITA DR WEST PALM BEACH FL, 33415
PHONE NUMBERS (HOME) 561-281-1076 (WORK)
CAN TESTIFY TO: PLACING DEFENDANT BEHIND THE WHEEL

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK) 0
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

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PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: Steinmetz, Valeria V.

CASE NUMBER: 22-076390

DATE: Jun 10, 2022

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 22:37

ENDING TIME: 22:46

BREATH TESTS RESULTS: 1) .300 TIME 22:42 A.M.☐ P.M.☒ 2) .292 TIME 22:45 A.M.☐ P.M.☒

3) N/A TIME ---------- A.M.☐ P.M.☐ 4) N/A TIME ---------- A.M.☐ P.M.☐

BREATH OPERATOR: R. Ragin #16877

MAINTENANCE TECHNICAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Talkative, upset, fidgety

CLOTHING: Black shorts, black t-shirt, gray sneakers

MEDICAL CONDITIONS: Anxiety

MEDICATIONS: None

OTHER:

Eyes are glassy & bloodshot
odor of unknown alcoholic beverage on breath

COMMENTS:

Arrived at center A/O started 20 minute observation period at 22:16 hrs.

Subject agreed to perform breath test.

A/O read breath test results.
Subject stated she understood breath test results.

A/O read breath test results.

NO rights and Q&A conducted do to subject invoked the rights to counsel.

COMMENTS CONTINUED:

SUBJECT: Steinmetz, Valeria V. CASE NUMBER: 22-076390

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 _____ of the _____

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) NOT Read on Camera

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

SUBJECT: Steinmetz, Valeria V. CASE NUMBER: [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? _____

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: [illegible]

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

PBSO 60129C REV. 9/93

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:	

REVIEW COMPLETED BY

Booking Number: 2022015009	**Date:** 6/11/2022
	Specialist Name/ID: Chantel Daniels/30347