

C539762 23CT6948 SB 1365

Marsy's Law CVI FL. Const. Art.1 § 18(b)		ARREST / NOTICE TO APPEAR Juvenile Referral Report		☐ Check if Supplement is Attached		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias		1		Juvenile ☒ N	
OBTs Number		Agency ORI Number		Agency Name		Agency Report Number		061-23-058425		()	
FLO: 5 0 0 0 0 0 0		PALM BEACH COUNTY SHERIFF'S OFFICE									
Charge Type: Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		If Weapon Seized		Multiple Clearance Indicator		0		1			
Location of Arrest (Including Name of Business)		Dulce St / Summit Place Cir, West Palm Beach, FL 33415		Location of Offense (Business Name, Address)		Dulce St / Summit Place Cir, West Palm Beach, FL 33415					
Date of Arrest		04/17/2023		Time of Arrest		22:58		Booking Date		04/18/2023	
Jail Date				Jail Time				Location of Vehicle		Cardless Towing, 1100 3rd Ave. N, Lake Wales, FL 33460, (561) 585-9272	
Name (Last, First, Middle)		Villareal, Adriana		Alias (Name, DOB, Soc. Sec. #, Etc.)							
Race		W - White		Sex		F		Date of Birth		12/23/1966	
Height		5'05		Weight		150		Eye Color		brown	
Hair Color		brown		Complexion		light		Build		small	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		tattoo neck		Marital Status		Married		Religion		CATHOLIC	
Local Address (Street, Apt. Number)		(City)		(State)		(Zip)		Mobile Phone		(561) 601 5753	
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		()	
Business Address (Name, Street)		(City)		(State)		(Zip)		Phone		()	
D/L Number, State		V464000669630, FL		Soc. Sec. Number				INS Number			
Place of Birth (City, State)		Mexico		Citizenship		US					
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											
Parent Legal Custodian		Name (Last)		(First)		(Middle)		Residence Phone		()	
Other		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	
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) 355-8511) informed of any change of address.		School Attended		Grade							
Property Crime? ☐ Yes ☐ No		Description of Property		Value of Property							
Drug Activity		N. N/A		S. Sell		R. Smuggle		K. Dispense/ Distribute		M. Manufacture/ Produce/ Cultivate	
P. Possess		T. Traffic		D. Deliver		E. Use		Z. Other			
Charge Description		Driving Under the Influence (enhanced)		Counts		1		Domestic Violence ☐ Y ☒ N		Statute Violation Number	
Drug Activity		N		Drug Type		N		Amount / Unit		Offense #	
Warrant / Capias Number		316.193(4)		Bond							
Charge Description				Counts				Domestic Violence ☐ Y ☒ N		Statute Violation Number	
Drug Activity				Drug Type				Amount / Unit		Offense #	
Warrant / Capias Number				Bond							
Charge Description				Counts				Domestic Violence ☐ Y ☒ N		Statute Violation Number	
Drug Activity				Drug Type				Amount / Unit		Offense #	
Warrant / Capias Number				Bond							
Charge Description				Counts				Domestic Violence ☐ Y ☒ N		Statute Violation Number	
Drug Activity				Drug Type				Amount / Unit		Offense #	
Warrant / Capias Number				Bond							
Location (Court, Room Number, Address)		South County Courthouse, Courtroom #1, 200 W. Atlantic Ave., Delray Beach, FL 33444 - Ph: (561) 355-2996		Court Date and Time		Month May Day 16 Year 2023 Time 08:30 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 (or Juvenile and Parent/Custodian)		Date Signed		04/17/2023					
I consent to receive text reminders of court date(s) and times for this case by automated technology to the mobile number identified above. I understand that standard text message rates may apply, and that I may revoke this consent via the text message system if I choose.		Signature									
HOLD for other agency		Signature of Arresting Officer		Name Verification (Printed by Arrestee)		(PRINT)				PAGE	
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other		Name of Arresting Officer (Print)		I.D. #		Inv. POINTU P. 16032				1 OF 1	
Inmate Deputy		I.D. #		Fouch #		Transporting Officer		I.D. #		Agency	
Inv. POINTU P. 16032		PBSO		Witness here if subject signed with an "X"							

OBT Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 NTA	3 Request for Warrant 4 Request for Copies	1	Juvenile N
ADMIN	Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 23-058425		
	Charge Type Check as many as apply ☐ 1 Felony ☐ 2 Traffic Felony ☐ 3 Misdemeanor ☒ 4 Traffic Misdemeanor ☐ 5 Ordinance ☐ 6 Other		Special Notes				
CHARGES / DEF	Name (Last, First, Middle) Villareal, Adriana,		Alias		Race W	Sex F	Date of Birth 12/23/1966
	Charge Description DUI		Charge Description				
VICTIM	Victim's Name (Last, First, Middle) STATE OF FLORIDA, ,		Race		Sex	Date of Birth	
	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 13 day of January 20 22 at 23:15 ☐ A.M ☒ P.M (Specifically include facts constituting cause for arrest.)							
☐ Marsy's Law CVI FL. Const. Art.1 § 18(b) Supplement Probable Cause On 04/17/2023 at approximately 22:30hrs, I responded to a call of a possible drunk driver, who was driving westbound on Southern Blvd in the area of Sansbury Way. The caller advised that the vehicle a black Lincoln sedan bearing FL tag 48DDAT made a u-turn and was eastbound Southern Blvd, the caller lost visual on the vehicle. I made contact with the vehicle at Summit Blvd and Summit Pines Blvd. The vehicle was driving at approximately 10 Mph with the right turn signal activated. I conducted a traffic stop at Dulce St and Summit Place Cir. I made contact with the driver and sole occupant Villareal, Adriana from the drivers' side of the vehicle. Adriana was seated in the drivers seat with the engine still running and the vehicle in drive. I noticed there was a strong smell of an unknown alcoholic beverage coming from Adriana's vehicle and mouth as she spoke. Adriana's eyes were blood shot and glassy and her speech was slurred. Adriana stated she was coming from a restaurant and had one margarita to drink. Adriana stated that she had an injury to her ribs and was taking medication. PBSO DUI Investigator Pointu #16032 was called to the scene and conducted a DUI Investigation.							
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH Singer Matthew J. (Signature of Arresting/Investigative Officer)		Digitally signed by Singer, Matthew J. Date: 2023.04.17 23:04:34 -04'00' D/S M. Singer 36149				
	The foregoing instrument was sworn to or affirmed and subscribed before me this 17 day of April 20 23 by D/S M. Singer 36149 (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced PERSONALLY KNOWN						
	Inv Pointu (#16032) Notary Public, Clerk of Court, Officer (F.S.S.) 11 7 1-07						

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 17th DAY OF April 20 23, AT 22:23 AM PM

SUBJECT: Villareal, Adriana, CASE NUMBER: 23-058425

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. POINTU P.

PERSONAL CONTACT

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

A caller notified 911 of a possible impaired driver in a black Lincoln bearing Florida tag 48DDAT driving on Southern Boulevard near Sansbury Way, in unincorporated West Palm Beach, Florida.

D/S Singer (#36149) made contact with the car at Summit Boulevard and Summit Pines Boulevard. The Lincoln was driving at 10 MPH in a 45 MPH zone with its turning signal continuously on. He initiated a traffic stop and made contact with the driver and only occupant who was identified by her Florida driver license as Adriana Villareal. Villareal was also the registered owner of the Lincoln.

OBSERVATION OF DRIVER:

Villareal had glassy and bloodshot eyes. Her speech was slurred and an obvious odor of unknown alcoholic beverage was coming from her person and become stronger when she talked. She also had an unsteady gait.

DRIVER'S STATEMENTS:

Villareal admitted coming from a restaurant where she drank one margarita. She also admitted taking Alprazolam and Soma in the morning.

ODORS:

Obvious odor of unknown alcoholic beverage that become stronger when she talked.

GENERAL OBSERVATIONS

SPEECH: Slurred, slow.

ATTITUDE: Cooperative, crying.

CLOTHING: black dress, black flip flop

MEDICAL/OTHER: Two broken ribs. Was released from the hospital on March 31st. Prescribed Alprazolam and Soma.

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. POINTU P.

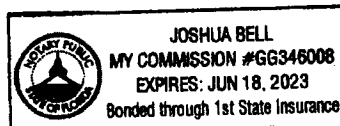
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 18 day of April 2023 by Inv. POINTU P.

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

Joshua Bell (#8656)

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



SUBJECT: Villareal, Adriana,

CASE NUMBER 23-058425

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

☒ LT EYE-LACK OF SMOOTH PURSUIT

☒ RT EYE-LACK OF SMOOTH PURSUIT

☒ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

☒ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

☒ LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

☒ RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Pupils round and equal. No resting nystagmus. Equal tracking. Onset of HGN at approximately 35 degrees. VGN present. LOC present. Swayed during the task.

WALK & TURN:

Villareal could not maintain the instructional stance. She started walking before being told. Once asked to start she did not count out loud and stepped off the line. She then stopped the task and restarted from the beginning, this time counting but starting from two. She stepped off the line and took an improper number of steps. She then stopped and asked for instruction. She did not turn as instructed. She then walked back, using her arms to balance and taking an improper number of steps.

ONE LEG STAND:

Villareal raised her right leg. She swayed while balancing. She put her foot down before being told.

FINGER TO NOSE:

Villareal had to be reminded to lower her hand on all tasks. On task 1 she touched the bridge of her nose instead of the tip. On task 2 she touched her left nostril instead of the tip. She swayed during the task and tilted her head forward.

ROMBERG ALPHABET:

Villareal swayed during the task. She could not complete the alphabet.

For the Romberg balance, Villareal stopped the 30 seconds count in approximately 35 seconds. She swayed in all directions.

BREATH TEST RESULTS: VNM 0.142 0.153

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. POINTU P.

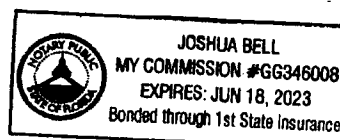
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 18 day of April, 2023 by Inv. POINTU P.

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

Joshua Bell (#8656)

Notary Public, Clerk of Court, Officer (F.S.S. 117.40)



**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: 04/18/2023

Date of Last Agency Inspection: 04/14/2023

Observation Period Began: 23:21

Subject's Name: ADRIANA VILLAREAL

DOB: 12/23/1966 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	00:03
	Air Blank	0.000	00:03
	Control Test	0.079	00:04
	Air Blank	0.000	00:04
	Subject Sample #1	0.142	00:06
	Air Blank	0.000	00:06
	Air Blank	0.000	00:08
	Subject Sample #2	0.153	00:09
	Air Blank	0.000	00:10
	Control Test	0.080	00:10
	Air Blank	0.000	00:11
	Diagnostics Check	OK	00:11

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: [Signature] Date: 04/18/23
Signature

Sworn to (or affirmed) before me this 18 day of April, 2023

Signature of Notary Public-State of Florida IRV. P. Pointu #16032
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.

**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: 04/17/2023

Date of Last Agency Inspection: 04/14/2023

Observation Period Began: 23:21

Subject's Name: ADRIANA VILLAREAL

DOB: 12/23/1966 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	23:47
	Air Blank	0.000	23:48
	Control Test	0.080	23:48
	Air Blank	0.000	23:49
	Subject Sample #1	VNM*	23:52
	Air Blank	0.000	23:53
	Air Blank	0.000	23:54
	Subject Sample #2	NSP**	23:57
	Air Blank	0.000	23:58
	Control Test	0.078	23:58
	Air Blank	0.000	23:59
	Diagnostics Check	OK	23:59

*Volume Not Met (0.140 - Breath Sample Not Reliable to Determine Breath Alcohol Level)
**No Sample Provided

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: _____

Signature

Date: 04/18/23

Sworn to (or affirmed) before me this 18 day of April, 2023

Signature of Notary Public-State of Florida

INV. P. Pointu #16032
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.

WITNESS LIST

CASE NUMBER: 23-058425

ARRESTING OFFICER: Inv. POINTU P.

ADDRESS: Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) (561) 688 3000

CAN TESTIFY TO: DUI Investigation, see PC

NAME: D/S Singer (#36149)

ADDRESS: Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

PHONE NUMBERS (HOME) 0 (WORK) (561) 688 3000

CAN TESTIFY TO: Driving pattern, wheel witness

NAME: D/S Martinez (#36836)

ADDRESS Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

PHONE NUMBERS (HOME) _____ (WORK) (561) 688 3000

CAN TESTIFY TO: Spanish translation

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) 0 (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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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: _____

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: VILLAREAL, ADRIANA

CASE NUMBER: 23-058425

DATE: Apr 17, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 2244

ENDING TIME: 0017

BREATH TESTS RESULTS: 1) .140vng TIME 2352 A.M. ☐ P.M. ☒ 2) NSP TIME 2357 A.M. ☐ P.M. ☒
3) .142 TIME 0006 A.M. ☒ P.M. ☐ 4) .153 TIME 0009 A.M. ☒ P.M. ☐

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED, BROKEN ENGLISH

ATTITUDE: EMOTIONAL, TALKATIVE, ARGUMENTATIVE

CLOTHING: BLACK DRESS, BLACK FLIP FLOPS

MEDICAL CONDITIONS: 2 BROKEN RIBS, KIDNEY INFECTION

MEDICATIONS: ALPRAZOLAM, SOMA

OTHER:

EYES: BLOODSHOT, GLASSY

ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

COMMENTS:

A/O ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 2321 HOURS

SUBJECT STATED SHE WOULD TAKE BREATH TEST

SUBJECT WAS ARGUMENTATIVE AT THE INSTRUMENT, SUBJECT DID NOT FOLLOW BREATH TEST INSTRUCTIONS

A/O READ I.C AND EXPLAINED

UNSURE IF SUBJECT UNDERSTOOD I.C, SUBJECT STATED SHE WANTED TO TAKE BREATH TEST

BREATH TEST COMPLETED

A/O READ RIGHTS

SUBJECT STATED SHE DID NOT UNDERSTAND HER RIGHTS

Q AND A NOT CONDUCTED

TECH READ BREATH TEST RESULT, A/O EXPLAINED BREATH TEST RESULTS

INTERPRETATION DONE BY DEPUTY D. MARTINEZ PBSO

SUBJECT: V. H. 101, A. H. 10

CASE NUMBER: 11-1084135

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) _____

WHITE: STATE ATTY.

YELLOW: DHSMV

PINK: CENTRAL RECORDS

GOLD: JAIL



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

PBSO CASE # 23-058425 PBSO ZONE 1-12

AGENCY CASE # _____ CRASH CASE # _____

TIME OF STOP/CRASH 22:23 DATE 04/17/2023 DAY Monday

SUBJECT'S NAME Villareal, Adriana, RACE W SEX F

HGT 5'05 WGT 150 DOB 12/23/1966

LOCATION Dulce St / Summit Place Cir, West Palm Beach, FL 33415

ARRESTING OFFICER'S NAME & ID Inv. POINTU P. (16032) AGENCY Palm Beach County Sheriff's Office

DIVISION: CID/DUI

NOTIFIED BY COMMO yes

ARRIVAL AT FACILITY 23:21

ARREST TIME 22:58

BREATH RESULTS:

.140 vnm

NSP

.142

.153

TESTING OFFICER'S ID 8656 PBSO VIDEOTAPE # _____

SUBJECT: VILLAGE 1, 4th CASE NUMBER: 24-058425

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: INV. P. PONTU #16052



**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: 2023010065	Date: 4/18/2023
	Specialist Name/ID: M. Tooks #8557