50 2023 CT-013445 ASB

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Juvenile: 1 — N

ADMINISTRATION

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number
	FL 0500300	BOYNTON BEACH POLICE DEPT.	34-23-035073

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

If Weapon Seized Enter Type:

Multiple Clearance Indicator: N

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
N. Congress Ave./Meadows Blvd., Boynton Beach FL 33426	N. Congress Ave./Meadows Blvd., BB FL 33436

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
07/29/2023	0132					

DEFENDANT

Name (Last, First, Middle): Peiker, Krista, Marie

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

W - White, B - Black, I - American Indian, O - Oriental / Asian

Race	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	04/12/1979	5'07"	180	Green	Blonde	Fair	Med

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

Marital Status: Married — Religion: Unk — Indication of: Alcohol Influence ☒ Y ☐ N ☐ Unk; Drug Influence ☐ Y ☐ N ☒ Unk

Local Address (Street, Apt. Number) (City) (State) (Zip) — Phone ( ) - — Residence Type: 1. City 3. Florida 2. County 4. Out of State: 1

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
2002 CHADWICK CT	BOYNTON BEACH	FL	33436	(954)648-8512	DAVID

Business Address (Street, Apt. Number) (City) (State) (Zip) — Phone ( ) - — Occupation: RN

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth	Citizenship
P260513796320, FL	[redacted]		Long Branch NJ	U.S

CO-DEF

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

JUVENILE

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

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

CA OR

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 561-355-2526) 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, B. Buy, P. Possess, S. Sell, D. Deliver, T. Traffic, R. Smuggle, E. Use, K. Dispense/Distribute, M. Manufacture/Produce/Cultivate, Z. Other

Drug Type: N. N/A, A. Amphetamine, B. Barbituate, 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 (injury to person or property)	1	☐ Yes ☒ No	316.193(3)(c)(1)	

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
N	N	N/A	23-035073		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐ Yes ☐ No		

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐ Yes ☐ No		

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐ Yes ☐ No		

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

NOTICE TO APPEAR

☐ Instruction No. 1 Mandatory Appearance in Court
☐ Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side.

Location (Court, Room Number, Address): South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444

Court Date and Time: Month August — Day 28 — Year 2023 — Time 0830 ☒ A.M. ☐ P.M.

FILED PBC - GUN CLUB-- '23 JUL 30 AM 6:57

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: 07/29/2023

ADMIN.

HOLD for other Agency Name:

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other.

Signature of Arresting Officer

Name of Arresting Officer (Print): Ofc. Rosas — I.D. #: 1127

Name Verification (Printed by Arrestee) (PRINT)

BU#

Intake Deputy — I.D. # — Pouch # — Transporting Officer: Ofc. Rosas — I.D. #: 1127 — Agency: BBPD

Witness here is subject Signed with an "X".

Page 1 OF 1

NOT A CERTIFIED COPY

0418192

2981

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 29 **DAY OF** July **2023 AT** 0058 ☒ **A.M** ☐ **P.M.**

CASE #: 23-035073 **DEFENDANT:** Peiker, Krista

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATION OF DRIVER:

On 07/29/2023, at approximately 0058 hours, I responded to N. Congress Ave./ Meadows Blvd., in reference to motor vehicle accident. This incident occurred within the City of Boynton Beach, Palm Beach County, Florida.

Upon arrival, I made contact with K9 Officer Roedel who advised that was stopped at a red light, facing southbound at the intersection of N. Congress Ave. and Meadows Blvd. The traffic light remained red when he witnessed a white 2019 Volkswagen Tiguan bearing, (FL Tag, BS96QE) fail to stop, which caused the vehicle to collide with a red 2003 Toyota Tundra bearing, (MO Tag, 8DDR69). K9 Officer Roedel made contact with the driver and sole occupant of the Volkswagen, which she was identified as, W/F Peiker, Krista (04/12/1979). After Peiker advised she was okay and did not need medical attention, she was asked to provide her driver's license, at which time she handed K9 Officer Roedel her RN ID card. Peiker appeared lethargic and had a strong odor of an unknown alcoholic beverage emanating from her breath as she spoke.

When I made contact with Peiker she was already out of her vehicle, sitting on a nearby bench. Peiker was explained that the crash investigation was completed and a DUI investigation would be conducted. I then read Peiker her Miranda Warnings, which she understood. I was able to observe the very potent odor of an unknown alcoholic beverage emanating from Peiker's person which only grew stronger as she spoke. Her eyes were red and glassy. When she arose from the bench, she was unable to maintain her balance while speaking with me.

Based on my investigation at this point, I asked Peiker if she would be willing to submit to a series of Standardized Field Sobriety Tasks. Peiker agreed to perform the exercises. Prior to beginning I asked Peiker if she had any disabilities and/or injuries; which she stated no.

Pen Exercise: The following task was explained and demonstrated to Peiker, which she acknowledged and understood. After giving Peiker the instructions, she was observed swaying and tilting her head when attempting to follow the stimulus. I observed Peiker's eye movement jerking while she was following the stimulus.

NOT A CERTIFIED COPY

HORIZONTAL GAZE NYSTAGMUS:

- ☐ Left eye does not follow smoothly
- ☐ Left eye prior to 45 degrees
- ☐ Distinct jerking in left eye at maximum deviation
- ☐ Vertical Nystagmus in left eye
- ☐ Right eye does not follow smoothly
- ☐ Right eye prior to 45 degrees
- ☐ Distinct jerking in right eye at maximum deviation
- ☐ Vertical Nystagmus in right eye

WALK AND TURN:

WALK AND TURN:

The following task was explained and demonstrated to Peiker, which she stated that she understood. During the instructional stage, Peiker swayed side to side and lost her balance. She began the task before I advised her to begin. During the walking stage, Peiker missed heel to toe between steps 2-3, 3-4, 6-7,7-8 on the first 9 steps. Peiker completed an incorrect turn by and used her arms for balance. On the returning 9 steps, Peiker walked in normal manner missing every heel to toe step and taking more than 9 steps.

ONE LEG STAND:
The task was then explained and demonstrated which she advised she understood. Peiker began the task, then stopped to early and appeared confused. The task had to be explained and demonstrated to Peiker again, which she advised she understood. During the balancing stage, Peiker began to sway side to side and used her arms for balance. Peiker failed to count and she did not keep her leg straight. Peiker had her arms raised the entire time, and put her foot down before the task was over. At one point, Peiker almost fell over.

FINGER TO NOSE:
Task was explained and demonstrated to Peiker, which she stated that she understood. During the instructional stage, Peiker swayed side to side. Smith had to be reminded multiple times to keep her feet together and arms at her side. Peiker failed to tilt her head back and she did not close her eyes.

ROMBERG/ALPHABET:
Task was explained and demonstrated to Peiker, which she stated that she understood. During the instructional stage, Peiker was asked if she knew the English Alphabet which she advised that she did. During the exercise stage, Peiker did not keep her head tilted. She swayed and recited the alphabet and a rhythmic manner.

Based on the above facts, Peiker was placed into handcuffs (D/L and Spaced) and arrested for suspicion of DUI. She was placed in my marked patrol vehicle (4744) and transported to the Palm Beach County BAT facility.

I arrived at the BAT and started my 20 minutes observations at 0200 hours and completed it at 0220 hours. Upon completion, I requested Peiker to provide a sample of her breath to determine the alcohol content, which she agreed. Peiker provided a BrAC sample of .169 at 0228 hours and .174 at 0231 hours. Peiker was read her Miranda Warnings again, which she advised she did not want to answer any questions.

Based on the above facts, Peiker was charged with Driving Under the Influence (injury to person or property) pursuant with F.S.S. 316.193(3)(c)(1). Peiker was then processed and later TOT PBCJ.

Peiker's vehicle was removed from the scene by Beck's Towing.

Nothing further.

Incident was captured via BWC.

NOT A CERTIFIED COPY

The following instrument was sworn to before me this 29 day of July 2023

By: Ofc. Rosas 1127

S. O'Neal
Notary/Police Officer (F.S.S. 117.10)

Ofc Rosas 1127
Signature of Arresting Officer

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # GG 972080
My Comm. Expires Jun 25, 2024
Bonded through National Notary Assn.

NOT A CERTIFIED COPY

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

PBSO CASE # 23-094002 PBSO ZONE 6-12

AGENCY CASE # 23-035073 CRASH CASE #

TIME OF STOP/CRASH 0058 DATE 07/29/2023 DAY

SUBJECT'S NAME Peiker (LAST) Krista (FIRST) M. (MID) RACE W SEX female

HGT 5'7" WGT 175lb DOB 04/12/1979

LOCATION Meadows Blvd./N. Congress Ave. Boynton Beach Fl 33462

ARRESTING OFFICER'S NAME & ID Ofc. Rosas 1127 Desiree AGENCY Boynton Beach

DIVISION:

NOTIFIED BY COMMO ✓

ARRIVAL AT FACILITY 0200

ARREST TIME 0132

BREATH RESULTS:

1) .169
2) .174
3)
4)

TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # N/A

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: BBPD OFC. ROSAS #1127

SUBJECT: PEIKER, KRISTA M.

CASE NUMBER: 23-094002

DATE: 07-29-23

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 02:22 HRS

ENDING TIME: 02:35 HRS

BREATH TESTS RESULTS: 1) .169 TIME 02:28 A.M. ☒ P.M. ☐ 2) .174 TIME 02:31 A.M. ☒ P.M. ☐

3) TIME A.M. ☐ P.M. ☐ 4) TIME A.M. ☐ P.M. ☐

BREATH OPERATOR: S. O'NEAL #6212

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: EMOTIONAL, MOODSWINGS, CRYING, DEMANDING, PROFANE, INSULTING, COOPERATIVE AT TIMES

CLOTHING: SHIRT- GREEN SHORTS- WHITE JEAN SHORTS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: VERY RED, GLASSY, WATERY FROM CRYING
ODOR OF UNKNOWN ALCOHOLIC BEVERAGE
FACE: FLUSHED

COMMENTS:

20 MIN. OBSERVATION CONDUCTED BY A/O ROSAS #1127

D WALKED INTO THE BREATH TESTING FACILITY, STATING SHE WANTED TO KILL HERSELF.
D STATED SHE NEEDED HER OWN CELL OR SHE WOULD KILL HERSELF.
A/O REQUESTED THE BREATH TEST.
D SUBMITTED TO THE REQUEST.
D ASKED ABOUT HER ATTORNEY, THEN ASKED ABOUT HER REFUSING.
D THEN DECIDED TO SUBMIT AGAIN.
D WAS DEMANDING DURING THE BREATH TESTING.
D COMPLETED THE TEST CORRECTLY, EXPLAINED THE RESULTS TO THE D.
C/W READ ON CAMERA, D REFUSED Q&A.

NOT A CERTIFIED COPY

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006477 Software: 8100.27
Date of Test: 07/29/2023

Date of Last Agency Inspection: 07/14/2023
Observation Period Began: 02:00
Subject's Name: KRISTA M PEIKER DOB: 04/12/1979 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	02:26
Air Blank	0.000	02:26
Control Test	0.078	02:26
Air Blank	0.000	02:27
Subject Sample #1	0.169	02:28
Air Blank	0.000	02:28
Air Blank	0.000	02:30
Subject Sample #2	0.174	02:31
Air Blank	0.000	02:32
Control Test	0.078	02:32
Air Blank	0.000	02:33
Diagnostics Check	OK	02:33

Cylinder Lot: 15922080A3
Exp: 08/05/2024

State of Florida, County of Palm Beach

Personally appeared before me the undersigned authority, who (✓) is personally known to me or (__) produced _____ as identification, and who after being placed under oath, states:

I 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: 07-29-23
Signature

Sworn to (or affirmed) before me this 29 day of July, 2023

Signature of Notary Public-State of Florida

Ofc. Rosas #1127
Printed Name of Notary Public-State of Florida

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

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

NOT A CERTIFIED COPY

CASE #: 23-035703 **DEFENDANT:** Peiker, Krista

Arresting Officer: Rosas 1127
Address: 2100 HIGH RIDGE ROAD, BOYNTON BEACH, FL 33426
Phone Numbers: Home: _____ **Work:** (561) 742-6100

Name: K9 Roedel
Address: 2100 High Ridge Road, Boynton Beach, FL 33426
Phone Numbers: Home: _____ **Work:** (561) 742- 6100
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ **Work:** _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ **Work:** _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ **Work:** _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ **Work:** _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ **Work:** _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ **Work:** _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ **Work:** _____
Can testify to: _____

NOT A CERTIFIED COPY

CASE #: 23-035073 **DEFENDANT:** Peiker, Krista

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.

Where you operating a motor vehicle at the time of the stop/Accident? _____
Where were you going? _____
What Street or Highway were you on? _____
What was you direction of travel? _____
Where did you start from? _____
What time did you start? _____
What time is it now? _____
What is today's date? _____
What day of the week is it? _____
What City and County 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 have you been drinking? _____
How much? _____
With whom? _____
When did you have your first drink? _____
When did you have your last drink? _____
Can you feel the effects of the alcohol? _____
Are you under the influence? _____
Have you consumed any alcohol since the stop/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? _____
Where 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 you eyes that are not corrected by glasses? _____
Do you take insulin? _____ If so, when was your last injection? _____
Have you ever gad a driver's license in any other state? _____
Where? _____
Interviewer: _____

REFUSED

NOT A CERTIFIED COPY

SUBJECT: Peiker, Krista CASE NUMBER: 23-035073

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 Ofc. Rojas of the Boynton Beach Police Dept.

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)_____

NOT A CERTIFIED COPY

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006477 Software: 8100.27
Date of Test: 07/29/2023

Date of Last Agency Inspection: 07/14/2023
Observation Period Began: 02:00
Subject's Name: KRISTA M PEIKER DOB: 04/12/1979 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	02:26
Air Blank	0.000	02:26
Control Test	0.078	02:26
Air Blank	0.000	02:27
Subject Sample #1	0.169	02:28
Air Blank	0.000	02:28
Air Blank	0.000	02:30
Subject Sample #2	0.174	02:31
Air Blank	0.000	02:32
Control Test	0.078	02:32
Air Blank	0.000	02:33
Diagnostics Check	OK	02:33

Cylinder Lot: 15922080A3
Exp: 08/05/2024

State of Florida, County of Palm Beach

Personally appeared before me the undersigned authority, who (✓) is personally known to me or (__) produced _____ as identification, and who after being placed under oath, states:

I 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: 07-29-23
Signature

Sworn to (or affirmed) before me this 29 day of July, 2023

1127 Ofc. Rosas #1127
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

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

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

NOT A CERTIFIED COPY

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:	

NOT A CERTIFIED COPY

REVIEW COMPLETED BY

Booking Number: 2023019732	**Date:** 7/30/2023
	Specialist Name/ID: R.Castro/40259