50-2022-CT-016928 AWB

0348725

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 22-003875

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: 1

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
799 MILITARY TRL. JUPITER, FL 33458	799 MILITARY TRL/TONEY PENNA DR, JUPITER, FL 33458

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
10/10/2022	23:12	10/10/2022	23:22			

DEFENDANT

Name (Last, First, Middle): MYERS, WILLIAM GEORGE | Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	04/01/1957	5'10	~~245~~ 224	HAZEL	BLONDE /	MEDIUM	Large

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description) | Marital Status: M | Religion: CHRISTIAN | 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
179 S HAMPTON DR, JUPITER, FL 33458				(561) 262-2213	1

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
179 S HAMPTON DR, JUPITER, FL 33458				(561) 262-2213	FL DL

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
M620927571210 / FL	[redacted]		PITTSBURGH, PA	US

CO-DEF

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

JUVENILE

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

Address (Street, Apt. Number) (City) (State) (Zip) | Business Phone

Notified by: (Name) | Date | Time | JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated

Released To: (Name) Relationship | Date | Time

The above address was provided by ☐ defendant and/or ☐ defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.

☐ Yes, by: ☐ No:

School Attended | Grade

Property Crime? ☐ Yes ☒ No | Description of Property | Value of Property

CODE

Drug Activity: N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Disperses/ Distribute M. Manufacture/ Produce/ Cultivate Z. Other

Drug Type: N. N/A A. Amphetamine B. Barbiturate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other

CHARGE

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

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

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

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

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

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

INTAKE

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

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

Transported By | Date Transported | Time Transported | Other

NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court
☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): North County PALM BEACH GARD

Court Date and Time: 11/16/2022 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

JOSEPH ABRUZZO CLERK OF COURTS PALM BEACH COUNTY FILED 2022 OCT 11 AM 7:56

ADMIN

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

Signature of Arresting Officer: 1185

Name of Arresting Officer (Print): YOCHUM, CRAIG | I.D. # 1185

Name Verification (Printed by Arrestee) (PRINT)

Intake Deputy | I.D. # | Pouch #

Transporting Officer: OFC. C. YOCHUM | I.D. # 1185 | Agency JPD

Witness here if subject signed with an "X"

PAGE 1 OF 1

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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 | 22-003875

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
MYERS, WILLIAM GEORGE		W	M	04/01/1957

CHARGES

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

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
State Of Florida			

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source

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

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and 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 _____ 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 10 day of October, 2022 at 23:12 (Specifically include facts constituting cause for arrest.)

On 10/10/2022 at approximately 2237 hours, I responded to Military Trl. and Toney Penna Dr. in the Town of Jupiter, Palm Beach County, Florida in reference to a motor vehicle crash. At the time, I was driving an unmarked Jupiter Police Department patrol vehicle (vehicle 2109), I was wearing a Jupiter Police Department uniform clearly identifying myself as a Jupiter Police Officer, and I was wearing my department-issued Axon body camera.

Prior to arriving, dispatch advised there were two vehicles involved in the crash: a white Mercedes and a dark colored Honda. The caller reported he believed the driver of the Mercedes was drunk.

Upon arrival, I observed a white Mercedes bearing FL tag # 7297QZ stopped (facing south) just south of the intersection, obstructing the southbound outside lane. I also observed a blue Honda Civic bearing FL tag # JEUN64 stopped in front of the Mercedes. I observed damage to the rear of the Honda and damage to the front of the Mercedes which was consistent with a linear, in-line rear end crash.

Between the vehicles, I observed a white male whom I later identified via his valid Class E Florida driver license to be William Myers (04/01/1957) staggering around the front of the Mercedes. I made contact with Myers and observed he had bloodshot eyes. After speaking with Myers, I detected the faint odor of an unknown alcoholic beverage on his breath which intensified as he spoke to me.

I made contact with the driver of the Honda, Michael Miller (w/m; 02/08/1991), who advised he was stopped (facing south) on Military Trl. for the red traffic control signal at the intersection with Toney Penna Dr. Miller advised he observed headlights approaching him from the rear at a speed he feared he would be struck so he began accelerating southbound through the intersection in an attempt to avoid the crash.

NOT A CERTIFIED COPY

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

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

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

10/11/2022
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

YOCHUM, CRAIG (1185)
NAME OF OFFICER (PLEASE PRINT)

10/11/2022
DATE

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

ADMIN

OBTS Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
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Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
MYERS, WILLIAM GEORGE		W	M	04/01/1957

PROBABLE CAUSE STATEMENT

Miller was ultimately unable to avoid the crash and the front bumper of the Mercedes struck the rear bumper of Miller`s vehicle. Miller identified Myers to me as the driver of the Mercedes at the time of the crash.

Throughout the entirety of me doing the crash paperwork inside my vehicle, Myers was leaned against the rear driver door of his vehicle. I completed the crash investigation, released Miller from the scene and advised Myers that my crash investigation was complete and I was starting a criminal DUI investigation. I advised Myers of his Miranda Warnings and confirmed he understood each one.

Myers advised he was coming from Burger King and, before that, "Stuart". When I asked further, Myers stated he had dinner with a family member where he had consumed 2 beers. Myers advised he could not really feel the effects of the alcohol and estimated on a scale of 1 (being sober) to 10 (being sick) that he was a 2. Myers consented to perform Standardized Field Sobriety Tasks.

Myers advised he takes daily medication for high blood pressure as well as an unknown medication, as needed, for Anxiety. Myers stated he had no other physical/medical issues.

I first conducted the Horizontal Gaze Nystagmus task. I am a certified Drug Recognition Expert (IACP # 32395) and I conducted this task in accordance with my training. Myers had pupils of equal approximate size, he did not display resting nystagmus, and was able to equally track a horizontally-moving stimulus. I observed Lack of Smooth Pursuit and Distinct and Sustained Nystagmus at Maximum Deviation in both Myers` eyes. I observed the Onset of Nystagmus prior to 45 degrees in Myers` right eye. Vertical Gaze Nystagmus was not present.

I then conducted the Walk and Turn. Myers started before being told several times during the Instructions Stage. When told to begin, Myers missed heel-to-toe on steps 1 and 3, then lost his balance and stumbled completely off the line (to the left). Myers advised he was going to restart. After restarting, Myers missed heel-to-toe on steps 2, 3, 5, 7, 8, and 9. Myers stepped off the line (to the left) on step 8. Myers turned improperly by taking small steps with both his feet. On the return walk, Myers missed heel-to-toe on steps 3, 4, 5, 6, 7, 8, and 9. Myers stepped off the line (to the left) on step 2.

I next conducted the One Leg Stand. Myers followed along with me during the instructions. When told to begin, Myers raised his right leg off the ground. Myers placed his leg on the ground on his count of 1005. Myers took a second to regain his composure then again raised his right leg off the ground. Myers counted to 1005 and dropped his foot again. Myers collected himself, raised his right leg again, and counted this time to 1004 before swaying moderately and dropping his foot.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER (PLEASE PRINT)

10/11/2022
DATE

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

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

YOCHUM, CRAIG (1185)
NAME OF OFFICER (PLEASE PRINT)

10/11/2022
DATE

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

ADMIN

OBTS Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	JUVENILE

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Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
MYERS, WILLIAM GEORGE		W	M	04/01/1957

PROBABLE CAUSE STATEMENT

Before conducting the Finger to Nose, Myers demonstrated knowledge of his left and right hands. When told to begin, Myers had to be reminded to tilt his head back and close his eyes. The cadence for this task was: left, right, left, right, right, left. On the first call of left, Myers touched the tip of his left index finger to the bridge of his nose and failed to return his arm to his side. I reminded him. On the first call of right, Myers touched the tip of his right index finger to the outside of his right nostril near the bridge of his nose and failed to return his arm to his side. On the second call of left, Myers touched the pad of his left index finger to the tip of his nose and failed to return his arm to his side. On the second call of right, Myers touched the tip of his right index finger to the tip of his nose but failed to return his arm to his side. On the final call of right, Myers returned his right arm to his side then lifted it back up and touched the pad of his right index finger just under the tip of his nose before correcting himself and failed to return his arm to his side. On the final call of left, Myers touched the pad of his left index finger to the tip of his nose and failed to return his arm to his side.

Finally, I conducted the Romberg Alphabet. Myers advised he had an Associate`s Degree and that he was comfortable with the alphabet from A to Z. When told to begin, Myers began quickly reciting the alphabet and recited the following "ABCDEFGFHIJLMMOPQRSTUVWXYZ".

Based on the totality of the circumstances, I placed Myers under arrest for DUI. I transported Myers to the Palm Beach County Breath Alcohol Testing Facility where I conducted a 20 minute observation period to ensure he did not ingest or regurgitate. At the conclusion of the observation period, I requested Myers provide a lawful sample of his breath for the purpose of determining the alcohol content. Myers agreed and provided two, adequate breath samples of .145 and .144, both exceeding the legal, per se limit of .08.

Based on the aforementioned facts resulting from my investigation, I find Probable Cause exists to charge William Myers with DUI pursuant to FSS 316.193(1)(c).

NOT A CERTIFIED COPY

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

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

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

10/11/2022
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

YOCHUM, CRAIG (1185)
NAME OF OFFICER (PLEASE PRINT)

10/11/2022
DATE

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

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

PBSO CASE # 22-117665 PBSO ZONE 3-14

AGENCY CASE # 22-003875 CRASH CASE #

TIME OF STOP/CRASH 2237 DATE 10/10/2022 DAY Monday

SUBJECT'S NAME Myers (LAST) William (FIRST) G (MID) RACE W SEX M

HGT 510 WGT 245 DOB 04/01/1957

LOCATION Military Trl./Toney Penna Dr. Jupiter, FL 33458

ARRESTING OFFICER'S NAME & ID Craig Yochum #1185 AGENCY Jupiter PD

DIVISION: Traffic

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 0000

ARREST TIME 2312

BREATH RESULTS:

1) .145
2) .144
3) N/A
4) N/A

TESTING OFFICER'S ID 8656 PBSO VIDEOTAPE # N/A

NOT A CERTIFIED COPY

SUBJECT: Myers, William George CASE NUMBER: 22-003875

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) READ ON CAMERA

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

SUBJECT: Myers, William Gregg CASE NUMBER: 22-003875

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? Military Trail

DIRECTION OF TRAVEL? S WHERE DID YOU START? —

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? Unknown WHAT DAY OF THE WEEK IS IT? Monday

WHAT COUNTY AND CITY ARE YOU IN NOW? —

WHEN DID YOU LAST EAT? 3 or 4 WHAT DID YOU EAT? Chamaro

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? With Friends, Heading Home

HOW MUCH DO YOU WEIGH? 240 HAVE YOU BEEN DRINKING? Yes WHAT? Beer

HOW MUCH? Unk WHERE? Twisted Tuna WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? 4 AND YOUR LAST DRINK? Unk

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? —

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? "Not really" ARE YOU UNDER THE INFLUENCE? "I guess I am"

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? No HOW MUCH? —

WHAT? — WHERE? — WHEN? —

WHAT LINE OF WORK ARE YOU IN? Caterer Assist WHEN DID YOU LAST WORK? Sat

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? No WHAT? _____

ARE YOU SICK OR INJURED? Yes WHAT'S WRONG? High Blood Pressure + Tramazine (Anxiety)

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

WERE YOU IN AN ACCIDENT TODAY? —

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN? —

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

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

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

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: D/C. C. Yochum #115

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

PBSO #0129C REV. 9/93

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006240 Software: 8100.27
Date of Test: 10/11/2022

Date of Last Agency Inspection: 09/16/2022
Observation Period Began: 00:00
Subject's Name: WILLIAM GEORGE MYERS DOB: 04/01/1957 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	00:26
Air Blank	0.000	00:26
Control Test	0.081	00:27
Air Blank	0.000	00:27
Subject Sample #1	0.145	00:28
Air Blank	0.000	00:28
Air Blank	0.000	00:30
Subject Sample #2	0.144	00:31
Air Blank	0.000	00:31
Control Test	0.080	00:32
Air Blank	0.000	00:32
Diagnostics Check	OK	00:32

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: 10/11/22
Signature

Sworn to (or affirmed) before me this 11 day of October, 2022

_____ OFC. C. Yochum #1185
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

NOT A CERTIFIED COPY

WITNESS LIST

CASE NUMBER: 22-003875

ARRESTING OFFICER: Craig Yochum

ADDRESS: 196 Military Trl. Jupiter, FL 33458

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

CAN TESTIFY TO: PC

NAME: Michael Miller

ADDRESS: 849 University Blvd. # 105 Jupiter, FL 33458

PHONE NUMBERS (HOME) _____ (WORK) 561-302-0625

CAN TESTIFY TO: Wheel Witness

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: _____

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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: _____

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TESTING FACILITY TASK REPORT

AGENCY: JPD

SUBJECT: MYERS, WILLIAM GEORGE

CASE NUMBER: 22-117665

DATE: Oct 11, 2022

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0024

ENDING TIME: 0038

BREATH TESTS RESULTS: 1) .145 TIME 0028 A.M. ☒ P.M. ☐ 2) .144 TIME 0031 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: SLURRED

ATTITUDE: COOPERATIVE

CLOTHING: WHITE POLO SHIRT, TAN SHOERTS, WHITE SHOES

MEDICAL CONDITIONS: HIGH BLOOD PRESSURE

MEDICATIONS: LISINOPRIL, TRANXENE

OTHER:

EYES:BLOODSHOT, GLASSY

COMMENTS:

A/O ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0000 HOURS

SUBJECT STATED HE WOULD TAKE BREATH TEST

BREATH TEST COOMPLETED

A/O READ RIGHTS
SUBJECT STATED HE UNDERSTOOD HIS RIGHTS

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

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

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PALM BEACH COUNTY
SHERIFF'S OFFICE
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2022026534	**Date:** 10/11/2022
	Specialist Name/ID: M. Tooks #8557