Arrest Report C5503345

FLORIDA HIGHWAY PATROL
P.O. BOX 540007, GREENACRES, FL 33454

1230

2024-CT 11687AXS

Report Date / Time	Report Number	Case Number/Cad Number	Reporting Officer Name
6/23/2024 05:33 AM	FHP99ARR884444	FHP24ON0314242 / RCC24IN0482905	ZIMMERMAN, JONATHAN

Originating Agency ORI	Occur Date Time Range	Jurisdiction
FL0509000	06/23/2024 02:25:54 -	

OBTS Number	Other Number	Clearance
	TROOP L	

Location of Occurrence

County	Location Type	Location Description
PALM BEACH	PUBLIC PLACE	NB I95 (SR9) JNOF BOYTON BEACH BLVD (SR804)

Street Number	Street	Apt/Lot/Bldg	City	State	Zip Code
	NB I-95		BOYNTON BEACH	FL	33435

Defendant

First Name	Middle Name	Last Name	Suffix	Race	Sex	Height	Weight	Hair	Eyes
LISA	DEANNE	RIDOUT		WHITE	FEMALE	506	130	BLK	BRO

MNI #	SSN	Date of Birth	Age	ID Type	Drivers License or other ID	State	OCA / Agency ID
	[redacted]	4/27/1990	34	E	R330524906470	FL	

Place of Birth:	MIAMI FL US

Address
* RESIDENCE / 42 MEADOWS DR , BOYNTON BEACH, FL 33436 /

Arrest

Arrest Date/Time	Arrest Location Type	Arrest Location Description
6/23/2024 2:58:00 AM	PUBLIC PLACE	NB I95 (SR9) JNOF BOYTON BEACH BLVD (SR804)

Street Number	Street	Apt/Lot/Bldg	County	City	State	Zip Code
	NB I-95		PALM BEACH	BOYNTON BEACH	FL	33435

Charge :

Counts	Charge	Bond Amount	
1	316.193.1c	$0.00	☐ No Bond

Charge Degree	Charge Level
S	MISDEMEANOR
General Offense Code	Arrest Offense Code
	DUI-UNLAW BLD ALCH

Charge Description
DUI BREATH ALCOHOL 0.08 OR MORE PER 210 L
Administrative Code - Description
-

Is Arrestee Juvenile?	No
Type of Arrest	On-View Arrest (apprehension without a warrant or previous incident report)

Breville 1830

JUN 23 AM 6:58

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SCANNED
JUN 24 2024

FILED PBC - GUN CLUB
'24 JUN 24 AM 7:56

Report Date / Time	Report Number	Case Number/Cad Number	Reporting Officer Name
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Bond Set by Court

Bond Amount	☐ No Bond

Bond Type(s)

Probable Cause

On Sunday June 23rd, 2024 at approximately 02:25am I, Trooper Jonathan Zimmerman ID#1703 was conducting routine patrol on Interstate 95 (State Road 9) in Palm Beach County, Florida. I was entering on to northbound Interstate 95 (State Road 9) from State Road 804 (Boynton Beach Boulevard) in my fully marked Florida Highway Patrol vehicle (FHP00544/VIN:2C3CDXAT2KH552993). I was on the entrance ramp when I observed a vehicle crash that just occurred located north of State Road 804.

I observed two vehicles with heavy front-end damage which were both disabled and blocking the center lanes of Interstate 95. Vehicle 1 (maroon KIA SUV) was disabled, blocking lane #3 facing south east. Vehicle 2 (blue Toyota Camry) was also disabled, blocking lane #4 facing north west. There were two other vehicles on scene that were uninvolved witness to the crash. Note: The driver of V02 (D02) did provided a sworn witness statement, along with the two other uninvolved witnesses that were on scene. The statements will be attached to the to the completed arrest report. Trooper Oscar Herrera (Badge #5279) later arrived on scene and conducted a crash investigation. Please refer to Trooper Herrera's crash report for an in-depth analysis of the crash.

As I approached the scene of the crash, I immediately checked the damaged vehicles for driver's or pending injuries. Lake Worth Regional Dispatching Center (LWRRC) was also notified, Boynton Fire Rescue was en-route. I approached the blue Toyota first and observed no driver or occupants. I then approached the maroon Kia and observed a single occupant, the driver who was sitting in the driver's seat. I asked if she was okay, she stated yes, and I observed no apparent injuries. Note: I was immediately met with a strong odor of an unknown alcoholic substance. For the brief moment I spoke with her, I observed slurred speech and blood shot and glassy eyes. I immediately left her and went to locate the driver of the other blue Camry who was standing on the outside shoulder with another occupant of his vehicle. I spoke with them and observed no signs of apparent injury. I then identified the two other vehicles and drivers on scene (witness, see witness statements). I returned back to the vehicle in order to attempt to move them out of the center of the roadway which was unsuccessful. At roughly this time Trooper Herrera arrived on scene and began conducting a crash investigation. Note: The driver of V02 (D02) stated that D01 was traveling against traffic in the outside lane, which based off my investigation of the crash is congruent with what Witness 1 (W01) and W02) advised along with the damage to both vehicles, as well as the final resting place of each vehicle.

D01 was identified by Florida driver's license as Lisa Deanne Ridout (DL: R330-524-90-647-0,

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W/F, DOB: 4/27/1990). V01 was identified by the attached Florida license plate #IFU433 which was entered NCIC/FCIC revealing a 2020 KIA Tulluride registered to Lisa Ridout Deanne.

After Trooper Herrera finished conducting his crash investigation and Mrs. Ridout was finished being assessed by Boynton Fire Rescue (she denied medical attention and transport), I returned to Mrs. Ridout and advised her to walk over to the front of my patrol vehicle so that I could further speak with her. Note: during Mrs. Ridout's time on scene and while walking over to my patrol vehicle, she demonstrated a difficulty in maintaining her balance, she seemed to look off with a blank stare while being spoken to and could not maintain eye contact while having a conversation. Once in front of my patrol vehicle I explained to Mrs. Ridout that based on the totality of circumstances I believe she may be under the influence of drugs and or alcohol. I offered Mrs. Ridout the opportunity to voluntary perform Field Side Sobriety exercise to determine her level of possible intoxication, she agreed. Note: When speaking with her face-to-face in front of my patrol vehicle, I could smell much more strongly, an unknown alcoholic substance now coming from her breath as she spoke as well as, a more apparent difficulty with balance. She seemed to portray a sort of delirious state of mind, for instance it appeared as the it took her a prolonged amount of time to process information in front of her.

Prior to administering the voluntary exercises, I advised Mrs. Ridout to stand in the starting position with her feet together and her hands at her sides. I asked if she could clearly see the black tip of my pen, she stated yes. Video and audio footage are available upon request. The summary below is not intended to be a verbatim account of all the events that took place during the administration of the standardized field sobriety exercises. (See in car dash camera footage for an in-depth video of events)

Horizontal Gaze Nystagmus Exercise

A black ballpoint pen with a silver tip was used. Mrs. Ridout stated that she could clearly see the tip of the stimulus as well as the tip of my finger. The exercise was explained and demonstrated. Mrs. Ridout had a difficult time maintain eye contact with the tip of the pen and keeping her head still.

-I checked for resting nystagmus which was observed in both eyes
-I checked for equal pupil size and equal tracking;
(Both pupils were equal in size and both eyes did track the stimulus equally)
-I observed a lack of smooth pursuit in both eyes
-I observed horizontal gaze nystagmus at maximum deviation in both eyes
-I observed Horizontal Gaze prior to 45 degrees in both eyes
-I did not observed Vertical gaze in either eye

Walk and Turn Exercise

A piece of yellow duct tape was used as a solid straight line in front of my patrol vehicle. The exercise was explained and demonstrated. Mrs. Ridout stated that she understood the instructions. Mr. Ridout

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was unable to successfully complete the exercise, please refer to the provided in car dash camera video.

-Could not complete exercise

One Legged Stand

The exercise was explained and demonstrated to Mrs. Ridout stated that she understood the directions.

-Swayed
-Put foot down
-Used arms for balance

Based on the totality of the circumstances I determined that there was probable cause to believe that Lisa Deanne Ridout committed the offense of driving under the influence by being in actual physical control/operating a motor vehicle while under the influence of alcoholic beverages, any chemical substance per Florida State Statute 316.193, or any controlled substance per Chapter 893, while her normal faculties were impaired. She was placed under arrest at approximately 02:58am for the above offense. Mrs. Ridout was escorted to the rear of my patrol vehicle; a search was not conduct due to the lack of available female Officers. Neighboring jurisdictions were reached out to, however were unable to provide a female Officer. Note: Mrs. Ridout was wearing nearly skin-tight clothes with no pockets therefore she had the inability to hide contraband on her person.

I transported Mrs. Ridout to Palm Beach County Breath Alcohol Testing (BAT) facility at approximately 03:08am. She underwent a 20-minute observation period where she did not ingest anything by mouth or regurgitate (mouth was confirmed to be empty prior to beginning the observation period. Mrs. Ridout provided a 2 breath samples at approximately 03:53. Breathe sample one was 0.252 and breathe sample two was 0.254. Mrs. Ridouot was read Florida Miranda Warning which she stated that she understood, she did agree to answer questions. (See BAT video footage for a complete account of the question and answering segment). Mrs. Ridout was then transported to Good Samaritan located off of State Road 704 (Okeechobee Boulevard) and Haverhill in reference to medical clearance. She was then transport back to Palm Beach County Jail with no further incidents.

All events occurred in Palm Beach County, State of Florida.

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Jail Booking Facility

Booking Date/Time	Booking County	Booking Facility	Booking Facility Phone
	PALM BEACH	PALM BEACH COUNTY CORRECTIONS	(561) 688-4400

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Originating Agency ORI	Occur Date Time Range	Jurisdiction
FL0509000	06/23/2024 02:25:54 -	

OBTS Number	Other Number	Clearance
	TROOP L	

Booking Facility Location	Booking Number
3228 GUN CLUB ROAD WEST PALM BEACH, FLORIDA 33406	

Booking Comments

Court

Court County	Court Location
PALM BEACH	3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406

Court	Court Phone	Court Appereance Date / Time	Court Fine
CRIMINAL JUSTICE COMPLEX	561-355-2994	07/25/2024 8:30AM	

Comments

Officer Name / Rank / ID #	Involvement On Report / Reporting Role	Officer Agency Org/Unit
ZIMMERMAN, JONATHAN TPR 5061	REPORTING OFFICER	FLORIDA HIGHWAY PATROL FHPL\LWRCC\PALM BEACH\BROW LN TO SR804

The undersigned certifies and swears that he/she has just and reasonable grounds to believe that the above named Defendant, committed violation(s), of law, on the below date(s) and time(s), as listed in the probable cause associated with this report:

Reporting Officer

Officer Name	Office Rank	Officer ID No
ZIMMERMAN, JONATHAN	TPR	5061

Officer Agency
FLORIDA HIGHWAY PATROL

Officer Signature

Sworn and subscribed before me, the undersigned authority
This the 23 day of June, 2024
DEPUTY OF THE COURT, NOTARY OR LAW ENFORCEMENT

○ No Bill / Petition ○ Issue Warrant ○ Prosecution Approved

Signature of Assistant State Attorney Date

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SCANNED
JUN 24 2024

FLORIDA TRAFFIC CRASH DRIVER INFORMATION EXCHANGE

This Traffic Crash Report can be purchased online at:
www.FloridaCrashPortal.gov

Crash Number	Reporting Agency		
26311925	FLORIDA HIGHWAY PATROL		

CRASH IDENTIFIERS

County of Crash	City or Place of Crash	☑ City Limits	Crash Date/Time	Reported Date/Time
PALM BEACH	BOYNTON BEACH		06/23/2024 02:20 AM	06/23/2024 02:25 AM

Roadway Description for Location of Occurrence: NB INTERSTATE 95 (STATE ROAD 9)

VEHICLE

V01	Year	Make	Model	Color	State	License Number	Registration Expires	☐ Permanent Registration	VIN
	2020	KIA	TELLURIDE	MAR	FL	IFU433	4/27/2025		5XYP34HC1LG002365

Owner First Name	Owner Middle Name	Owner Last Name	Owner Suffix	Owner Business (if not Person)
LISA	DEANNE	RIDOUT		

Address	Address Other	City	State	Zip Code
42 MEADOWS DR		BOYNTON BEACH	FL	33436-9123

Owner Phone Number	Owner Phone Number (other)	Insurance Company	Insurance Policy Number
		LIBERTY MUTUAL PERSONAL INSURANCE COMPANPOLI	AOV25143363790

	License Number	State	Reg. Expires	Permanent Reg.	VIN	Year	Make	Length	Axles
Trailer One				NO					
Trailer Two				NO					

VEHICLE

V02	Year	Make	Model	Color	State	License Number	Registration Expires	☐ Permanent Registration	VIN
	2023	TOYT	CAMRY	BLU	FL	Z32JXS	9/18/2024		4T1F11AK0PU171911

Owner First Name	Owner Middle Name	Owner Last Name	Owner Suffix	Owner Business (if not Person)
SCOTT		CHARLES		

Address	Address Other	City	State	Zip Code
135 NE 5TH AVE		BOYNTON BEACH	FL	33435-3869

Owner Phone Number	Owner Phone Number (other)	Insurance Company	Insurance Policy Number
561-945-9424		GEICO CASUALTY COMPANY	6147333154

	License Number	State	Reg. Expires	Permanent Reg.	VIN	Year	Make	Length	Axles
Trailer One				NO					
Trailer Two				NO					

PERSON RECORD

Person Type	NM#	Vehicle#	First Name	Middle Name	Last Name	Suffix
DRIVER		V01	LISA	DEANNE	RIDOUT	

Address	Address Other	City	State	Zip Code
42 MEADOWS DR		BOYNTON BEACH	FL	33436

Phone Number	Phone Number (other)	Other Comments (Write In)
561-860-6214		

PERSON RECORD

Person Type	NM#	Vehicle#	First Name	Middle Name	Last Name	Suffix
DRIVER		V02	SCOTT		CHARLES	

Address	Address Other	City	State	Zip Code
135 NE 5TH AVE		BOYNTON BEACH	FL	33435

Phone Number	Phone Number (other)	Other Comments (Write In)
561-945-9424		

PERSON RECORD

Person Type	NM#	Vehicle#	First Name	Middle Name	Last Name	Suffix
PASSENGER		V02	MEDJINA		MALERBE	

Address	Address Other	City	State	Zip Code
6751 RUBENS CT		ORLANDO	FL	32818

Phone Number	Phone Number (other)	Other Comments (Write In)

REPORTING OFFICER

ID Number	Rank	Name	Troop / Post	Officer Agency	Phone Number
5279	TPR	O.HERRERA	L	FLORIDA HIGHWAY PATROL	561-357- 4040

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FLORIDA HIGHWAY PATROL

Vehicle Tow

RECIPIENT COPY

CASE NUMBER	DATE / TIME	COUNTY	CITY	OTHER NUMBER	CITATION / REPORT
FHP24ON0314242	6/23/2024 3:37:04 AM	PALM BEACH	BOYNTON BEACH		26311925

NO HOLD - MAY BE RELEASED

OWNER

NAME (FIRST MIDDLE LAST SUFFIX) / BUSINESS NAME: **LISA DEANNE RIDOUT**

ADDRESS: **42 MEADOWS DR** | CITY: **BOYNTON BEACH** | STATE: **FL** | ZIP CODE: **33436** | TELEPHONE:

☑ OWNER PRESENT OR ☐ OWNER NOTIFICATION ATTEMPTED | OWNER NOTIFICATION ATTEMPTS: | ☐ OWNER NOTIFICATION SUCCESSFUL

DRIVER

NAME FIRST	NAME MIDDLE	LAST NAME	SUFFIX NAME
LISA	DEANNE	RIDOUT	

ADDRESS: **42 MEADOWS DR** | CITY: **BOYNTON BEACH** | STATE: **FL** | ZIP CODE: **33436** | TELEPHONE: **561-860-6214**

CMV

CARRIER NAME

ADDRESS | CITY | STATE | ZIP CODE | TELEPHONE

VEHICLE / TRAILERS

YEAR	MAKE	MODEL	VEHICLE STYLE	VEHICLE COLOR	TAG STATE / NUMBER	VIN	ODOMETER
2020	KIA	TELLURIDE	UT	MAR	FL IFU433	5XYP34HC1LG002365	

CIC ENTRY | RED TAG DATE / TIME | ID NUMBER | NAME

REASON VEHICLE TOWED: **CRASH**

	MAKE	YEAR	COLOR	UNIT NO.	VEHICLE IDENTIFICATION NO.	TAG NO.	STATE	EXP. DATE
POWER UNIT								
TRAILER 1								
TRAILER 2								

TOW

TOW SELECTION TYPE: **ROTATION WRECKER** | LOCATION VEHICLE INVENTORIED / TOWED FROM: **NB INTERSTATE 95 (STATE ROAD 9)**

TOWING SERVICE: **PRIORITY TOWING** | DAY TELEPHONE: **561-533-5573** | NIGHT TELEPHONE

ADDRESS: **214 SE 7TH AVE BOYNTON BEACH, FL** | CITY / STATE / ZIP

STORAGE

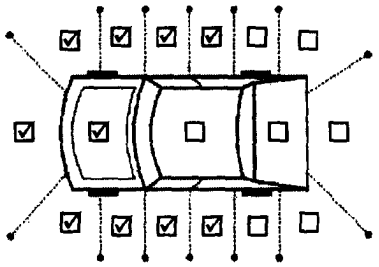
VEHICLE STORAGE LOCATION: **PRIORITY TOWING** | DAY TELEPHONE: **561-533-5573** | NIGHT TELEPHONE

ADDRESS: **214 SE 7TH AVE BOYNTON BEACH, FL** | CITY / STATE / ZIP

VEHICLE INVENTORY & DAMAGE

- ☐ CELLULAR PHONE (MAKE/MODEL)
- ☐ RADAR DETECTOR (MAKE/MODEL)
- ☐ STEREO SYSTEM (RADIO / CD / TAPE, ETC)
- ☐ CB RADIO / 2 WAY RADIO
- ☐ TRAILER HITCH
- ☐ WHEEL COVERS QTY
- ☐ CUSTOM RIMS QTY
- NUMBER OF TIRES (INCLUDE SPARE)
- ☐ TRUNK ACCESSIBLE
- ☐ REAR SPOILER

INDICATE VEHICLE DAMAGE



MARK AREA OF DAMAGE
- ☐ UNDERCARRIAGE
- ☐ OVERTURN
- ☐ WINDSHIELD
- ☐ FIRE
- ☐ TRAILER

☐ NO DAMAGE

PROPERTY IN VEHICLE

OWNER PRESENT AND BOYFRIEND REMOVED VALUABLES

OFFICER COMMENTS

CRASH REPORT 26311925-01 DRIVER ARRESRED REF S1

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NO HOLD - MAY BE RELEASED

WE THE UNDERSIGNED OFFICER(S) AND TOW DRIVER, HEREBY CERTIFY THAT THE ABOVE LISTED JOINT PROPERTY INVENTORY IS CORRECT TO THE BEST OF OUR KNOWLEDGE.

SIGNATURE OF TOW TRUCK DRIVER | DATE | SIGNATURE OF OFFICER

PRINTED NAME OF TOW TRUCK DRIVER

RANK AND NAME OF OFFICER: **TPR O.HERRERA** | ORG / UNIT: **L** | I.D. NUMBER: **5279**

WITNESS INTERVIEW / STATEMENT

Name: Scott Anders Date/Time: 06/23/24

Address: 135 NE 5th Ave, Boynton Beach, FL 33435

Place of Employment: Publix, Warehouse

Phone Number(s): Home: (561) 445-9424 Work: (561) 369-7900

Interview Conducted By: Trooper Herrera

Identification Produced:

I was driving North bound in the number 1 lane when I notice a SUV coming at me coming from the number 6 lane driving the wrong way.

After the crash, I do notice a white truck driving

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Sworn to me this _____ day of _____ ,

I swear/affirm that this statement is true and correct

(Law Enforcement Officer Signature)
Section 117.10 Florida Statute

(Witness Signature)

(Print Name / PIN)

Statement Page _____ of _____

SCANNED
JUN 24 2024

Case Number: _____ Page _____

HSMV 62705 (Rev. 02/22)

WITNESS INTERVIEW / STATEMENT

Name: Michael P Cory Date/Time: 6/23/24 2304

Address: 860 Pioneer Way

Place of Employment: Oolak Property Management

Phone Number(s): Home: 704-975-9657 Work:

Interview Conducted By:

Identification Produced: FL C600555910920

I witnessed what appeared to be a head on collision between two vehicles on 195 NB on 6/23/24 at approx 2:15 am. After stopping my vehicle to alert oncoming traffic of the collision, I made contact with occupants to assess their conditions/injuries. the female driver of the kia Soul (blk/grey) seemed disoriented, confused and completely unaware she had just been involved in a serious accident. She was physically uninjured, but her behavior and mannerisms led me to believe she was impaired and/or not fit to safely operate a motor vehicle to my untrained eye. occupants of the blue toyota seemed to be of sound mind & body, but a male reported minor injury

Sworn to me this _____ day of _____,

_____

(Law Enforcement Officer Signature)
Section 117.10 Florida Statute

I swear/affirm that this statement is true and correct

(Witness Signature)

_____

(Print Name / PIN)

Statement Page _____ of _____

Case Number: _____ Page _____

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JUN 24 2024

WITNESS INTERVIEW / STATEMENT

Name: Tiffany Colon Date/Time: 6/23/24

Address: 1981 NE 6th St Boynton Beach FL, 33435

Place of Employment: NEW YORK PRIME

Phone Number(s): Home: 561 400 6413 Work:

Interview Conducted By:

Identification Produced: DL

was heading north on 95. after passing the Boynton beach exit I saw a SUV collide with a sedan on its left side and spin around. Air bags deployed and the occupants of the sedan exited their vehicle. Female in the SUV stayed in hers. An officer arrived on scene within 5 minutes

Sworn to me this _____ day of _____ ,

(Law Enforcement Officer Signature)
Section 117.10 Florida Statute

Tiffany Colon
(Print Name / PIN)

I swear/affirm that this statement is true and correct

(Witness Signature)

Statement Page _____ of _____

Case Number: _____ Page _____

HSMV 62705 (Rev. 02/22)

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

PBSO CASE # 24-074374 PBSO ZONE 6-12

AGENCY CASE # FHP24ON0314242 CRASH CASE # 26311925

TIME OF STOP/CRASH 02:25 DATE 06/23/2024 DAY Sunday

SUBJECT'S NAME RIDOUT (LAST) LISA (FIRST) DEANNE (MID)

DOB 4/27/19090 HGT 506 WGT 110 RACE W SEX F

LOCATION NB I95 (SR9) JNOF BOYNTON BEACH BLVD (SR804)

ARRESTING OFFICER'S NAME & ID JONATHAN ZIMMERMAN 5061 FHP/ TROOP L (AGENCY)

NOTIFIED BY COMMO Yes

BREATH RESULTS:

1) .252
2) 254
3) N/A
4) N/A

ARRIVAL AT FACILITY 03:30

ARREST TIME 02:58

M. GONZALEZ 40577
BAT TECH. OFFICER NAME & ID

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SCANNED
JUN 24 2024

SUBJECT: RIDOUT LISA D 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) READ ON CAMERA

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

SUBJECT: RIDOUT, LISA D 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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SCANNED
JUN 24 2024

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CSO
Instrument Serial Number: 80-006477 Software: 8100.27
Date of Test: 06/23/2024

Date of Last Agency Inspection: 06/14/2024
Observation Period Began: 03:30
Subject's Name: LISA D RIDOUT DOB: 04/27/1990 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	03:55
Air Blank	0.000	03:56
Control Test	0.079	03:56
Air Blank	0.000	03:57
Subject Sample #1	0.252	03:58
Air Blank	0.000	03:59
Air Blank	0.000	04:00
Subject Sample #2	0.254	04:01
Air Blank	0.000	04:02
Control Test	0.077	04:02
Air Blank	0.000	04:03
Diagnostics Check	OK	04:03

Cylinder Lot: 14323080A3
Exp: 09/05/2025

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 MADELIN GONZALEZ, 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: _____ Date: 06·23·24
Signature

Sworn to (or affirmed) before me this 23 day of June, 2024

_____ TPR. J ZIMMERMAH
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

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JUN 24 2024

TESTING FACILITY TASK REPORT

AGENCY: FHPL

SUBJECT: RIDOUT , LISA D

CASE NUMBER: 24-074374

DATE: Jun 23, 2024

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 03:53

ENDING TIME: 04:05

BREATH TESTS RESULTS: 1) .252 TIME 03:58 A.M. ☒ P.M. ☐ 2) .254 TIME 04:01 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: SLOW, LOW

ATTITUDE: CALM, QUIET

CLOTHING: BLACK PANTS, BLACK SHIRT, BLACK SHOES

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

v

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 03:30 HRS.

SUBJECT: AGREED TO TAKE TEST.

A/O: READ RIGHTS
SUBJECT: ACKNOWLEDGE WITH A HEAD NOD SHE UNDERSTOOD RIGHTS

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

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

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SCANNED
JUN 24 2024

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	
	☐	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: 2024017036	**Date:** 6/24/2024
	Specialist Name/ID#: ANGELA PINKNEY/7796

SCANNED
JUN 24 2024