

25 OCT 16 4 98 3B

2 N.T.A. 5 Juvenile Referral

Agency ORI Number 0500200	Agency Name Boca Raton Police Department	Report Number (N.T.A.'s only) 3, 2	2025-011199
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	If Weapon Seized Enter Type UNARMED	Multiple Clearance Indicator	
Location of Arrest (Including Name of Business) 800 MEADOWS RD, BOCA RATON, FL 33486		Location of Offense (Business Name, Address) 1400 W GLADES RD, BOCA RATON, FL 33431	
Date of Arrest 10/16/2025	Time of Arrest 20:02	Booking Date 10/16/2025	Booking Time 20:33
Jail Date 10/16/2025	Jail Time 21:37	Location of Vehicle 1400 W GLADES RD BOCA	
Name (Last, First, Middle) BENZENBERG, CAREY EDWIN		Alias (Name, DOB, Soc. Sec. #, Etc.) Alias:	
Race W. White B. Black O. Oriental/Asian W	Sex M	Date of Birth 10/30/1969	Height 6'01
Weight 215	Eye Color BROWN	Hair Color SALT &	Complexion LIGHT
Build Large		Indication of Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT R FOREARM / BLUE OCTOPUS		Marital Status M	Religion
Local Address (Street, Apt. Number) 160 NW 42ND WAY, DEERFIELD BEACH, FL 33442		Phone (954) 579-2301	Residence Type 1. City 2. County 3. Florida 4. Out of State 3
Permanent Address (Street, Apt. Number) 160 NW 42ND WAY, DEERFIELD BEACH, FL 33442		Phone (954) 579-2301	Address Source FL DL
Business Address (Name, Street) B525105693900 / FL		Phone	Occupation Chef
D/L Number, State B525105693900 / FL	Soc. Sec. Number	INS Number	Place of Birth (City, State) SATTLERIVER, NJ
Citizenship US		Co-Defendant Name (Last, First, Middle) [REDACTED]	
Race		Sex	Date of Birth
Arrested <input type="checkbox"/>		At Large <input type="checkbox"/>	Misdemeanor <input type="checkbox"/>
Juvenile <input type="checkbox"/>		Co-Defendant Name (Last, First, Middle) [REDACTED]	
Race		Sex	Date of Birth
Arrested <input type="checkbox"/>		At Large <input type="checkbox"/>	Misdemeanor <input type="checkbox"/>
Juvenile <input type="checkbox"/>		Parent <input type="checkbox"/> Other <input type="checkbox"/>	
Name (Last, First, Middle)		Residence Phone	
Legal Custodian		Business Phone	
Address (Street, Apt. Number)		(City) (State) (Zip)	
Notified by (Name)		Date	Time
Released To (Name)		Relationship	Date
Time		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 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 355-2526) informed of any change of address.			
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property	
Value of Property		School Attended	
Grade		Drug Activity	
S Sell N N/A P Possess		R Scuggle 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 DUI		Statute Violation Number 316.193(1) 1A GS	
Violation of ORD #		Drug Activity	
Drug Type		Amount / Unit	
Offense #		Counts	
Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number	
Bond		Charge Description	
Statute Violation Number		Violation of ORD #	
Drug Activity		Drug Type	
Amount / Unit		Offense #	
Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
Warrant / Capias Number		Bond	
Charge Description		Statute Violation Number	
Violation of ORD #		Drug Activity	
Drug Type		Amount / Unit	
Offense #		Counts	
Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number	
Bond		Health / Apparent Physical Condition of Defendant GOOD	
Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input checked="" type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries		Explain: PRESCRIPTION	
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail		PROPERTY - Received By OFC. SAVVIDIS	
<input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health		Released By OFC. SAVVIDIS	
Released To OFC.SAVVIDIS		Transported By OFC. SAVVIDIS	
Date Transported 10/16/2025		Time Transported 23:45	
Other		Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444	
Court Date and Time 11/17/2025 08:30:00		No Photo Available	
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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.			
Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed	
HOLD for Other Agency		Signature of Arresting Officer [Signature]	
Name Verification (Printed by Arresting Officer) OCT 17 AM 1:47		Name of Arresting Officer (Print) SAVVIDIS, G.	
ID # 913		Agency BRPD	
Intake Deputy [Signature]		ID # 913	
Pouch #		Witness here if subject signed with an "X"	

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SCANNED
OCT 17 2025 397

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

Agency ORI Number FL FL0500200	Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2025-01199
Charge Type Check as many as apply <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		Special Notes

Name (Last, First, Middle) BENZENBERG, CAREY EDWIN	Aliases	Race W	Sex M	Date of Birth 10/30/1969
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Charge Description 316.193(1) DUI	Charge Description
Charge Description	Charge Description

Victim's Name (Last, First, Middle)	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 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...
 committed the below acts in my presence was observed by _____ who told
 confessed to _____ that he/she saw the arrested person commit the below acts
 admitting to the below facts was found to have committed the below acts, resulting from my (described) investigation.
 On the 16 day of October, 2025 at 18:09 (Specifically include facts constituting cause for arrest.)

On 10/16/2025, at approximately 1809 hours, I was dispatched to Boca Raton Regional Hospital in reference to a vehicle accident. Officer Thiago from the Boca Raton Police Department conducted the accident investigation and upon his investigation he observed signs of impairment regarding one of the drivers, later identified as Carey Benzenberg. When Ofc. Thiago asked all parties if they required medical attention, Benzenberg responded, yes. When asked why, Benzenberg replied, "under the influence".

Upon arrival I made contact with Benzenberg. I immediately smelled the very distinct and strong odor of an alcoholic beverage emanating from Benzenberg's person. I observed Benzenberg's eyes to be glassy and his speech to be slow and slurred. Benzenberg also made a sudden utterance that he had drank "four to five beers" Benzenberg also stated, "I made a mistake drinking and driving and I will own it".

I waited until Benzenberg was medically cleared by the hospital's personnel and based on the above information, I requested Benzenberg to participate in field sobriety exercises to dispel my suspicion that he may have been driving while impaired, to which he agreed. The FSEs were conducted as follows:

Horizontal Gaze Nystagmus (HGN)
 Benzenberg had equal pupil size and equal tracking in both eyes. His eyes continued to jump as he attempted to follow the stimulus. In conducting the exercise, I observed a Lack of Smooth Pursuit, Distinct and Sustained Nystagmus at Maximum Deviation, and the onset of Nystagmus prior to 45 degrees. While giving the instructions, Benzenberg continued to move his head following the stimulus.

Walk and Turn
 The surface was flat and hard. Benzenberg attempted the exercise with his shoes on. I ensured he knew the line he would be using. I began the exercise by instructing and

SWORN AND SUBSCRIBED BEFORE ME <i>Signature</i> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <u>10/16/2025</u> DATE	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <i>Signature</i> SAVVIDIS, GEORGIOS (913) NAME OF OFFICER (PLEASE PRINT) <u>10/16/2025</u> DATE
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PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

A D M I N I S T R A T I V E	OBTS Number	Agency ORI Number FL FL0500200		Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2025-011199
	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
D E F	Name (Last, First, Middle) BENZENBERG, CAREY EDWIN				Race W
					Sex M
					Date of Birth 10/30/1969
<p>demonstrating how to complete it. While giving instructions, Benzenberg lost balance and failed to stay in the starting position. Benzenberg further used his arms for balance leaning against the wall. Benzenberg stated he had no medical issues that would cause him to lose balance however he stated that he could not keep his balance. Benzenberg said that he could continue attempting to complete the exercise. During the exercise, Benzenberg started too soon, took an incorrect number of steps, stepped off the line, and did not count each step out loud as instructed.</p> <p>One-Leg Stand The surface was flat and hard. Benzenberg attempted the exercise with his shoes on and he initially raised his left leg. During the exercise, Benzenberg swayed, used his arms for balance, and placed his raised foot down. He then attempted a second try and lost balance again, placing his foot down.</p> <p>Finger to Nose The surface was flat and hard. Benzenberg performed the exercise with shoes on. During the exercise, Benzenberg failed to follow instructions by keeping his eyes open and moving his finger to his nose when he was not asked to.</p> <p>Modified Romberg Balance The surface was flat and hard. Benzenberg performed the exercise with shoes on. During the exercise, Benzenberg was asked to estimate when thirty seconds have passed while leaning back with his head and his eyes closed. He said that thirty seconds passed after 9.75 seconds measured by my watch.</p> <p>Based on this investigation, I reasonably determined that Benzenberg was driving while impaired. As a result, I placed him under arrest and charged him with one count of DUI, F.S.S. 316.193(1A). I handcuffed Benzenberg, checked for proper fit, and double-locked them.</p> <p>Benzenberg was transported to BRPD Boking for the DUI process. Benzenberg provided three breath samples to Officer Madotta with the first being .199, the second .169 and the third .169.</p> <p>Benzenberg was transported to the Palm Beach County Jail.</p>					
<p>SWORN AND SUBSCRIBED BEFORE ME</p> <p><i>Scott Hill</i> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) DATE: <u>10/16/2025</u></p> <p><i>SAVVIDIS, GEORGIOS</i> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER NAME OF OFFICER (PLEASE PRINT) DATE: <u>10/16/2025</u></p>					

SCANNED
CRIME ANALYSIS
OCT 17 2025

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: BOCA RATON PD
Instrument Serial Number: 80-006622 Software: 8100.27
Date of Test: 10/16/2025

Date of Last Agency Inspection: 09/23/2025
Observation Period Began: 20:33
Subject's Name: CAREY E BENZENBERG

DOB: 10/30/1969 Sex: M

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:	Test	g/210L	Time
	Diagnostics Check	OK	21:09
	Air Blank	0.000	21:10
	Control Test	0.078	21:10
	Air Blank	0.000	21:11
	Subject Sample #1	0.199	21:13
	Air Blank	0.000	21:13
	Air Blank	0.000	21:15
	Subject Sample #2	0.169	21:16
	Air Blank	0.000	21:17
	Air Blank	0.000	21:18
	Subject Sample #3	0.169	21:20
	Air Blank	0.000	21:20
	Control Test	0.078	21:21
	Air Blank	0.000	21:21
	Diagnostics Check	OK	21:21

Cylinder Lot: 01524080A2
Exp: 03/05/2026

State of Florida, County of Palm Beach

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

I LIONEL A MADOTTA, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____

Signature

Date: 10/16/25

Sworn to (or affirmed) before me this 16 day of 10, 2025

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.

BS25 105693900
Carey Edwin Benzenberg
10/30/1969

10-15-2002
1032 - 2033
2025-011199

DUI INFLUENCE REPORT



BOCA RATON POLICE SERVICES DEPARTMENT
100 NW 2nd Avenue
Boca Raton, FL 33432

SCANNED

OCT 17 2025



BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT - PART I

On the 16 day of October 2025, at 2002 AM/PM

Subject: Benzen berg, Carcy Case Number: 2025-011199

PERSONAL CONTACT

Driving Pattern: _____

Observation of Driver: _____

Driver's Statement: _____

Odors: _____

GENERAL OBSERVATIONS

Speech: _____

Attitude: _____

Clothing: _____

Medical Problems: _____

Medications: _____

Other: _____

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Horizontal Gaze Nystagmus:

- Left eye does not follow smoothly
- Right eye does not follow smoothly
- Left eye jerks at 45 degrees angle or less
- Right eye jerks at 45 degrees angle or less
- Distinct jerking left eye maximum deviation
- Distinct jerking right eye maximum deviation

Can not do, Why? _____

Walk and turn: _____

Can not do, Why? _____

One leg stand: _____

Can not do, Why? _____

Finger to nose: _____

Can not do, Why? _____

Alphabet (speech pattern): _____

Can not do, Why? _____

Breath/Blood test results: 0.199, .169, .169

State of Florida, County of Palm Beach,
Sworn and subscribed before me this 10/16/25 (date) by ofc Madotta

[Signature] 812 _____ 10/16/25
Notary/Clerk of Court/ Officer (FSS 117.10) Date

[Signature] _____ Savvidis
Signature of Arresting Officer Name of Officer (print)

ARRESTING OFFICER: Savvidis

Name: Savvidis Phone # _____ Work # _____

Address: 100 NW 2nd Ave, Boca Raton, FL

Can testify to: SFST

Name: Madotta Phone # 561430820 Work # _____

Address: 100 NW 2nd Ave, Boca Raton, FL

Can testify to: Breath tech

Name: ofc Thiago Phone # _____ Work # _____

Address: 100 NW 2nd Ave, B.R., FL

Can testify to: w/ Accident

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

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OCT 17 2025



BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT - PART II

To be filled out at testing facility

Agency Case # 2025-011199

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is Thursday, October, 16, 2025.
(day) (month) (date) (year)

B. The time is now approximately 2107 AM/PM

C. The following is in reference to case number 2025-011199

D. Present at this time is Ofc. Sawidis, Ofc. Ganthier of the Boca Raton Police Department.
(Officer's Name)

E. Officer Savvidis, have you arrested Benzenberg in violation of
Florida State Statute 316.193? (Defendant's name)

F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida? Yes

G. Mr./Mrs./Ms. Benzenberg, I am required to inform you these
proceedings are being video recorded.

Operator Note: *Video record breath request, breath sample, and interview.*

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II. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.

Note: Read only the paragraph applicable to the type of test you are requesting.

- A. I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.
- B. 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.
- C. I am now requesting that you submit to a lawful test of your **BLOOD** for the purpose of determining its alcohol content and the presence of chemical or controlled substances.

IMPLIED CONSENT WARNINGS

Note: Read only if the subject does not comply with your request.

I am ofc Savvidis of the Boca Raton PD.

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. Additionally, if you refuse to take the test I have requested of you, you will be committing a misdemeanor of the SECOND DEGREE if this is your first refusal, in addition to any other penalties which can be imposed by law. 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, your driving privilege will be suspended for a period of eighteen (18) months. Additionally, you will be committing a misdemeanor of the FIRST DEGREE, 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

Subject Signature: ~~ON~~ N/A

Note: Also read for CDL holders:

In addition, if you hold a Commercial Driver's License (CDL), or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privileges for one year from today. If this is your second refusal, you will be permanently disqualified from operating a Commercial Motor Vehicle (CMV).

Note: After reading the implied consent warning, the arresting officer must request a breath sample again.

(IF REFUSAL THEN)

At this time Mr./Mrs./Ms. _____ has refused to submit to a breath test.

The date is _____, _____, _____, and the time is _____ AM/PM.
(month) (day) (year)

A refusal form will be completed by the arresting officer.



BOCA RATON POLICE SERVICES DEPARTMENT
JUVENILE CONSTITUTIONAL WARNINGS

**Rights of suspects prior to custodial questioning.
Identify yourself and state:**

I am required to warn you before you make any statement that you have the following Constitutional rights:

- (1) You have the right to remain silent and not answer any questions. *Tell me in your own words what you think this means. (You do not have to talk to me or answer any questions about this offense. You can be quiet if you want.)*
- (2) Any statement you make must be freely and voluntarily given. *Tell me in your own words what you think this means. (If you do talk to me it has to be because you want to and not because anyone is forcing you to speak.)*
- (3) You have a right to the presence and representation of a lawyer of your choice before you make any statement and during any questioning. *Tell me in your own words what you think this means. (You can talk to a lawyer before we ask you any questions and you can have him/her with you now, during our questioning.)*
- (4) If you cannot afford a lawyer, you are entitled to the presence and representation of a court appointed lawyer before you make any statement and during any questioning. *Tell me in your own words what you think this means (If you do not have money for a lawyer and you want one, a lawyer will be given to you for free.)*
- (5) If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent. *Tell me in your own words what you think this means. (If you decide to talk to me then change your mind, you can stop answering my questions at any time.)*
- (6) I can make no threats or promises to induce you to make a statement. This must be of your own free will. *Tell me in your own words what you think this means (I am not allowed to threaten you or make you any promises to get you to talk to me. If you decide to talk, it must be because you want to.)*
- (7) Any statement can be and will be used against you in a court of law. *Tell me in your own words what you think this means (Anything you say to me can and will be told to the judge or a jury in court. A judge is a person who decides if you have done something wrong. Sometimes a group of people called a jury decide this, but the Judge is the person who decides what punishment you get.)*
- (8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: _____ Date: _____ Time: _____

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OCT 17 2025



BOCA RATON POLICE SERVICES DEPARTMENT
TESTING FACILITY TASK REPORT

SUBJECT: Benzenberg, Carey

CASE #: 2025-011199 DATE: 10/16/25

BREATH TEST RESULTS

- 1) TIME .199 2113 AM/PM AM PM
- 2) TIME .169 2116 AM/PM AM PM
- 3) TIME .169 2120 AM/PM AM PM
- 4) TIME _____ AM/PM AM PM

BREATH OPERATOR: Madotta

MAINTENANCE TECHNICIAN: Crawford

TESTING OFFICER'S OBSERVATIONS

SPEECH: _____

ATTITUDE: _____

CLOTHING: _____

MEDICAL CONDITION: _____

OTHER: _____

COMMENTS: _____

Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

- (1) You have the right to remain silent and not answer any questions.
- (2) Any statement you make must be freely and voluntarily given.
- (3) You have a right to the presence and representation 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 and representation of a court appointed lawyer before you make any statement 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 be and will be used against you in a court of law.
- (8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: ON Camera Date: 10/16/25 Time: _____

QUESTIONS AND ANSWERS

Were you operating a motor vehicle at the time of the accident/stop? Yes

Where were you going? Home

What street or highway were you on? Glades Road

Direction of travel? West

Where did you start driving from? NW 15th Ave

What city (county) were you stopped in? Boca Raton

What time did you start? 1500 AM/PM What time is it now? _____

What is today's date? 18 What day of the week is it? Friday

When did you last eat? 0700 What did you eat? A Bagel

What have you been doing the past three hours prior to this stop/accident? Working as a Chef

How much do you weigh? 220 Have you been drinking? Yes What were you drinking? Beer

How much? Four Where? Hooters With whom were you drinking? Self

When did you have your first drink? 1530 AM/PM When did you stop drinking? 1600 AM/PM

How did you consume your last two drinks? Sip it

Are you under the influence of alcohol now? Yes No

Can you feel the effects of alcohol? Yes No

Have you consumed alcohol since the accident? Yes No

Can you feel the effects of alcohol? Yes No

Have you consumed alcohol since the accident? Yes No How much? _____

What? _____ Where? _____

What line of work are you in? Chef

When did you last work? Wednesday and Thursday "last two days"

Do you have any physical defects or injuries? Yes No If yes, explain: _____

Are you sick or injured? Yes No If yes, explain: _____

Do you limp? Yes No

Did you get a bump on the head? Yes No

Were you in an accident today? Yes

Have you taken any drugs or smoked marijuana today? Yes G.I.S NO

What? _____ When? _____

Have you seen a doctor or dentist today? Yes No Who? Met Farman

Are you taking any prescription medications? Yes No What? 2 Blood pressure pills, medical Marijuana When? every day

Do you have: Epilepsy? Yes No

Inner ear trouble? Yes No

Glass eye? Yes No

Ear infection? Yes No

False teeth? Yes No

Diabetes? Yes No

Any problems not correctable by glasses or contact lenses? No

Do you take insulin? Yes No If yes, when was your last injection? Pill twice a day

Have you ever had a driver's license in any other state? New Jersey 40 years ago

I am now ending this video recording. The time is now approximately 2:33 AM/PM.

The date is Oct 16, 2025
(month) (day) (year)

SCANNED

OCT 17 2025



Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel	
	<input type="checkbox"/>	119.071(2)(e)	Confession	
Public Info. Exemptions	<input type="checkbox"/>	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 110 of the CRTM for additional information)	
	<input type="checkbox"/>	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	
	<input type="checkbox"/>	119.0712(2)	Personal information contained in a motor vehicle record	
	<input type="checkbox"/>	316.650(11)	Driver information contained in a uniform traffic citation	
	<input type="checkbox"/>	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
Florida Rules of Judicial Administration 2.420	<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"/>	(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"/>			
Other	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			

REVIEW COMPLETED BY

Booking Number: 202502772788	Date: 10/17/2025
	Specialist Name/ID#: Angela Pinkney/7796

SCANNED
OCT 17 2025