

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

1

Juvenile N

0535874 23 CT 4716 MB 1009

OBTS Number _____ Agency Name **PALM BEACH COUNTY SHERIFF'S OFFICE** Agency Report Number **061-23045300**

Agency ORI Number **FL0: 50000000** Agency Name **PALM BEACH COUNTY SHERIFF'S OFFICE** Agency Report Number **061-23045300**

Charge Type: 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other _____

If Weapon Seized _____ Multiple Clearance Indicator **01**

Location of Arrest (Including Name of Business) **LUCERNE AND N J ST LAKE WORTH FL 33460** Location of Offense (Business Name, Address) _____

Date of Arrest **03/11/2023** Time of Arrest **0715** Booking Date _____ Booking Time _____ Jail Date _____ Jail Time _____ Location of Vehicle **LUCERNE AND N J ST LAKE WORTH FL 33460** *priority towing*

Name (Last, First, Middle) **PHELPS, ARIEL, DIANA** Alias (Name, DOB, Soc. Sec. #, Etc.) _____

Race **W - White** 1. American Indian **W** Sex **F** Date of Birth **9/16/1994** Height **5'2"** Weight **120** Eye Color **BROWN** Hair Color **BROWN** Complexion **LIGHT** Build **SMALL**

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) _____ Marital Status **Single** Religion _____ Indication of: Alcohol Influence Drug Influence

Local Address (Street, Apt. Number) **105 SE 4TH AVE APT B, BOYNTON BEACH FL 33435** (City) _____ (State) _____ (Zip) _____ Mobile Phone **(561) 201-3493** Residence Type: 1. City 2. County 3. Florida 4. Out of State **2**

Permanent Address (Street, Apt. Number) _____ (City) _____ (State) _____ (Zip) _____ Phone _____ Address Source **VERBAL**

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

D/L Number, State **P412004948360, FL** Soc. Sec. Number _____ INS Number _____ Place of Birth (City, State) **DAYTONA, FL** 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 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) 355-8511) informed of any change of address.

Yes, by: (Name) _____ No (Reason) _____ School Attended _____ Grade _____

Property Crime? Yes No Description of Property _____ Value of Property _____

Drug Activity: **D.U.I.** Drug Type: **N** Amount / Unit: **N** Offense #: **23045300** Statute Violation Number: **316.193(1)** Warrant / Capias Number: _____ Bond: _____

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

Drug Activity: **N** Drug Type: **N** Amount / Unit: **N** Offense #: **23045300** Warrant / Capias Number: _____ Bond: _____

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

Drug Activity: **N** Drug Type: **N** Amount / Unit: **N** Offense #: **23045300** Warrant / Capias Number: _____ Bond: _____

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

Drug Activity: **N** Drug Type: **N** Amount / Unit: **N** Offense #: **23045300** Warrant / Capias Number: _____ Bond: _____

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

Court Date and Time **APRIL Day 6TH Year 2023 Time 0830 A.M. P.M.** **23 MAR 12 AM**

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 **03/11/2023**

I consent to receive text reminders of court dates 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 Resisted Arrest Other: _____

Signature of Arresting Officer **M. MORGADO** Name Verification (Printed by Arrestee) _____

Name of Arresting Officer (Print) **M. MORGADO** I.D. # **34265** (PRINT) _____

Signature of Transporting Officer **M. MORGADO** I.D. # **34265** Agency **PBSO** PAGE _____

Witness here if subject signed with an "X" _____ 1 OF _____

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 11TH DAY OF MARCH 20 23, AT 0630 AM PM

SUBJECT: PHELPS, ARIEL, DIANA CASE NUMBER: 23045300

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: M. MORGADO

PERSONAL CONTACT

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

On 3/11/2023, at around 0630 hours, PBSO received a call about a yellow car that crashed into a building near Lucerne Ave and N J St in Lake Worth.--

Upon arrival, I observed a yellow Hyundai Tiburon bearing an FL tag (Y15LSG) which had crashed through the window of a building. As I approached the driver's side, I observed a white female (later identified as Ariel D Phelps) behind the wheel sleeping with her seat belt on. I shook her awake and asked her to step out. I also observed an open Budweiser beer bottle in the center console.--

OBSERVATION OF DRIVER:

I approached the vehicle and observed a white female, later identified as Ariel Phelps, who was wearing a black shirt, and blue jean shorts sleeping behind the wheel of her registered vehicle. The vehicle had crashed through a building window. I also noticed the vehicle was still in reverse. I put the vehicle in park then took the keys out.

DRIVER'S STATEMENTS:

After I woke Phelps up, I told her she had crashed through a building, she looked at the building and told me "First of all that definitely was not me"

ODORS:

smelled the odor of alcohol emitting from her person

GENERAL OBSERVATIONS

SPEECH: slurred

ATTITUDE: happy

CLOTHING: black shirt, blue jeans

MEDICAL/OTHER: none stated

STATE OF FLORIDA
COUNTY OF PALM BEACH

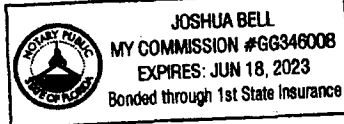
M. MORGADO
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 11T day of MARCH 2023 by M. MORGADO

(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: PHELPS, ARIEL, DIANA

CASE NUMBER 23045300

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|---|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT |
| <input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input checked="" type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input checked="" type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

WALK & TURN:

Phelps was positioned on a painted white line that was on the ground, which was on a smooth and level surface, free of any debris and it was well lit, being daylight time. Phelps was instructed to place her left foot on the line and her right foot in front of the left touching heel to toe. To keep her hands at her side and stay in this position until she was instructed to do otherwise. Once placed into the instructed position, it was explained and demonstrated the rest of the task. During the task, I observed Phelps swayed while balancing, stops walking to steady self, did not touch heel to toe one time, used arms to maintain balance +6", did not turn properly, loses balance while turning, which she staggered and stumbled. Incorrect number of steps, which were 10.

ONE LEG STAND:

Phelps was instructed to stand with her feet together and arms at her side. Once Phelps was placed into the instructed position, I explained and demonstrated. Once Phelps stated she understood, the task was performed. During the task, I observed, Phelps could not maintain the instructed position, she started too soon and swayed while standing stationary. While raising her foot, she swayed while balancing, and could not keep her hands down at her side, and used them for balance.

FINGER TO NOSE:

Phelps was instructed to stand with her feet together, make each hand into a fist keeping extended his index fingers and to place his palms facing up. She was instructed to lower her arms by her side. She was instructed and demonstrated the proper hand and arm position and for her to remain in this position while demonstrated the rest of the task. She was instructed and demonstrated her to tilt her head back approximately 45 degrees and close her eyes while waiting for a verbal command of left or right. On the command of "left" or "right", she would raise the requested hand, touch the tip of his finger to the tip of her nose, then bring her hand immediately back down to her side. During the instruction and demonstration of the task she swayed heavily while standing in the instructional position. Phelps stated she understood. She was instructed to start the task as explained. During the task, I observed Phelps did not keep her eyes closed, and was unable to properly place the tip of her finger to the tip of her nose.

ROMBERG ALPHABET:

Phelps was asked if she could recite the entire English alphabet. She stated she was able to recite the English alphabet and was instructed to place their feet together with her arms at their side and stay in this position until told to do otherwise. She was instructed her that upon starting she was to tilt her head back approximately 45 degrees and close their eyes. She would begin to state the alphabet in a slow and methodical manner without singing or rhyming it. She was asked her if she understood the instructions and she verbally replied she understood. During the instructions she continued to sway while standing stationary. She was instructed Phelps to start the task as explained. During the task, I observed that Phelps did not keep eyes closed, swayed more than (+2") from side to side, and used arms for balancing (more than 6').

BREATH TEST RESULTS: 1) .212 2) .211 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

M. MORGADO

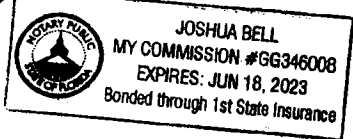
(Signature of Arresting/Investigative Officer)

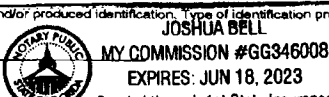
The foregoing instrument was sworn to or affirmed and subscribed before me this 11 day of MARCH 2023 by M. MORGADO

(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. 117.30)



OBTS Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 NTA	3 Request for Warrant 4 Request for Citrus	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 23045300					
	Charge Type Check as many as apply	<input type="checkbox"/> 1 Felony <input type="checkbox"/> 2 Traffic Felony		<input checked="" type="checkbox"/> 3 Misdemeanor <input type="checkbox"/> 4 Traffic Misdemeanor		<input type="checkbox"/> 5 Ordinance <input type="checkbox"/> 6 Other		Special Notes	
DEF	Name (Last, First, Middle) PHELPS, ARIEL, DIANA			Alias	Race W	Sex F	Date of Birth 9/16/1994		
	Charge Description D.U.I.		316.193(1)		Charge Description				
CHARGES	Charge Description		Charge Description		Charge Description				
	Charge Description		Charge Description		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
<p>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:</p> <input checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.									
On the 11TH day of MARCH 20 23 at 0630 <input type="checkbox"/> A.M <input type="checkbox"/> P.M (Specifically include facts constituting cause for arrest.)									
<input type="checkbox"/> Marsy's Law CVI FL. Const. Art.1 § 16(b)									
<p>On 3/11/2023, at around 0630 hours, PBSO received a call about a yellow car that crashed into a building near Lucerne Ave and N J St in Lake Worth.--</p> <p>Upon arrival, I observed a yellow Hyundai Tiburon bearing an FL tag (Y15LSG) which had crashed through the window of a building. As I approached the driver's side, I observed a white female (later identified as Ariel D Phelps behind the wheel sleeping. I shook her awake and asked her to step out. I also observed an open Budweiser beer bottle in the center console.--</p> <p>Fire Rescue arrived and provided medical care reference Run# PBC2330461. After Fire rescue was done, I spoke with Phelps again, and I could smell the odor of alcohol emitting from her person.--</p> <p>Deputy Bradford 24637 arrived and conducted the Field Sobriety Tasks(FST) to determine if Phelps was driving under the influence. See her supplemental probable cause form where Phelps did not perform the FSTs satisfactorily.--</p> <p>Based upon the above facts and circumstances, I find probable cause to charge Phelps with DUI pursuant to FSS 316.193 (1)</p>									
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH			M. MORGADO					
	(Signature of Arresting/Investigative Officer)								
The foregoing instrument was sworn to, affirmed and subscribed before me this 11T day of MARCH 20 23 by M. MORGADO									
(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced KNOWN									
Joshua Bell (#8656)						PAGE 1 OF 1			
Notary Public, Clerk of Court, Officer (F.S. Stat. § 2-70)			Bonded through 1st State Insurance						

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Copies	1	Juvenile	N
ADMIN	Agency ORI Number FLO 500000	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06- 23-045300					
	Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes:	
CHARGES	Name (Last, First, Middle) Phelps Ariel D			Alias	Race W	Sex F	Date of Birth 09/16/1994	
	D.U.I.			316.193(1)				
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			
<p>The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The Person taken into custody</p> <p><input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>11th</u> day of <u>March</u> 20<u>23</u> at <u>0910</u> <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p><input type="checkbox"/> Marsy's Law CVI FL Const. Art.1 § 18(b)</p>								
Supplemental Probable Cause Affidavit								
Personal Contact:								
<p>On 3/11/2023 at approximately 0840hrs, I responded to the scene of a crash which is located at Lucerne Ave. and N J St in Lake Worth Beach FL, Palm Beach County, Florida. D/S Morgado #34265, advised me that he had witnessed the subject in a yellow Hyundai Tiburon bearing FL tag Y15LSG. D/S Morgado advised that the defendant's vehicle was pinned into a building. D/S Morgado noticed that the defendant had articulable indicators of impairment, so he called for assistance to conduct a possible DUI investigation. D/S Morgado identified the defendant, to me, as the driver, at the time of the stop.</p> <p>On Saturday 3/11/2023 at approximately 0645hours, I was dispatched to the area of Lucerne Ave and N J St as a backup deputy for a vehicle crash. Deputy Morgado observed the driver of the vehicle involved in the crash, Ariel Phelps, passed out behind the wheel of the vehicle (see his Probable Cause Affidavit for further), and noticed an open bottle of an unknown alcoholic substance in the cup holder of the front seat of the vehicle.</p> <p>I made contact with the driver, later identified via his Florida Driver License as white male Ariel Diana Phelps 9/16/1994. I observed Phelps was wearing a long sleeve black shirt, blue jean shorts, and black and white with color spots sneakers. At this time I introduced myself, and explained to Phelps what was going on. I explained to Phelps based on observations that Deputy Morgado made initially, I would be assisting him with conducting a series of Tasks to ensure she was able to drive. I also observed that she was slurring her words, and had bloodshot, glassy eyes.</p> <p>I asked Phelps what medical problems and/or previous injuries she had, and she advised she had no injuries that could prevent her from doing the tasks. I asked Phelps if she wore any glasses or contacts to correct his vision, to which she stated yes, but does not require them to conduct the tasks.</p> <p>At this time, I began conducting the Standardized Field Sobriety Tasks:</p>								
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p style="text-align: right;">D/S M. Bradford (ID #) 24637</p> <p>(Signature of Arresting/Investigative Officer)</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>11th</u> day of <u>March</u> 20<u>23</u> by <u>D/S M. Bradford 24637</u></p> <p>(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>KNOWN</u> <u>LEO</u></p> <p>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>								
ADMINISTRATIVE								

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile	N
ADMIN	Agency ORI Number FLO 500000	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06- 23-045300					
	Charge Type: Check as many as apply.		Special Notes:					
DEF.	Name (Last, First, Middle) Phelps Ariel D		Alias	Race W	Sex F	Date of Birth 09/16/1994		
	Charges D.U.I.		316.193(1)					
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		
<p>The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The Person taken into custody</p> <p><input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>11</u>th day of <u>March</u> 20<u>23</u> at <u>0910</u> <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p><input type="checkbox"/> Marsy's Law CVI FL. Const. Art.1 § 16(b)</p> <p>HGN -Once positioned in the front of my vehicle, I continued my investigation. I instructed Phelps to keep her hands by her side, stand with her feet together, and follow a blue light stimulus with his eyes not turning her head. I asked her if she understood my instructions. Once Phelps verbally stated she understood my instructions before the task began. Phelps swayed while standing stationary. I observed both eyes to be red, bloodshot, and glossy. Her left and right eye displayed equal pupil size, equal tracking, and a lack of smooth pursuit. I observed distinct and sustained nystagmus was present in both her left and right eye at maximum deviation during two separate four second evaluations. The onset of nystagmus was prior to a 45 degree angle in both her left and right eye during two separate four second evaluations.</p> <p>WALK AND TURN-I positioned Phelps on a painted white line that was on the ground, which was on a smooth and level surface, free of any debris and it was well lit, being daylight time. I instructed Phelps to place her left foot on the line and her right foot in front of the left touching heel to toe. I instructed her that she was to keep her hands at her side and stay in this position until I instructed her to do otherwise. Once placed into the instructed position, I explained and demonstrated the rest of the task. During the task, I observed Phelps swayed while balancing, stops walking to steady self, did not touch heel to toe one time, used arms to maintain balance +6", did not turn properly, loses balance while turning, which she staggered and stumbled. Incorrect number of steps, which were 10.</p> <p>ONE LEG STAND- I placed Phelps with her feet together and arms at her side. Once Phelps was placed into the instructed position, I explained and demonstrated. Once Phelps stated she understood, the task was performed. During the task, I observed, Phelps could not maintain the instructed position, she started too soon and swayed while standing stationary. While raising her foot, she swayed while balancing, and could not keep her hands down at her side, and used them for balance.</p> <p>FINGER TO NOSE -I instructed Phelps to stand with her feet together, make each hand into a fist keeping extended his index fingers and to place his palms facing up. She was instructed to lower her arms by her side. I instructed and demonstrated the proper hand and arm position and for her to remain in this position while I demonstrated the rest of the task. I instructed and demonstrated her to tilt her head back approximately 45 degrees and close her eyes while waiting for a verbal command of left or right. On the command of "left" or "right", she would raise the requested hand, touch the tip of his finger to the tip of her nose, then bring her hand immediately back down to her side. During the instruction and demonstration of the task she swayed heavily while standing in the instructional position. I asked Phelps if she understood the instructions I provided and she verbally stated she understood. I instructed her to start the task as explained. During the task, I observed Phelps did not keep her eyes closed, and was unable to properly place the tip of her finger to the tip of her nose.</p> <p>RHOMBERG ALPHABET - I verbally inquired if Phelps could recite the entire English alphabet. She stated she was able to recite the English alphabet and I instructed her to place their feet together with her arms at their side and stay in this position until told to do otherwise. I instructed her that upon starting she was to tilt her head back approximately 45 degrees and close their eyes. She would begin to state the alphabet in a slow and methodical manner without singing or rhyming it. I asked her if she understood the instructions and she verbally replied she understood. During the instructions she continued to sway while standing stationary. I instructed Phelps to start the task as explained. During the task, I observed that Phelps did not keep eyes closed, swayed more than (+2") from side to side, and used arms for balancing (more than 6').</p>								
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p style="text-align: right;">D/S M. Bradford (ID #) 24637</p> <p>(Signature of Arresting/Investigative Officer)</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>11th</u> day of <u>March</u> 20<u>23</u> by <u>D/S M. Bradford</u> <u>24637</u></p> <p>(Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification. Type of identification produced <u>KNOWN</u> <u>LEO</u>)</p> <p>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>								
PAGE 2 OF 2								

WITNESS LIST

CASE NUMBER: 23045300

ARRESTING OFFICER: M. MORGADO

ADDRESS: _____

PHONE NUMBERS (HOME): _____ (WORK) 561-901-5238

CAN TESTIFY TO: driver behind wheel and first observations

NAME: D/S BRADFORD #24637

ADDRESS: _____

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

CAN TESTIFY TO: FSTs

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY:

SUBJECT:

DATE:

BEGINNING TIME:

CASE NUMBER:

VIDEO DVD NUMBER:

ENDING TIME:

BREATH TESTS RESULTS: 1) TIME A.M. P.M. 2) TIME A.M. P.M.

3) TIME A.M. P.M. 4) TIME A.M. P.M.

BREATH OPERATOR:

MAINTENANCE TECHNICIAN:

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE:

CLOTHING:

MEDICAL CONDITIONS:

MEDICATIONS:

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 0738 HOURS

SUBJECT ASKED WHAT HAPPENS IF SHE DOES NOT TAKE BREATH TEST

A/O READ I.C

SUBJECT STATED SHE UNDERSTOOD I.C

SUBJECT STATED SHE WOULD TAKE BREATH TEST

TECH READ BREATH TEST RESULTS

SUBJECT STATED SHE UNDERSTOOD BREATH TEST RESULTS

A/O READ RIGHTS

SUBJECT STATED SHE UNDERSTOOD HER RIGHTS

SUBJECT DECLINED TO ANSWER Q AND A

SUBJECT: Melby, Angel D.

CASE NUMBER: 23-04530

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) Ronald A. [Signature]

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) Ronald A. [Signature]

WHITE: STATE ATTY.

YELLOW: DHSMV

PINK: CENTRAL RECORDS

GOLD: JAIL

SUBJECT: M. M. ... CASE NUMBER: 22-0415 JFC

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: D/S M. M. ... # 34915



**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	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2023006651	Date: 3/12/2023
	Specialist Name/ID: M. Tooks #8557