J# 0544155 23CT185541 P# 3502

# ARREST / NOTICE TO APPEAR

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

1 JUVENILE

**ADMINISTRATION**

OBTS Number

Agency ORI Number: 0500400
Agency Name: Delray Beach Police Department
Agency Report Number (N.T.A.'s only): 40 23-013476

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 UNARMED
Multiple Clearance Indicator: 1

Location of Arrest (Including Name of Business): RIDGE LN/HILLCREST LN, BOYNTON BEACH, FL
Location of Offense (Business Name, Address): 2599 N SWINTON AVE, DELRAY BEACH, FL 33444

| Date of Arrest | Time of Arrest | Booking Date | Booking Time | Jail Date | Jail Time | Location of Vehicle |
|---|---|---|---|---|---|---|
| 10/12/2023 | 20:25 | 10/12/2023 | 20:35 | 10/12/2023 | 23:37 | 2599 N SWINTON AVE |

**DEFENDANT**

Name (Last, First, Middle): STUART, JAMIE ALEXIS
Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:

| Race (W - White, B - Black, I - American Indian, O - Oriental/Asian) | Sex | Date of Birth | Height | Weight | Eye Color | Hair Color | Complexion | Build |
|---|---|---|---|---|---|---|---|---|
| W | F | 11/29/1979 | 5'02 | 95 | BLUE | BROWN | FAIR | SMALL |

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description):
Marital Status: M
Religion: NON-DENOMI
Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. ☐ Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 8998 NW 47TH CT, CORAL SPRINGS, FL 33067
Phone: (954) 242-5325
Residence Type: 1. City 2. County 3. Florida 4. Out of State: 3

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 8998 NW 47TH CT, CORAL SPRINGS, FL 33067
Phone: (954) 242-5325
Address Source: DHSMV

Business Address (Name, Street) (City) (State) (Zip):
Phone:
Occupation:

| D/L Number, State | Soc. Sec. Number | INS Number | Place of Birth (City, State) | Citizenship |
|---|---|---|---|---|
| S363421799290 / FL | [redacted] | | PLANTATION, FL, | 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 ☐ Other: ☐ Legal Custodian
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 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.
☐ Yes, by: ☐ No

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. Disperses/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**

| Charge Description | Statute Violation Number | Violation of ORD # |
|---|---|---|
| DRIVING WHILE UNDER INFLUENCE | 316.193(1)A | |

| Drug Activity | Drug Type | Amount / Unit | Offense # | Counts | Domestic Violence | Warrant / Capias Number | Bond |
|---|---|---|---|---|---|---|---|
| | N | / | | 1 | ☐ Y ☒ N | | |

**CHARGE**

| Charge Description | Statute Violation Number | Violation of ORD # |
|---|---|---|
| | | |

| Drug Activity | Drug Type | Amount / Unit | Offense # | Counts | Domestic Violence | Warrant / Capias Number | Bond |
|---|---|---|---|---|---|---|---|
| | | / | | | ☐ Y ☐ N | | |

**CHARGE**

| Charge Description | Statute Violation Number | Violation of ORD # |
|---|---|---|
| | | |

| Drug Activity | Drug Type | Amount / Unit | Offense # | Counts | Domestic Violence | Warrant / Capias Number | Bond |
|---|---|---|---|---|---|---|---|
| | | / | | | ☐ Y ☐ N | | |

**INTAKE**

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 ☒ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By: Released By: Released To:
Transported By: Date Transported: Time Transported: Other:

FILED PBC - GUN CLUB
'23 OCT 13 AM 8:10

**NOTICE TO APPEAR**

☒ 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: 11/09/2023 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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian) Date Signed

No Photo Available

**ADMIN**

HOLD for Other Agency:
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other
Intake Deputy: I.D. #: Pouch #:
Signature of Arresting Officer:
Name of Arresting Officer (Print): WINDSOR, NICHOLAS I.D. #: 1029
Transporting Officer: WINDSOR I.D. #: 1029 Agency: DBPD
Name Verification (Printed by Arrestee) (PRINT): OCT 13 AM 12:54
Witness here if subject signed with an "X":

PAGE 1 OF 1

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

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# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 12th DAY OF October 20 23, AT 1941hrs ☐AM ☑PM

SUBJECT: Stuart, Jamie Alexis CASE NUMBER: 23-013476

AGENCY: DELRAY BEACH PD ARRESTING OFFICER: Windsor #1029

## PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

The following occurred in the City of Delray Beach, FL.
On 10/12/23 at 1925hrs a report of a motor vehicle crash at 1899 N. Swinton Ave. (refer to DBPD Case #23-013475) was given to the Delray Beach Police Department Dispatch. The report stated a white 2019 Jeep Grand Cherokee (FL Tag #5943TJ) ran off the roadway and struck a tree. The complainant stated the Jeep left the crash scene and traveled north and west to the area of NW 22nd St. and Lake Dr. The driver exited the Jeep and returned to the driver seat of the Jeep. The complainant stated the Jeep traveled east on NW 22nd St. and turned left (north) onto N. Swinton Ave. I arrived at the intersection of NW 22nd St. and N. Swinton Ave. and the complainant stated the Jeep went north on N. Swinton Ave. I observed the taillights of the Jeep in the 2500 block of N. Swinton Ave. I followed the Jeep and the Jeep continued north in the City of Boynton Beach, FL. I observed the Jeep turn right (east) onto Mission Hill Rd. and I activated my emergency lights of my marked DBPD patrol vehicle to conduct a traffic stop. The Jeep turned left (north) onto Ridge Ln. and pulled over at the intersection section of Ridge Ln. and Hillcrest Rd. While the Jeep was pulling over, the right mirror of the Jeep made contact with the mailbox at 300 Ridge Ln. The contact was minor causing the mailbox door to open but the mailbox was not damaged. I met with the white female driver of the Jeep and identified her by her FL DL as Jamie Alexis Stuart. Stuart was sitting in the driver seat of the Jeep with the vehicle engine running and Stuart was in possession of the vehicle key fob. There was nobody else inside the vehicle.

### OBSERVATION OF DRIVER:

I smelled an odor of an unknown alcoholic beverage coming from Stuart. Stuart's eyes were red and had a glassy appearance. Stuart's eyelids were droopy. Stuart was disheveled and had difficulty locating her driver license. Stuart's speech was slurred and thick. Stuart movements were slow and she appeared to be disoriented on her current location. After Stuart exited the Jeep, she stumbled while walking and swayed in a circular motion while standing still.

The Jeep's windshield was shattered and there was glass particles inside the vehicle on the dash. The hood, front end and right side mirror all had heavy damage with pieces of wood and leaves on the vehicle. There was also a branch with leaves stuck under the rear undercarriage of the Jeep.

During a search inventory prior to tow, I located two 187ml Sutter Home Pinot Grigio White Wine bottles in the center console of the Jeep. Both seals on the bottles were broken and there was clear liquid in the bottle. The clear liquid had an odor of alcohol and was poured out in front of my patrol vehicle which was captured on my in-car video dashcam.

### DRIVER'S STATEMENTS:

Stuart denied having any medical conditions or taking any prescription medications that would affect her ability to operate a motor vehicle. Stuart denied consuming any illegal drugs including marijuana prior to driving. Stuart stated she consumed "a little" prior to driving. Stuart stated "a little" was two glasses of wine. Stuart stated she consumed the glasses of wine at Duffy's Sports Grill located at 1750 S. Federal Hwy., Delray Beach, FL. 33483. Stuart stated she consumed her first drink at 1825hrs and finished her last drink at 1855hrs. Stuart stated she left the business at 1855hrs and was traveling to her friend's residence in Boynton Beach, FL. when she was pulled over. When asked about the heavy damage on the Jeep, Stuart stated she hit something but Stuart did not know what she hit. Stuart stated she did not know she struck a tree or the mailbox. Stuart would not state what caused her to run off the roadway striking the tree but stated she may have been looking at her cell phone when the crash occurred. Stuart denied having any problems with her eyes that were not corrected by eyeglasses. Stuart denied being treated by a doctor or dentist on todays date. Stuart denied having diabetes or taking any insulin. I requested Stuart performed roadside tasks and she refused. I advised Stuart of Taylor Warning and Stuart stated she understood Taylor Warning. After being advised of Taylor Warning, Stuart agreed to perform roadside tasks.

### ODORS:

I smelled an odor of an unknown alcoholic beverage coming from Stuart.

## GENERAL OBSERVATIONS

SPEECH: Slurred and Thick

ATTITUDE: Polite and Cooperative

CLOTHING: Blue Shirt, Blue Pants and White Shoes

MEDICAL/OTHER: None Stated

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12th day of October 20 23 by Ofc. Windsor #1029

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

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

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

NOT A CERTIFIED COPY

**SUBJECT:** Stuart, Jamie Alexis **CASE NUMBER** 23-013476

## ROADSIDE TASKS

**HORIZONTAL GAZE NYSTAGMUS:**

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- [x] RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

**Other Observations:**

Stuart moved her head and had to be instructed several times to keep her head still during the HGN/VGN roadside task.

WALK & TURN:

Stuart denied having any injuries or ailments that would affect her ability to walk in a straight line. Stuart did not remain in the instructional phase position. Stuart did not count out loud on the first series of steps. Stuart did not turn around as instructed. Stuart used her arms for balance. Stuart stepped off the line several times to maintain her balance. Stuart did not touch heel to toe on any of the steps taken.

ONE LEG STAND:

Stuart denied having any injuries or ailments that would affect her ability to stand on one leg. Stuart had to be instructed to look at my legs as I demonstrated the roadside task. Stuart used her arms for balance. Stuart did not count out loud and I had to instruct her to count during the roadside task. Stuart put her fot down on the ground to maintain her balance.

FINGER TO NOSE:

Stuart missed the tip of her nose on four attempts. Stuart swayed in a circular motion while standing still.

ROMBERG ALPHABET:

Stuart swayed in a circular motion while standing still. Stuart performed this roadside task as instructed.

NOT A CERTIFIED COPY

**BREATH TEST RESULTS:** | 1) Refused | 2) | 3) | 4)

**STATE OF FLORIDA**
**COUNTY OF PALM BEACH**

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12th day of October 20 23 by Ofc. Windsor #1029

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

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

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

**STATE OF FLORIDA**
**DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES**
**AFFIDAVIT OF REFUSAL TO SUBMIT TO**
**BREATH AND/OR URINE TEST**

I, Nicholas Windsor, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of Delray Beach Police Department, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 12th day of October, 20 23, at 2025 ☑ P.M ☐ A.M.

DRIVER Jamie Alexis Stuart,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# S363-421-79-929-0, state of Florida, was placed under lawful arrest for

the offense of Driving Under the Influence by Ofc. Windsor #1029 DBPD and
(Name of Arresting Officer)

issued Citation # AI951DE.

That on or about the 12th day of October, 20 23, at 2117 ☑ P.M ☐ A.M.

in Palm Beach County,

I requested that the driver submit to a ☑ **breath and/or** ☐ **urine** test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended for refusing to submit to a breath, urine or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.

Signature of Law Enforcement Officer or Correctional Officer

**THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)**

Notary Public State of Florida
Renee Ragin
My Commission GG 986418
Expires 03/05/2024

**(AFFIX SEAL)**

The foregoing instrument was sworn and subscribed before me this 12 day of Oct, 20 23, by N. Windsor #1029, who is personally known to me or who has produced _____ as identification.

Notary Public _____

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title _____

Date _____

Note: Mail or hand deliver to the designated Bureau of Administrative Reviews office, Department of Highway Safety and Motor Vehicles, with the driver's license, the appropriate copy of the UTC, and the probable cause affidavit.

HSMV-BAR1001 (REV. 10/2016)

NOT A CERTIFIED COPY

# WITNESS LIST

CASE NUMBER: 23-013476

ARRESTING OFFICER: OFC. WINDSOR #1029 DBPD

ADDRESS: 300 W ATLANTIC AVE., DELRAY BEACH, FL 33444

PHONE NUMBERS (HOME): _____ (WORK) 561-243-7800

CAN TESTIFY TO: TRAFFIC STOP AND DUI PC

NAME: THOMAS DALY

ADDRESS: 149 AVOCADO RD., DELRAY BEACH, FL 33444

PHONE NUMBERS (HOME) 561-596-3948 (WORK) _____

CAN TESTIFY TO: COMPLAINANT / 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: _____

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

PBSO CASE # 23-118912 PBSO ZONE 6-32

AGENCY CASE # 23-013476 CRASH CASE # 23-013475

TIME OF STOP/CRASH 1941 DATE 10/12/23 DAY THURSDAY

SUBJECT'S NAME STUART, JAMIE ALEXIS RACE W SEX F

HGT 5'02" WGT 95 DOB 11/29/79

LOCATION RIDGE LN/HILLCREST LN, BOYNTON BEACH, FL

ARRESTING OFFICER'S NAME & ID WINDSOR #1029 AGENCY DELRAY BEACH PD

DIVISION: CRD

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 2051

ARREST TIME 2025

BREATH RESULTS:

1) REFUSED
2)
3)
4)

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

NOT A CERTIFIED COPY

# TESTING FACILITY TASK REPORT

AGENCY: DBPD

SUBJECT: Stuart, Jamie A.

CASE NUMBER: 23-118912

DATE: Oct 12, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 21:15

ENDING TIME: 21:18

BREATH TESTS RESULTS: 1) Refused TIME 21:17 A.M.☐ P.M.☒ 2) N/A TIME ——— 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: Cooperative talkative, crying

CLOTHING: Blue scrubs pants, blue scrubs shirt, white sneakers

MEDICAL CONDITIONS: None

MEDICATIONS: None

**OTHER:**

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

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**COMMENTS:**

Arrived at center A/O started 20 minute observation period at 20:51 hrs.

Subject refused to perform breath test.

A/O read I/C and subject stated she understood I/C.

Subject refused to take test.

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

A/O attempted Q&A.
Subject refused to answer Q&A.

REFUSED

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REFUSED

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)_____

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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: _____

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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**

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| **Booking Number:** 2023026991 | **Date:** 10/13/2023 |
| | **Specialist Name/ID#:** C.Daniels 30347 |

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