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## **DUI PROBABLE CAUSE AFFIDAVIT**

On the	22nd	Day of	Aug	ust	at	1848	A.M.	P.M.
Subject:	Alyso	on M. K	Cehler		Case Number:	202400	137	75
Agency:	West Palm	Beach Police	Department		Arresting Officer:	Gittens	#22	63
			Personal	Conta	ict			
<b>Driving Patterr</b>	1		Actual physical contro	ol (physical e	vidence putting the driver b	ehind the wheel)		
the suspect v	vehicle from	the hit and	run had stoppe	ed at 20	a hit and run act 4 Avila Rd. Office driver seat in ph	er Mendez wa	as first	
Observation of	i Deiman				·			
had a strong	odor of an u she spoke. K	inknown alc ehler's eyes	coholic beverag s were glassy	ge emar	vehicle, Alyson Ko nating from her br was very unstead	eath that bed	ame	
Drivers Statem	ents:		<del>/</del>	٠.	•	· ·		<u>'</u>
After the accident inv read Kehler her Miral accident. Kehler state was driving home. Ke	estigation was comp nda Warnings, and sl ed she had gotten of chler stated she was section of Southern E	he stated she under work and went to a driving her vehicle	rstood. After being read restaurant where she hand was the sole occup-	her Miranda ad two glasse ant. Kehler ad	as completed and I would no Warnings, I asked Kehler to es of wine. Kehler said after dvised while driving south or cident, Sofia Cullet. Cullet a	tell me what happens leaving the restaurant is Dixie Hwy she hit is	ed with the to go home a vehicle from	e she
Odors:			1	····· ···· ···	· · · · · · · · · · · · · · · · · · ·	<u>- · · · · · · · · · · · · · · · · · · ·</u>		
I observed Kehler	had a strong odd	or of an unknow	n alcoholic beverag	e emanațir	ng from her breath that	became stronger	as she s	ooke.
General Observations								
Speech: Normal					· · · · · · · · · · · · · · · · · · ·			
Attitude: Coope	rative	···						
Clothing: White	shirt and gray skir	t						
Medical Proble	ms/Medicatio	ns: None						
Other:			· , ————					

### **DUI PROBABLE CAUSE AFFIDAVIT**

Alyson M. Kehler

Case Number: 20240013775

Su	bj	ect:

Roadside Tasks							
Horizontal Gaze Nystagmus							
Left Eye Does Not Follow Smoothly	Right Eye Does Not Follow Smoothly						
Left Eye Jerks at 45 Degree Angle or Less	Right Eye Jerks at 45 Degree Angle or Less						
Distinct Jerking Left Eye at Maximum Deviation	Distinct Jerking Right Eye at Maximum Deviation						
I explained to Kehler I would be checking her eyes and gave her instructions to follow my finger with her eyes and only her eyes. I held up in her head still, Kehler stated she understood. I checked Kehler's eyes for equal pupil size and resting nystagmus. Kehler had equal pupil size only to bollow the tip of my finger. I started passes with my finger from center to maximum deviation then back to create on each eye to chec qualifying Kehler I immediately started passes on each eye to check for distinct and sustained mystagmus at maximum deviation. I moved my approximately eight seconds then back to center for both eyes. During the passes I saw distinct and sustained mystagmus at maximum deviation. I moved my to 45 degrees. I saw nystagmus prior to 45 degrees in each eye. After checking for onset of nystagmus prior to 45 degrees, I started two pe	a and did not have resting nystagrous. I loid Kahler with her eyes and only her eyes at Kahler's eyes for equal Packing, Kahler's eyes tracked equally. After madically the pursuit. During the pesses I sew nystagrous in each eye. After checking for lack of finger from center to maximum deviation, hadding at maximum deviation for lack eyes. I started pesses on each eye to check for direct of nystagrous prior.						
Walk and Turn Task							
I instructed Kehler to stand with her feet together and her arms doright heel touching her left toe along a line (painted line) extending standing in that position until I told her to begin the evaluation. Whi instructional position she almost fell over numerous times. Due to I falling over I did not believe the evaluation could be conducted safe	straight off her left toe and to remain ile attempting to get Kehler into the Kehler's inability to stand without nearly						
One Leg Stand							
After being unable to conduct the walk and turn evaluation I at one leg stand evaluation. I asked Kehler to stand with her feet side and I would tell her when to begin. Kehler again nearly fe can't do this. Due to Kehler's inability to stand without falling of	together and her arms down by her li over numerous times and stated I						
Finger To Nose							
Unable to safely conduction							
Romberg Balance	<u> </u>						
Unable to safely conduction							
Breath Results from Instrument							
1st Result *SNM 2nd Result 0.413	3rd Result 0.403						
County of Palm Beach							
The Following Instrument was notorized or sworn before me this	(DATE)						
Personaly Known Produced Identification							
Notary / Clerk of Courts / Officer (FSS: 117.10)	Signature of Arresting Officer						

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: WEST PALM BEACH PD
Instrument Serial Number: 80-001235 Software: 8100.27
Date of Test: 08/22/2024

Date of Last Agency Inspection: 07/18/2024

Observation Period Began: 19:10 Subject's Name: ALYSON M KEHLER

DOB: 07/24/1982 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	19:47	
	Air Blank	0.000	19:48	<b>Y</b>
	Control Test	0.079	19:48	
	Air Blank	0.000	19:49	
	Subject Sample #1	0.413	19:49	
	Air Blank	0.000	19:50	•
	Air Blank	0.000	19:52	
	Subject Sample #2	0.403	19:52	
	Air Blank	0.000	19:53	
	Control Test	0.079	19:54	
	Air Blank	0.000	19:54	
	Diagnostics Check	OK .	19:54	

Cylinder Lot: 402872586 Exp: 10/12/2026

State of Florida, County of Palm Beach,

Personally appeared before me the undersigned authority, who  $(\checkmark)$  is personally known to me or  $(\_)$  produced  $\_$  as identification, and who after being placed under oath, states:

I ALINA MENDEZ

, 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: 8 22 24

Sworn to (or affirmed) before me this 27 day of

day of 710000 , 2024

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.

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

Instrument Type: Intoxilyzer 8000 Instrument Registered To: WEST PALM BEACH PD Instrument Serial Number: 80-001235 Software: 8100.27

Date of Test: 08/22/2024

Date of Last Agency Inspection: 07/18/2024

Observation Period Began: 19:10 Subject's Name: ALYSON M KEHLER

DOB: 07/24/1982 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	19:41
	Air Blank	0.000	19:41
	Control Test	0.080	19:42
	Air Blank	0.000	19:42
	Subject Sample #1	SNM*	19:43
	Air Blank	0.000	19:43
	Control Test	0.080	19.44
	Air Blank	0.000	19:44
	Diagnostics Check	OK	19:44

<sup>\*</sup>Slope Not Met

Cylinder Lot: 402872586 Exp: 10/12/2026

State of Florida, County of Dalm Beach

Personally appeared before me the undersigned authority, who  $(\underline{\smile})$  is personally known to me or  $(\underline{\phantom{\smile}})$  produced  $\underline{\phantom{\smile}}$  as identification, and who after being placed under oath, states:

I ALINA MENDEZ , 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: T276 Date: 8 22 24

Sworn to (or affirmed) before me this 22 day of August ,

1.3. #0263 (5: Hav 7.3. #0263

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.



# West Palm Beach Police Department Breath Testing Facility Report



Defendant:	Kehler, Alyson	Case #:	20240013775
Arresting Officer:	Mendez#2276	Date:	08/22/2024
Breath Test Resutls:	0.413 g/210L 1949 Time 0.403 g/210L 1952 Time	g/210	
	Note: Times are in Mili		
Breath Operator:	A.	Mendez #22	/6
Maintenance Technician	Inv J Ingra	ssia #1857	
Testing Officer Observati	ons: Slurred		
Attitude:	Calm and polite	<b>Y</b>	
Clothing:	White shirt, white jac	cket, gray skii	rt, and blue shoes
Medical Conditions	None None		
Medications:	None stated		
Other:	None		
		· · · · · · · · · · · · · · · · · · ·	
Arrival Time at Facility/1	Time Twenty (20) Minute Observation	n Started:	1910
Comments:	<b>&gt;</b>		

Kehler arrived at WPBPD booking and the 20-minute observation period began.

Kehler was asked if she would submit to a breath test, in which, she agreed to do so.

On the first attempt to take Kehler first breath sample, the Intoxilyzer machine read Slope Not Met.

A second attempt was conducted to obtain an accurate breath sample.

On the second attempt, the machine read the above breath samples.

SUBJECT: CASE NUMBER:	
QUESTIONS AND ANSWERS	
I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.	, OR
WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT?	
WHERE WERE YOU GOING?	<del></del>
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?	<u></u> (
HOW MUCH? WHERE? WITH WHOM?	<del>-</del>
WHEN DID YOU HAVE YOUR FIRST DRINK? AND YOUR LAST DRINK?	
HOW DID YOU CONSUME YOUR LAST TWO DRINKS?	<del></del>
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?	<del></del>
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?	<del>.</del> .
HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARUUANA TODAY? WHEN? WHEN?	
HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? WHO? WHY?	
RE YOU TAKING ANY PRESCRIPTION MEDICINES? WHAT? WHEN?	
OO YOU HAVE: EPILEPSY?	
GLASS EYE?  FALSE TEETH?	
EAR INFECTION?	
INNER EAR TROUBLE?	•
O VOIL HAVE ANY PROBLEMS WITH VOILE EVES THAT ARE NOT CORRECTED BY CLASSES?	

DO YOU TAKE INSULIN? \_\_\_\_\_ IF SO, WHEN WAS YOUR LAST INJECTION? \_\_\_\_\_

INTERVIEWER:\_\_\_

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? \_\_\_\_\_ WHERE? \_\_\_\_\_

SUB	JECT: CASE NUMBER:
	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 entOR-
I am chen	now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of nical or controlled substances.  OR-
I am and	now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content the presence of chemical or controlled substances.
	NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.
I am	of the
	ou fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for od of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have sested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test our breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you driving into evidence in any criminal proceeding.
SUE	BJECT'S SIGNATURE: (X)
:	CONSTITUTIONAL WARNINGS
IAM	I 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.
<b>5</b> .	If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
<b>6</b> ,	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)



	х	Florida State Statute	Description	Page Number(s)
S	⋈	119.071(4)(c)	Undercover personnel	
L/E Exemptions	o	119.071(2)(e)	Confession	(
Public Info. Exemptions		FL Const. Art. I, s. 16(b)(5)	Marsy's Law – victim information shall be redacted. The term "victim" also includes the victim's lawful representative, the parent or guardian of a minor, or the next of kin of a homicide victim. The term "victim" does not include the accused (ref. page 99 of the CRTM for additional information)	
	0	119.071(2)(j)	Home/employment telephone number, home/employment address, or personal assets of a person who has been the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence	
Public		119.0712(2)	Personal information contained in a motor vehicle record	
		316.650(11)	Driver information contained in a uniform traffic citation	
		119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
le o	⊠	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
f Judic n 2.42		(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request	
ules o		(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses	
Florida Rules of Judicial Administration 2.420	0			
Floi				
			,	
Other		X		
₹		\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		
	0			

#### REVIEW COMPLETED BY

Booking Number:	2024022736	Date: 8/23/2024	•	·	
Booking Number:	2024022736 .	Specialist Name/ID#:	Joe Kovach 44820		