C53970S

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

23CT7374MB

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

☐ Check if Supplement is Attached

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

OBTS Number | | 1 | Juvenile: N

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number
FL0 5 0 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	06-23-060270 ( )

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: 1

Location of Arrest (including Name of Business)	Location of Offense (Business Name, Address)
US 441 AND FOREST HILL BV WELLINGTON FL 33414	FOREST HILL BV AND US 441, WELLINGTON FL 33414

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
04/22/2023	2334					BABSCO TOWING

DEFENDANT

Name (Last, First, Middle): Lynch, John, Fredrick — 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	10/31/1965	5'10	160	BRO	GRY	BRO	MED

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)	Marital Status	Religion	Indication of: Alcohol Influence / Drug Influence (Y / N / Unk)
NONE	Single	NONE	Y ☒ / N ☐ / Unk ☐ ; Y ☐ / N ☐ / Unk ☒

Local Address (Street, Apt. Number) (City) (State) (Zip)	Mobile Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State
225 E 74th St Apt 11, NEW YORK NY 10021	(917) 656 2888	

Permanent Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
5200 N FLAGLER DR 1804, WEST PALM BEACH FL 33407	( )	DEFENDANT

Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation
236250 GREENPOINT AVE BROOKLYN NY 11222	(917) 656 2888	VICE PRESIDENT OF MARKETING

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
L25530529, NY	[redacted]		NEW JERSEY	US

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)	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 #
DUI	1	☐ Y ☒ N	316.193(1)A	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		23-060270		

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

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): 3228 GUN CLUB RD WEST PALM BEACH FL 33406 - Ph: (561) 355-2996

FILED PBC - GUN CLUB '23 APR 23 AM 7:25

Court Date and Time: Month MAY Day 18 Year 2023 Time 0800 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: 04/22/2023

I consent to receive text reminders of court date(s) and times for this case by automated technology to the mobile number identified above.
I understand that standard text message rates may apply, and that I may revoke this consent via the text message system if I choose. Signature

ADMIN

HOLD for other agency

☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other:

Signature of Arresting Officer: X

Name of Arresting Officer (Print): INV E. K. WHITE I.D. # 7209

Name Verification (Printed by Arrestee) (PRINT)

Intake Deputy I.D. # Pouch #

Transporting Officer: INV. E. K. WHITE I.D. # 7209 Agency: PBSO

Witness here if subject signed with an "X"

PAGE 1 OF 1

PBSO #0148 REV. 11/22 DISTRIBUTION: COURT COPY STATE ATTORNEY AGENCY AGENCY DEFENDANT (N.T.A.'s ONLY)

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PROBABLE CAUSE AFFIDAVIT

OBTS Number | 1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias | 1 | Juvenile

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 23060270

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

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
Lynch John Frederick		W	M	10/31/1965

CHARGES

D.U.I.	316.193(1)

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
State of Florida			

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.
☐ 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 commited the below acts, resulting from my (described) investigation.

On the 22 day of April 20 23 at 2237 ☐ A.M. ☒ P.M. (Specifically include facts constituting cause for arrest.)

PROBABLE CAUSE STATEMENT

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

On Saturday, April 22, 2023 at appoximately 2237hrs I responded to the intersection of State Road 7 and Forest Hill Blvd, Wellington, FL in reference to a Motor Vehicle Crash.

Upon arrival I observed the two vehicles involved stopped on the east side of State Road 7. Both of the drivers were out of the vehicles. One of these drivers was W/M John Lynch who I identified by his New York driver license. AS I initiated my crash investigation I immediately noticed that Lynch's eyes were glassy. AS I asked him about the crash I noticed his answers were slightly delayed and his speech was unclear and slurred. I stood next to him momentarily and detected the semi sweet odor of an unknown alcoholic substance coming from his breath as he spoke. Based on these observations I requested a DUI unit to respond to the scene. Inv. White responded and conducted a separate DUI investigation.

This concluded my involvement in the case.

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ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

_____ (ID #) 24991
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 22 day of April 20 23 by 24991

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

Inv. E.F. White 7209
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY

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: 23-060270

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

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
Lynch, John, Fredrick		W	M	10/31/1965

CHARGES

Charge Description	Charge Description
DUI 316.193(1)A	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	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
				( )	

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 22 day of APRIL 20 23 at 2223 ☐ A.M ☒ P.M (Specifically include facts constituting cause for arrest.)

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

On Saturday, April 22, 2023 at approximately 2330 hours, I was dispatched to State Road 7 (US 441) and Forest Hill Boulevard to assist Deputy Marshall T Miller with a traffic crash that involved a possible impaired driver. Upon my arrival I noticed police cruisers stopped in the outside northbound lane of SR 7 behind two crashed vehicles. The cruisers had their emergency lights activated. I met with D/S Miller who was actively investigating the crash. He told me the crash occurred at a different location which was near the mall. He directed me to the driver of the non-fault vehicle. I spoke with him and he remembered leaving the mall when a vehicle struck his from the rear. He said the vehicle that hit his left the scene. He followed it and managed to get it stopped. He identified the defendant as the driver of the vehicle that left the scene. I noticed little damage to the rear of his vehicle. The Mercedes, however, incurred severe damage to its front side. The non-fault driver provided a sworn video statement to Deputy Davis Malvinni. D/S Miller also wrote a sworn witness statement on a probable cause affidavit detailing his involvement with this case.

I made contact with the driver of the Mercedes who was currently standing on the sidewalk. He was later identified as John Fredrick Lynch by his New York driver license. I noticed his eyes were red, watery and glossy. His face was flushed, mouth dry and he slurred his speech while speaking. Throughout my encounter I could hear smacking coming from his mouth as I watched him moisten the inside of his mouth with his tongue. His movements were slow, calculated and lethargic. I could smell a strong odor of an unknown alcoholic beverage emanating from his breath that intensified when he spoke. He was well dressed in white pants and peach shirt and black shoes. I told him I was assisting with a crash investigation where he was identified as the driver of the Mercedes vehicle. I later explained I had competed my assistance with the crash investigation and would now be conducting a criminal investigation for DUI. My suspicion of his alcoholic beverage consumption was prompted by the previously mentioned indicators of impairment he was exhibiting. Prior to speaking with him further I explained I am required to advise him of his Constitutional Rights. He acknowledged his "rights" afterward and agreed to speak with me. He admitted to driving his vehicle when the crash occurred. He thought the crash occurred at SR 7 and Forest Hill Bv. He explained the vehicle ahead of him stopped abruptly which caused the collision. He told me he was leaving a party where he indulged in drinking wine.

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ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV E. K. WHITE
(Signature of Arresting /Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 23 day of APRIL 20 23 by INV E. K. WHITE

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

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

THOMASINA MILLER
Notary Public - State of Florida
Commission # HH 139641
My Comm. Expires Dec 7, 2026
Bonded through National Notary Assn.

PAGE 1 OF 2

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PBSO #0004 REV. 04/22

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: 23-060270

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

Special Notes:

DEF

Name (Last, First, Middle): Lynch, John, Fredrick

Alias:

Race: W | Sex: M | Date of Birth: 10/31/1965

CHARGES

Charge Description: DUI 316.193(1)A

Charge Description:

Charge Description:

Charge Description:

VICTIM

Victim s Name (Last, First, Middle):

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 22 day of APRIL 20 23 at 2223 ☐ A.M ☒ P.M (Specifically include facts constituting cause for arrest.)

PROBABLE CAUSE STATEMENT

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

He was anxious and welcomed sobriety testing. Based on my suspicion, I asked if he would consent to performing Standardized Field Sobriety Evaluations (SFSTs) for the purpose of determining if he was impaired while operating a motor vehicle. He obliged. Prior to his performance I asked if he was injured from the crash, has any physical problems with his body that would inhibit him from performing light physical exercises and if he was taking medication. He reported he neither has any injuries, physical issues with his body, nor is he taking medication. I escorted him to a level surface on the sidewalk that was smooth and free from obstructions and debris. I placed a yellow strip of masking tape on the surface that formed a line. The defendant identified the tape by giving its color and placing his left foot on it when prompt to do so. The following SFSTs were explained, demonstrated and acknowledged by him prior to his performance: HGN, The Walk and Turn, The One Leg Stand, The Finger to Nose and The Romberg Alphabet Recitation. His deficiencies were recorded on another form in this work sheet. At the conclusion of the SFSTs, coupled with the witness' identification of the defendant driving the vehicle that struck his, coupled with my observation of personal indicators of impairment exhibited by the defendant, probable cause was established for DUI. I told the defendant he was being placed under lawful arrest for DUI. He was searched and handcuffed (double locked and checked for tightness) prior to being seated into the rear of my patrol car. Back up deputies arranged for the defendant's vehicle to be towed by a tow service from PBSO's rotation list. Babsco Towing responded and impounded his vehicle to their lot. Meanwhile I began transport to the main jail breath analysis facility for further processing. Upon our arrival I escorted the defendant into the facility and began a 20 minute observation period. During this time the defendant did not ingest anything into his body orally or otherwise. Neither did he regurgitate. I escorted him into the testing room and asked them to provide breath samples for the purpose of determining his alcohol content. He obliged. The defendant provided two (2) adequate breath samples that rendered results of .191 and .193. I asked if he still remembered his Miranda Rights being read with his understanding. He said he did and agreed to be interviewed. After the interview the defendant was charged with the crash and booked into the main jail for DUI.

NOT A CERTIFIED COPY

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV E. K. WHITE
(Signature of Arresting /Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 23 day of APRIL 20 23 by INV E. K. WHITE

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

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.

PAGE 2 OF 2

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PBSO #0004 REV. 04/22

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 22 DAY OF APRIL 20 23, AT 2223 AM ✓PM

SUBJECT: Lynch, John, Fredrick CASE NUMBER: 23-060270

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV E. K. WHITE

PERSONAL CONTACT

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

SEE PC AFFIDAVIT

OBSERVATION OF DRIVER:

SEE PC AFFIDAVIT

DRIVER'S STATEMENTS:

POST MIRANDA ADMITTED TO DRIVING HIS VEHICLE WHEN THE CRASH OCCURRED. ALSO ADMITTED TO DRINKING AT A PARTY.

ODORS:

STRONG ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE EMANATING FROM SUBJECT'S BREATH.

GENERAL OBSERVATIONS

SPEECH: **SLURRED**

ATTITUDE: **LETHARGIC, INATTENTIVE, COOPERATIVE**

CLOTHING: **NORMAL**

MEDICAL/OTHER: **NONE**

NOT A CERTIFIED COPY

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV E. K. WHITE
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 23 day of APRIL 20 23 by INV E. K. WHITE

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

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.

SUBJECT: Lynch, John, Fredrick **CASE NUMBER** 23-060270

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] 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:

Subject was asked to stand with their feet together and place their hands by their side. They were asked to focus on the stimulus and follow it with their eyes. Lastly they were told not to move their head to assist in following the stimulus with their eyes. Subject showed equal pupil size that tracked equally. Both eyes lacked a smooth pursuit. Subject swayed while performing this task. Subject also turned his head to assist in following the light. He failed to follow my instructions and ultimately did not complete this task

WALK & TURN:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE WALK AND TURN. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject was unable to maintain balance while placed in the instructional position, swayed and abandoned the position altogether. During the performance subject failed to touch heel to toe, stepped off the line, could not maintain balance while walking the line, took an incorrect number of steps and turned improperlyount aloud}

ONE LEG STAND:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE ONE LEG STAND. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject swayed while standing and put foot down-did not raise foot the specified height.

FINGER TO NOSE:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE FINGER TO NOSE. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject swayed while placed in the instructional position, failed to touch the tip of his finger to the tip of his nose on 4 out of the6 attempts, on his failed attempts he touched underneath and the bridge of his nose with the pad of the finger. On the initial request he began raising the wrong arm.

ROMBERG ALPHABET:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE ROMBERG ALPHABET TASK. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject swayed while performing this task. Failed to recite the 26 letter alphabet correctly

BREATH TEST RESULTS: 1) .191 | 2) .193 | 3) | 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV E. K. WHITE
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 23 day of APRIL 20 23 by INV E. K. WHITE

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

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.

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WITNESS LIST

CASE NUMBER: 23-060270

ARRESTING OFFICER: INV E. K . WHITE

ADDRESS: CID/DUI

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

CAN TESTIFY TO: FACTS

NAME: D/ MARSHALL T MILLER

ADDRESS: DIST 8

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

CAN TESTIFY TO: CRASH INVESTIGATOR

NAME: DS DAVIS MALVINNI

ADDRESS DIST 8

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

CAN TESTIFY TO: TOOK SWORN STATEMENT FROM THE NON-FAULT DRIVER

NAME: SOLITO DEPEINE

ADDRESS 10914 OAK BEND WAY WELLINGTON FL 33407

PHONE NUMBERS (HOME) 954 793 7774 (WORK) 0

CAN TESTIFY TO: IDENTIFYING THE DEFENDANT AS THE DRIVER

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: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: LYNCH, JOHN .F.

CASE NUMBER: 23-060270

DATE: Apr 23, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 00:29

ENDING TIME: 00:45

BREATH TESTS RESULTS: 1) .191 TIME 00:33 A.M. ☒ P.M. ☐ 2) .193 TIME 00:36 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: PRONOUNCED

ATTITUDE: CALM, QUIET

CLOTHING: CORAL SHIRT, WHITE PANTS, BLACK LOAFERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

PRESENT: D/S. C. BYRNE

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 00:06 HRS.

SUBJECT: AGREED TO TAKE TEST.

A/O: STATED RIGHTS WERE READ ON SCENE.

TECH: READ TEST RESULTS.
SUBJECT: STATED HE UNDERSTOOD TEST RESULTS.

A/O: CONDUCTED Q & A.
SUBJECT: ANSWERED QUESTIONS.

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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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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: 04/23/2023

Date of Last Agency Inspection: 04/14/2023
Observation Period Began: 00:06
Subject's Name: JOHN F LYNCH DOB: 10/31/1965 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	00:32
Air Blank	0.000	00:32
Control Test	0.081	00:33
Air Blank	0.000	00:33
Subject Sample #1	0.191	00:33
Air Blank	0.000	00:34
Air Blank	0.000	00:36
Subject Sample #2	0.193	00:36
Air Blank	0.000	00:37
Control Test	0.080	00:37
Air Blank	0.000	00:38
Diagnostics Check	OK	00:38

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: T Thomasina E Miller Date: 04/23/23
Signature

Sworn to (or affirmed) before me this 23 day of April, 2023

Signature of Notary Public-State of Florida

Inv. E.K. White
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

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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: 2023010546	**Date:** 4/23/2023
	Specialist Name/ID: Chantel Daniels/30347