0546714 24CT1620SB 1640

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATION

OBTS Number:

Agency ORI Number: FL0500300
Agency Name: BOYNTON BEACH POLICE DEPT.
Agency Report Number: 34-24-002182

Charge Type (Check as many as Apply): ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

If Weapon Seized Enter Type: N/A
Multiple Clearance Indicator: 01

Location of Arrest (Including Name of Business): 2200 N Congress Ave, Boynton Beach, FL, 33426
Location of Offense (Business Name, Address): 2200 N Congress Ave, Boynton Beach, FL, 33426

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
01/29/2024	1940 hrs					Residence

DEFENDANT

Name (Last, First, Middle): Phillippi, Colby Kennedy
Alias (Name, DOB, Soc. Sec. #, Etc):

W - White, B - Black, I - American Indian, O - Oriental / Asian	Race	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
	W	F	09/10/1994	507	130	Hzl	Brn	Lgt	Sm

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description):
Marital Status: Single
Religion: Irreligion
Indication of: Alcohol Influence ☒ Y ☐ N ☐ Unk.; Drug Influence ☐ Y ☐ N ☒ Unk.

Local Address (Street, Apt. Number) (City) (State) (Zip): 9769 Nickles Blvd, Boynton Beach, FL, 33436
Phone: (561)757-0409
Residence Type: 1. City 2. County 3. Florida 4. Out of State: 1

Permanent Address (Street, Apt. Number) (City) (State) (Zip):
Phone: ( ) -
Address Source:

Business Address (Street, Apt. Number) (City) (State) (Zip):
Phone: ( ) -
Occupation:

D/L Number, State: P410111948300 / FL
INS Number: [redacted]
Place of Birth: Las Vegas, NV
Citizenship: US

CO-DEF

Co-Defendant Name (Last, First, Middle): | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

Co-Defendant Name (Last, First, Middle): | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other — Name (Last) (First) (Middle):
Residence Phone:
Address (Street, Apt. Number) (City) (State) (Zip):
Business Phone:
Notified by: (Name) Date: Time:
Juvenile Disposition: 1. Handled/Processed within Dept. and Released 2. TOT HRS/DYS 3. Incarcerated
Released To: (Name) Relationship: Date: Time:
The above address was provided by ☐ defendant and/or ☐ defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 561-355-2526) informed of any change of address: ☐ Yes, By: (Name) ☐ No. (Reason)
School Attended: Grade:
Property Crime? Yes ☐ No ☐
Description of Property:
Value of Property:

CODE

Drug Activity: 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. Barbituate, C. Cocaine, E. Heroin, H. Hallucinogen, M. Marijuana, O. Opium/Deriv., P. Paraphernalia/Equipment, S. Synthetic, U. Unknown, Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
DUI over .150	01	☐ Yes ☒ No	316.193(4)	-

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
N	N	-	24-002182	-	- 1,500

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐ Yes ☐ No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐ Yes ☐ No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐ Yes ☐ No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond

NOTICE TO APPEAR

☐ Instruction No. 1 Mandatory Appearance in Court
☐ Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side.

Location (Court, Room Number, Address): South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444
Court Date and Time: Month March Day 4th Year 2024 Time 0830 ☒ A.M. ☐ P.M.

FILED PBC - CUK CLKS 24 JAN 30 AM 8:17

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:

ADMIN.

HOLD for other Agency Name:
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:
Intake Deputy: ID #: 36162
Pouch #:
Signature of Arresting Officer:
Name of Arresting Officer (Print): OFC. Wertman #1111 I.D. #:
Transporting Officer: Wertman #1111 BBPD I.D. #: Agency:
Name Verification (Printed by Arrestee) (PRINT):
BU#:
Witness here is subject Signed with an "X".

Page 1 OF 1

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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 29th **DAY OF** January **2024 AT** 1845 ☐ **A.M** ☒ **P.M.**

CASE #: 24-002182 **DEFENDANT:** Phillippi, Colby Kennedy

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATION OF DRIVER:

Officer Mite responded to N Congress Ave and Gateway Blvd in reference to a vehicle crash with no injuries. Dispatch advised its between a Chevy Silverado and a Toyota Camry. Officer Mitre arrived and began the crash investigation and later requested my response for one of the drivers being impaired. Officer Mitre advised the driver was stumbling and her eyes were pinpoint.

On my arrival, Officer Mitre directed me to the driver of the Toyota Camry bearing FL/ Z80 – GVA who was sitting in the driver's seat. I contacted the driver later identified as W/F Phillippi, Colby (09/10/1994) who exited the vehicle appearing unsteady on her feet and nervous. Phillippi was read her Miranda warnings acknowledging she understood and stated she had one glass of wine at her residence. Phillippi provided a different location of where the crash occurred stating she was at Old Boynton Road and N Congress Ave. I informed Phillippi that Officer Mitre was completing the crash investigation and I will be conducting an DUI investigation. Phillippe agreed to conduct the Standardized Field Sobriety Tasks (SFSTs). Phillippe was also asked if she suffers from any medical conditions or wears glasses/contacts, answering she wears contacts and has anxiety, see below.

HORIZONTAL GAZE NYSTAGMUS:

- ☒ Left eye does not follow smoothly
- ☒ Left eye prior to 45 degrees
- ☒ Distinct jerking in left eye at maximum deviation
- ☐ Vertical Nystagmus in left eye
- ☒ Right eye does not follow smoothly
- ☒ Right eye prior to 45 degrees
- ☒ Distinct jerking in right eye at maximum deviation
- ☐ Vertical Nystagmus in right eye

WALK AND TURN:

The following task was explained and demonstrated to Phillippi who acknowledged the instructions. Phillippi had a difficult time getting into the starting position constantly losing her balance. After numerous attempts to stand in the position she began the exercise and missed touching heel to toe and used her arms for balance.

ONE LEG STAND:

The following task was explained and demonstrated to Phillippe who acknowledged the instructions. Phillippi swayed back and fourth and had a difficult keeping her balance with her foot in the air. Phillippi had to stop multiple times and was also repositioned from the roadway to the sidewalk to try again.

FINGER TO NOSE:

The following task was explained and demonstrated to Phillippi who acknowledged the instructions. Phillippi swayed back and fourth and after each command failed to returned her finger to her side.

ROMBERG/ALPHABET:

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The following task was explained and demonstrated to Phillippi who acknowledged the instructions. Phillippi swayed back and fourth and stated she can't recite it backwards.

Based on the above facts, Phillippi, Colby was taken into custody under the suspicion of DUI, she was placed in handcuffs and transported to the Palm Beach County BAT. The 20 – minute observation began at 2010 hours and completed at 2030 hours. Upon completion I requested Phillippi to provide a sample of her breath to determine the alcohol content. The proper way to provide a sample was explained, acknowledging she understood. Phillippi provided a sample of .342 at 2037 hours and a second sample of .338 at 2040 hours. Phillippi was read her Miranda warnings which she understood and agreed to the questions and answers.

Phillippi, Colby is charged with one count of DUI over .150 pursuant to F.S.S 316.193 (4). Phillippi was medically cleared and later turned over to the care/custody of the Palm Beach County Jail.

The following instrument was sworn to before me this 29 day of January 2024

By: _____

Notary/Police Officer (F.S.S. 117.10)

Notary Public State of Florida
Renee Ragin
My Commission GG 966418
Expires 03/05/2024

Signature of Arresting Officer

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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: _____

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SUBJECT: [illegible] CASE NUMBER: [illegible]

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)_____

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WHITE: STATE ATTY. YELLOW: DHSMV PINK: CENTRAL RECORDS GOLD: JAIL

TESTING FACILITY TASK REPORT

AGENCY: BBPD

SUBJECT: Phillippi, Colby K.

CASE NUMBER: 24-029698

DATE: Feb 6, 2024

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 20:32

ENDING TIME: 20:50

BREATH TESTS RESULTS: 1) .342 TIME 20:37 A.M.☐ P.M.☒ 2) .338 TIME 20:40 A.M.☐ P.M.☒

3) N/A TIME ——— A.M.☐ P.M.☐ 4) N/A TIME ——— A.M.☐ P.M.☐

BREATH OPERATOR: R. Ragin #16877

MAINTENANCE TECHNICAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Calm, cooperative, talkative

CLOTHING: Black pants, LS black jacket, black sneakers

MEDICAL CONDITIONS: Anxiety

MEDICATIONS: Clonazepam

OTHER:

Eyes are glassy & bloodshot
odor of unknown alcoholic beverage on breath
Subject stated in Q&A she had 2 Vodka drinks

COMMENTS:

Arrived at center A/O started 20 minute observation period at 20:10 hrs.

Subject agreed to perform breath test.

Tech read breath test results.
Subject stated she understood breath test results.

A/O read rights.
Subject stated she understood rights.

A/O conducted Q&A.
Subject answered Q&A.

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

PBSO CASE # 24-029698 PBSO ZONE 6-32

AGENCY CASE # 24-002182 CRASH CASE #

TIME OF STOP/CRASH 1845 DATE 1/29/24 DAY MON

SUBJECT'S NAME Phillippi, Colby RACE W SEX F

HGT 507 **WGT** 140 **DOB** 9/10/94

LOCATION 2200 N Congress Ave

ARRESTING OFFICER'S NAME & ID Wertman #1111 AGENCY BBPD

DIVISION: RP

NOTIFIED BY COMMO Y

ARRIVAL AT FACILITY 20:0 HRS

Arrest Time 19:40

BREATH RESULTS:

1. .342
2. .338
3.
4.

TESTING OFFICER'S ID 16877

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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: 80-006477 Software: 8100.27
Date of Test: 01/29/2024

Date of Last Agency Inspection: 01/12/2024
Observation Period Began: 20:10
Subject's Name: COLBY K PHILLIPPI DOB: 09/10/1994 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	20:35
Air Blank	0.000	20:35
Control Test	0.080	20:36
Air Blank	0.000	20:36
Subject Sample #1	0.342	20:37
Air Blank	0.000	20:38
Air Blank	0.000	20:40
Subject Sample #2	0.338	20:40
Air Blank	0.000	20:41
Control Test	0.078	20:41
Air Blank	0.000	20:42
Diagnostics Check	OK	20:42

Cylinder Lot: 06723080A5
Exp: 04/05/2025

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 RENEE M RAGIN, 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: _____ Date: 01/29/24
Signature

Sworn to (or affirmed) before me this 29 day of Jan, 2024

Ofc. _____ Ofc. G. Wertman # 1111
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.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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CASE #: 24-002182 **DEFENDANT:** Phillippi, Colby Kennedy

Arresting Officer: Wertman
Address: 2100 HIGH RIDGE ROAD, BOYNTON BEACH, FL 33426
Phone Numbers: Home: _____ **Work:** (561) 742-6100

Name: Officer Mitre
Address: 2100 High Ridge Road, Boynton Beach, FL, 33426
Phone Numbers: Home: _____ **Work:** 561-742-6100
Can testify to: Crash Investigation and SFSTs

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: _____

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Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☐	119.071(2)(e)	Confession	
Public Info. Exemptions	☐	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 99 of the CRTM for additional information)	
	☐	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	
	☐	119.0712(2)	Personal information contained in a motor vehicle record	
	☐	316.650(11)	Driver information contained in a uniform traffic citation	
	☐	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	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses	
	☐			
	☐			
Other	☐			
	☐			
	☐			
	☐			

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REVIEW COMPLETED BY

Booking Number: 2024002698	**Date:** 1/30/2024
	Specialist Name/ID#: A. Paniagua/42769