

50-2023 CT 015821 AMB

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 FL01 5, 0, 0, 0, 0, 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 0 6 -1 23-106845	
Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	If Weapon Seized Enter Type
Location of Arrest (Including Name of Business) 23052 Sandalfoot Plaza Boca Raton, FL 33428		Location of Offense (Business Name, Address) 23032 Sandalfoot Plaza Dr, Boca Raton, FL 33428	
Date of Arrest 09/04/2023	Time of Arrest 2057	Booking Date	Booking Time
Name (Last, First, Middle) Miller, Betty, H			
Aliases (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White B - Black	Sex M - Male F - Female	Date of Birth 8/12/1959	Height 5'04
Weight 150	Eye Color Blue	Hair Color Blk	Complexion Light
Build Small			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)			
Local Address (Street, Apt. Number) 1034 Marlin Dr, Boca Raton, FL 33428		Mobile Phone (561) 271-7027	Residence Type: 1. City 2. County 3. Florida 4. Out of State
Permanent Address (Street, Apt. Number) 5654 NW 24th ST, Okeechobee, FL 34972		Phone ()	Address Source Verbal
Business Address (Name, Street)		Phone ()	Occupation Home Depot Millwork Specialist
D/L Number, State M-460-088-59-792-0, FL	Soc. Sec. Number	INS Number	Place of Birth (City, State) Indianapolis, IN
Citizenship US			
Co-Defendant (Last, First, Middle)		Race	Sex
Co-Defendant (Last, First, Middle)		Race	Sex
Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other		Name (Last)	(First)
Address (Street, Apt. Number)		(City)	(State)
Notified by: (Name)		Date	Time
Released To: (Name)		Relationship	Date
Juvenile Disposition 1. Handled/Processed within Dept. and Released. 2. TOT HRS/DYS 3. Incarcerated			
The above address was provided by: <input type="checkbox"/> defendant and/or <input type="checkbox"/> 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. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No (Reason)		School Attended	Grade
Property Crimes? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property	
Value of Property			
Drug Activity S. Sell N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Dispense/Distribute
M. Manufacture/Produce/Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine	B. Barbiturate C. Cocaine E. Heroin
H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/Equipment S. Synthetic	U. Unknown Z. Other	
Charge Description Driving Under the Influence		Counts 01	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Statute Violation Number 316.193(1A)		Violation of ORD #	
Drug Activity N	Drug Type N	Amount / Unit	Offense # 23-106845
Warrant / Capias Number		Bond	
Charge Description		Counts	Domestic Violence
Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #
Warrant / Capias Number		Bond	
Charge Description		Counts	Domestic Violence
Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #
Warrant / Capias Number		Bond	
Charge Description		Counts	Domestic Violence
Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #
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			
Court Date and Time Month September Day 28 Year 2023 Time 0830 A.M. <input checked="" type="checkbox"/> P.M. <input type="checkbox"/>			
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 09/04/2023	
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.			
HOLD for other agency		Signature of Arresting Officer X	Name Verification (Printed by Arrestee)
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other	Name of Arresting Officer (Print) Inv. C. Ward 16305	I.D. # 16305
Transporting Officer Inv. C. Ward 16305		I.D. # 16305	Agency PBSO
Witness here if subject signed with an "X"		PAGE 1 OF 1	

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0130 h2

1908

Agency ORI Number: FLD 5 0 0 0 0 0 Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE Agency Report Number: 23-106845

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

Name (Last, First, Middle): Miller, Betty, H Alias: _____ Race: W Sex: F Date of Birth: 8/12/1959

Charge Description: Driving Under the Influence 316.193(1A)

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. was observed by _____ who told that he/she saw the arrested person commit the below acts.
 confessed to _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.
 On the 4 day of September 20 23 at 2017 A.M P.M (Specifically include facts constituting cause for arrest.)

Marry's Law CVI FL Const. Art. 1 § 19(b)

The area was flat and even to the naked eye. The area was clear of any large debris. The area was dark and illuminated by the lights from my PBSO patrol vehicle. The area was dry and not windy. The Fields Sobriety Tasks were recorded on my incar video system as well as my Body Worn Camera.

Horizontal Gaze Nystagmus (HGN)/Pen Light Task

The defendant was placed with their feet together and hands down by their side. The defendant was instructed to await the completion of the instructions prior to beginning the task. The defendant acknowledged that they clearly understood my instructions. I then instructed the defendant on the task. The defendant stated that they clearly understood my instructions for the task. I placed my stimulus in front of the defendant and ask the defendant if they could see it to which he said "yes." I asked the defendant what color the stimulus was to which they answered, "red." Upon commencing the task the defendant moved their head side to side instead of following with their eyes only, anticipated the stimulus, and did not follow the stimulus as instructed. I had to reinstruct the defendant multiple times during the task to follow the stimulus with their eyes only. During the task, I observed that the defendant had equal pupil size and did not exhibit resting nystagmus. The defendant's eyes tracked equally. I observed a lack of smooth pursuit in both of the defendant's left and right eyes. I observed a distinct and sustained nystagmus, a quivering/jerking from side to side, while the stimulus was held at maximum deviation in both of the defendant's left and right eyes. I observed the onset of nystagmus with the stimulus held at/or prior to 45 degrees in both of the defendant's left and right eyes.

I then checked the defendant for Vertical Gaze Nystagmus (VGN). I did not observe a distinct and sustained nystagmus at maximum deviation in both of the defendant's left and right eyes.

Walk and Turn:

I placed, with the assistance of another deputy, an approximately 2" wide piece of yellow on the ground. I asked the defendant if they knew their left from their right which they did. I asked the defendant if they could see the line and they stated that they did. I asked the defendant what color the line was and they stated yellow. I attempted to place the defendant in the instructional position by having them place their left foot on the line with their right foot in front of the left, heel to toe. At this point the defendant stated that she had leg problems and that she had trouble walking and balancing. At this time I decided to conduct the seated battery of Standardized Field Sobriety Tasks.

STATE OF FLORIDA
 COUNTY OF PALM BEACH
 Inv. C. Ward 16305
 (Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 4 day of September 20 23 by Inv. C. Ward

(Print name of Arresting/Investigative Officer), who is personally known to me, and the type of identification produced: Known LEO

Notary Public, Clerk of Court, Officer (F.S.B.) 127-11
 THOMAS HENRY LEAHEY
 Notary Public - State of Florida
 Commission # HH 408332
 My Comm. Expires Jun 20, 2027
 STATE ASSOCIATION OF NOTARIES AFFIDAVIT OF DEFENDANT (N.T.A.'s ONLY)

Agency ORI Number: FLO 5 0 0 0 0 0 Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE Agency Report Number: 23-106845

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

Name (Last, First, Middle): Miller, Betty, H Race: W Sex: F Date of Birth: 8/12/1959

Charge Description: Driving Under the Influence 316.193(1A)

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. was observed by _____ who told that he/she saw the arrested person commit the below acts.
 confessed to _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.

On the 4 day of September 20 23 at 2017 A.M P.M (Specifically include facts constituting cause for arrest.)

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

At this time I found probable cause to believe that the defendant was impaired for the purposes of operating and/or being in actual physical control of a motor vehicle pursuant to Florida State Statute 316.193(1a). I handcuffed the denfedant to the rear. I checked the handcuffs for proper fit and double locked them. I then placed the defendant in the rear of my PBSO patrol vehicle.

An inventory search of the vehicle was conducted prior to tow per PBSO policy. I located nothing to mention inside the vehicle. The vehicle was towed by rotation by Boca Raton Towing to their impound lot.

I transported the Defendant to the Palm Beach County Jail Breath Alcohol Testing (B.A.T.) center.

Once at the Breath Alcohol Testing Center I placed the defendant in a centrally located position where they could be easily monitored. I observed the defendant for 20 uninterrupted minutes during which time they did not ingest anything and/or regurgitate. During this time the defendant requested to use the restroom. The defendant's handcuffs were moved to the front where they were checked for proper fit and double locked. The defendant was then allowed to use the restroom in the presence of Breath Tech Operator (BTO) M. Gonzalez # 41017. While using the restroom the defendant slipped, hitting her face. Palm Beach County Fire Rescue was called to the BAT and the defendant was transported to Wellington Regional Medical Center for treatment reference the facial injuries cut to the lip.

Due to the cut to the lip which was actively bleeding a breath sample became impractical as to not contaminate the instrument. I requested a blood sample from the defendant for the purposes of deterring the presence of Alcohol and or Chemical or controlled substances. The defendant refused. The defendant was read implied consent which she stated that she didn't understand. She was read implied consent again, slower, which was also explained to her. She stated that she understood. I again asked her if she would give me a lawful sample of her blood. She again refused.

STATE OF FLORIDA COUNTY OF PALM BEACH Inv. C. Ward 16305
 (Signature of Arresting Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 4 day of September 20 23 by Inv. C. Ward

(Print name of Arresting/Investigative Officer), who is personally known and identified to me as _____ Known LEO

Notary Public, Clerk of Court, Officer (F.S.B. 117.10) THOMAS HENRY LEAHEY Notary Public - State of Florida Commission # HH 408332 My Comm. Expires Jun 20, 2027

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 4 DAY OF September 20 23, AT 2017 AM PM

SUBJECT: Miller, Betty, H CASE NUMBER: 23-106845

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. C. Ward 16305

PERSONAL CONTACT

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

At approximately 2022 hrs, I was called to the scene of a traffic stop in the area of 23032 Sandalfoot Plaza Dr, unincorporated Boca Raton, Palm Beach County.

I arrived at the scene at approximately 2030 hrs. I was advised by D/S E. Alves 32404, who stated that he had observed the vehicle not stop for a stop sign. He stated that he activated his lights to stop the vehicle which slowed and stopped before quickly accelerating through the parking lot. The vehicle eventually came to a stop in front of the Turn 3 Bar. D/S Alves made contact with the defendant, Betty Miller, who was the sole occupant of the vehicle. He stated that he observed articulable signs of impairment and called for a DUI investigator to respond. (See Supplemental PC for further.)

OBSERVATION OF DRIVER:

I made contact with the defendant, later identified by their Florida Driver's License as, Betty Miller. I observed that the defendant had red watery eyes. The defendant had the odor of an unknown alcoholic beverage, based on my training and life experiences, that came from their breath which intensified as they spoke to me. I asked the defendant if they had any medical problems or had taken any medications and the defendant said no. I asked the defendant if she had taken any drugs and she stated that she did not. I asked the defendant if she had taken any marijuana and she stated that she did not. I asked how much they had had to drink and the defendant held up two fingers prior to saying three drinks and changing her fingers to three fingers. She stated that she had one Michelob Ultra and drinks of Crown Royal. She stated that she had been at the turn 3 bar and had left and came back. She stated that she was agitated.

I asked the defendant to exit the vehicle. The defendant swayed while standing and while walking to the front of my vehicle.

I asked the defendant to perform voluntary field sobriety tasks. The defendant consented.

DRIVER'S STATEMENTS:

I asked the defendant if they had any medical problems or had taken any medications and the defendant said no. I asked the defendant if she had taken any drugs and she stated that she did not. I asked the defendant if she had taken any marijuana and she stated that she did not. I asked how much they had had to drink and the defendant held up two fingers prior to saying three drinks and changing her fingers to three fingers. She stated that she had one Michelob Ultra and drinks of Crown Royal. She stated that she had been at the turn 3 bar and had left and came back. She stated that she was agitated.

ODORS:

I could smell the odor of an unknown alcoholic beverage, based on my training and life experiences, which came from the defendant's breath and intensified as they spoke to me.

GENERAL OBSERVATIONS

SPEECH: slurred

ATTITUDE: agitated, argumentative, mood swings, jovial,

CLOTHING: White Shirt, Black Pants, Black Sandals

MEDICAL/OTHER: I asked the defendant if they had any medical problems or had taken any medications and the defendant said no. I asked the defendant if she had taken any drugs and she stated that she did not. I asked the defendant if she had taken any marijuana and she stated that she did not. I asked how much they had had to drink and the defendant held up two fingers prior to saying three drinks and changing her fingers to three fingers. She stated that she had one Michelob Ultra and drinks of Crown Royal.

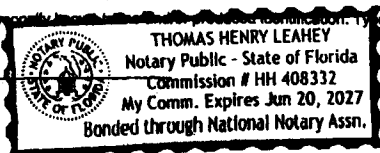
STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. C. Ward 16305
Signature of Arresting/Investigative Officer

This foregoing instrument was sworn to or affirmed and subscribed before me this 4 day of September 20 23 by Inv. C. Ward 16305

Print name of Arresting/Investigative Officer, who is personally known to me, and probable cause commission: Type of identification produced Known LEO

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



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:
See P.C.

FINGER TO NOSE:

The defendant was instructed to sit with their feet together in front of them and their hand down by their side with their index finger pointed. The defendant was then instructed to remain in the position throughout the instructions and demonstration until instructed to begin. The defendant acknowledged and stated that they clearly understood these instructions. The defendant mimicked me raising their arms prior to being told to start. I instructed the defendant on the task and demonstrated the task. The defendant acknowledged the instructions stating that they clearly understood them. When told to begin the defendant closed their eyes but hesitated prior to tipping their head back. The defendant proceeded to miss/search for the tip of their nose with the tip of their finger on every attempt and started with the wrong hand on the third right.

PALM PAT:

The defendant was sat in the chair with their feet in front of them and their hands in front of them one hand palm up and the other hand palm down touching. The defendant was instructed to remain in this position and to not start the task prior to being told to do so. The defendant was then instructed on the task which were also demonstrated. The defendant stated that she understood. The defendant was then told to begin and she did not proceed with the task as instructed. I asked the defendant if she understood the instructions and she stated that she did not. She was again instructed on the task which she stated that she understood. Once told to begin the defendant rolled her hand, chopped her hand and began moving both hands instead of just one hand. The defendant did speed up as instructed.

HAND COORDINATION:

The defendant was sat in the chair with her hands in front of her. She was placed into the instructional position and told not to begin until told to do so. The defendant was instructed on the task and demonstrated. The defendant did not remain in the instructional position. The defendant eventually stated that she understood the instructions. The defendant then stepped her hands 4 steps out incorrectly and stopped. She began asking for additional instruction stating that she didn't understand the instructions. The defendant was again placed in the instructional position. The defendant was again instructed on the task which was also demonstrated. The defendant stated that she understood. The defendant improperly stepped her hands the four steps. She did not clap her hands and stopped the task.

ROMBERG ALPHABET:

The defendant was sat in her hand. The defendant was then instructed to remain in the position throughout the instructions and demonstration until instructed to begin. The defendant acknowledged and stated that they clearly understood these instructions. The defendant stated that she knew her ABC's from A to Z. I instructed them on the task and then demonstrated the task. The defendant acknowledged the instructions stating that they clearly understood them. The defendant then proceeded to state their alphabet correctly rhyming them as she was told not to do.

BREATH TEST RESULTS:

1) Blood Refusal	2)	3)	4)
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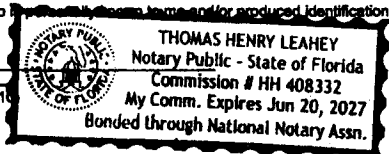
STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. C. Ward 16305
Signature of Arresting/Investigative Officer

This foregoing instrument was sworn to or affirmed and subscribed before me this 4 day of September 2023 by Inv. C. Ward 16305

Print name of Arresting/Investigative Officer, who personally knows me and/or produced identification. Type of identification produced Known LEO

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





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

PBSO CASE # 23-106845 PBSO ZONE 7-43

AGENCY CASE # _____ CRASH CASE # _____

TIME OF STOP/CRASH 2017 DATE 09/04/2023 DAY Monday

SUBJECT'S NAME Miller, Betty, H RACE W SEX F

HGT 5'04 WGT 150 DOB 8/12/1959

LOCATION , Boca Raton, FL 33428

ARRESTING OFFICER'S NAME & ID Inv. C. Ward 16305 (16305) AGENCY Palm Beach County Sheriff's Office

DIVISION: DUI-CID

NOTIFIED BY COMMO Yes

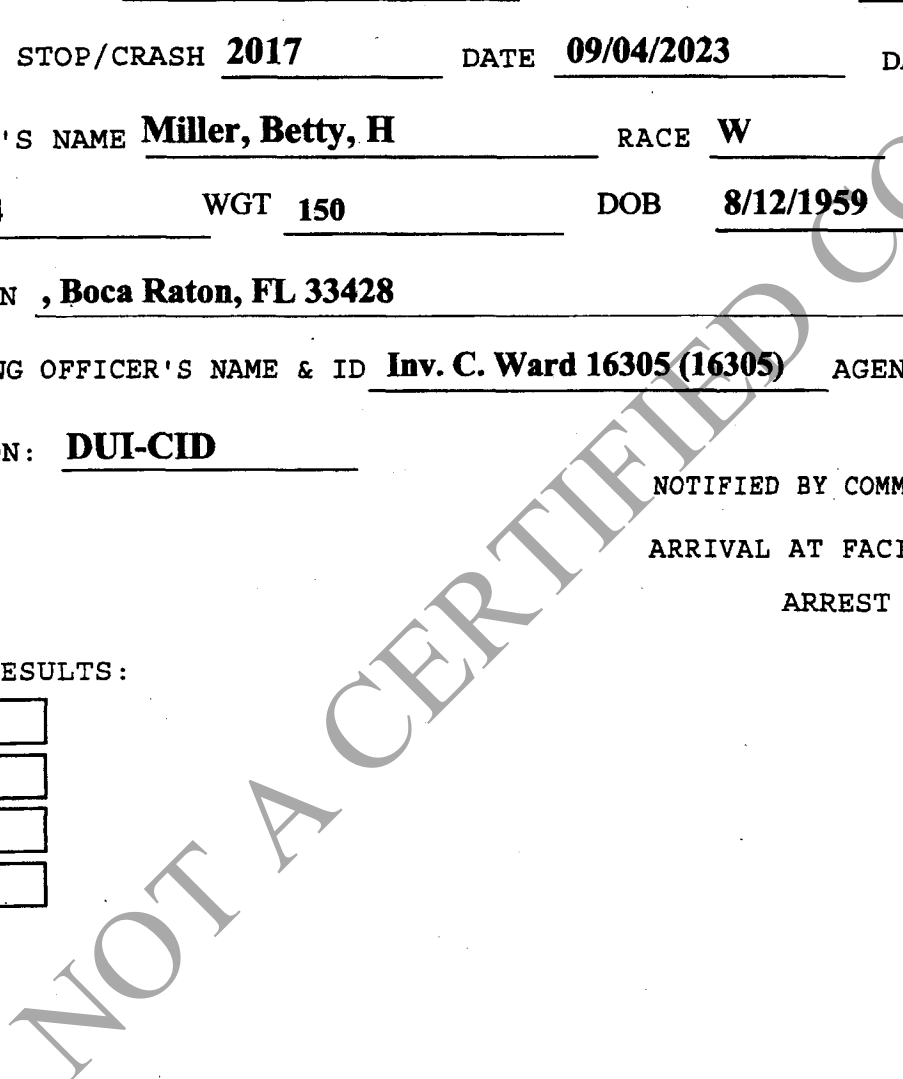
ARRIVAL AT FACILITY _____

ARREST TIME 2057

BREATH RESULTS:

- 1)
- 2)
- 3)
- 4)

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



WITNESS LIST

CASE NUMBER: 23-106845

ARRESTING OFFICER: Inv. C. Ward 16305

ADDRESS: 3228 Gun Club Rd, West Palm Beach, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) 561-851-1130

CAN TESTIFY TO: DUI Investigation

NAME: D/S E. Alves # 32404

ADDRESS: 3228 Gun Club Rd, West Palm beach, FL

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

CAN TESTIFY TO: Wheel Witness, Traffic Stop

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: _____

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: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NOT A CERTIFIED COPY

SUBJECT: Miller, Betty H

CASE NUMBER: 23-166895

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) D. H. [Signature]

WHITE: STATE ATTY.

YELLOW: DHSMV

PINK: CENTRAL RECORDS

GOLD: JAIL

SUBJECT: Miller, Betty H CASE NUMBER: 23-106845

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: _____

**STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BLOOD TEST**

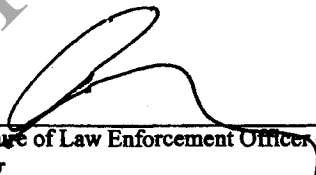
I, Inv. C. WARD, a duly certified Law Enforcement Officer or Correctional Officer,
(Person reading Implied Consent Warning)
am a member of Palm Beach County Sheriffs Office, and I do swear
(Name of enforcement agency)
or affirm that on or about the FOURTH day of September, 2023, at 8:57 PM

DRIVER BETTY HAWLEY MILLER
(Type or Print) FIRST MIDDLE OR MAIDEN LAST

DL # M460088597920, state of FL, appeared for treatment at a hospital,
clinic, or other medical facility pursuant to s. 316.1932(1)(c), Florida Statutes, and a breath or urine test was impossible or impractical.

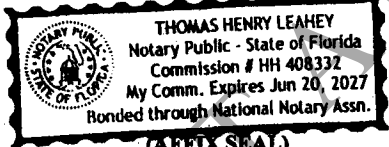
That on or about the FOURTH day of September, 2023, at 10:55 PM
in Palm Beach County,

I requested that the driver submit to a **BLOOD** test for the purpose of determining its alcohol content and/or the presence of chemical or controlled substances. I informed the driver that refusal to submit to a blood test would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended, or if he or she had been previously fined under s. 327.35215, F.S., for refusing to submit to a breath, urine, or blood test. Nonetheless, the driver refused to submit to the test requested.



Signature of Law Enforcement Officer or Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (s. 117.10, F.S.)



(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before
me this 05 day of September, 2023
by Jim C Ward #16305
who is personally known to me or who has produced
Jim as identification.
Notary Public TLS

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title _____

Date _____

Note: Mail or hand deliver to the designated Bureau of Administrative Reviews office, Department of Highway Safety and Motor Vehicles, with the driver's license, the appropriate copy of the UTC, and the probable cause affidavit.

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- 23106845						
	Charge Type Check as many as apply.		1. Felony <input type="checkbox"/>	2. Traffic Felony <input type="checkbox"/>	3. Misdemeanor <input type="checkbox"/>	4. Traffic Misdemeanor <input type="checkbox"/>	5. Ordinance <input type="checkbox"/>	6. Other <input type="checkbox"/>	Special Notes
CHARGES/DEF	Name (Last, First, Middle) Miller Betty Hawley		Alias			Race W	Sex F	Date of Birth 08/12/1959	
	Victim's Name (Last, First, Middle)		Race	Sex	Date of Birth				
VICTIM	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 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.</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>04th</u> day of <u>September</u>, 20<u>23</u> at <u>0817</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p><input type="checkbox"/> Morsy's Law CVI FL Const. Art.1 §16(b)</p> <p>On 09/04/2023, at approximately 2017 hours, I was patrolling the area of SW 66th Avenue and Sandalfoot Blvd in the incorporated Boca Raton/ Palm Beach County, Florida 33433. While in the area, I observed a Black Jeep SUV bearing FL tag HSSP31 driving at a high-speed rate, approaching the intersection mentioned above, and failing to come to a complete stop at a stop sign while driving eastbound on Sandalfoot Blvd before making a right turn onto southbound sw 66th ave at the intersection mentioned above.</p> <p>At that moment, I started to follow the black Jeep to initiate a traffic stop by activating my patrol vehicle's emergency lights. The Black Jeep eventually stopped at Boca Center Plaza's parking lot behind Turn3 Sports Bar's parking lot just north of the intersection mentioned above.</p> <p>Once I activated my patrol vehicle's traffic light, she abruptly exited her vehicle and started approaching my vehicle before I could give her any lawful commands and the reason for the traffic stop.</p> <p>I approached the vehicle's driver-side door and made contact with the driver, identified as Betty Miller, who was the sole occupant and registered owner of the vehicle. I identified myself as PBSO D/S Alves and explained the reason for the traffic stop. I observed that he had glassy and bloodshot eyes, and I smelled an odor of unknown alcoholic beverage coming from her person and becoming stronger when she talked. Betty had a blank stare and slow movement as she looked for her documents.</p> <p>I asked her if she had consumed alcoholic beverages. Betty stated she had three drinks.</p> <p>Based on my observations of the driver, and her admission of consuming alcoholic beverage, I contacted DUI Investigator Deputy Ward #7209 and requested his response to the scene. Subsequently, I turned the scene over to him after completing my vehicle traffic stop.</p> <p>All the above initial investigation was captured on my assigned body worn camera.</p>									
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH D/S Alves, E		(ID#) 32404						
	(Signature of Arresting/Investigative Officer)								
<p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>4</u> day of <u>Sept</u>, 20<u>23</u> by <u>D/S Alves, E</u> 32404</p> <p>(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>Known CEO</u></p> <p>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>									
								PAGE	OF

SUBJECT: 1111 1074 CASE NUMBER: 82 11595

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: _____

SUBJECT: _____

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 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**
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"/>			
Other	<input checked="" type="checkbox"/>	316.650(b)	Other: Driver information contained in a uniform traffic citation	7-8
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2023023282	Date: 9/5/2023
	Specialist Name/ID: T.Howard/7185