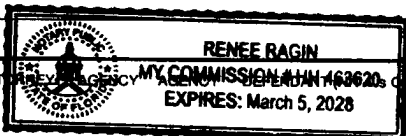


0549536		24CT9510AMB		1033	
Marsy's Law CVI FL Const. Art. I § 16(b)		ARREST / NOTICE TO APPEAR Juvenile Referral Report		☐ Check if Supplement is Attached	
OBTs Number		Agency ORI Number		Agency Name	
FLO: 5 0 0 0 0 0		PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number	
Charge Type: Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		If Weapon Seized Enter Type: NONE		Multiple Clearance Indicator 0 1	
Location of Arrest (including Name of Business)		Location of Offense (Business Name, Address)		Location of Vehicle	
LAKE AVENUE AND N. PALM WAY, LAKE WORTH BEACH, FL 33460		LAKE AVENUE AND N. PALM WAY, LAKE WORTH BEACH, FL 33460		PRIORITY TOWING	
Date of Arrest 05/22/2024		Time of Arrest 18:55		Booking Date Booking Time Jail Date Jail Time	
Name (Last, First, Middle) ROSS-HONEYCUTT, ELIZABETH, ELLEN		Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White B - Black I - American Indian O - Oriental/Asian W F		Date of Birth 12/18/1975		Height 5'03"	
Weight 165		Eye Color BLUE		Hair Color BROWN	
Complexion LIGHT		Build MEDIUM			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATTOOS - LEFT WRIST AND RIGHT ANKLE		Marital Status MARRIED		Religion CATHOLIC	
Local Address (Street, Apt. Number) (City) (State) (Zip)		Mobile Phone (561) 30803484		Indication of: Alcohol Influence Drug Influence Y N Unk	
Permanent Address (Street, Apt. Number) At Large		(City) (State) (Zip)		Residence Type: 1. City 2. County 3. Florida 4. Out of State 2	
Business Address (Name, Street) (City) (State) (Zip)		Phone ()		Address Source DEFENDANT - FL D/L	
D/L Number, State R252225759580, FL		Soc. Sec. Number		INS Number	
Place of Birth (City, State) WEST PALM BEACH, FL		Citizenship U.S.			
Co-Defendant (Last, First, Middle)		Race		Sex	
Co-Defendant (Last, First, Middle)		Date of Birth		1. Arrested 2. At Large	
Parent Legal Custodian Other:		Name (Last) (First) (Middle)		Residence Phone ()	
Address (Street, Apt. Number) (City) (State) (Zip)		Business Phone ()			
Notified by: (Name)		Date		Time	
Released to: (Name)		Relationship		Juvenile Disposition 1. Handled/Processed within Dept. and Released. 2. TOT HRS/DYS 3. Incarcerated	
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) 355-6511) informed of any change of address. ☐ Yes, by: (Name) ☐ No (Reason)		School Attended		Grade	
Property Crime? ☐ Yes ☐ No		Description of Property		Value of Property	
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. 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 ☐ Y ☒ N	
Drug Activity N		Drug Type N		Amount / Unit N/A	
Offense # 24064985		Statute Violation Number 316.193(3)(C)(1)		Violation of ORD #	
Charge Description		Counts		Domestic Violence ☐ Y ☒ N	
Drug Activity N		Drug Type N		Amount / Unit N/A	
Offense #		Statute Violation Number		Violation of ORD #	
Charge Description		Counts		Domestic Violence ☐ Y ☒ N	
Drug Activity N		Drug Type N		Amount / Unit N/A	
Offense #		Statute Violation Number		Violation of ORD #	
Charge Description		Counts		Domestic Violence ☐ Y ☒ N	
Drug Activity N		Drug Type N		Amount / Unit N/A	
Offense #		Statute Violation Number		Violation of ORD #	
Location (Court, Room Number, Address) Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600		Court Date and Time Month JUNE Day 20TH Year 2024 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 05/22/2024			
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 X		Name Verification (Printed by Arrestee) MAY 23 AM 02:42	
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other		Name of Arresting Officer (Print) INV. A. SENTMANAT		I.D. # 24968	
Transporting Officer INV. A. SENTMANAT 24968		Agency PBSO		Witness here if subject signed with X MAY 23 2024	
Pouch #		Page 1 OF 1			

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capias		1	Juvenile	N
ADMIN	Agency ORI Number FLO. 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 24064985			
	Charge Type Check as many as apply ☐ 1 Felony ☐ 2 Traffic Felony		☐ 3 Misdemeanor ☒ 4 Traffic Misdemeanor ☐ 5 Ordinance ☐ 6 Other		Special Notes			
CHARGES	Name (Last, First, Middle) ROSS-HONEYCUTT, ELIZABETH, ELLEN				Alias	Race W	Sex F	Date of Birth 12/18/1975
	Charge Description DUI		314.193(3)(C)(1)		Charge Description			
VICTIM	Victim's Name (Last, First, Middle) STATE OF FLORIDA, ,				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. ☐ confessed to _____ admitting to the below facts. ☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the <u>22nd</u> day of <u>MAY</u> , 20 <u>24</u> at <u>17:37</u> ☐ A.M. ☒ P.M. (Specifically include facts constituting cause for arrest.)								
☐ Marsy's Law CVI FL. Const. Art.1 § 16(b)								
SUPPLEMENTAL PROBABLE CAUSE AFFIDAVIT								
Upon arrival to the scene and prior to leaving it, I had conducted an investigation on how the traffic crash had occurred. Based on my observations it appeared that the blue 2019 NISSAN bearing Florida tag #69AMVT was traveling east bound on Lake Ave approaching N. Palm Way. As it was approaching N. Palm Way it drifted out of the lane and side swiped a parked vehicle. The truck was a gray 2019 Ford pick-up truck that was not occupied. The right front bumper of the Nissan and right side/tire struck the left side of the Ford truck; form the left rear bumper to the left front bumper.								
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH				INV. A. SENTMANAT			
	(Signature of Arresting/Investigative Officer)							
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>22nd</u> day of <u>MAY</u> , 20 <u>24</u> by <u>INV. A. SENTMANAT</u>							
	(Print name of Arresting/Investigative Officer who is personally known to me and/or produced identification. Type of identification produced Renee Ragin (#16877) <u>KNOWN</u> Notary Public, Clerk of Court, Officer (F.S.S.), 197, N.O.							



D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 22nd DAY OF MAY 20 24, AT 17:37 AM PM
SUBJECT: ROSS-HONEYCUTT, ELIZABETH, ELLEN CASE NUMBER: 24064985

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV. A. SENTMANAT

PERSONAL CONTACT

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

On Wednesday May 22, 2024 at approximately 1803hrs I responded to the scene of an accident (PBSO case #24064967) for a DUI investigation on a possibly impaired driver. Upon arrival I spoke with CSA Claudio #9532 that had investigated the crash and was completing a traffic crash report. CSA Claudio stated that the driver of the blue Nissan (Florida tag #69AMVT) was W/F Elizabeth Ross-Honeycutt (12/18/75) had struck a parked pick-up truck; and she had observed signs of impairment. She said that she observed Ross slurring some words, red, watery eyes, and had an odor of an unknown alcoholic beverage coming from her breath. The wheel witness W/M Moises Becerra (06/12/90) (also the owner of the truck that had been struck) observed Ross exiting the driver seat; after the accident had occurred.

OBSERVATION OF DRIVER:

Upon making contact with the defendant who was sitting on the curb. I immediately smelled an obvious odor of an unknown alcoholic beverage coming from the defendant the moment she spoke to me. I observed the defendant's eyes to be glassy, watery, and red. I also observed the defendant to have a slow and slurred speech. The defendant had a pale and flushed face. The defendant appeared disheveled. The defendant was asked to step to speak with me in front of my patrol car, as she walked towards the vehicle she had an unstable balance. I also observed the defendant to have a sway as she stood normally without walking. She also had a small abrasion on her right knee and calf. After being secured in the backseat of my patrol vehicle had a strong odor of an unknown alcohol in it.

DRIVER'S STATEMENTS:

The defendant stated she has no physical defects or injuries. She stated she had seizures and was taking [REDACTED] twice a day. She stated she was taking [REDACTED] medicine. She stated she has not hit her head recently. She stated she has not smoked marijuana or used any illegal drugs today. She said that she had only [REDACTED] at approximately 1530hrs. Later she said that her light green Stanley cup had [REDACTED] seltzer water in it.

ODORS:

An obvious odor of an unknown alcoholic beverage coming from her breath which intensified as she spoke with me.

GENERAL OBSERVATIONS

SPEECH: Slow, slurred, thick and at times difficult to understand.

ATTITUDE: Cooperative.

CLOTHING: White shorts, brown flip flops, light brown shirt, and a blue bikini top.

MEDICAL/OTHER: [REDACTED]

STATE OF FLORIDA
COUNTY OF PALM BEACH

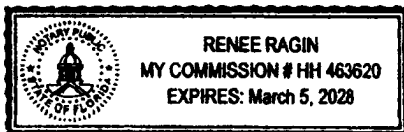
INV. A. SENTMANAT
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 22nd day of MAY 20 24 by INV. A. SENTMANAT

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

Renee Ragin (#16877)

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



SUBJECT: ROSS-HONEYCUTT, ELIZABETH, CASE NUMBER 24064985

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:

The defendant was placed into the instructional stance for Horizontal Gaze Nystagmus. She verbally identified the red stimulus that I was holding up. She was told to follow the stimulus with her eyes only and not to move her head. I checked her eyes for equal pupil size, equal tracking, and resting nystagmus. I observed a lack of smooth pursuit in both eyes. I observed distinct and sustained nystagmus at maximum deviation in both eyes. I observed onset of nystagmus prior to 45 degrees in both eyes. She was reminded several times not to move her head. I did not observe any vertical nystagmus in neither eye. She swayed from side to side throughout this process.

WALK & TURN:

I explained and demonstrated the instructions for the Walk & Turn to her. She stated she understood the instructions and had no questions for me. She failed to maintain the instructional stance by separating her feet help steady herself. She swayed from side to side. She did not walk heel to toe, stepped off the line, stopped to steady herself, took less than nine steps, did not count the steps out loud, made an improper turn. She used her arms to assist in balance.

ONE LEG STAND:

I explained and demonstrated the instructions for the One Leg Stand to her. She stated she understood the instructions and had no questions for me. She failed to maintain the instructional stance by separating her feet to help steady herself. She swayed from side to side. She lowered her left foot several time, did not count out loud, and did not look down at her foot.

FINGER TO NOSE:

I explained and demonstrated the instructions for the Finger to Nose task to her. She stated she understood the instructions and had no questions for me. She failed to maintain the instructional stance by separating her feet to help steady herself. She missed all attempts with both the right and left hand. She used the pad of his fingers, touched under the nose, to the side of the nose, or the bridge of the nose.

ROMBERG ALPHABET:

I explained and demonstrated the instructions for the Rhomberg Alphabet task to her. She stated she understood the instructions and had no questions for me. She failed to maintain the instructional stance by separating her feet to help steady herself. She swayed from side to side. She correctly recited the Alphabet as instructed.

BREATH TEST RESULTS: 1) .179 2) .163 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. A. SENTMANAT

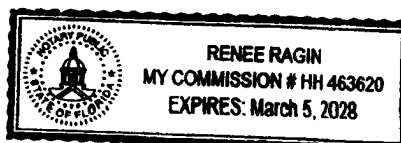
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 22nd day of MAY 20 24 by INV. A. SENTMANAT

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

Renee Ragin (#16877)

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



WITNESS LIST

CASE NUMBER: 24064985

ARRESTING OFFICER: INV. A. SENTMANAT

ADDRESS: TRAFFIC DIVISON/DUI

PHONE NUMBERS (HOME): _____ (WORK) 561-688-3400

CAN TESTIFY TO: FACTS OF THE CASE AND DUI INVESTIGATION.

NAME: CSA CLAUDIO #9532

ADDRESS: 3228 GUN CLUB ROAD, WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME) _____ (WORK) 561-688-3400

CAN TESTIFY TO: INVESTIGATED THE TRAFFIC CRASH/REPORT, AND OBSERVED SIGNS OF IMPAIRMENT

NAME: BECERRA, MOISES

ADDRESS 3569 FOREST HILL BLVD APT 118, WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME) 631-960-2290 (WORK) _____

CAN TESTIFY TO: WHEEL WITNESS

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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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: Ross-Honeycutt, Elizabeth E.

CASE NUMBER: 24-064985

DATE: May 22, 2024

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 19:51

ENDING TIME: 20:02

BREATH TESTS RESULTS: 1) .179 TIME 19:56 A.M. ☐ P.M. ☒ 2) .163 TIME 19:49 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 TECHNICIAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Calm, cooperative, crying

CLOTHING: White shorts, brown sweater shirt, black flip-flops

MEDICAL CONDITIONS: Seizures, Bipolar

MEDICATIONS: Xanax, Zoloft, Laotrigine, Ambien

OTHER:

Eyes are glassy & bloodshot
odor of unknown alcoholic beverage on breath

COMMENTS:

Arrived at center A/O started 20 minute observation period at 19:25 hrs.

Subject agreed to perform breath test.

A/O read rights.

Subject stated she understood rights.

Tech read breath test results.

Subject stated she understood breath test results.

No Q&A conducted.

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) _____

WHITE: STATE ATTY.

YELLOW: DHSMV

PINK: CENTRAL RECORDS

GOLD: JAIL

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: _____

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



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

PBSO CASE # 24064985 PBSO ZONE 14-52

AGENCY CASE # _____ CRASH CASE # 24064967

TIME OF STOP/CRASH 17:37 DATE 05/22/2024 DAY Wednesday

SUBJECT'S NAME ROSS-HONEYCUTT, ELIZABETH, ELLEN RACE W SEX F

HGT 5'03" WGT 165 DOB 12/18/1975

LOCATION LAKE AVENUE AND N. PALM WAY, LAKE WORTH BEACH, FL 33460

ARRESTING OFFICER'S NAME & ID INV. A. SENTMANAT (24968) AGENCY Palm Beach County Sheriff's Office

DIVISION: TRAFFIC/DUI

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 19:25

ARREST TIME 18:55

BREATH RESULTS:

1) .179

2) .163

3) _____

4) _____

TESTING OFFICER'S ID 16877 PBSO VIDEOTAPE # N/A



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	4
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	6-9
	☐	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	☐			
	☐			
	☒	395.302597(a) 456.057(7)(a)	Medical Information	4
	☐			

REVIEW COMPLETED BY

Booking Number: 2024013950	Date: 5/23/2024
	Specialist Name/ID#: Brintnall/42772