0542031 23CT12869MB 32822

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

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	PALM BEACH COUNTY SHERIFF'S OFFICE	0 6 -| 23091123 ( )

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 N/A | Multiple Clearance Indicator

Location of Arrest (including Name of Business)	Location of Offense (Business Name, Address)
2660 N. HAVERHILL RD, WEST PALM BEACH, FL 33417	2660 N. HAVERHILL RD, WEST PALM BEACH, FL 33417

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
07/20/2023	2148					SISTERS TOWING

DEFENDANT

Name (Last, First, Middle): Macinnis, Joseph, F

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

Race (W - White, I - American Indian, B - Black, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	1/2/1961	5'10	150	BLUE	BRN	MED	MED

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): NONE

Marital Status: Married | Religion: CATHOLIC | Indication of: Alcohol Influence (Y ☒ N ☐ Unk ☐) Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 4151 N Haverhill Rd Apt 1520, West Palm Beach, FL 33417

Mobile Phone: (772) 400-1084

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

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

Phone: ( )

Address Source: VERBAL - FL DL

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

Phone: ( )

Occupation: POSTAL SERVICE

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
M252480610020, FL	[redacted]		QUINCY, MA	YES

CO-DEF

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

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

JUVENILE

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

Address (Street, Apt. Number) (City) (State) (Zip) | Business Phone ( )

1 OK 2 OK

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) 355-8511) informed of any change of address. ☐ Yes, by: (Name) ☐ No (Reason) | School Attended | Grade

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

CODE

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

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

CHARGE

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

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
U	U		23091123		

1

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Person Willfully Refuses to Sign/Accept Criminal Citation	1	☐ Y ☒ N	318.14(3)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
U	U		23091123		

2

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): Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600

FILED PBC - GUN CLUB
'23 JUL 21 AM 8:00

Court Date and Time: Month AUGUST Day 10th Year 2023 Time 0830 A.M. ☒ P.M. ☐

I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED

Refused to Sign
Signature of Defendant (or Juvenile and Parent/Custodian) | 07/20/2023 Date Signed

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

SCANNED

ADMIN

HOLD for other agency: JUL 21 2023

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Signature of Arresting Officer: x

Name of Arresting Officer (Print): Inv. Cisson J. I.D. # 24091

Intake Deputy: Bonilla I.D. # 16348 Pouch #

Transporting Officer: Inv. Cisson J. I.D. # 24091 Agency: PBSO

Name Verification (Printed by Arrestee) (PRINT)

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 | N

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 23-091123

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

Special Notes: **Supplement PC**

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
Macinnis Joseph		W	M	01/02/1961

CHARGES

DUI

VICTIM

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

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 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 20th day of July 20 23 at 2123 ☐ A.M. ☒ P.M. (Specifically include facts constituting cause for arrest.)

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

On 7/20/2023 I was assigned to the North Region Patrol (District 3) and patrolling the unincorporated area of West Palm Beach, FL. At approximately 2123 hours, I observed a red Hyundai Sedan bearing FL license plate 3199YU traveling northbound on North Haverhill Road. The vehicle was failing to maintain a single lane and was partially traveling along the grassy shoulder of the roadway. The vehicle was traveling well-below the posted speed limit at speeds that I estimated to be about 5 miles an hour or less. As I approached, I observed other vehicles changing lanes to go around the red Hyundai.

I initiated a traffic stop and the vehicle pulled into a nursing home parking lot at 2660 North Haverhill Road West Palm Beach, FL 33417. I made contact with the driver and sole occupant of the Hyundai, who was identified by DHSMV records as Joseph Macinnis. Upon making contact, Mr. Macinnis appeared confused and disoriented. Mr. Macinnis' speech was slurred and his movements were lethargic. Mr. Macinnis fumbled through his wallet and had difficulty producing his driver's license. Mr. Macinnis later informed me that he was coming from Duggans Pub, which is a local bar in the area.

Based on the above mentioned indicators of impairment, I requested that a DUI Investigator respond to the scene. Investigator Cisson #24091 arrived and conducted a sobriety investigation.

NOT A CERTIFIED COPY

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH
Cpl. P. Owers (ID #) 15789
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 20 day of July 20 23 by Cpl. P. Owers 15789

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

Inv. Cisson #24091

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

PBSO #0004 REV. 01/23 DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 20th DAY OF July 20 23, AT 2123 AM ✓PM

SUBJECT: Macinnis, Joseph, F CASE NUMBER: 23091123

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

PERSONAL CONTACT

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

On Thursday July 20th 2023, at approximately 2136 hours, I arrived on scene of a traffic stop at 2660 N. Haverhill Rd, in unincorporated West Palm Beach, FL 33417 (Palm Beach County). Upon arrival I spoke to Deputy P. Owers ID# 15789 who relayed to following to me: On 7/20/2023 I was assigned to the North Region Patrol (District 3) and patrolling the unincorporated area of West Palm Beach, FL. At approximately 2123 hours, I observed a red Hyundai Sedan bearing FL license plate 3199YU traveling northbound on North Haverhill Road. The vehicle was failing to maintain a single lane and was partially traveling along the grassy shoulder of the roadway. The vehicle was traveling well-below the posted speed limit at speeds that I estimated to be about 5 miles an hour or less. As I approached, I observed other vehicles changing lanes to go around the red Hyundai. I initiated a traffic stop and the vehicle pulled into a nursing home parking lot at 2660 North Haverhill Road West Palm Beach, FL 33417. I made contact with the driver and sole occupant of the Hyundai, who was identified by DHSMV records as Joseph Macinnis. Upon making contact, Mr. Macinnis appeared confused and disoriented. Mr. Macinnis' speech was slurred and his movements were lethargic. Mr. Macinnis fumbled through his wallet and had difficulty producing his driver's license. Mr. Macinnis later informed me that he was coming from Duggans Pub, which is a local bar in the area. This concludes his supplement.

OBSERVATION OF DRIVER:

I observed the defendant, Joseph Francis Macinnis who was wearing a black/gray tee shirt, blue jean pants and white sneakers. The defendant was sitting in the driver seat of his vehicle and he was alone. I asked the defendant to walk over to the front of my vehicle and speak with me. While walking over to my vehicle, the defendant was unsteady on his feet and staggered and stumbled as he walked. While standing stationary the defendant swayed heavily. I could see the defendants eyes were bloodshot and glossy. He had an obvious odor of an unknown alcoholic beverage emitting from his breath that grew stronger as he spoke. The defendants speech was slow and slurred. His movements were slow and lethargic.

DRIVER'S STATEMENTS:

The defendant said he did not have any physical defects or preexisting injuries, diabetes, or wear glasses. The defendant said he had 4 Miller Lite can beers to drink. The defendant said he was coming from Dugans bar. He said he was driving the vehicle. I asked the defendant to submit to roadside field sobriety tasks to which he refused. (Taylor) I said to the defendant, if you fail to submit to the roadside tasks I am requesting, it can be used against you in court. If you fail to submit to the roadside tasks I am requesting, I will be forced to conclude my investigation and base my decision as to your impairment solely on the facts at hand. He said he understood and he again refused.

ODORS:

An obvious odor of an unknown alcoholic beverage

GENERAL OBSERVATIONS

SPEECH: **Slow, Slurred, Thick, Unclear**

ATTITUDE: **Calm**

CLOTHING: **Clean**

MEDICAL/OTHER: **NONE**

NOT A CERTIFIED COPY

STATE OF FLORIDA
COUNTY OF PALM BEACH

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

The foregoing instrument was sworn to or affirmed and subscribed before me this 20th day of July 2023 by Inv. Cisson J.

(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced Known LEO ID# 24091

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

MADELIN GONZALEZ
Notary Public
State of Florida
Comm# HH225716
Expires 2/7/2026

SUBJECT: Macinnis, Joseph, F CASE NUMBER 23091123

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- ☐ LT EYE-LACK OF SMOOTH PURSUIT
- ☐ 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:

While standing stationary in front of my vehicle, the defendant struggled to stand still or remain in the position I asked him to. He moved his feet apart and did not keep his hands by his side. He was unable to stand still and would lose his balance.

WALK & TURN:

The defendant refused to do the task.

ONE LEG STAND:

The defendant refused to do the task.

FINGER TO NOSE:

The defendant refused to do the task.

ROMBERG ALPHABET:

The defendant refused to do the task.

NOT A CERTIFIED COPY

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

STATE OF FLORIDA
COUNTY OF PALM BEACH

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

The foregoing instrument was sworn to or affirmed and subscribed before me this 20th day of July 2023 by Inv. Cisson J.

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Known LEO ID# 24091

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

MADELIN GONZALEZ
Notary Public
State of Florida
Comm# HH225716
Expires 2/7/2026

WITNESS LIST

CASE NUMBER: 23091123

ARRESTING OFFICER: Inv. Cisson J.

ADDRESS: PBSO 3228 GUN CLUB RD, WEST PALM BEACH, FL 33406

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

CAN TESTIFY TO: Facts of the case

NAME: DEPUTY Owers ID# 15789

ADDRESS: PBSO

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: TRAFFIC STOP, INDICATORS OF IMPAIRMENT

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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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: _____

NOT A CERTIFIED COPY

STATE OF FLORIDA

AFFIDAVIT OF REFUSAL TO SUBMIT TO

BREATH TEST

I, inv JACKIE CISSON, a duly certified Law Enforcement Officer or Correctional Officer,
(Person reading Implied Consent Warning)

am a member of Palm Beach County Sheriffs Office, and I do swear
(Name of enforcement agency)

or affirm that on or about the TWENTIETH day of July, 2023, at 9:48 PM

DRIVER (Type or Print) JOSEPH (FIRST) MACINNIS (MIDDLE OR MAIDEN) (LAST),

DL # M252480610020, state of FL, was placed under lawful arrest for

the offense of DUI by inv JACKIE CISSON and
(Name of Arresting Officer)

issued Citation # AGY7WDE.

That on or about the TWENTIETH day of July, 2023, at 10:54 PM

in Palm Beach County,

I requested that the driver submit to a **BREATH** test for the purpose of determining its alcohol content. I informed the driver that the refusal to submit to such test would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended, or if he or she had been previously fined under s. 327.35215, F.S., for refusing to submit to a breath, urine, or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended, or if he or she has been previously fined under s. 327.35215, F.S., for refusal to submit to a lawful test of his or her breath, urine, or blood. Nonetheless, the driver refused to submit to the test requested.

Signature of Law Enforcement Officer or Corrctional Officer

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

MADELIN GONZALEZ
Notary Public
State of Florida
Comm# HH225716
Expires 2/7/2026
(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this 20 day of July, 2023 by _____ who is personally known to me or who has produced _____ as identification.

Notary Public _____

The foregoing instrument was sworn and subscribed before me:

_____
Signature of Attesting Officer

Title _____

Date _____

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

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

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: MACINNIS, JOSEPH

CASE NUMBER: 23-091123

DATE: Jul 20, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 22:50

ENDING TIME: 22:55

BREATH TESTS RESULTS: 1) .R TIME 22:54 A.M.☐ P.M.☒ 2) TIME 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: M. GONZALEZ #40577

MAINTENANCE TECHNICAN: J. KARLECKE# 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED,

ATTITUDE: ANXIOUS, FIDGETY

CLOTHING: BLUE JEAN PANTS, BLAK/GREY PRINT SHIRT, WHITE SNEAKERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

REFUSED

OTHER:

NOT A CERTIFIED COPY

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 22:27 HRS.

SUBJECT: REFUSED TO ANSWER FORMAT QUESTIONS, ASK FOR LAWYER

A/O: READ I/C
SUBJECT: WOULD NOT ACKNOWLEDGE IF HE UNDERSTOOD I/C OR NOT.

A/O: CALLED REFUSAL AT 22:54

A/O: NO RIGHTS READ

A/O: NO Q & A CONDUCTED

REFUSED

SUBJECT: _____ CASE NUMBER: _____

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

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

OR

I am now requesting that you submit to a lawful test of your ***URINE*** for the purpose of determining the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am _____ of the _____

If you refuse to take the test I have requested of you, your driving privilege will be suspended for a period of one (1) year for a FIRST REFUSAL, or eighteen (18) months if your driving privilege has been PREVIOUSLY SUSPENDED, or if you have been PREVIOUSLY FINED under s. 327.35215, for refusing to submit to a lawful test of your breath, urine, or blood. Additionally, if you refuse to take the test I have requested of you, and if your driving privilege has been previously suspended, or if you have been previously fined under s. 327.35215, for a refusal to submit to a lawful test of your ***breath, urine*** or blood, you will be committing a misdemeanor, in addition to any other penalties which can be imposed by law.

Refusal to submit to the test I have requested is admissible into evidence in any criminal proceeding.

Do you understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO

NOTE: IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER'S LICENSE (CDL), READ THE FOLLOWING,

If you are a Commercial Driver License (CDL) holder or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privilege for a period of one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from holding a CDL or operating a CMV.

Do you understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO

SUBJECTS SIGNATURE: (X)_____

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X)_____

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

SUBJECT: _____ CASE NUMBER: _____

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

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

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

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

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE:
- EPILEPSY? _____
- GLASS EYE? _____
- FALSE TEETH? _____
- EAR INFECTION? _____
- INNER EAR TROUBLE? _____
- DIABETES? _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: _____

NOT A CERTIFIED COPY

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.	
	☐			
	☐			
	☐			
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	☐			
Other	☒	316.650(b)	Other: Driver information contained in a uniform traffic citation	6-7
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2023018934	**Date:** 7/21/2023
	Specialist Name/ID: Chantel Daniels/30347