

23CT1725

ARREST / NOTICE TO APPEAR

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

ADMI NIST RATI ON	OBTS Number		Agency ORI Number <b>0500400</b>		Agency Name <b>Delray Beach Police Department</b>		Agency Report Number (N.T.A.'s only) <b>4   0   23-001276</b>		Charge Type: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type: <b>UNARMED</b>		Multiple Clearance Indicator: <b>1</b>						
DEF END ANT	Location of Arrest (Including Name of Business) <b>166 SE 2ND AVE, DELRAY BEACH, FL 33444</b>						Location of Offense (Business Name, Address) <b>166 SE 2ND AVE, DELRAY BEACH, FL 33444</b>												
	Date of Arrest <b>01/26/2023</b>		Time of Arrest <b>23:07</b>		Booking Date <b>01/26/2023</b>		Booking Time <b>23:17</b>		Jail Date <b>01/27/2023</b>		Jail Time <b>01:36</b>		Location of Vehicle <b>166 SE 2ND AVE DELRAY</b>						
J U V E N I L E	Name (Last, First, Middle) <b>HAYDEN, CHRISTOPHER JOSEPH</b>											Alias (Name, DOB, Soc. Sec. #, Etc.)							
	Race W - White B - Black O - Oriental/Asian		Sex <b>M</b>		Date of Birth <b>04/28/1968</b>		Height <b>5'07</b>		Weight <b>170</b>		Eye Color <b>HAZEL</b>		Hair Color <b>BROWN</b>		Complexion <b>FAIR</b>		Build <b>MEDIUM</b>		
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)											Marital Status <b>S</b>		Religion <b>NON-DENOMI</b>		Indication of Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>			
	Local Address (Street, Apt. Number) <b>6950 PINES CIRCLE, COCONUT CREEK, FL 33073</b>						(City)		(State)		(Zip)		Phone <b>(954) 774-7591</b>		Residence Type: 1. City 3. Florida 2. County 4. Out of State <b>3</b>				
	Permanent Address (Street, Apt. Number) <b>6950 PINES CIRCLE, COCONUT CREEK, FL 33073</b>						(City)		(State)		(Zip)		Phone <b>(954) 774-7591</b>		Address Source <b>VERBAL</b>				
Business Address (Name, Street)						(City)		(State)		(Zip)		Phone		Occupation					
D/L Number, State <b>H350110681480 / FL</b>			Soc. Sec. Number			INS Number			Place of Birth (City, State) <b>ATLANTA, GA, United</b>			Citizenship <b>US</b>							
C O D E F	Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor		<input type="checkbox"/> 5. Juvenile				
	Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor		<input type="checkbox"/> 5. Juvenile				
I N T A K E	<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ Name (Last, First, Middle)											Residence Phone							
	<input type="checkbox"/> Legal Custodian											Business Phone							
	Address (Street, Apt. Number) (City) (State) (Zip)																		
	Notified by: (Name) Date Time											JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated							
C H A R G E	Released To: (Name) Relationship				Date		Time												
	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.											School Attended		Grade					
	<input type="checkbox"/> Yes, by: _____ <input type="checkbox"/> No: _____				Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property				Value of Property								
C O D E	Drug Activity N. N/A P. Posses						S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Disperse/ 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						
C H A R G E	Charge Description <b>DUI BREATH ALCOHOL .08 OR MORE PER 210L</b>											Statute Violation Number <b>316.193(1)(C)</b>		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 #					
C H A R G E	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input 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 type="checkbox"/> N		Warrant / Capias Number		Bond				
I N T A K E	Health / Apparent Physical Condition of Defendant											Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries							
	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		Released By		Released To			
	Transported By											Date Transported		Time Transported		Other			
N O T I C E	<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court											Location (Court, Room) <b>South County 200 W Atlantic Ave Delray Beach, FL 33444</b>							
	<input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.											Court Date and Time <b>02/21/2023 08:30:00</b>							
T O A P P E A R	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.											Date Signed <b>01/27/23</b>							
	Signature of Defendant (or Juvenile and Parent/Custodian)											Date Signed							
A D M I N	HOLD for Other Agency						Signature of Arresting Officer						Name Verification (Printed by Arrestee)						
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest						Name of Arresting Officer (Print) <b>WINDSOR, NICHOLAS</b>						I.D. # <b>1029</b>						
	<input type="checkbox"/> Suicidal <input type="checkbox"/> Other						Transporting Officer <b>WINDSOR</b>						I.D. # Agency <b>1029 DBPD</b>						
Intent/Denial <b>Cpt Honick 764</b>						Fouch #						Witness here if subject signed with an "X".							

0537792

22/2

No Photo Available

# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 26th DAY OF January 20 23, AT 2233  AM  PM

SUBJECT: Hayden, Christopher Joseph CASE NUMBER: 23-001276

AGENCY: DELRAY BEACH PD ARRESTING OFFICER: Windsor #1029

## PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

The following occurred in the City of Delray Beach, County of Palm Beach, FL. On 01/26/23 at 2233hrs Ofc. Penagos #1190 DBPD observed a black 2021 Kia Seltos (FL Tag #QJZE48) traveling southbound in the 1st block of SE 2nd Ave. The Kia was following another vehicle too closely and failing to drive within a single lane crossing into the northbound travel lane. There was oncoming traffic traveling north when the Kia entered the northbound travel lane. The vehicle traveling directly in front of the Kia stopped at a stop sign at the intersection of SE 1st St. Due to the Kia following too closely, the Kia had to brake rapidly and locked the tires while braking. There was an audible squeal from the locked tires. After the other vehicle turned right (west) onto SE 1st St., the Kia entered the intersection and continued south on SE 2nd Ave. The Kia stopped in front of 166 SE 2nd Ave (The O.G. Bar). The Kia was stopped blocking the southbound travel lane when there was available parking spaces to use. Ofc. Penagos activated his emergency lights of his marked DBPD patrol vehicle and conducted a traffic stop. Ofc. Penagos identified the white male driver by his FL DL as Christopher Joseph Hayden. Hayden was sitting in the driver seat of the Kia with the engine running and was in possession of the vehicle key. I arrived on scene and confirmed Hayden's identity by his FL DL. Hayden was sitting in the driver seat with the engine running when I arrived on scene.

### OBSERVATION OF DRIVER:

I smelled an odor of an unknown alcoholic beverage coming from Hayden. Hayden's eyes were red and had a glassy appearance. Hayden's speech was slurred. Hayden seemed disoriented on where his current location was. Hayden stated he stopped to check his GPS on his cell phone but I observed the in car navigation system on a current route. The navigation system also was displayed a right turn symbol on the dash directly in front of the driver seat. Hayden did not know what the in car navigation destination was. I requested Hayden perform roadside tasks and he agreed. After Hayden exited the Kia, he stumbled while walking and swayed in a circular motion while standing still.

### DRIVER'S STATEMENTS:

Hayden stated he did not see another vehicle traveling south in front of the Kia. Hayden stated he stopped in the travel lane to check his GPS but did not think to pull into a parking space out of the roadway. Hayden stated he was attempting to drive to his residence but did not know where he was currently located. Hayden stated he parked the Kia in a parking garage nearby but did not know what exact garage he parked in. Hayden stated he was in Delray Beach having dinner. Hayden denied having medical conditions or taking any prescription medications that would affect his ability to operate a motor vehicle. Hayden denied consuming any illegal drugs including marijuana prior to driving. Hayden initially denied consuming any alcohol but later admitted to consuming two glasses of wine at dinner. Hayden stated he consumed the two glasses of wine between 2140hrs and 2210hrs. Hayden denied having problems with his eyes that would not be corrected by eyeglasses or contact lenses. Hayden stated he had a bursted blood vessel in his left eye but it did not affect his vision. Hayden denied being in a motor vehicle crash today. Hayden denied recently receiving a bump on the head. Hayden denied receiving treatment at a doctor or dentist office today.

### ODORS:

I smelled an odor of an unknown alcoholic beverage from Hayden.

## GENERAL OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Polite and Cooperative

CLOTHING: Black Shirt, Gray Shorts and Gray Shoes

MEDICAL/OTHER: None Stated

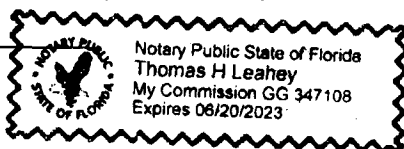
STATE OF FLORIDA  
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 27th day of January 20 23 by Ofc. Windsor #1029

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

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



SUBJECT: Hayden, Christopher Joseph CASE NUMBER 23-001276

**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:**

Hayden swayed in a circular motion while standing still during roadside tasks.

**WALK & TURN:**

Hayden did not remain in the instructional phase position. Hayden used his arms for balance. Hayden stepped off the line several times to maintain his balance. Hayden did not touch heel to toe on several steps. Hayden did not turn around as instructed.

**ONE LEG STAND:**

Hayden used his arms for balance. Hayden put his foot down on the ground before the roadside task was completed. Hayden did not count in the sequence as instructed. Hayden hopped up and down.

**FINGER TO NOSE:**

Hayden missed the tip of his nose on several attempts. Hayden only raised his hand and did not touch his nose on the first attempt. I had to instruct Hayden to touch his nose and put his hand back down to his side after he touched his nose. Hayden raised his left hand when I instructed him to use his right hand.

**ROMBERG ALPHABET:**

Hayden recited the wrong letters and repeated several letters. Hayden stopped reciting when he said the letter "Z" out of order.

**BREATH TEST RESULTS:**

1) .170	2) .171	3)	4)
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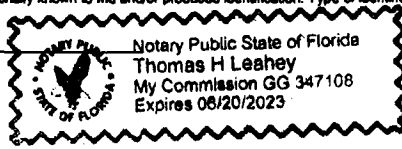
STATE OF FLORIDA  
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 27th day of January, 2023 by Ofc. Windsor #1029

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

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





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

PBSO CASE # 23-030027 PBSO ZONE 4-11

AGENCY CASE # 23-001276 CRASH CASE # N/A

TIME OF STOP/CRASH 2233 DATE 01/26/23 DAY THURSDAY

SUBJECT'S NAME HAYDEN, CHRISTOPHER JOSEPH RACE W SEX M

HGT 5'06" WGT 170 DOB 04/28/68

LOCATION 166 SE 2ND AVE, DELRAY BEACH, FL.

ARRESTING OFFICER'S NAME & ID WINDSOR #1029 AGENCY DELRAY BEACH PD

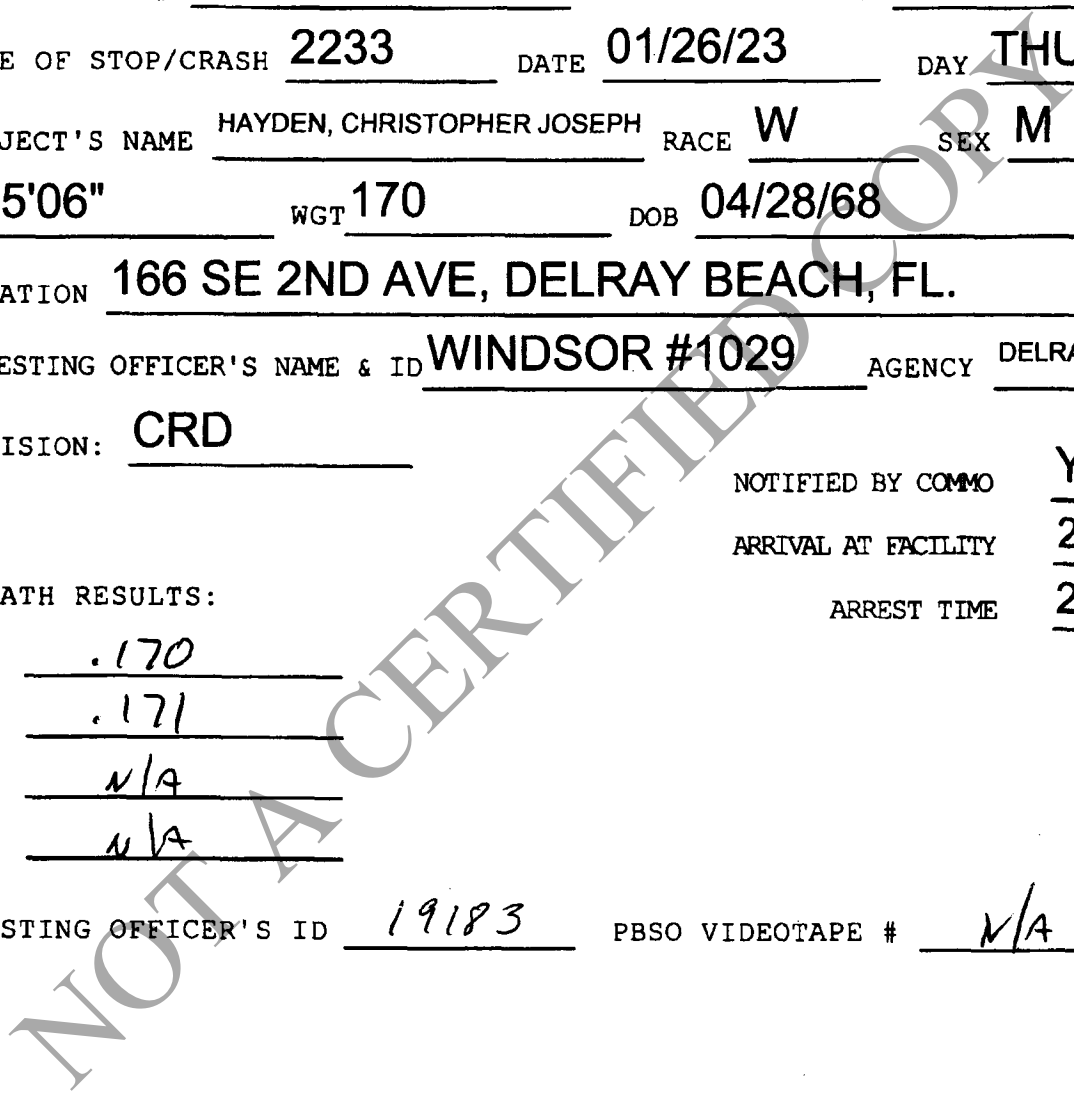
DIVISION: CRD

NOTIFIED BY COMMO	<u>YES</u>
ARRIVAL AT FACILITY	<u>2330</u>
ARREST TIME	<u>2307</u>

BREATH RESULTS:

- 1) .170
- 2) .171
- 3) N/A
- 4) N/A

TESTING OFFICER'S ID 19183 PBSO VIDEOTAPE # N/A



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

Instrument Type: Intoxilyzer 8000  
Instrument Registered To: PALM BEACH CO SO  
Instrument Serial Number: 80-006478 Software: 8100.27  
Date of Test: 01/27/2023

Date of Last Agency Inspection: 01/13/2023  
Observation Period Began: 23:30  
Subject's Name: CHRISTOPHER J HAYDEN DOB: 04/28/1968 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	23:55
	Air Blank	0.000	23:55
	Control Test	0.078	23:55
	Air Blank	0.000	23:56
	Subject Sample #1	0.170	23:57
	Air Blank	0.000	23:58
	Air Blank	0.000	23:59
	Subject Sample #2	0.171	00:00
	Air Blank	0.000	00:01
	Control Test	0.076	00:01
	Air Blank	0.000	00:01
	Diagnostics Check	OK	00:01

Cylinder Lot: 15922080A3  
Exp: 08/05/2024

State of Florida, County of Palm Beach

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

I THOMAS H LEAHEY, 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: T Leahey Date: 01/27/2023  
Signature

Sworn to (or affirmed) before me this 21 day of January, 2023

[Signature] Signature of Notary Public-State of Florida  
Ofc N Windsor # 1029 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.

# TESTING FACILITY TASK REPORT

AGENCY: DBPD

SUBJECT: Hayden, Christopher J

CASE NUMBER: 23-030027

DATE: Jan 27, 2023

VIDEO DVD NUMBER: n/a

BEGINNING TIME: 2353

ENDING TIME: 0003

BREATH TESTS RESULTS: 1) .170 TIME 2357 A.M.  P.M.  2) .171 TIME 0003 A.M.  P.M.   
3) n/a TIME 0 A.M.  P.M.  4) n/a TIME 0 A.M.  P.M.

BREATH OPERATOR: Thomas H Leahey #19183

MAINTENANCE TECHNICIAN: Jason Karlecke #6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH: slurred

ATTITUDE: calm, cooperative

CLOTHING: gray shorts, black shirt, gray sneakers

MEDICAL CONDITIONS: none

MEDICATIONS: none

## OTHER:

eyes were glassy & bloodshot  
odor of unknown alcoholic beverage on breath

## COMMENTS:

arrived at center A/O conducted 20 observation period at 2330 hrs  
subject agreed to perform breath test  
subject completed breath test  
A/O read rights & subject understood rights  
tech read breath test results & subject understood breath test results  
A/O attempted Q&A  
subject declined to answer questions

# **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) \_\_\_\_\_

SUBJECT: \_\_\_\_\_

CASE NUMBER: \_\_\_\_\_

23-001276

### 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: OIC Windsor #1029

# WITNESS LIST

CASE NUMBER: 23-001276

ARRESTING OFFICER: OFC WINDSOR #1029 DBPD

ADDRESS: 300 W ATLANTIC AVE, DELRAY BEACH, FL 33444

PHONE NUMBERS (HOME): \_\_\_\_\_ (WORK) 561-243-7800

CAN TESTIFY TO: DUI PC

NAME: OFC. PENAGOS #1190 DBPD

ADDRESS: 300 W ATLANTIC AVE, DELRAY BEACH, FL 33444

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) 561-243-7800

CAN TESTIFY TO: TRAFFIC STOP AND BACKUP OFFICER

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

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NAME: \_\_\_\_\_

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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



**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"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2023002588	Date: 1/27/2023
	Specialist Name/ID: Pinkneya/7796