

50-2023-CT-00 2782AMB

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

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

Check if Supplement is Attached

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

1

Juvenile

N

ADMINISTRATIVE	OBTS Number	Agency ORI Number FL01 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 0161-23-036029	
	Charge Type: Check as many as apply	<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	Multiple Clearance Indicator 1
Location of Arrest (Including Name of Business) LAKE WORTH RD (W) OF THE TURNPIKE LAKE WORTH			Location of Offense (Business Name, Address) LAKE WORTH RD (W) OF THE TURNPIKE, LAKE WORTH FL 33461			
Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle BABBSO TOWING
02/13/2023	0048					

DEFENDANT	Name (Last, First, Middle) Keefe, Christy, Lee		Alias (Name, DOB, Soc. Sec. #, Etc.)						
	Race W - White B - Black	Sex M - Male F - Female	Date of Birth 5/25/1972	Height 5'04	Weight 140	Eye Color BLU	Hair Color BLON	Complexion FAIR	Build SMALL
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE			Marital Status Single	Religion NONE	Indication of Alcohol Influence Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk <input type="checkbox"/>			
	Local Address (Street, Apt. Number) (City) (State) (Zip) 18028 Samba Ln, Boca Raton, FL 33496			Mobile Phone (954) 552 7702		Residence Type: 1. City 2. County 3. Florida 4. Out of State			
	Permanent Address (Street, Apt. Number) (City) (State) (Zip)			Phone ()		Address Source FL DL			
	Business Address (Name, Street) (City) (State) (Zip)			Phone ()		Occupation BARTENDER			
D/L Number, State K100112726850, FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) FORT CAMPBELL KY		Citizenship US	

CODEF	Co-Defendant (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 (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

JUVENILE	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other	Name (Last) (First) (Middle)	Residence Phone ()
	Address (Street, Apt. Number) (City) (State) (Zip)		Business Phone ()

Notified by: (Name)	Date	Time	Juvenile Disposition 1. Handled/Processed within Dept. and Released. 2. TOT HRS/DYS 3. Incarcerated
Released To: (Name)	Relationship	Date	Time
The above address was provided by <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
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No	Description of Property	Value of Property	

CHARGE	Drug Activity N. N/A P. Possess	S. Sell 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 DUI	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)A	Violation of ORD #	Drug Activity N	Drug Type	Amount / Unit	Offense # 23-036029	Warrant / Capias Number	Bond
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation of ORD #	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond	
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number FR13	Violation of ORD # 2:38	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond	
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number	Violation of ORD #	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond	

NOTICE TO APPEAR	Location (Court, Room Number, Address) 3228 GUN CLUB RD WEST PALM BEACH FL 33406 - Ph: (561) 355-2996	
	Court Date and Time Month MARCH Day 9 Year 2023 Time 0800 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) *Christy Keefe* Date Signed **02/13/2023**

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 opt out of the text message system if I choose.

HOLD for other agency	Signature of Arresting Officer <i>[Signature]</i>	Name Verification (Printed by Arrestee)
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	Name of Arresting Officer (Print) INV E. K. WHITE	(PRINT)
Intake Deputy <i>SPAN 28101</i>	Transporting Officer I.D. # INV. E. K. WHITE 7209	Agency PBSO
Pouch #	Witness here if subject signed with an "X"	

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 NTA	3 Request for Warrant 4 Request for Capias	1	Juvenile	N
ADMIN	Agency ORI Number	Agency Name	Agency Report Number					
	FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	23-036029					
CHARGES / DEF	Charge Type	Charge Description		Charge Description		Special Notes		
	<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	316.193(1)A						
VICTIM	Name (Last, First, Middle)			Alias	Race	Sex	Date of Birth	
	Keefe, Christy, Lee				W	F	5/25/1972	
	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	
<p>The undersigned certifies and swears that I have just and reasonable grounds to believe, and do believe that the above named Defendant committed the listed violation(s) of law.</p> <p>The Person taken into custody:</p> <p><input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>9</u> day of <u>FEBRUARY</u> 20 <u>23</u> at <u>0015</u> <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p>								
<p><input type="checkbox"/> Marsy's Law CVI FL. Const. Art.1 § 16(b)</p> <p>On Sunday, February 13, 2023 at approximately 0020 hours, I responded to Lake Worth Road (Rd) and Polo Rd, Lake Worth (Palm Beach County) Florida to assist Deputy Shawn R. Davis with a traffic stop that involved a possible impaired driver. Upon my arrival I noticed a dark blue utility vehicle stopped in the westbound outside lane of Lake Worth Rd. D/S Davis' patrol vehicle was stopped behind the utility vehicle with his emergency lights activated. I spoke with the deputy who wrote the following sworn witness statement on a probable cause affidavit: On February 13, 2023 at approximately 0015 hours I was over watching the area of Lake Worth Road and Polo Road in my marked PISO unit. While I was in a one way in entrance monitoring east bound traffic on Lake Worth Road, a black Volkswagon SUV license plate# 40FFE drove around me without acknowledging the lane of travel and proceeded to continue in a one way lane going the wrong way. The SUV continued to make a right hand turn without using a turn signal for a right hand turn. I initiated a traffic stop and identified the driver as Christy Keefe DOB:05/25/1972. As I advised Keefe why I was stopping her, I then asked Keefe for her drivers license. Keefe was slow to answering my questions. Keefe then attempted to locate her drivers license and while doing so, Keefe was very slow at doing so. Keefe then began to slur her speech while speaking to me. At that moment I radioed dispatch for an available DUI Unit and moments later DUI 10 D/S White arrived and took over the traffic investigation:</p> <p>I made contact with the driver who was currently sitting in the driver seat of the previously mentioned vehicle. She was later identified as Christy Lee Keefe by her Florida driver license. Her eyes were red, watery and glossy. Her cheeks were flushed, mouth dry and she spoke in a slow soft tone. She was unsteady while standing and lost her balance on occasion. I could smell a faint odor of an unknown alcoholic beverage emanating from the inside of his vehicle. She was not aware of her current location or where she had gone. She also did not remember how she entered into the place where she drove the wrong way. She was wearing a cream colored sweater, an orange shirt underneath, blue jeans and brown cowboy boots. I told her she was stopped for driving the wrong way. Additionally I explain I had a suspicion that she had been drinking an unspecified amount of alcoholic beverages. She admitted to drinking at a bar. Based on my suspicion I asked if she would consent to performing Standardized Field Sobriety Evaluations (SFSTs) for the purpose of determining if she was impaired while operating a motor vehicle. She obliged.</p>								
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH			INV E. K. WHITE				
	(Signature of Arresting/Investigative Officer)							
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>13</u> day of <u>FEBRUARY</u> 20 <u>23</u> by <u>INV E. K. WHITE</u>							
(Print name of Arresting/Investigative Officer), who is personally known to me			KNOWN LEO			PAGE		
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)			SHARI L. O'NEAL Notary Public - State of Florida Commission # GG 972080 My Comm. Expires Jun 25, 2024			1 of 2		

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 NTA	3 Request for Warrant 4 Request for Copies	1	Juvenile	N
ADMIN	Agency ORI Number	Agency Name	Agency Report Number					
	FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	23-036029					
CHARGES / DEF	Charge Type		Special Notes					
	<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							
VICTIM	Name (Last, First, Middle)			Alias	Race	Sex	Date of Birth	
	Keefe, Christy, Lee				W	F	5/25/1972	
	Charge Description		316.193(1)A		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	
<p>The undersigned certifies and swears that I have just and reasonable grounds to believe, and do believe that the above named Defendant committed the listed violation(s) of law.</p> <p>The Person taken into custody:</p> <p><input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>9</u> day of <u>FEBRUARY</u> 20 <u>23</u> at <u>0015</u> <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p>								
<p><input type="checkbox"/> Marry's Law CVI FL. Const. Art.1 § 16(b)</p> <p>Prior to her performance I asked if she had any physical problems with her body that would inhibit her from performing light physical exercises. I also asked if she was taking medication. She reported she neither has anything wrong with her physically, nor is she taking medication. I escorted her to a level surface that was smooth and free from obstructions and debris. I could now smell a faint odor of an unknown alcoholic beverage emanating from her breath. I placed a yellow strip of masking tape on the surface that formed a line. The defendant identified the tape by giving its color and placing her left foot on it when prompt to do so. The following SFSTs were explained, demonstrated and acknowledged by her prior to her performance: HGN, The Walk and Turn, The One Leg Stand, The Finger to Nose and The Romberg Alphabet Recitation. Her deficiencies were recorded on another form in this work sheet. At the conclusion of the SFSTs, coupled with the Deputy's observation of the defendant's vehicle in motion and my observation of personal indicators of impairment exhibited by the defendant, probable cause was established for DUI. I told the defendant she was being placed under lawful arrest for DUI. A cursory search of her outer clothing was completed, she was handcuffed (double locked and checked for tightness) prior to being seated into the rear of my patrol car. Back up deputies arranged for the defendant's vehicle to be towed by a tow service from PBSO's rotation list. An inventory search of her vehicle revealed an open container of Sutter Home Pinot Grigio with half of its liquid content remaining. An exhausted four pack of the same alcoholic beverage was consumed and still inside its carrying case. Babbco Towing responded and impounded her vehicle to their lot. Meanwhile I began transport to the main jail breath analysis facility for further processing. Upon our arrival I escorted the defendant into the facility and began a 20 minute observation period. During this time the defendant did not ingest anything into her body orally or otherwise. Neither did she regurgitate. I escorted her into the testing room and asked her to provide breath samples for the purpose of determining her alcohol content. She obliged. The defendant gave two adequate breath samples that rendered results of .295 and .284. I advised her of her Constitutional Rights in which she acknowledged. She refused to be interviewed, however. The defendant was cited for having the open container and booked into the main jail for DUI.</p>								
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH		INV E. K. WHITE					
	(Signature of Arresting/Investigative Officer)							
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>13</u> day of <u>FEBRUARY</u> 20 <u>23</u> by <u>INV E. K. WHITE</u>							
(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced.		KNOWN LEO						
Notary Public, Clerk of Court, Officer (F.S.S. 11 7 1 0)						PAGE		
						2 OF 2		

Agency ORI Number _____ Agency Name **PALM BEACH COUNTY SHERIFF'S OFFICE** Agency Report Number **23036029**

F.O. **5 0 0 0 0 0** Charge Type 1 Felony 2 Traffic Felony 3 Misdemeanor 4 Traffic Misdemeanor 5 Ordinance 6 Other _____ Special Notes _____

Name (Last, First, Middle): **KEFFE CHRISTY LEE** Alias _____ Race **W** Sex **F** Date of Birth **05/25/1972**

Charge Description **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 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 **13** day of **FEBRUARY** 20**23** at **0015** A.M. P.M. (Specifically include facts constituting cause for arrest.)

Morsy's Law CV# FL Const. Art.1 § 18(b)

On February 13, 2023 at approximately 0015 hours I was over watching the area of Lake Worth Road and Polo Road in my marked PBSO unit. While I was in a one way in entrance monitoring east bound traffic on Lake Worth Road, a black Volkswagon SUV license plate# 40FFE drove around me without acknowledging the lane of travel and proceeded to continue in a one way lane going the wrong way. The SUV continued to make a right hand turn without using a turn signal for a right hand turn. I initiated a traffic stop and identified the driver as Christy Keefe DOB:05/25/1972. As I advised Keefe why I was stopping her, I then asked Keefe for her drivers license. Keefe was slow to answering my questions. Keefe then attempted to locate her drivers license and while doing so, Keefe was very slow at doing so. Keefe then began to slur her speech while speaking to me. At that moment I radioed dispatch for an available DUI Unit and moments later DUI 10 D/S White arrived and took over the traffic investigation.

NOT A CERTIFIED COPY

STATE OF FLORIDA **DAVIS**
COUNTY OF PALM BEACH **D/S SP26 31812**
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this **13** day of **February** 20**23** by **D/S DAVIS**

(Print Name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced **D/S DAVIS**
IM. E.K. WHITE 7209
Notary Public, Clerk of Court, Officer (F.S.S.) 11 7.1.0)



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

PBSO CASE # 23-036029 PBSO ZONE 1-45

AGENCY CASE # _____ CRASH CASE # _____

TIME OF STOP/CRASH 0015 DATE 02/13/2023 DAY Monday

SUBJECT'S NAME Keefe, Christy, Lee RACE W SEX F

HGT 5'04 WGT 140 DOB 5/25/1972

LOCATION LAKE WORTH RD (W) OF THE TURNPIKE LAKE WORTH

ARRESTING OFFICER'S NAME & ID INV E. K. WHITE 0 AGENCY Palm Beach County Sheriff's Office

DIVISION: CID/DUI

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0119 HRS

ARREST TIME 0048

BREATH RESULTS:

- 1) 295
- 2) 284
- 3) _____
- 4) _____

TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # 1

NOT A CERTIFIED COPY

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 9 DAY OF FEBRUARY 20 23 AT 0015 AM PM

SUBJECT: Keefe, Christy, Lee CASE NUMBER: 23-036029

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV E. K. WHITE

PERSONAL CONTACT

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

SEE PC AFFIDAVIT

OBSERVATION OF DRIVER:

SEE PC AFFIDAVIT

DRIVER'S STATEMENTS:

ADMITTED TO DRINKING AT A BAR

ODORS:

FAINT ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE EMANATING FROM SUBJECT'S BREATH.

GENERAL OBSERVATIONS

SPEECH: **SOFT**

ATTITUDE: **LETHARGIC, COOPERATIVE, INATTENTIVE**

CLOTHING: **NORMAL**

MEDICAL/OTHER: **NONE**

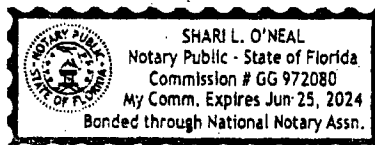
STATE OF FLORIDA
COUNTY OF PALM BEACH

INV E. K. WHITE
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 13 day of FEBRUARY 2023 by INV E. K. WHITE

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

Shari L. O'Neal
Notary Public, Clerk of Court, Officer (F.S.S 117.10)



SUBJECT: Keefe, Christy, Lee

CASE NUMBER 23-036029

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

LT EYE-LACK OF SMOOTH PURSUIT

RT EYE-LACK OF SMOOTH PURSUIT

LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Subject was asked to stand with their feet together and place their hands by their side. They were asked to focus on the stimulus and follow it with their eyes. Lastly they were told not to move their head to assist in following the stimulus with their eyes. Subject showed equal pupil size that tracked equally. Both eyes lacked a smooth pursuit. I saw distinct and sustained Nystagmus at maximum deviation. Subject swayed while performing this task. Subject also turned her head to assist in following the light on occasion.

WALK & TURN:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE WALK AND TURN. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject was unable to maintain balance while placed in the instructional position, swayed and abandoned the position altogether. During the performance subject failed to touch heel to toe, stepped off the line, could not maintain balance while walking the line, took an incorrect number of steps and turned improperly

ONE LEG STAND:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE ONE LEG STAND. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject swayed while standing, used arms for balance, put foot down (more than three times) ceased in continuing this task for safety concerns

FINGER TO NOSE:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE FINGER TO NOSE. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject swayed while placed in the instructional position, failed to touch the tip of her finger to the tip of her nose on all six attempts, rather touched underneath, sides of nose with the pad of the finger, on the counter request subject raised the wrong arm about half way.

ROMBERG ALPHABET:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE ROMBERG ALPHABET TASK. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject swayed while performing this task. Recited the 26 letter alphabet correctly

BREATH TEST RESULTS: 1) .295 2) .284 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

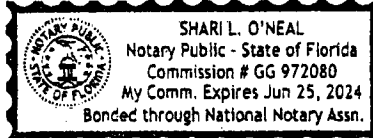
INV E. K. WHITE

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 13 day of FEBRUARY 20 23 by INV E. K. WHITE

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

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



WITNESS LIST

CASE NUMBER: 23-036029

ARRESTING OFFICER: INV E. K. WHITE

ADDRESS: CID/DUI

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

CAN TESTIFY TO: FACTS

NAME: D/S SHAWN DAVIS 31812

ADDRESS: DIST 1

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

CAN TESTIFY TO: STOPPING THE VEHICLE FOR A TRAFFIC VIOLATION

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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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

TESTING FACILITY TASK REPORT

AGENCY: PBSO INV. WHITE #7209

SUBJECT: KEEFE, CHRISTY L.

CASE NUMBER: 23-036029

DATE: 02-13-23

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 01:42 HRS

ENDING TIME: 01:57 HRS

BREATH TESTS RESULTS: 1) .295 TIME 01:51 A.M. P.M. 2) .284 TIME 01:54 A.M. P.M.
3) TIME A.M. P.M. 4) TIME A.M. P.M.

BREATH OPERATOR: S.O'NEAL #6212

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: EMOTIONAL, COOPERATIVE, A LITTLE HESITANT

CLOTHING: JACKET- CREME SHIRT- ORANGE PINK PANTS- BLUE JEANS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: VERY RED, GLASSY, WATERY FROM CRYING AT TIMES
STRONG ODOR OF UNKNOWN ALCOHOLIC BEVERAGE.

COMMENTS:

20 MIN. OBSERVATION DONE BY A/O WHITE #7209

A/O REQUESTED THE BREATH TEST.
D SAID YES, THEN ASKED IF SHE HAD A CHOICE.
A/O READ THE IMPLIED CONSENT TO THE D.
D UNDERSTOOD THE I/C.
D STILL SUBMITTED AFTER THE I/C WAS READ TO HER.
D COMPLETED THE TEST CORRECTLY.
C/W READ ON CAMERA TO THE D.
EXPLAINED THE RESULTS TO THE D.
D REFUSED Q&A.

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) _____

SUBJECT: _____ CASE NUMBER: _____

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, 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: _____

**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: 80-006029 Software: 8100.27
Date of Test: 02/13/2023

Date of Last Agency Inspection: 02/10/2023
Observation Period Began: 01:19
Subject's Name: CHRISTY L KEEFE

DOB: 05/25/1972 Sex: F

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

Results:	Test	g/210L	Time
	Diagnostics Check	OK	01:49
	Air Blank	0.000	01:49
	Control Test	0.082	01:49
	Air Blank	0.000	01:50
	Subject Sample #1	0.295	01:51
	Air Blank	0.000	01:51
	Air Blank	0.000	01:53
	Subject Sample #2	0.284	01:54
	Air Blank	0.000	01:55
	Control Test	0.080	01:55
	Air Blank	0.000	01:56
	Diagnostics Check	OK	01:56

Cylinder Lot: 29122080A1
Exp: 12/05/2024

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 SEARI L O'NEAL, 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: S. O'neal Date: 02-13-23
Signature

Sworn to (and affirmed) before me this 13 day of February 2023

Signature of Notary Public-State of Florida [Signature] Printed Name of Notary Public-State of Florida Inv. White #7209

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.



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: 2023004114	Date: 2/13/2023
	Specialist Name/ID: M. Tooks #8557