J# 0539367 NH 23LT6011-N3 PH2816

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	Agency Name	Agency Report Number
FLO 5 0 2 6 0 0	PALM BEACH GARDENS POLICE DEPARTMENT	78 - 23001784

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

Weapon Seized / Type: 2 (1. Yes 2. No) | Multiple Clearance Indicator:

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
GRANDIFLORA RD/N MILITARY TRL, PALM BEACH GARDENS, FL, 33410	12000-BLK N MILITARY TRL, PALM BEACH GARDENS, FL, 33410

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
03/31/2023	22:11					RELEASED TO FAMILY MEMBER

DEFENDANT

Name (Last, First, Middle): SCHNEIDER, JONATHAN, DAVID | Alias (Name, DOB, Soc. Sec. #, Etc.):

Race (W - White I - American Indian B - Black 0- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	10/07/1970	5'11	174	BRO	BRO	LGT	MED

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description):

Marital Status	Religion	Indication of:	Y	N	Unk.
MARRIED	NOT STATED	Alcohol Influence	☑	☐	☐
		Drug Influence	☑	☐	☐

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State
260 SEDONA WAY,	PALM BEACH GARDENS,	FL	33418	(404) 660-9400	1

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
260 SEDONA WAY,	PALM BEACH GARDENS,	FL	33418		VERBAL

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
S-536-424-70-367-0 FL	[redacted]		RICHMOND, VA	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
				☐ 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
				☐ 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 provided by ☐ defendant and / or ☐ defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) 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. Synthetics U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DRIVING UNDER THE INFLUENCE	1	☐Y ☒N	316.193(1)(A)	

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

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): NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700

Court Date and Time: Month MAY Day 3 Year 2023 Time 10:00 AM ☒ PM

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: 03/31/2023

ADMIN

HOLD for other Agency Name: | Signature of Arresting Officer: X | Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other | Name of Arresting Officer (Print): A. FLINK I.D. #: 514

Intake Deputy I.D. # Pouch # | Transporting Officer: A. FLINK ID #: 514 Agency: PBGPD | Witness here if subject signed with an -X"

FILED PBC - CLERK
'23 APR 1 AM 7:54

PAGE 1 OF 1

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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
FL FL0502600	Palm Beach Gardens Police Department	7 | 8 | 23-001784

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
SCHNEIDER, JONATHAN DAVID		W	M	10/07/1970

CHARGES

Charge Description	Charge Description
316.193(1)(A) DUI - NORMAL FACULTIES IMPAIRED	

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

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable 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 committed the below acts, resulting from my (described) investigation.

On the 31 day of March 2023 at 21:55 (Specifically include facts constituting cause for arrest.)

On 03/31/2023 at approximately 2155 hours, this Officer was conducting speed measurement in the area of the 12000-block of N Military Trl, PBG, FL, when a vehicle was observed traveling at an increased rate of speed north bound in the outside through lane. Body worn camera and in car video were used.

This Officer`s initial visual estimation of the vehicle, was approximately 65 MPH in a posted 45 MPH zone. Using RADAR Stalker DSR2X (DB001317), rear antenna (KR027120) this Officer received a steady tone and reading of 66 MPH. The RADAR calibration was last checked on 12/28/2022 and was due on 06/28/2023. Prior to this tour of duty on this date, this Officer ensured the RADAR was in working order, to confirm the accuracy of the unit. At the end of this tour of duty, this Officer did the same. This Officer received RADAR/LIDAR certification on 05/31/2008, in Cannon AFB, NM. This Officer observed the same vehicle overtake a vehicle, in close proximity in the middle lane, then change lanes into the inside through lane.

This Officer caught up to the vehicle, a Honda sedan (AG85MM/FL) and initiated a traffic stop on same on Grandiflora Rd just west of N Military Trl, PBG, FL. This Officer approached the vehicle on the driver side and made contact with the driver, identified via Florida Driver License photo, Jonathan Schneider (OF), while he was still in actual physical control of same. Schneider had heavy eyelids, glassy watery eyes and very slurred speech. Schneider said he was coming from West Palm Beach and was dropping someone off. Schneider said he had one glass of wine two hours ago and denied consuming narcotics and/or Cannabis on this night.

Based on this Officer`s observations, this Officer asked Schneider to exit the vehicle, to ensure he was not driving under the influence. Schneider said he did not have any medical conditions which would affect the exercises performed.

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

03/31/2023
DATE

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

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

FLINK, ANDREW S (514)
NAME OF OFFICER (PLEASE PRINT)

03/31/2023
DATE

PAGE 1 OF 3

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

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ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL FL0502600	Palm Beach Gardens Police Department	7 | 8 | 23-001784

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
SCHNEIDER, JONATHAN DAVID		W	M	10/07/1970

PROBABLE CAUSE STATEMENT

The first exercise conducted, was the Horizontal Gaze Nystagmus. The stimulus used was a Stylus Streamlight with an illuminated red tip. This Officer observed a lack of smooth pursuit in both eyes and sustained involuntary jerking in both eyes at maximum deviation. Schneider also had a lack of convergence in his left eye, twice.

The second exercise conducted, was the Walk and Turn. The line used, was a strip of yellow tape placed upon the pavement by this Officer. During the instructions, Schneider stepped out of the starting position twice and swayed side-to-side. During the first set of steps, Schneider paused to regain balance on steps one, three and five. The sixth step, Schneider lost his balance and rocked backward. The eighth step Schneider swung his foot wide and crossed over, missing the line and almost fell. Schneider kept his arms raised more than six inches from his sides through the entire attempt. Schneider conducted an improper turnaround by way of walking around, rather than taking a series of small steps. During the return set of steps, before the first step, Schneider brought his right foot in front of his left foot, lost his balance and stumbled to his left, off the line. On step four, Schneider missed heel-to-toe. Step five, Schneider crossed his lead foot over and missed the line, Schneider then paused to regain balance. Schneider again kept his arms raised more than six inches from his sides throughout the attempt.

The third exercise conducted, was the One-Leg Stand. During the exercise, Schneider raised his right foot. Schneider swayed side-to-side during the attempt and raised his arms more than six inches from his sides. Schneider placed his foot down one time prior to being told to do so. After placing his foot down, Schneider raised his right foot again and aligned it with his planted foot in an effort to assist with balance.

Based on this Officer`s observations, Schneider was placed under arrest at 2211 hours. During a search of Schneider incident-to-arrest, this Officer located an Advil bottle in Schneider`s right front pocket. Inside the bottle was an array of pills, mostly non-prescription, with a noted exception of a red and white capsule labeled ELI-515 30MG, which was determined to be Amphetamine and Dextroamphetamine Extended Release, which Schneider was lawfully prescribed. Schneider later, at the PBSO BAT uttered to this Officer he takes this daily with Adderall, which he did so on this date.

At PBSO BAT, this Officer requested Schneider provide a breath sample for the purpose of determining its alcohol content, to which he refused. This Officer read Florida Implied Consent to Schneider to which he acknowledged and consented. At 2312 hours and 2315 hours, he blew .000. This Officer the requested Schneider provide a urine sample for the purpose of detecting the presence of chemical or controlled substances, to which he refused again. This Officer again read Florida Implied Consent to Schneider to which he acknowledged and reluctantly consented. Schneider provided a urine sample at 2321 hours. Same was seized by this Officer and booked into evidence.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

03/31/2023
DATE

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

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

FLINK, ANDREW S (514)
NAME OF OFFICER (PLEASE PRINT)

03/31/2023
DATE

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

ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL FL0502600	Palm Beach Gardens Police Department	7 | 8 | 23-001784

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
SCHNEIDER, JONATHAN DAVID		W	M	10/07/1970

PROBABLE CAUSE STATEMENT

Based on the results of the investigation, this Officer has probable cause to prove Jonathan Schneider operated a motor vehicle, in the county of Palm Beach, in the state of Florida, while under the influence to the extent his normal faculties were impaired, in violation of FSS 316.193(1)(A).

NOT A CERTIFIED COPY

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER [illegible]

03/31/2023
DATE

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

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

FLINK, ANDREW S (514)
NAME OF OFFICER (PLEASE PRINT)

03/31/2023
DATE

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

SUBJECT: [illegible] 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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FLINK (514) 23001784 $ 281.00

FLORIDA UNIFORM TRAFFIC CITATION

AGEVHXE

COUNTY OF: PALM BEACH
CITY (IF APPLICABLE): PALM BEACH GARDENS
☐ (1) F.H.P. ☒ (2) P.D. ☐ (3) S.O. ☐ (4) OTHER
AGENCY NAME: Palm Beach Gardens
AGENCY #: 78

IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON — COMPLAINT (RETAINED BY COURT)

DAY OF WEEK	MONTH	DAY	YEAR	
FRIDAY	03	31	2023	10:01 ☐ A.M. ☒ P.M.

NAME (FIRST) FIRST: JONATHAN MIDDLE: DAVID LAST: SCHNEIDER
STREET: 260 SEDONA WAY — IF DIFFERENT THAN ONE ON DRIVER LICENSE "X" HERE ▶
CITY: PALM BEACH GARDENS STATE: FL ZIP CODE: 33418
TELEPHONE NUMBER — DATE OF BIRTH: MO 10 DAY 07 YR 1970 RACE W SEX M HGT 511

DRIVER LICENSE NUMBER: $536424703670
STATE: FL CLASS: E CDL LICENSE: ☐ YES ☒ NO YR LICENSE EXP.: 2027 COMMERCIAL VEHICLE: ☐ YES ☒ NO
YR. VEHICLE: 2020 MAKE: HOND STYLE: 4D COLOR: GRY PLACARDED HAZ. MATERIAL: ☐ YES ☒ NO
VEHICLE LICENSE NO.: AG85MM TRAILER TAG NO. STATE: FL YEAR TAG EXPIRES: 2023 ≥ 16 PASSENGERS: ☐ YES ☒ NO
UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY: N MILITARY TRL (Block 12000), PALM BEACH GARDENS — MOTORCYCLE: ☐ YES ☒ NO — COMPANION CITATION NUMBER(S): ☒ YES ☐ NO
FT. _____ MILES _____ ☐ N ☐ S ☐ E ☐ W OF NODE _____

DID UNLAWFULLY COMMIT THE FOLLOWING OFFENSE. CHECK ONLY ONE OFFENSE EACH CITATION.

☒ UNLAWFUL SPEED 66 MPH SPEED APPLICABLE 45 MPH
(☐ INTERSTATE ☐ SCHOOL ZONE ☐ CONSTRUCTION WORKERS PRESENT)
SPEED MEASUREMENT DEVICE: STALKER RADAR DSR2X 16474 (DB001317)

☐ CARELESS DRIVING
☐ VIOLATION OF TRAFFIC CONTROL DEVICE
☐ FAILURE TO STOP AT A TRAFFIC SIGNAL
☐ IMPROPER LANE CHANGE OR COURSE
☐ NO PROOF OF INSURANCE
☐ VIOLATION OF RIGHT-OF-WAY
☐ CHILD RESTRAINT
☐ SAFETY BELT VIOLATION
☐ IMPROPER OR UNSAFE EQUIPMENT
☐ EXPIRED TAG SIX (6) MONTHS OR LESS
☐ EXPIRED TAG MORE THAN SIX (6) MONTHS
☐ IMPROPER PASSING
☐ EXPIRED DRIVER LICENSE SIX (6) MONTHS OR LESS
☐ EXPIRED DRIVER LICENSE MORE THAN SIX (6) MONTHS
☐ NO VALID DRIVER LICENSE
☐ DRIVING WHILE LICENSE SUSPENDED OR REVOKED
☐ DRIVING UNDER THE INFLUENCE
☐ Passenger Under 18 Yrs
BAL. _____

OTHER VIOLATIONS OR COMMENTS PERTAINING TO OFFENSE:
SPEED(COUNTY) - UNLAWFUL SPEED/COUNTY ROADS | To Wit Excessive Speed, 21 Mph Over Posted Speed
RE-EXAM: ☐ YES ☒ NO
DL SEIZED: ☐ YES ☒ NO

☐ AGGRESSIVE DRIVING | IN VIOLATION OF STATE STATUTE | SECTION: 316.189 | SUB-SECTION: (2)

CRASH	PROPERTY DAMAGE	INJURY TO ANOTHER	SERIOUS BODILY INJURY TO ANOTHER	FATAL
☐ YES ☒ NO	☐ YES $ _____ ☒ NO	☐ YES ☒ NO	☐ YES ☒ NO	☐ YES ☒ NO

☐ CRIMINAL VIOLATION. COURT APPEARANCE REQUIRED. AS INDICATED BELOW.
☒ INFRACTION. COURT APPEARANCE REQUIRED. AS INDICATED BELOW.
☐ INFRACTION WHICH DOES NOT REQUIRE APPEARANCE IN COURT.

AGEVHXE

CIVIL PENALTY IS $ 281.00
COURT INFORMATION — DATE: 05/03/2023 TIME: 10:00 AM
COURT: NORTH COUNTY GOVERNMENT CENTER
LOCATION: 3188 PGA Boulevard PBG, FL 33410

ADDITIONAL COMMENTS:

ARREST DELIVERED TO: PBSO MAIN JAIL DATE: 03/31/2023

I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION. WILLFUL REFUSAL TO ACCEPT AND SIGN THE CITATION MAY RESULT IN ARREST. I UNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF COURT.

X SIGNATURE OF VIOLATOR [illegible] INFRACTION REQUIRES APPEARANCE

TRF

RANK - NAME OF OFFICER: [illegible] BADGE NO.: 514 ID. NO. TROOP UNIT

☒ I CERTIFY THIS CITATION WAS DELIVERED TO THE PERSON CITED ABOVE AND CERTIFY THE CHARGE ABOVE

ADDITIONAL OFFICER:

RANK - NAME OF OFFICER BADGE NO. ID. NO. TROOP UNIT

HSMV 73601 (Rev. 08/19)

COMPLAINT

WHEN PRESENTED TO VIOLATOR, THE FOLLOWING AMOUNT WAS ENTERED.
PAY A CIVIL PENALTY IN THE AMOUNT OF $ _____.

CASE NO. _____ DOCKET NO. _____ PAGE NO. _____

DATE	COURT ACTION AND OTHER ORDERS
	BAIL FIXED AT $ _____ OR CASH DEPOSIT OF $ _____ SIGNATURE OF PERSON GIVING BAIL SIGNATURE OF PERSON TAKING BAIL
	FINE IN THE AMOUNT OF $ _____ RECEIVED AS REQUIRED BY COURT SCHEDULE _____ SIGNATURE OF CLERK
	CONTINUANCE TO _____ REASON _____
	CONTINUANCE TO _____ REASON _____
	BOND ESTREATED _____
	WARRANT ISSUED _____
	VIOLATOR FAILED TO APPEAR-DRIVER LICENSE SUSPENDED
	VIOLATOR ARRAIGNED ON _____ (DATE) PLEA: _____ FINDING: _____ ADJUDICATION: _____ SENTENCE: FINE _____ COST _____ JAILED _____ DAYS DRIVER IMPROVEMENT SCHOOL _____ OTHER _____ DRIVER LICENSE SUSPENDED OR REVOKED FOR _____ DAYS RECOMMEND DRIVER LICENSE SUSPENSION FOR _____ DAYS RECOMMEND RE-TEST _____ SIGNATURE OF JUDGE
	TESTIMONY - JUDGE'S NOTES (OR OTHER COURT ORDERS):
	APPEAL BOND OF $ _____
	VIOLATOR'S FINGERPRINT WHEN APPLICABLE ⟶

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PALM BEACH GARDENS POLICE DEPARTMENT
DUI TESTING FACILITY INFORMATION SHEET

PBSO Case #: 23-052477 PBSO Zone: 3-13

Agency Case #: 23001784 Crash Case #: _____

Incident Information:

Time of Stop/Crash: 2158 Date of Incident: 03/31/2023 Day: FRIDAY

Location of Incident: 12000-BLK N MILITARY TRL, PALM BEACH GARDENS, FL, 33410

Arrest Information:

Time of Arrest: 22:11 Date of Arrest: 03/31/2023 Day: FRIDAY

Location of Arrest: GRANDIFLORA RD/N MILITARY TRL, PALM BEACH GARDENS, FL, 33410

Subject's Name: (L) SCHNEIDER, (F) JONATHAN, (M) DAVID

DOB: 10/07/1970 Race: W Sex: M Height: 5'11 Weight: 174 Hair BRO Eye BRO

Address: 260 SEDONA WAY, PALM BEACH GARDENS, FL 33418 Phone: (404) 660-9400

Arresting Officer's Name: A. FLINK ID#: 514

Agency: PBGPD Division: TRAFFIC UNIT

Breath Results

1) .000 at 23:12 hrs.
2) .000 at 23:15 hrs.
3) Urine at _____ hrs.
4) _____ at _____ hrs.

---BAT Use---

BAT Notified:	YES
Arrival Time at BAT:	2245
Subject Arrest Time:	22:11

Breath Test Operator: RAGIN 16877
PBSO

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TESTING FACILITY TASK REPORT

AGENCY: PBG

SUBJECT: Schneider, Jonathan D.

CASE NUMBER: 23-052477

DATE: Mar 31, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 23:06

ENDING TIME: 23:20

BREATH TESTS RESULTS: 1) .000 TIME 23:12 A.M.☐ P.M.☒ 2) .000 TIME 23:15 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: Pronounced

ATTITUDE: Agitated, calm fidgety

CLOTHING: White pants, dark blue jacket, blue shirt, white sneakers

MEDICAL CONDITIONS: Psoriasis, BPH, Anxiety

MEDICATIONS: FloMax, Adderall, Xanax

OTHER:

COMMENTS:

Arrived at center A/O started 20 minute observation period at 22:45 hrs.

Subject refused to perform breath test.

A/O read I/C and subject stated he under stood I/C.

Subject agreed to take test.

Tech read breath test results.
Subject stated he understood test results.

A/O requested to provide urine at 23:18 hrs..

A/O read I/C.
Subject stated he understood I/C and agreed to provide urine.

A/O read rights.
Subject stated he understood rights and NO Q&A conducted.

Urine provide @ 23:21

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PALM BEACH COUNTY
SHERIFF'S OFFICE
RIC L. BRADSHAW, SHERIFF

TOXICOLOGY ANALYSIS REQUEST

This Form Must Be Included With the Property Receipt and Accompany the Evidence Submitted for Toxicology Analysis
PRINT LEGIBLY OR TYPE

Agency: PALM BEACH GARDENS POLICE DEPARTMENT Case #: 23001784

Officer: A. FLINK ID#: 514 Email: AFLINK@PBGFL.COM

Specimen Collected By: A. FLINK Date: March 31, 2023 Time: 2321

Specimen Collected From: SCHNEIDER, JONATHAN, DAVID Age: 52 Sex: M Hgt: 5'11 Wgt: 174

Specimen Type: ☐ Blood ☑ Urine ☐ Beverage ☐ Other-Describe

Type of Case: ☐ Traffic Crash ☐ Fatality ☑ DWI/DUI ☐ Other Date: 3/31/23 Time: 2211

Potential Felony? ☐ Yes ☑ No

Was any medication administered by medical personnel prior to sample being drawn: ☐ Yes ☑ No

If yes, name of Medication(s): n/a

Subject Arrested: ☑ Yes ☐ No

Breath Test Performed? ☑ Yes ☐ No Results: .000 .000 - -

Tests requested: ☐ Blood Alcohol ☐ Blood Drug Screen ☑ Urine Drug Screen

NOTE: Blood Alcohol analysis is performed on all DUI blood specimens. Requested Blood Drug Screen may not be performed based on the laboratory protocol. If you have any questions, please contact the Toxicology Unit at 561-688-4814 or toxicologyrequest@pbso.org.

DRE exam performed: ☐ Yes ☑ No DRE Officer: n/a Agency:

DRE Opinion: DRE Email:

Drug History and Signs of Impairment (Please list any drugs, medications, or prescriptions the subject may have taken or were in his/her possession.)

Amphetamine and Dextroamphetamine Extended Release and Adderall used daily, including this date.

Schneider was stopped for speeding.

Schneider had heavy eyelids, glassy watery eyes and very slurred speech. Schneider also had a lack of smooth pursuit in both eyes, as well as sustained Nystagmus in both eyes. Lastly, Schneider had a lack of convergence in his left eye twice.

Schneider had great difficulty with the walk and turn, frequently losing his balance and almost falling to the ground.

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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: 2023008482	**Date:** 4/1/2023
	Specialist Name/ID: Chantel Daniels/30347