

0547595

24 CT 4050

1752

ADDITIONAL INFORMATION		OBTS Number		ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		JUVENILE	
Agency ORI Number 0500400		Agency Name Delray Beach Police Department		Agency Report Number (N.T.A.'s only) 4 0 24-003197									
Charge Type: ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Check as many as apply		If Weapon Seized Enter Type UNARMED		Multiple Clearance Indicator 1							
Location of Arrest (Including Name of Business) 316 NW 10TH AVE		Location of Offense (Business Name, Address) 300 NW 10TH AVE BLK, DELRAY BEACH, FL 33444											
Date of Arrest 03/07/2024		Time of Arrest 01:42		Booking Date 03/07/2024		Booking Time 04:19		Jail Date 03/07/2024		Jail Time 04:13		Location of Vehicle	
Name (Last, First, Middle) SCHULTZ, GUNNAR PATRICK		Alias: SCHULTZ, GUNNAR PATRICK		Alias (Name, DOB, Soc. Sec. #, Etc.)									
Race W - White		Sex M		Date of Birth 07/07/2000		Height 6'04		Weight 170		Eye Color BLUE		Hair Color BROWN	
Complexion OLIVE		Build MEDIUM		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status U		Religion		Indication of: Alcohol Influence Drug Influence Yes ☒ No ☐ Unk. ☐			
Local Address (Street, Apt. Number) 738 W CAMINO REAL, BOCA RATON, FL 33486		(City) BOCA RATON		(State) FL		(Zip) 33486		Phone		Residence Type: 1. City 2. County 3. Florida 4. Out of State 2			
Permanent Address (Street, Apt. Number) 738 W CAMINO REAL, BOCA RATON, FL 33486		(City) BOCA RATON		(State) FL		(Zip) 33486		Phone		Address Source VERBAL			
Business Address (Name, Street) 738 W CAMINO REAL, BOCA RATON, FL 33486		(City) BOCA RATON		(State) FL		(Zip) 33486		Phone		Occupation			
D/L Number, State S432295002470 / FL		Sec. Sec. Number [REDACTED]		DNS Number		Place of Birth (City, State) BOCA RATON, FL		Citizenship US					
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					
☐ Parent ☐ Legal Custodian		Name (Last, First, Middle)		Residence Phone									
Address (Street, Apt. Number) 738 W CAMINO REAL, BOCA RATON, FL 33486		(City) BOCA RATON		(State) FL		(Zip) 33486		Business Phone					
Notified by: (Name)		Date		Time		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 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 355-2526) informed of any change of address.		Property Crime? ☐ Yes ☒ No		Description of Property		Value of Property							
C O D E Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Struggle D. Deliver E. Use		K. Disperse/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other		Drug Type N. N/A A. Amphetamine	
B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetic		U. Unknown Z. Other							
Charge Description DUI-DAMAGE TO PERSON/PROPERTY		Statute Violation Number 316.193(3)(C)(1)		Violation of ORD #									
Drug Activity N		Drug Type N		Amount / Unit /		Offense #		Counts 1		Domestic Violence ☐ Y ☒ N		Warrant / Capias Number	
Charge Description		Statute Violation Number		Violation of ORD #									
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence ☐ Y ☒ N		Warrant / Capias Number	
Charge Description		Statute Violation Number		Violation of ORD #									
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence ☐ Y ☒ N		Warrant / Capias Number	
Health / Apparent Physical Condition of Defendant		Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries		Explain:									
Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ Posted Bond ☐ South County Mental Health		☒ T.O.T. County Jail		PROPERTY - Received By		Released By		Released To					
Transported By STROUD		Date Transported 03/07/2024		Time Transported 04:13		Other							
INSTRUCTION NO. 1 - Mandatory appearance in court ☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.		Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444		Court Date and Time 03/28/2024 08:30:00									
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								No Photo Available	
HOLD for Other Agency		Signature of Arresting Officer STROUD, ELIZABETH		Name Verification (Printed by Arrestee) STROUD, ELIZABETH		ID # 1191							
☐ Dangerous ☐ Suicidal		☐ Restricted Arrest ☐ Other		Name of Arresting Officer (Print) STROUD, ELIZABETH		ID # 1191		Agency DBPD		Page 1 OF 1			
Intake Deputy		ID #		Pouch #		Transporting Officer STROUD, ELIZABETH		ID # 1191		Agency DBPD		Witness here if subject signed with an "X".	

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P-I-O ☐ DEFENDANT

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 07 DAY OF March, 2024 AT 12:35 ☒ AM ☐ PM
IN THE CITY OF DELRAY BEACH, COUNTY OF PALM BEACH, STATE OF FLORIDA

Case No: 24003197 Defendant: Gunnar Schultz
Agency: Delray Beach Police Arresting Ofc: OFC. ELIZABETH STROUD

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATIONS OF DRIVER:

On 03/07/2024, Delray Beach Police Dispatch received a call advising that someone crashed into there trash can located at 316 NW 10th Ave. A resident, Shirley Jones, provided a sworn statement (not verbatim) advising the following:

She had woken up after hearing a crash. She got out of bed and went to look outside. She noticed a black in the driveway with the taillights on. The car had sounded like it was still running with all of the windows rolled up. Another resident in the home called police.

Upon the arrival of police, Sergeant Kratz walked up the driveway of 316 NW 10th Ave and noticed the blue Lexus sedan (FL Tag: 9787PB) in the driveway. He noticed that the Lexus had struck another vehicle in the driveway. He observed a white male asleep behind the wheel, later identified as Gunner Schultz via his Florida Driver's License. He was able to wake the subject and asked him to exit the vehicle through the front passenger door, due to an obstruction next to the driver side door. During the interaction he noticed that the vehicle was still running, and the car was in drive.

I made contact with Schultz in the driveway. Vomit was observed on his shirt and his hair was disheveled. His eyes were red and had a glassy appearance. An odor of an unknown alcoholic beverage was smelled emanating from his breathe as he spoke. Schultz had droopy eyelids and was sluggish. When he spoke there were times that he did not make sense. During the interaction, Schultz believed that he was in Boca Raton where he originally stated that he lived. He advised that he had been on his way home. Schultz was notified that I suspected him of driving while under the influence and consented to roadside task.

The foregoing instrument was sworn to before me this 07 day of March, 2024
by Officer OFC. ELIZABETH STROUD

[Signature] 1191
Arresting Officer

[Signature] 36162
Notary/Police Officer (FSS 117.10)

ROADSIDE TASKS

Case No: 24003197 Defendant: Gunnar Schultz

HORIZONTAL GAZE NYSTAGMUS:

6 of 6 clues

Left Eye:

- ☒ Lack of smooth pursuit
- ☒ Distinct & sustained nystagmus at maximum deviation
- ☒ Onset prior to 45 degrees

Right Eye:

- ☒ Lack of smooth pursuit
- ☒ Distinct & sustained nystagmus at maximum deviation
- ☒ Onset prior to 45 degrees

Notes:

Subject was unable to track the stimulus during the task at times. His eyes also had a delayed reaction when following the stimulus. He was told to keep his head still several times.

WALK AND TURN: 4 of 8 clues

Subject took 10 steps down the line and completed an improper turn. He missed several heel to toe steps after he was reminded. He further stepped off of the line during the task. During the instruction stage he was unable to enter into the proper start position with the heel of his right foot touching his left toes. His feet were also slanted at an angle while he was standing.

ONE LEG STAND: 1 of 4 clues

Toward the end of the task he lost balance at (11 1000). He further did not count in the proper manner (1001, 1002, etc), instead he counted in such manner: 1 1000, 2 1000, 3 1000, 4 1000, etc.

FINGER TO NOSE: 0 of 4 clues

Subject completed the tasks

ROMBERG/ALPHABET: 0 of 4 clues

Subject recited the alphabet in a rhythmic manner and inserted the word "and" between Y and Z.

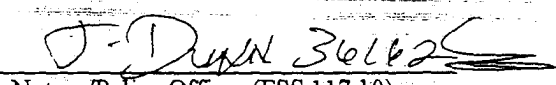
The defendant (Gunnar Schultz) was handcuffed and taken into custody.

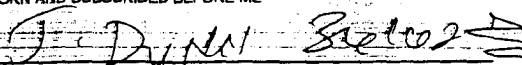
I then transported to the Breath Alcohol Testing facility at the Palm Beach County Jail. Prior to my arrival at the facility, Schultz threw up in my vehicle after he claimed that the car ride made him nauseous. Upon my arrival at 0252 hours, I completed the required 20-minute observation. I then requested Schultz provide a sample of her breath for the purpose of determining the alcohol content. He blew twice resulting in an initial blow of .151 and a final blow of .165. Based on the above facts, probable cause does exist to charge Gunnar Schultz with one count of DUI pursuant to FSS 316.193(4). I charged and issued him the following citation: DUI-Property Damage.

Upon completion of the booking process, Schultz was turned over to Palm Beach County Jail.

The foregoing instrument was sworn to before me this 07 day of March, 2024
by Officer OFC. ELIZABETH STROUD


Arresting Officer


Notary/Police Officer (FSS 117.10)

A D M I N		OBTs Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		JUVENILE					
Agency ORI Number		FL 0500400		Agency Name		DELRAY BEACH POLICE DEPARTMENT		Agency Report Number		4 0		24-003197					
Charge Type: Check as many as apply.		☐ 1. Felony ☐ 2. Traffic Felony		☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		Special Notes:									
Name (Last, First, Middle)		SCHULTZ, GUNNAR PATRICK		Alias				Race		W		Sex M					
Date of Birth		07/07/2000															
Charge Description		316.193(3)(C)(1) DUI-DAMAGE TO PERSON/PROPERTY		Charge Description													
Charge Description				Charge Description													
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 he/she 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 <u>7</u> day of <u>March</u> , <u>2024</u> at <u>04:45</u> (Specifically include facts constituting cause for arrest.)																	
A typographical error was discovered in the original probable cause affidavit with the offender's name. The offender's first name is written as Gunner ; however, the correct spelling is Gunnar. This probable cause supplement serves to correct the above error.																	
SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <u>3/7/24</u> DATE														SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  STROUD, ELIZABETH (1191) NAME OF OFFICER (PLEASE PRINT) <u>03/07/2024</u> DATE		PAGE 1 OF 1	

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

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 a 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: _____

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL



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

PBSO CASE #: 24-041191 PBSO ZONE: 4-11

AGENCY CASE #: 24003197 DHSMV CRASH #: _____

TIME OF CRASH/STOP: 01:42 DATE: 07/07/24 DAY: Thursday

DEFENDANT: Gunnar Schultz RACE: W SEX: M

HGT: 604 WGT: 170 DOB: 07/07/2000

LOCATION: 300-Blk NW 10th Ave

ARRESTING OFC: OFC. ELIZABETH STROH ID: 191 AGENCY: Delray Beach Police

DIVISION: Patrol

NOTIFIED BY COMM: _____

ARRIVAL AT FACILITY: 0252

TIME OF ARREST: 0217

BREATH RESULTS:

1. .151
2. .165
3. -
4. -

TESTING OFC. ID: 8656

PBSO VIDEOTAPE #: _____

TESTING FACILITY TASK REPORT

AGENCY: DBPD

SUBJECT: SCHULTZ, GUNNAR PATRICK

CASE NUMBER: 24-041191

DATE: Mar 7, 2024

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0318

ENDING TIME: 0339

BREATH TESTS RESULTS: 1) .151 TIME 0332 A.M. ☒ P.M. ☐ 2) .165 TIME 0335 A.M. ☒ P.M. ☐
3) XX TIME XX A.M. ☐ P.M. ☐ 4) XX TIME XX A.M. ☐ P.M. ☐

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: TALKATIVE, REPETITIVE

CLOTHING: GREY LONG SLEEVE SHIRT, BLACK PANTS, GREY SHOES

MEDICAL CONDITIONS: UNKNOWN

MEDICATIONS: UNKNOWN

OTHER:

EYES: GLASSY

COMMENTS:

ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0252 HOURS

SUBJECT ASKED IF COULD SPEAK TO SOMEONE BEFORE BREATH TEST

A/O READ I.C AND EXPLAINED

SUBJECT STATED HE WOULD TAKE BREATH TEST TEST

BREATH TEST COMPLETED

A/O READ RIGHTS

SUBJECT STATED HE UNDERSTOOD HIS RIGHTS

TECH READ BREATH TEST RESULTS

SUBJET ACKNOWLEDGED HE UNDERSTOOD BREATH TEST RESULTS

SUBJECT ASKED FOR A LAWYER

Q AND A NOT CONDUCTED

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CSO
Instrument Serial Number: 80-001741 Software: 8100.27
Date of Test: 03/07/2024

Date of Last Agency Inspection: 02/16/2024

Observation Period Began: 02:52

Subject's Name: GUNNAR PATRICK SCHULTZ

DOB: 07/07/2000 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	03:29
	Air Blank	0.000	03:29
	Control Test	0.080	03:29
	Air Blank	0.000	03:30
	Subject Sample #1	0.151	03:32
	Air Blank	0.000	03:32
	Air Blank	0.000	03:34
	Subject Sample #2	0.155	03:35
	Air Blank	0.000	03:36
	Control Test	0.079	03:36
	Air Blank	0.000	03:37
	Diagnostics Check	OK	03:37

Cylinder Lot: 06723030A5
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 JOSHUA J BELLI, 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: 03/07/24

Sworn to (or affirmed) before me this, 07 day of March, 2024

Signature of Notary Public-State of Florida

OFC. E. Stroud #1191

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 No: 24003197 Defendant: Gunnar Schultz

Arresting Officer: OFC. ELIZABETH STROUD
Address: Delray Beach Police Department
Phone Numbers: Home: 561-243-7800 Work: _____

Name: Sergeant Joseph Kratz
Address: Delray Beach Police Department
Phone Numbers: Home: 561-243-7800 Work: _____
Can testify to: Physical control of the vehicle

Name: Officer Kailey Shinn and Officer Austin Stickley
Address: Delray Beach Police Department
Phone Numbers: Home: _____ Work: _____
Can testify to: Backup Officers

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: _____



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	☐			
	☐			
	☐			
	☐			

REVIEW COMPLETED BY

Booking Number: 2024006213	Date: 3/7/2024
	Specialist Name/ID#: T.HOWARD/7185