50-2026-CF-004349-AMB
5685557

OBTS NUMBER

ARREST / NOTICE TO APPEAR

Juvenile Referral Report

DOCUMENT TYPE: 1 - Arrest | JUVENILE: No

ADMINISTRATIVE

AGENCY ORI NUMBER	AGENCY NAME	AGENCY REPORT NUMBER
FL0500000	PALM BEACH COUNTY SHERIFF'S OFFICE	26068147-1-

CHARGE TYPE	OTHER CHARGE TYPE	WEAPON SEIZED	WEAPON TYPE	MULTIPLE CLEARANCE INDICATOR
FELONY,TRAFFIC_MISDEMEANOR		No		N - Not Applicable

LOCATION OF ARREST (BUSINESS NAME, ADDRESS)	LOCATION OF OFFENSE (BUSINESS NAME, ADDRESS)
Donald Ross Rd & 69th Dr N, Palm Beach Gardens, FL, 33418, USA	Donald Ross Rd & 69th Dr N, Palm Beach Gardens, FL, 33418, USA

DATE OF ARREST	TIME OF ARREST	BOOKING DATE	BOOKING TIME	JAIL DATE	JAIL TIME	LOCATION OF VEHICLE
06/10/2026	18:07					Donald Ross Rd & 69th Dr N, Palm Beach Gardens, FL, 33418, USA

DEFENDANT

NAME (LAST, FIRST, MIDDLE)	ALIAS (FIRST, MIDDLE, LAST)
MEISSNER, JONELLE, SUMMER	; ; , ; ;

RACE	SEX	DATE OF BIRTH	HEIGHT	WEIGHT	EYE COLOR	HAIR COLOR	COMPLEXION	BUILD
W	F	08/31/1981	5' 7"	140	Blue	Blond	Medium	Medium

SCARS, MARKS, TATTOOS, ETC.	MARITAL STATUS	RELIGION	ALCOHOL INDICATION	DRUG INDICATION
	Single	CHRISTIAN	No	Yes

LOCAL ADDRESS (STREET & APT #, CITY, STATE, ZIP)	MOBILE PHONE	RESIDENCE TYPE
809 Lighthouse Dr APT D, North Palm Beach, FL, 33408, USA		City

PERMANENT ADDRESS (STREET & APT #, CITY, STATE, ZIP)	PHONE	ADDRESS SOURCE
	(561) 566-0250	FL DL - VERBAL

BUSINESS ADDRESS (STREET & APT #, CITY, STATE, ZIP)	PHONE	OCCUPATION
		LASER TECH

DRIVER'S LICENSE NUMBER	STATE	SOCIAL SECURITY NUMBER	INS NUMBER	PLACE OF BIRTH	CITIZENSHIP
M356820420000	FL	[redacted]		BEAVER, PA USA	USA

CHARGE

STATUE NUMBER & CHARGE DESCRIPTION / VIOLATION OF ORD #: 316.193(1)(a) - DUI INFLUENCE OF ALCOHOL OR DRUGS - MIS

COUNTS	DOMESTIC	DRUG ACTIVITY	DRUG TYPE	AMOUNT/UNIT
1	No	Not Applicable		

OFFENSE #	WARRANT / CAPIAS #	BOND
26068147		$1000

CHARGE

STATUE NUMBER & CHARGE DESCRIPTION / VIOLATION OF ORD #: 893.13(6)(a) - POSSESS CONTROLLED SUBSTANCE W/O PRESCRIPTION - FEL

COUNTS	DOMESTIC	DRUG ACTIVITY	DRUG TYPE	AMOUNT/UNIT
1	No	Possess	Synthetic	PILLS / OXYCODONE / ALPRAZOLAM

OFFENSE #	WARRANT / CAPIAS #	BOND
26068147		$5000

NOTICE TO APPEAR

COURT LOCATION	COURT DATE	COURT TIME
Criminal Justice Complex - 3238 Gun Club Rd, West Palm Beach 33406	07/09/2026	08:30

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 / JUVENILE AND PARENT OR CUSTODIAN | DATE

I CONSENT TO RECEIVE TEXT REMINDERS OF COURT DATE(S) AND TIMES FOR THIS CASE BY AUTOMATED TECHONOLOGY 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: X

ADMINISTRATIVE

HOLD FOR OTHER AGENCY	SIGNATURE OF ARRESTING OFFICER	NAME VERIFICATION (PRINT BY ARRESTEE)
NONE		
CAUTIONS	NAME OF ARRESTING OFFICER: Cisson, Jackie (24091)	
INTAKE DEPUTY / ID #: CJ RUNAL 7000	TRANSPORTING OFFICER / ID # / AGENCY: Cisson, Jackie (24091)	WITNESS ABOVE IF SUBJECT SIGNED WITH AN "X"

JUN 11 0:15
FILED PBC - GUN CLUB--
'26 JUN 11 AM6:10

NOT A CERTIFIED COPY

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 10th DAY OF June 20 26, AT 1730 AM ✓ PM

SUBJECT: MEISSNER, JONELLE, SUMMER CASE NUMBER: 26068147

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Investigator J. Cisson

PERSONAL CONTACT

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

On Wednesday, June 10th 2026 at approximately 1730 hours, I was dispatched and arrived on scene of a suspicious vehicle stopped at the intersection of Donald Ross Rd and 69th Dr N. in unincorporated Jupiter, FL 33418 (Palm Beach County). Upon arrival I spoke with Investigator A. Tejeda ID# 31814 who relayed to me he was on scene of an unrelated crash near the round about at the above intersection. While walking by he noticed the vehicle stopped near the entrance to 6973 Donald Ross Rd. He observed the driver was slumped over and made contact with her at the driver window. He observed her movements were slow and her speech was slurred. He observed she was nodding off and on, she was the sole occupant of the vehicle. I made contact with her at her window and made similar observations. She was identified by her Florida driver license as Jonelle Summer Meissner.

OBSERVATION OF DRIVER:

I observed the defendant, Jonelle Summer Meissner who was wearing a blue button up shirt, white shorts and tan sandals. The defendant was sitting in the driver seat of her vehicle and she was alone. I began speaking with her and asked how she got to this location. She said she was attempting to go to Starbucks but then got lost and now she was going to pick up a furniture item from an unknown location. I asked for her driver license and as she looked for it, she was making very slow movements with her purse and as she removed items from it. I had to remind her she was looking for her license. I could see the defendant's eyes were bloodshot and glossy. The defendant's speech was slow and slurred. As she spoke, I had to ask her to speak up and repeat herself several times.

DRIVER'S STATEMENTS:

The defendant said she did not have diabetes, but said she has several conditions involving her health. She said she recently had surgery on her eyes (lasers). She had surgery on her ankles/feet. The defendant said she had no alcohol to drink. The defendant said she was coming from home and going to pick up a furniture item. She said she could walk so I asked her to step out and walk over to have a seat on nearby concrete wall that was at a seating level. I asked the defendant to submit to roadside field sobriety tasks to which she agreed.

ODORS:

NONE

GENERAL OBSERVATIONS

SPEECH: **Slow, Slurred, Unclear**

ATTITUDE: **Calm, Compliant**

CLOTHING: **Dirty, Disheveled**

MEDICAL/OTHER: **BELLS PALSY, SURGERYS, DEPRESSION**

NOT A CERTIFIED COPY

STATE OF FLORIDA
COUNTY OF PALM BEACH

Investigator J. Cisson
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 10TH day of JUNE 20 26 by Investigator J. Cisson

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

Shari O'Neal (#6212)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

SHARI L. O'NEAL
MY COMMISSION # HH 512128
EXPIRES: June 25, 2028

SUBJECT: MEISSNER, JONELLE, SUMMER CASE NUMBER 26068147

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

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

Other Observations:
Nothing observed

HAND COORDINATION:

The second task was the Hand Coordination. The task was explained and demonstrated, she said she understood. During the task, the defendant, (instructional) failed to keep her hands in the instructional position, (task 2) she counted improperly by going to 4, she clapped 4 times. (task 3) She counted improperly and did not bring her fist back to her chest. (task 4) She did not perform the end of the task.

PALM PAT:

The third task was the Palm Pat. The task was explained and demonstrated. The defendant stated she understood the instructions. During the task, she did not count properly and she did not speed up as instructed.

FINGER TO NOSE:

The forth task was the Finger to Nose. The task was explained and demonstrated. The defendant stated she understood the instructions. During the task the defendant failed to return her hands to her side on all attempts. She missed the tip of her nose, she searched for the tip by holding her hand out in front her and making very slow movements toward her nose. I had to remind her to touch her nose after she held her hand out in front of her for several seconds. She opened her eyes during the task. She failed to keep her head tilted back.

ROMBERG ALPHABET:

The fifth Task was the Romberg Alphabet. The task was explained and demonstrated. The defendant stated she understood the instructions. During the task, she defendant's speech was slurred and she struggled to annunciate the letters J,N,Q and R.

BREATH TEST RESULTS: | 1) VNM | 2) VNM | 3) 0.00 | 4) VNM |

STATE OF FLORIDA
COUNTY OF PALM BEACH

Investigator J. Cisson
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 10TH day of JUNE 2026 by Investigator J. Cisson

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

Shari O'Neal (#6212)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

SHARI L. O'NEAL
MY COMMISSION # HH 512128
EXPIRES: June 25, 2028

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: PBSO INV. CISSON #24091

SUBJECT: MEISSNER, JONELLE S.

CASE NUMBER: 26-068147

DATE: 06-10-26

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 19:07 HRS

ENDING TIME: 20:07 HRS

BREATH TESTS RESULTS: 1) .000*V TIME 19:15 A.M.☐ P.M.☒ 2) .000**V TIME 19:21 A.M.☐ P.M.☒

3) .000 TIME 19:26 A.M.☐ P.M.☒ 4) .000*V TIME 19:32 A.M.☐ P.M.☒

BREATH OPERATOR: S.O'NEAL #6212

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED, LOW

ATTITUDE: CALM, QUIET, COOPERATIVE, EMOTIONAL

CLOTHING: SHIRT- LIGHT BLUE JEAN/ ICE CREAM STAINED SHORTS- WHITE/STAINED

MEDICAL CONDITIONS: SEVERAL, BELL'S PALSY NO ALLERGIES

MEDICATIONS: SEVERAL MEDS.

OTHER:

EYES: VERY GLASSY
DEXTERITY: SLOW SLUGGISH

COMMENTS:

20 MIN. OBSERVATION DONE BY A/O CISSON #24091

A/O REQUESTED THE BREATH TEST.

D SUBMITTED TO THE BREATH REQUEST.

D WAS HAVING DIFFICULTY BLOWING CORRECTLY.

EXPLAINED TO HER SEVERAL TIMES HOW TO BLOW. GAVE D SEVERAL CHANCES TO BLOW.

A/O READ THE I/C, D UNDERSTOOD THE I/C AS READ.

AFTER SEVERAL ATTEMPTS TO BLOW, A/O STOPPED THE BREATH TESTING.

A/O REQUESTED A URINE SAMPLE ON CAMERA.

D SAID YES TO THE URINE REQUEST.

A/O READ THE IMPLIED CONSENT FOR URINE.

D STILL SAID YES TO URINE.

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: PBSO INV. CISSON #24091

SUBJECT: MEISSNER, JONELLE S.

CASE NUMBER: 26-068147

DATE: 06-10-26

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 19:07 HRS

ENDING TIME: 20:07 HRS

BREATH TESTS RESULTS: 5) .000**V TIME 19:37 A.M.☐ P.M.☒ 6) .000*V TIME 19:45 A.M.☐ P.M.☒

7) .000**V TIME 19:50 A.M.☐ P.M.☒ ☐ TIME ☐ A.M.☐ P.M.☐

BREATH OPERATOR: S.O'NEAL #6212

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE:

CLOTHING:

MEDICAL CONDITIONS:

MEDICATIONS:

OTHER:

EYES:

COMMENTS:

20 MIN. OBSERVATION DONE BY A/O

NOT A CERTIFIED COPY

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

PBSO CASE # **26068147** PBSO ZONE **3-15**

AGENCY CASE # **N/A** CRASH CASE # **N/A**

TIME OF STOP/CRASH **1730** DATE **06/10/2026** DAY **Wednesday**

SUBJECT'S NAME **MEISSNER, JONELLE, SUMMER** RACE **W** SEX **F**

HGT **5'07** WGT **140** DOB **8/31/1981**

LOCATION **DONALD ROSS RD / 69TH DR N, JUPITER, FL 33418**

ARRESTING OFFICER'S NAME & ID **Investigator J. Cisson (24091)** AGENCY **Palm Beach County Sheriff's Office**

DIVISION: **Traffic - DUI**

NOTIFIED BY COMMO **Yes**

ARRIVAL AT FACILITY **1845**

ARREST TIME **1807**

BREATH RESULTS:

1) .000 **VNM
2) .000 **VNM
3) .000 Urine Pending
4) .000 **VNM
5) .000 **VNM
6) .000 **VNM
7) .000 **VNM

TESTING OFFICER'S ID **6212** PBSO VIDEOTAPE # /

NOT A CERTIFIED COPY

I

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH COUNTY SO
Instrument Serial Number: 80-006476 Software: 8100.27
Date of Test: 06/10/2026

Date of Last Agency Inspection: 05/22/2026
Observation Period Began: 18:45
Subject's Name: JONELLE S MEISSNER DOB: 08/31/1981 Sex: F

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	19:11
Air Blank	0.000	19:11
Control Test	0.080	19:12
Air Blank	0.000	19:12
Subject Sample #1	VNM*	19:15
Air Blank	0.000	19:16
Air Blank	0.000	19:18
Subject Sample #2	VNM**	19:21
Air Blank	0.000	19:21
Control Test	0.080	19:22
Air Blank	0.000	19:22
Diagnostics Check	OK	19:22

*Volume Not Met (0.000 - Breath Sample Not Reliable to Determine Breath Alcohol Level)
**Volume Not Met (0.000 - Breath Sample Not Reliable to Determine Breath Alcohol Level)

Cylinder Lot: 19825080A2
Exp: 09/05/2027

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 SHARI L O'NEAL, 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: S. O'Neal Date: 06-10-26
Signature

Sworn to (or affirmed) before me this 10 day of June, 2026

Signature of Notary Public-State of Florida

Inv. J. Cisson #24091
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
SHERIFF RIC L. BRADSHAW

DUI Breath Implied Consent

NOT APPLICABLE WITH VOLUNTARY CONSENT

DEFENDANT'S NAME: [redacted] CASE NO: [redacted]

DATE OF ARREST: [redacted] TIME OF ARREST: [redacted]

I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.

Will you take the test? YES ✓ NO ____

NOTE: *READ ONLY IF THE ANSWER TO THE ABOVE IS "NO"*

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. Additionally, if you refuse to take the test I have requested of you, you will be committing a misdemeanor of the SECOND DEGREE if this is your first refusal, in addition to any other penalties which can be imposed by law. 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, your driving privilege will be suspended for a period of eighteen (18) months. Additionally, you will be committing a misdemeanor of the FIRST DEGREE, 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 ✓ NO ____

Do you still refuse to submit to this test? YES ____ NO ____

NOTE: *IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER LICENSE (CDL), READ THE FOLLOWING, REGARDLESS OF WHETHER THE SUBJECT IS OPERATING A COMMERCIAL MOTOR VEHICLE (CMV)*

In addition, if you hold a Commercial Driver's License (CDL), or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privileges for one year from today. If this is your second refusal, you will be permanently disqualified from operating a Commercial Motor Vehicle (CMV).

Do you understand what I have just read to you? YES ____ NO ____

Do you still refuse to submit to this test? YES ____ NO ____

Date read: [redacted] Time read: [redacted] Location read: [redacted]

LAW ENFORCEMENT OFFICER NAME (printed): [redacted] ID: [redacted]

LAW ENFORCEMENT OFFICER SIGNATURE: [redacted]

WHITE: STATE ATTY. YELLOW: DHSMV PINK: CENTRAL RECORDS GOLD: JAIL

FORM #0126BR REV 09/25

NOT A CERTIFIED COPY

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

DUI Breath Implied Consent

NOT APPLICABLE WITH VOLUNTARY CONSENT

DEFENDANT'S NAME: [illegible] CASE NO: [illegible]

DATE OF ARREST: 6-10-26 TIME OF ARREST: 1007

I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.

Will you take the test? YES ✓ NO ___

NOTE: *READ ONLY IF THE ANSWER TO THE ABOVE IS "NO"*

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. Additionally, if you refuse to take the test I have requested of you, you will be committing a misdemeanor of the SECOND DEGREE if this is your first refusal, in addition to any other penalties which can be imposed by law. 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, your driving privilege will be suspended for a period of eighteen (18) months. Additionally, you will be committing a misdemeanor of the FIRST DEGREE, 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 ✓ NO ___

Do you still refuse to submit to this test? YES ___ NO ___

NOTE: *IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER LICENSE (CDL), READ THE FOLLOWING, REGARDLESS OF WHETHER THE SUBJECT IS OPERATING A COMMERCIAL MOTOR VEHICLE (CMV)*

In addition, if you hold a Commercial Driver's License (CDL), or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privileges for one year from today. If this is your second refusal, you will be permanently disqualified from operating a Commercial Motor Vehicle (CMV).

Do you understand what I have just read to you? YES ___ NO ___

Do you still refuse to submit to this test? YES ___ NO ___

Date read: 06-10-26 Time read: [illegible] Location read: [illegible] AT

LAW ENFORCEMENT OFFICER NAME (printed): Lav. J. Gibson ID: 24011

LAW ENFORCEMENT OFFICER SIGNATURE: [signature]

WHITE: STATE ATTY. YELLOW: DHSMV PINK: CENTRAL RECORDS GOLD: JAIL

FORM #0126BR REV 09/25

NOT A CERTIFIED COPY

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

DUI Breath Implied Consent

NOT APPLICABLE WITH VOLUNTARY CONSENT

DEFENDANT'S NAME: _____ CASE NO: _____

DATE OF ARREST: _____ TIME OF ARREST: _____

I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.

Will you take the test? YES____ NO____

NOTE: *READ ONLY IF THE ANSWER TO THE ABOVE IS "NO"*

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. Additionally, if you refuse to take the test I have requested of you, you will be committing a misdemeanor of the SECOND DEGREE if this is your first refusal, in addition to any other penalties which can be imposed by law. 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, your driving privilege will be suspended for a period of eighteen (18) months. Additionally, you will be committing a misdemeanor of the FIRST DEGREE, 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____ NO____

Do you still refuse to submit to this test? YES____ NO____

NOTE: *IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER LICENSE (CDL), READ THE FOLLOWING, REGARDLESS OF WHETHER THE SUBJECT IS OPERATING A COMMERCIAL MOTOR VEHICLE (CMV)*

In addition, if you hold a Commercial Driver's License (CDL), or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privileges for one year from today. If this is your second refusal, you will be permanently disqualified from operating a Commercial Motor Vehicle (CMV).

Do you understand what I have just read to you? YES____ NO____

Do you still refuse to submit to this test? YES____ NO____

Date read: _____ Time read: _____ Location read: _____

LAW ENFORCEMENT OFFICER NAME (printed): _____ ID: _____

LAW ENFORCEMENT OFFICER SIGNATURE: _____

WHITE: STATE ATTY. YELLOW: DHSMV PINK: CENTRAL RECORDS GOLD: JAIL

FORM #0126BR REV 09/25

NOT A CERTIFIED COPY

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

DUI Urine Implied Consent

NOT APPLICABLE WITH VOLUNTARY CONSENT

DEFENDANT'S NAME: [illegible] CASE NO: [illegible]

DATE OF ARREST: [illegible] TIME OF ARREST: [illegible]

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.

Will you take the test? YES ✓ NO ___

NOTE: *READ ONLY IF THE ANSWER TO THE ABOVE IS "NO"*

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. Additionally, if you refuse to take the test I have requested of you, you will be committing a misdemeanor of the SECOND DEGREE if this is your first refusal, in addition to any other penalties which can be imposed by law. 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, your driving privilege will be suspended for a period of eighteen (18) months. Additionally, you will be committing a misdemeanor of the FIRST DEGREE, 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 ✓ NO ___

Do you still refuse to submit to this test? YES ___ NO ✓

NOTE: *IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER LICENSE (CDL), READ THE FOLLOWING, REGARDLESS OF WHETHER THE SUBJECT IS OPERATING A COMMERCIAL MOTOR VEHICLE (CMV)*

In addition, if you hold a Commercial Driver's License (CDL), or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privileges for one year from today. If this is your second refusal, you will be permanently disqualified from operating a Commercial Motor Vehicle (CMV).

Do you understand what I have just read to you? YES ___ NO ___

Do you still refuse to submit to this test? YES ___ NO ___

Date read: [illegible] Time read: [illegible] Location read: [illegible]

LAW ENFORCEMENT OFFICER NAME (printed): [illegible] ID: [illegible]

LAW ENFORCEMENT OFFICER SIGNATURE: [illegible]

WHITE: STATE ATTY. YELLOW: DHSMV PINK: CENTRAL RECORDS GOLD: JAIL

FORM #0126UR REV 09/25

NOT A CERTIFIED COPY

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

DUI Urine Implied Consent

NOT APPLICABLE WITH VOLUNTARY CONSENT

DEFENDANT'S NAME: Mercier, Jonelle CASE NO: 26-068147

DATE OF ARREST: 6-10-26 TIME OF ARREST: 1807

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.

Will you take the test? YES ✓ NO ___

NOTE: *READ ONLY IF THE ANSWER TO THE ABOVE IS "NO"*

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. Additionally, if you refuse to take the test I have requested of you, you will be committing a misdemeanor of the SECOND DEGREE if this is your first refusal, in addition to any other penalties which can be imposed by law. 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, your driving privilege will be suspended for a period of eighteen (18) months. Additionally, you will be committing a misdemeanor of the FIRST DEGREE, 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 ✓ NO ___

Do you still refuse to submit to this test? YES ___ NO ✓

NOTE: *IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER LICENSE (CDL), READ THE FOLLOWING, REGARDLESS OF WHETHER THE SUBJECT IS OPERATING A COMMERCIAL MOTOR VEHICLE (CMV)*

In addition, if you hold a Commercial Driver's License (CDL), or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privileges for one year from today. If this is your second refusal, you will be permanently disqualified from operating a Commercial Motor Vehicle (CMV).

Do you understand what I have just read to you? YES ___ NO ___

Do you still refuse to submit to this test? YES ___ NO ___

Date read: 06-10-26 Time read: 0n Screen Location read: PBSO/LAT

LAW ENFORCEMENT OFFICER NAME (printed): Inv. J. Cisson ID: 24091

LAW ENFORCEMENT OFFICER SIGNATURE: _____

WHITE: STATE ATTY. YELLOW: DHSMV PINK: CENTRAL RECORDS GOLD: JAIL

FORM #0126UR REV 09/25

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

DUI Urine Implied Consent

NOT APPLICABLE WITH VOLUNTARY CONSENT

DEFENDANT'S NAME: _____ CASE NO: _____

DATE OF ARREST: _____ TIME OF ARREST: _____

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.

Will you take the test? YES ✓ NO ____

NOTE: *READ ONLY IF THE ANSWER TO THE ABOVE IS "NO"*

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. Additionally, if you refuse to take the test I have requested of you, you will be committing a misdemeanor of the SECOND DEGREE if this is your first refusal, in addition to any other penalties which can be imposed by law. 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, your driving privilege will be suspended for a period of eighteen (18) months. Additionally, you will be committing a misdemeanor of the FIRST DEGREE, 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 ✓ NO ____

Do you still refuse to submit to this test? YES ____ NO ✓

NOTE: *IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER LICENSE (CDL), READ THE FOLLOWING, REGARDLESS OF WHETHER THE SUBJECT IS OPERATING A COMMERCIAL MOTOR VEHICLE (CMV)*

In addition, if you hold a Commercial Driver's License (CDL), or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privileges for one year from today. If this is your second refusal, you will be permanently disqualified from operating a Commercial Motor Vehicle (CMV).

Do you understand what I have just read to you? YES ____ NO ____

Do you still refuse to submit to this test? YES ____ NO ____

Date read: _____ Time read: _____ Location read: _____

LAW ENFORCEMENT OFFICER NAME (printed): _____ ID: _____

LAW ENFORCEMENT OFFICER SIGNATURE: _____

WHITE: STATE ATTY. YELLOW: DHSMV PINK: CENTRAL RECORDS GOLD: JAIL

FORM #0126UR REV 09/25

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SUBJECT: [illegible] CASE NUMBER: 26-[illegible]

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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SUBJECT: Weissner, Jamelle CASE NUMBER: 26-006147

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? [illegible]

WHAT STREET OR HIGHWAY WERE YOU ON? I dk

DIRECTION OF TRAVEL? dk WHERE DID YOU START? [illegible]

WHAT TIME DID YOU START? dk WHAT TIME IS IT NOW? dk

WHAT IS TODAY'S DATE? [illegible] WHAT DAY OF THE WEEK IS IT? [illegible]

WHAT COUNTY AND CITY ARE YOU IN NOW? [illegible]

WHEN DID YOU LAST EAT? [illegible] WHAT DID YOU EAT? [illegible]

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? [illegible]

HOW MUCH DO YOU WEIGH? 140 HAVE YOU BEEN DRINKING? NO 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~~? NO ARE YOU UNDER THE INFLUENCE? NO

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? — HOW MUCH? —

WHAT? — WHERE? — WHEN? —

WHAT LINE OF WORK ARE YOU IN? [illegible] WHEN DID YOU LAST WORK? [illegible]

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? [illegible] WHAT? [illegible]

ARE YOU SICK OR INJURED? NO WHAT'S WRONG? —

DO YOU LIMP? NO DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? NO

WERE YOU IN AN ACCIDENT TODAY? NO

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? [illegible] WHEN? [illegible]

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? [illegible] WHO? [illegible] WHY? [illegible]

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? [illegible] WHAT? [illegible] WHEN? [illegible]

DO YOU HAVE:

EPILEPSY? NO
GLASS EYE? NO
FALSE TEETH? NO
EAR INFECTION? NO
INNER EAR TROUBLE? NO
DIABETES? [illegible]

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? NO

DO YOU TAKE INSULIN? NO IF SO, WHEN WAS YOUR LAST INJECTION? —

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? NO WHERE? —

INTERVIEWER: T.W. J. Cisson 24091

NOT A CERTIFIED COPY

SUBJECT: [illegible] CASE NUMBER: [illegible]

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: [illegible]

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WITNESS LIST

CASE NUMBER: 26068147

ARRESTING OFFICER: Investigator J. Cisson

ADDRESS: 3960 RCA BLVD - TRAFFIC OFFICE

PHONE NUMBERS (HOME): PBSO (WORK) 561-309-8629

CAN TESTIFY TO: FACTS OF THE CASE

NAME: INVESTIGATOR A. TEJEDA ID# 31814

ADDRESS: PBSO

PHONE NUMBERS (HOME) PBSO (WORK) _____

CAN TESTIFY TO: CONTACT

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

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NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☐	119.071(2)(e)	Confession	
Public Info. Exemptions	☐	FL Const. Art. I, s. 16(b)(5)	Marsy's Law – victim information shall be redacted. The term "victim" also includes the victim's lawful representative, the parent or guardian of a minor, or the next of kin of a homicide victim. The term "victim" does not include the accused (ref. page 99 of the CRTM for additional information)	
	☐	119.071(2)(j)	Home/employment telephone number, home/employment address, or personal assets of a person who has been the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence	
	☐	119.0712(2)	Personal information contained in a motor vehicle record	
	☒	316.650(11)	Driver information contained in a uniform traffic citation	5
	☐	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
Florida Rules of Judicial Administration 2.420	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses	
	☐			
	☐			
Other	☐			
	☐			
	☐			
	☐			

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REVIEW COMPLETED BY

Booking Number: 2026015464	**Date:** 6/11/2026
	Specialist Name/ID#: C.Daniels 30347