

50-2023-CT-010953 ASB

0541369

207

☐ Marsy's Law CVI FL Const. Art.1 § 18(b)		ARREST / NOTICE TO APPEAR Juvenile Referral Report		☐ Check if Supplement is Attached 1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias		Juvenile ☐ N ☐ Y	
OBS Number		Agency Name		Agency Report Number			
Agency ORI Number		PALM BEACH COUNTY SHERIFF'S OFFICE		0 6 - 23-080912			
Charge Type: ☐ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other		If Weapon Seized		Multiple Clearance Indicator		0 1	
Location of Arrest (Including Name of Business)		Location of Offense (Business Name, Address)		45th St and N Congress Ave, Mangonia Park, FL 33407		45th St and N Congress Ave, Mangonia Park, FL 33407	
Date of Arrest		Time of Arrest		Booking Date		Booking Time	
06/20/2023		21:03		06/20/2023			
Jail Date		Jail Time		Location of Vehicle		45th St and N Congress Ave, Mangonia Park, FL 33407	
Name (Last, First, Middle)							
Henry, Edward, Michael, III							
Alias (Name, DOB, Soc. Sec. #, Etc.)							
Race		Sex		Date of Birth		Height	
W - White B - Black		W M		7/20/1971		5'11	
Weight		Eye Color		Hair Color		Complexion	
220		blue		brown		light	
Build		Religion		Indication of: Alcohol Influence Drug Influence		Y N Unk	
medium		CATHOLIC					
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)							
tattoo on stomach							
Local Address (Street, Apt. Number)		(City)		(State)		(Zip)	
499 Evernia St 502, West Palm Beach, FL 33401							
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)	
Business Address (Name, Street)		(City)		(State)		(Zip)	
DL Number, State		Soc. Sec. Number		INS Number		Place of Birth (City, State)	
H560233712600, FL						New York, NY	
Citizenship		Date of Birth		Sex		Date of Birth	
US							
Co-Defendant (Last, First, Middle)		Race		Sex		Date of Birth	
Co-Defendant (Last, First, Middle)		Race		Sex		Date of Birth	
Parent		Name (Last)		(First)		(Middle)	
Legal Custodian							
Other:							
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) 355-8511) informed of any change of address.							
☐ Yes, by: (Name) ☐ No (Reason)							
Property Crime?		Description of Property		Value of Property			
☐ Yes ☐ No							
Drug Activity		S. Sell		R. Smuggle		K. Dispense/ Distribute	
N. N/A		B. Buy		D. Deliver		M. Manufacture/ Produce/ Cultivate	
P. Possess		T. Traffic		E. Use		Z. Other	
Charge Description		Counts		Domestic Violence		Statute Violation Number	
Driving Under the Influence		1		☐ Y ☐ N		316.193(1)(a)	
Drug Activity		Drug Type		Amount / Unit		Offense #	
N		N				23-080912	
Charge Description		Counts		Domestic Violence		Statute Violation Number	
				☐ Y ☐ N			
Drug Activity		Drug Type		Amount / Unit		Offense #	
Charge Description		Counts		Domestic Violence		Statute Violation Number	
				☐ Y ☐ N			
Drug Activity		Drug Type		Amount / Unit		Offense #	
Charge Description		Counts		Domestic Violence		Statute Violation Number	
				☐ Y ☐ N			
Drug Activity		Drug Type		Amount / Unit		Offense #	
Location (Court, Room Number, Address)							
South County Courthouse, Courtroom #1, 200 W. Atlantic Ave., Delray Beach, FL 33444 - Ph: (561) 355-2996							
Court Date and Time							
Month July		Day 18th		Year 2023		Time 08:30	
						A.M. ☒ P.M. ☐	
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 06/20/2023							
I consent to receive text reminders of court date(s) and times for this case by automated technology to the mobile number identified above. I understand that standard text message rates may apply, and that I may revoke this consent via the text message system if I choose.							
Signature							
HOLD for other agency		Signature of Arresting Officer		Name Verification (Printed by Arrestee)			
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other		Name of Arresting Officer (Print)		I.D. #		(PRINT)	
		Inv. POINTU P.		16032			
Inv. POINTU P.		Transporting Officer		I.D. #		Agency	
		Inv. POINTU P.		16032		PBSO	
Witness here if subject signed with an "X"							
1 OF 1							

OBTS Number		PROBABLE CAUSE AFFIDAVIT							
		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias						Juvenile	
Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number 06 - -23080912			
Charge Type: ☐ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance Check as many ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other as apply.						Special Notes:			
Defendant's Name (Last, First, Middle) Henry III, Edward Michael						Race W		Sex m	
								Date of Birth 07-20-1971	
Charge Description Driving under the influence			Charge Description						
Charge Description			Charge Description						
Victim's Name (Last, First, Middle) State of Florida						Race		Sex	
								Date of Birth	
Victim's Local Address (Street, Apt. Number) (City) (State) (Zip)				Phone		Address Source			
Victim's Business Address (Name, Street) (City) (State) (Zip)				Phone		Occupation			
The undersigned certifies and swears that I 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 _____ 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 20 day of June , 20 23 at 08:10 ☐ A.M. ☒ P.M. (Specifically include facts constituting cause for arrest).									

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

NARRATIVE:

On 06-20-2023 at approx: 20:10 hrs. I was in the 5800 blk of Broadway Ave. in the City of West Palm Beach, FL when I heard a loud grinding noise approaching me from the north driving south bound. As the loud became louder I observed a Black Cadillac Escalade driving south bound on Broadway. As the vehicle passed me I observed the front driver side tire was flat and the grinding noise was the rim on the asphalt.

At that time I got behind the vehicle and continued to follow the vehicle waiting for a back up unit. The Escalade turned west bound on to 45th st. In doing this the front drivers tire came off the rim and rolled into the east bound lanes almost striking an oncoming vehicle. That vehicle had to apply his brakes and swerve to avoid being hit by the tire.

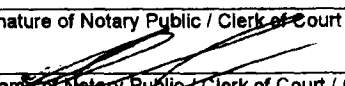
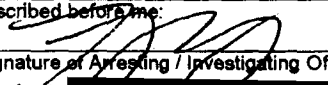
I continued to follow the vehicle west bound for approx: 1.8 miles until it pulled into the parking lot of the Cadillac dealership located at 2101 45th st.

As the vehicle entered the paring lot I activated my emergency lights and siren. The vehicle contiuned into the parking lot and parked in a parking spot .

At that time I made contact with the w/m driver who identified himself by FL d/I as Edward Michael Henry III (dob of 07-20-1971).

Henry advised he was coming from Singer Island and was trying to get to the Cadillac delarship due to his tire. While Henry was talking I was able to smell the odor of unknown alcohol coming from his breath.

Due to this I requested an on duty D.U.I deputy to respond.

State of Florida, County of Palm Beach, The foregoing instrument was sworn to or affirmed and subscribed before me:	
Signature of Notary Public / Clerk of Court / Officer (F.S.S 117.10) 	Signature of Arresting / Investigating Officer 
Name of Notary Public / Clerk of Court / Officer (F.S.S 117.10) 6/20/2023 Date	Name of Arresting / Investigating Officer (Please Print) 6/20/2023 Date

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 20th DAY OF June 2023, AT 20:21 PM

SUBJECT: Henry, Edward, Michael, III CASE NUMBER: 23-080912

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. POINTU P.

PERSONAL CONTACT

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

Agt [REDACTED] observed a Cadillac Escalade driving its front left rim southbound on Broadway in the city of West Palm Beach, Palm Beach County, Florida. He followed the vehicle that continued westbound on 45th Street and the tire came off the rim, almost striking an incoming vehicle. The Cadillac continued for more than 1.5 mile and pulled into the parking lot of the Cadillac dealership at the intersection of North Congress Avenue and 45th St. Agt [REDACTED] initiated a traffic stop and the driver of the vehicle was identified by his Florida driver license as Edward Henry, III.

OBSERVATION OF DRIVER:

Henry had glassy and bloodshot eyes. An obvious odor of unknown alcoholic beverage was coming from his person and became stronger when he talked. His gait was unsteady. His speech was slightly slurred.

DRIVER'S STATEMENTS:

Henry explained he was coming from Singer Island and hit a curb, deflating the front left tire. He decided to continue to drive to the dealership but soon the tire came off and he continued to drive on the rim. He admitted drinking 2 Bourbons around 6 or 7 PM.

ODORS:

Obvious odor of unknown alcoholic beverage that became stronger when he talked.

GENERAL OBSERVATIONS

SPEECH: Slightly slurred.

ATTITUDE: Cooperative, polite.

CLOTHING: White short sleeve shirt, black shorts, white sneakers

MEDICAL/OTHER: None disclosed.

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. POINTU P.

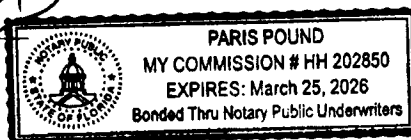
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 20th day of June 2023 by Inv. POINTU P.

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

Paris Pound (#24639)

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



SUBJECT: Henry, Edward, Michael, III

CASE NUMBER 23-080912

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:

Pupils round and equal. No resting nystagmus. Equal tracking. Onset of HGN at approximately 40 degrees. VGN not present. No LOC. Swayed during the task. Moved his head

WALK & TURN:

Henry stopped at the 9th step to ask for instruction. He then turned by rotating on his toes clockwise. He then walked back 9 steps, but missing touching heel to toe on one of them.

ONE LEG STAND:

Henry raised his left leg. He swayed while balancing and put his foot down on his count of 1006. He then resumed the task restarting counting from 1001 instead of 1007. He put his foot down again at his count of 1011.

FINGER TO NOSE:

Henry used the pad of his finger instead of the tip on all tasks. He swayed during the task and tilted his head forward. On task 4 he hovered over the left side of his nose, before bringing his finger back to the tip.

ROMBERG ALPHABET:

Henry recited the alphabet repeating letters and swaying.

For the Romberg balance, he stopped the 30 seconds tasks at approximately 14 seconds. He swayed during the task.

BREATH TEST RESULTS: 0.079 0.077

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. POINTU P.

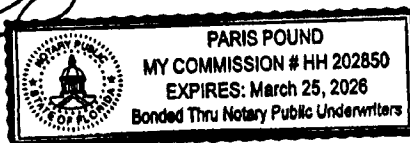
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(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced known

Paris Pound (#24639)

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



SUBJECT: HENRY, EDWARD M CASE NUMBER: 23-080912

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) READ ON CAMERA

WHITE: STATE ATTY.

YELLOW: DHSMV

PINK: CENTRAL RECORDS

GOLD: JAIL

SUBJECT: HENRY, EDWARD m CASE NUMBER: 23-080912

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: _____

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

**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: 80-006239 Software: 8100.27
Date of Test: 06/20/2023

Date of Last Agency Inspection: 05/19/2023

Observation Period Began: 21:28

Subject's Name: EDWARD M HENRY

DOB: 07/20/1971 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		21:52
Air Blank	0.000	21:52
Control Test	0.079	21:53
Air Blank	0.000	21:53
Subject Sample #1	0.079	21:54
Air Blank	0.000	21:55
Air Blank	0.000	21:57
Subject Sample #2	0.077	21:57
Air Blank	0.000	21:58
Control Test	0.079	21:58
Air Blank	0.000	21:59
Diagnostics Check OK		21:59

Cylinder Lot: 08622080A1
Exp: 06/05/2024

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 PARIS D POUND, 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: 06/20/2023

Sworn to (or affirmed) before me this 20th day of JUNE, 2023

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.

WITNESS LIST

CASE NUMBER: 23-080912

ARRESTING OFFICER: Inv. POINTU P.

ADDRESS: Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

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

CAN TESTIFY TO: DUI Investigation, see PC

NAME: Agt [REDACTED]

ADDRESS: Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

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

CAN TESTIFY TO: wheel witness, driving pattern, initial observations. See supplemental PC.

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 _____

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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: _____

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: HENRY, EDWARD M

CASE NUMBER: 23-080912

DATE: Jun 20, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 21:50

ENDING TIME: 22:03

BREATH TESTS RESULTS: 1) .079 TIME 21:54 A.M. ☐ P.M. ☒ 2) .077 TIME 21:57 A.M. ☐ P.M. ☒
3) N/A TIME N/A A.M. ☐ P.M. ☐ 4) N/A TIME N/A A.M. ☐ P.M. ☐

BREATH OPERATOR: P.POUND #24639

MAINTENANCE TECHNICAN: J. KARLECKE# 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: PRONOUNCED

ATTITUDE: CALM, QUIET

CLOTHING: BLACK SHORTS, WHITE SHIRT , WHITE SNEAKERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 21:28 HRS.

SUBJECT: AGREED TO TAKE TEST

TECH: READ TEST RESULTS

SUBJECT: STATED HE UNDERSTOOD TEST RESULTS

A/O: READ RIGHTS

SUBJECT: STATED HE UNDERSTOOD RIGHTS

A/O: CONDUCTED Q&A

SUBJECT: ANSWER QUESTIONS , THEN INVOKED HIS RIGHTS TO COUNSEL



**PALM BEACH COUNTY
SHERIFF'S OFFICE**
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☒	119.071(4)(c)	Undercover personnel.	4, 5, 10
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(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	☐	119.071 (2)(u)	Other: The Victim's address in a Domestic Violence action on petitioner's request.	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2023016156	Date: 6/21/2023
	Specialist Name/ID: M. Tooks #8557