23CT6909 MB

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

☐ Check if Supplement is Attached

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number

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

Juvenile: N

ADMINISTRATIVE

Agency ORI Number: FL0 5 0 0 0 0 0 0

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 0 6 -| 23-057841 ( )

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

Multiple Clearance Indicator: 0 1

Location of Arrest (Including Name of Business): 7554 Thornlee Dr, Lake Worth, fl 33467

Location of Offense (Business Name, Address): 7554 Thornlee Dr, Lake Worth, fl 33467

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
4/16/23	0524					Gardens Towing

DEFENDANT

Name (Last, First, Middle): Jados, Jeffrey,

Alias (Name, DOB, Soc. Sec. #, Etc.)

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	m	1/29/1989	6'02	220	Blue	Bro	Light	Slim

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)

Marital Status: Single

Religion: CATHOLIC

Indication of: Alcohol Influence ☐ Y ☐ N ☐ Unk; Drug Influence ☐ Y ☐ N ☒ Unk

Local Address (Street, Apt. Number) (City) (State) (Zip): 1263 VIA PANZANI , Boynton Beach, fL 33426

Mobile Phone: (845) 544-3871

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

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

Phone: ( )

Address Source: fl dl

Business Address (Name, Street) (City) (State) (Zip)

Phone: ( )

Occupation: Mechanic

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
J-320-430-89-029-0, FL	[redacted]		Warwick, NY	yes

CO-DEF

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

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other: Name (Last) (First) (Middle)

Residence Phone: ( )

Address (Street, Apt. Number) (City) (State) (Zip)

Business Phone: ( )

Notified by: (Name): 1- OR — 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) 355-6511) informed of any change of address.
☐ Yes, by: (Name) ☐ No (Reason)

School Attended — Grade

Property Crime? ☐ Yes ☐ No — Description of Property — Value of Property

CODE

Drug Activity: N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Dispense/ Distribute M. Manufacture/ Produce/ Cultivate Z. Other

Drug Type: N. N/A A. Amphetamine B. Barbiturate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Driving Under the Influence	01	☐ Y ☒ N	316.193(1A)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		23-057841		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

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

FILED PBC - GUN CLUB '23 APR 17 AM 7:13

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

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

NOTICE TO APPEAR

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 May Day 11 Year 2023 Time 0830 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

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

ADMIN

HOLD for other agency

Signature of Arresting Officer: X

Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Name of Arresting Officer (Print): Inv. C. Ward 16305 — I.D. #: 16305

Intake Deputy — I.D. # — Pouch #

Transporting Officer: Inv. C. Ward — I.D. #: 16305 — Agency: PBSO

Witness here if subject signed with an "X"

PAGE 1 OF 1

PBSO #0148 REV. 1/22 DISTRIBUTION: COURT COPY STATE ATTORNEY AGENCY AGENCY DEFENDANT (N.T.A.'s ONLY)

NOT A CERTIFIED COPY

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697

PROBABLE CAUSE AFFIDAVIT

OBTS Number:

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: 23-057841

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

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
Jados, Jeffrey,		w	m	1/29/1989

CHARGES

Charge Description	Charge Description
Driving Under the Influence 316.193(1A)	
Charge Description	Charge Description

VICTIM

Victim s Name (Last, First, Middle)	Race	Sex	Date of Birth
State of Floirda, ,	--	--	--

Local Address (Street, Apt Number) (City) (State) (Zip)	Phone	Address Source
,	( )	
Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation
	( )	

PROBABLE CAUSE STATEMENT

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 16 day of April 20 23 at 0438 ☒ A.M ☐ P.M (Specifically include facts constituting cause for arrest.)

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

Horizontal Gaze Nystagmus (HGN)

The defendant was placed with their feet together and hands down by their side. The defendant was instructed to await the completion of the instructions prior to beginning the task. The defendant acknowledged that they clearly understood my instructions. I then instructed the defendant on the task. The defendant stated that they clearly understood my instructions for the task. I placed my stimulus in front of the defendant and ask the defendant if they could see it to which he said "yes." I asked the defendant what color the stimulus was to which they answered. "red.". Upon commencing the task the defendant moved their head instead of following with their eyes only, anticipated the stimulus, and did not follow the stimulus as instructed. During the task, I observed that the defendant had equal pupil size and did not exhibit resting nystagmus. The defendant's eyes tracked equally. I observed a lack of smooth pursuit in both of the defendant's left and right eyes. I observed a distinct and sustained nystagmus, a quivering/jerking from side to side, while the stimulus was held at maximum deviation in both of the defendant's left and right eyes. I observed the onset of nystagmus with the stimulus held prior to 45 degrees in both of the defendant's left and right eyes.

I then checked the defendant for Vertical Gaze Nystagmus (VGN). I observed a distinct and sustained nystagmus at maximum deviation in both of the defendant's left and right eyes.

NOT A CERTIFIED COPY

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. C. Ward 16305
(Signature of Arresting /Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 16 day of April 20 23 by Inv. C. Ward

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

Thomasina Miller (#41017) Thomasina Miller
Notary Public, Clerk of Court, Officer (F.S.S). 117. 10)

THOMASINA MILLER
Notary Public - State of Florida
Commission # HH 339641
My Comm. Expires Dec 7, 2026
Bonded through National Notary Assn.

PBSO #0004 REV. 12/22

DISTRIBUTION: STATE ATTORNEY AGENCY AGENCY DEFENDAN

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 16 DAY OF April 20 23, AT 0438 ✓AM PM

SUBJECT: Jados, Jeffrey, CASE NUMBER: 23-057841

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. C. Ward 16305

PERSONAL CONTACT

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

At approximately 0438 hrs, I was responded to the scene of a traffic collision with property damage at 7554 Thornlee Dr, in unincorporated Lake Worth, Palm Beach County, Florida.

I arrived at the scene at approximately 0445 hrs. Upon my arrival the defendant, Jeffrey Jados, was still sitting in the driver seat of the Red Jeep bearing FL tag 64DDZC, which was registered to him. My independent traffic collision investigation, based on physical evidence and witness statements, determined that, at approximately 00438 hrs, the defendant drove eastbound through the cul-de-sac, into the driver striking the three vehicles that were parked int the driveway. The Jeep pushed one of the vehicles into the house. (See Traffic Collision Report 23-057841 for further).

OBSERVATION OF DRIVER:

I made contact with the defendant, later identified by their verbally and confirmed through FCIC/NCIC, as Jeffrey Jados. The defendant was sitting in the driver seat and stepped out of the car to speak with fire rescue. The defendant was swaying while standing still with his feet more than shoulder width apart. I observed that the defendant had red, watery, bloodshot eyes. The defendant had slurred, slowed, speech, and the odor of an unknown alcoholic beverage, based on my training and life experiences, that came from their breath which intensified as they spoke. I had the defendant walk to the front of my PBSO patrol vehicle. The defendant swayed while walking. I identified myself to the defendant. I advised the defendant that the traffic crash investigation was complete and that I was conducting a traffic crash investigation. I then read the defendant their Miranda rights from a pre printed card, which they stated they understood and continued speaking to me. I asked the defendant if they had any medical problems or had taken any medications and the defendant said no. I asked him if he had taken any illegal drugs or smoked any marijuana and he said no. I asked the defendant how much alcohol they had had to drink. The defendant said that he had a couple. He then said that he had 3 drinks of wine.

I asked the defendant to perform voluntary field sobriety tasks. The defendant consented.

DRIVER'S STATEMENTS:

I identified myself to the defendant. I advised the defendant that the traffic crash investigation was complete and that I was conducting a traffic crash investigation. I then read the defendant their Miranda rights from a pre printed card, which they stated they understood and continued speaking to me. The defendant identified himself to me. The defendant stated that he was coming form the Casino at Coconut Creek, He stated that he was heading to his house at Renaissance commons. He did not know where he was currently located. He stated that he was not injured in the crash. He stated that he did not hit his head in the accident. I asked the defendant if they had any medical problems or had taken any medications and the defendant said no. I asked him if he had taken any illegal drugs or smoked any marijuana and he said no. I asked the defendant how much alcohol they had had to drink. The defendant said that he had a couple. He then said that he had 3 drinks of wine.

ODORS:

I could smell the odor of an unknown alcoholic beverage, based on my training and life experinces, which came from the defendant's breath and intensified as they spoke to me.

GENERAL OBSERVATIONS

SPEECH: Slurred, Slowed Speech

ATTITUDE: Cooperative

CLOTHING: No Shirt, Black Slacks and Black Sneakers

MEDICAL/OTHER: I asked the defendant if they had any medical problems or had taken any medications and the defendant said no. I asked him if he had taken any illegal drugs or smoked any marijuana and he said no. I asked the defendant how much alcohol they had had to drink. The defendant said that he had a couple. He then said that he had 3 drinks of wine.

TATE OF FLORIDA
:OUNTY OF PALM BEACH

Inv. C. Ward 16305
ignature of Arresting/Investigative Officer)

ne foregoing instrument was sworn to or affirmed and subscribed before me this 16 day of April 20 23 by Inv. C. Ward 16305

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

Thomasina Miller (#41017)

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

THOMASINA MILLER
Notary Public - State of Florida
Commission # HH 339641
My Comm. Expires Dec 1, 2026
Bonded through National Notary Assn.

NOT A CERTIFIED COPY

SUBJECT: Jados, Jeffrey, CASE NUMBER 23-057841

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

)ther Observations:
See P.C.

WALK & TURN:

I placed, with the assistance of another deputy, an approximately 2" wide piece of yellow on the ground. I asked the defendant if they knew their left from their right which they did. I asked the defendant if they could see the line and they stated that they did. I asked the defendant what color the line was and they stated yellow. I had the defendant place their left foot on the line with their right foot in front of the left, heel to toe. I instructed the defendant to remain in the position throughout my instructions and demonstration. The defendant was instructed not to start the task prior to me telling them to begin. The defendant acknowledged and stated they completely understood my instructions. The defendant was then instructed on the task which I also demonstrated. The defendant swayed during my instructions. The defendant came out of the stance prior to me telling them to begin. Once the defendant was told to begin the task they missed heel to toe, stepped off the line, used their arms for balance, made an improper turn, walked the incorrect number of steps, and slowed to balance/steady themself. The defendant did not count out loud, asked for additional instructions, and swayed throughout completing the task.

ONE LEG STAND:

The defendant was instructed to stand with their feet together and their hands down by their side. They were then instructed to remain in the position throughout the instructions and demonstration until instructed to begin. The defendant acknowledged and stated that they clearly understood the instructions. The defendant swayed while in the instructional position. After being told to begin the defendant put their foot down prior to being told to stop, used their arms for balance, and swayed. The defendant did not look at their toe as instructed even after being instructed to do so.

FINGER TO NOSE:

The defendant was instructed to stand with their feet together and their hands down by their side. The defendant was then instructed to remain in the position throughout the instructions and demonstration until instructed to begin. The defendant acknowledged and stated that they clearly understood these instructions. The defendant swayed while in the instructional position. I instructed the defendant on the task and demonstrated the task. The defendant acknowledged the instructions stating that they clearly understood them. The defendant proceeded to miss/search for the tip of their nose with the tip of their finger, started with the wrong hand, and did not bring their hand immediately bring back as instructed. The defendant did not keep their head tilted back and opened their eyes during the task. The defendant swayed throughout the task.

ROMBERG ALPHABET:

The defendant was instructed to stand with their feet together and their hands down by their side. The defendant was then instructed to remain in the position throughout the instructions and demonstration until instructed to begin. The defendant acknowledged and stated that they clearly understood these instructions. The defendant swayed while in the instructional position. The defendant stated that they knew their English alphabet from A to Z. I instructed them on the task and then demonstrated the task. The defendant acknowledged the instructions stating that they clearly understood them. The defendant then proceeded to misstate their alphabet.

)REATH TEST RESULTS: Refused

TATE OF FLORIDA
'OUNTY OF PALM BEACH

Inv. C. Ward 16305
Signature of Arresting/Investigative Officer)

ne foregoing instrument was sworn to or affirmed and subscribed before me this 16 day of April 20 23 by Inv. C. Ward 16305

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

Thomasina Miller (#41017) Thomasina Miller

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

THOMASINA MILLER
Notary Public - State of Florida
Commission # HH 339641
My Comm. Expires Dec 7, 2026
Bonded through ional Notary Assn.

NOT A CERTIFIED COPY

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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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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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: 80-006238 Software: 8100.27
Date of Test: 04/16/2023

Date of Last Agency Inspection: 04/14/2023
Observation Period Began: 05:59
Subject's Name: JEFFREY JADOS DOB: 01/29/1989 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	06:34
Air Blank	0.000	06:34
Control Test	0.080	06:35
Air Blank	0.000	06:35
Subject Sample #1	REF*	06:38
Air Blank	0.000	06:39
Control Test	0.080	06:39
Air Blank	0.000	06:40
Diagnostics Check	OK	06:40

*Subject Test Refused

Cylinder Lot: 29122080A1
Exp: 12/05/2024

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 THOMASINA E MILLER, 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: Thomasina E Miller Date: 04/16/23
Signature

Sworn to (or affirmed) before me this 16 day of April, 2023

Signature of Notary Public-State of Florida

Inv. C. Ward
Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

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

NOT A CERTIFIED COPY

STATE OF FLORIDA

AFFIDAVIT OF REFUSAL TO SUBMIT TO

BREATH TEST

I, inv. C. WARD (Person reading Implied Consent Warning), a duly certified Law Enforcement Officer or Correctional Officer, am a member of Palm Beach County Sheriffs Office (Name of enforcement agency), and I do swear or affirm that on or about the SIXTEENTH day of April, 2023, at 5:24 AM

DRIVER (Type or Print) JEFFREY (FIRST) JASON (MIDDLE OR MAIDEN) JADOS (LAST),

DL # J320430890290, state of FL, was placed under lawful arrest for the offense of DUI by inv. C. WARD (Name of Arresting Officer) and issued Citation # AGY7PUE.

That on or about the SIXTEENTH day of April, 2020, at 6:38 AM in Palm Beach County,

I requested that the driver submit to a **BREATH** test for the purpose of determining its alcohol content. I informed the driver that the refusal to submit to such test 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, or if he or she had been previously fined under s. 327.35215, F.S., 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, or if he or she has been previously fined under s. 327.35215, F.S., for refusal to submit to a lawful test of his or her breath, urine, or blood. Nonetheless, the driver refused to submit to the test requested.

Signature of Law Enforcement Officer or Corrctional Officer

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

The foregoing instrument was sworn and subscribed before me:

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this 16 day of April, 2023

by _____

who is personally known to me or who has produced _____ as identification.

Notary Public Thomas Mella

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.

NOT A CERTIFIED COPY

****EFFECTIVE OCTOBER 1, 2021****

WITNESS LIST

CASE NUMBER: 23-057841

ARRESTING OFFICER: Inv. C. Ward 16305

ADDRESS: 3228 Gun Cub Rd, West PAlm Beach, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) 561-851-1130

CAN TESTIFY TO: DUI Investigation

NAME: D/S Razi # 40962

ADDRESS: 3228 Gun Club Rd, West Palm Beach, FL 33406

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

CAN TESTIFY TO: Traffic Crash Report

NAME: D/S F. Germaine

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: JADOS, JEFFREY

CASE NUMBER: 23-057841

DATE: Apr 16, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 06:26

ENDING TIME: 06:40

BREATH TESTS RESULTS: 1) R TIME 06:38 A.M. ☒ P.M. ☐ 2) N/A TIME N/A 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: T. MILLER #41017

MAINTENANCE TECHNICAN: J. KARLECKE# 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: CALM, TALKATIVE

CLOTHING: NO SHIRT, BLUE PANTS, BLACK SNEAKERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

REFUSED

OTHER:

RED AND GLASSY EYES.

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 05:59 HRS.

SUBJECT: REFUSED TO TAKE TEST.

A/O: READ AND EXPLAIN I/C.
SUBJECT:DID NOT ACKNOWLEDGE IF HE UNDERSTOOD I/C AND AGREED TO TAKE TEST.

SUBJECT: WOULD NOT FOLLOW TEST INSTRUCTIONS KEPT STOPPING AND BLOWING.

A/O: CALLED A REFUSAL AT 06:38 HRS.

A/O: STATED RIGHTS WERE READ ON SCENE.

A/O: ATTEMPTED Q & A.
SUBJECT: REFUSED QUESTIONS.

REFUSED

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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.	
	☐	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	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2023009947	**Date:**
	Specialist Name/ID: Pinkneya/7796