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

0571080 26CT11690 ASB

ARREST / NOTICE TO APPEAR

Check if Supplement is Attached

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

1

Juvenile

220

ADMINISTRATIVE

OBTS Number

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
0500200	Boca Raton Police Department	32 2026-009282

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 UNARMED

Multiple Clearance Indicator

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
801 W YAMATO RD, BOCA RATON, FL 33431	801 W YAMATO RD, BOCA RATON, FL 33431

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
09/09/2026	02:24	09/09/2026	03:10	09/09/2026	03:10	PRIORITY TOWING

DEFENDANT

Name (Last, First, Middle): CUESTA, LUISA ALEXANDRA

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

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	02/25/1967	5'06	180	BROWN	BROWN	LIGHT	Medium

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

Marital Status: D — Religion: CATHOLIC

Indication of: Alcohol Influence Y ☒ N ☐ Unk ☐ — Drug Influence Y ☒ N ☐ Unk ☐

Local Address (Street, Apt. Number) (City) (State) (Zip): 7326 SW 90TH LOOP 105, OCALA, FL 34476

Mobile Phone: (954) 205-5445

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

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 7326 SW 90TH LOOP 105, OCALA, FL 34476

Phone: (954) 205-5445

Address Source: ARRESTEE

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

Phone:

Occupation: Caregiver

D/L Number, State: C200573774000 / FL

Soc. Sec. Number: [redacted]

INS Number:

Place of Birth (City, State): BOGOTA, Columbia

Citizenship: US

CO-DEF

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

11,000

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) 355-6511) 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: ☐ No N. N/A P. Possess — S. Sell B. Buy T. Traffic — R. Smuggle D. Deliver E. Use — K. Disperse/ 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 #
DUI	1	☐ Y ☒ N	316.193(1) A	

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

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

FILED PBC - GUN CLUB
'26 SEP 10 AM 9:14

NOTICE TO APPEAR

Location (Court, Room Number, Address): 200 W Atlantic Ave, Delray Beach, Fl 33444 DELRAY BEACH FL

Court Date and Time: Month October Day 13 Year 2026 Time 8:30 (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.

X [signature] 09/09/2026

Signature of Defendant (or Juvenile and Parent/Custodian) — 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 text message system if I choose. Signature

ADMIN

HOLD for Other Agency: N/A

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Signature of Arresting Officer: [signature] 938

Name of Arresting Officer (Print): TOMAZ, D.M. I.D. #: 938

Intake Deputy I.D. # Pouch #

Transporting Officer [signature] I.D. # 929 Agency: BRPD

Name Verification (Printed by Arrestee) (PRINT) X: Luisa Alexandra Cuesta 9/9/26

Witness here if subject signed with an "X".

PAGE 1 OF 1

PB80 #0140 REV. 10/22

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

TANCREDI

SEP 9 6:11

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PROBABLE CAUSE AFFIDAVIT

ADMIN

OBTS Number:

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

JUVENILE:

Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 2026-009282

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

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
CUESTA, LUISA ALEXANDRA		W	F	02/25/1967

CHARGES

Charge Description	Charge Description
316.193(1) DUI	

VICTIM

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

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source

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

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.

The Person taken into custody . . .

☐ committed the below acts in my presence.

☐ confessed to _____ admitting to the below facts.

☐ was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.

☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 9 day of September, 2026 at 02:15 (Specifically include facts constituting cause for arrest.)

On 09/09/2026 at approximately 0215 hours, I responded to 801 W Yamato Road in reference to a possible impaired driver. Upon my arrival at 0220 hours, I met with Officer Leonard.

According to Officer Leonard he was patrolling the parking lot and observed a 2024 white Volkswagen Tiguan bearing Florida tag Z285CW with the windows fogged up. The car was parked at a business that was closed with nobody else around. Upon making contact with the car, he observed a white female, later identified by her Florida Driver License as Luisa Cuesta, passed out in the driver's seat with the engine running. Officer Leonard stated once he was able to wake Cuesta, he could smell an odor of an unknown alcoholic beverage emanating from her breath as she spoke. He also observed two empty 187 milliliter plastic bottles of Sutter Home Pinot Grigio.

I then made contact with Cuesta. Cuesta stated that she had been sleeping in her car for a few hours with the engine running. Cuesta stated she drank the two bottles of Pinot Grigio a few hours before falling asleep in her car. Cuesta stated she was upset with her family and just wanted to get away from them for a few hours. I observed that Cuesta had glassy bloodshot eyes, and had an odor of an unknown alcoholic beverage emanating from her breath as she spoke. Cuesta also had trouble balancing while standing. I asked Cuesta if she was willing to perform standardized field sobriety tasks. Cuesta agreed. The exercises were performed on a flat and level surface. All directions were read from a preprinted card.

HGN: There was lack of smooth pursuit seen in both eyes. There was distinct and sustained nystagmus at maximum deviation in both eyes. Onset of nystagmus prior to 45 degrees was not seen. VGN was not seen.

Walk and Turn: Cuesta could not keep balance and maintain the instruction stance. Cuesta

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

CARUSO, MARK RICHARD
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

09/09/2026
DATE

938
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

TOMAZ, DANIEL MARTINS (938)
NAME OF OFFICER (PLEASE PRINT)

09/09/2026
DATE

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

ADMIN

OBTS Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2026-009282

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

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
CUESTA, LUISA ALEXANDRA		W	F	02/25/1967

PROBABLE CAUSE STATEMENT

kept stepping off the line and spread her feet to maintain her balance. Cuesta did not walk heel to toe several steps as seen by Officer Crawford`s arm gesture on video. Cuesta stepped off the line multiple times while walking as seen on video. Cuesta used her arms to balance while walking. Cuesta performed an improper turn because she started walking with her right foot instead of her left foot which caused her to end up pivoting on her right foot instead of her left foot.

One Leg Stand: Cuesta used her right foot which she dropped eight times during the exercise. Cuesta had a slight sway while performing the exercise. She also used her arms for balance by slightly raising them.

Romberg Counting: She was instructed to count from 25-75. She did not close her eyes as instructed. She exhibited a slight sway during the exercise.

Finger to Nose: She was instructed to raise her hand and touch the tip of her nose with her fingertip. However, when she was instructed to raise her right hand to touch the tip of her nose, she held her right hand up with her arm extended out from her body and her finger pointed out. She needed clarification on the instructions despite saying she understood them. She touched the top of her nose several times and the base of her nose several times instead of the tip as instructed as seen on video.

Based upon my investigation, I have probable cause to believe Luisa Cuesta did drive or was in actual physical control of a vehicle, while under the influence of alcoholic beverages or chemical substances as set forth in Florida Statute 877.111, or a controlled substance as set forth in Chapter 893 or any combination thereof, and was affected to the extent that her normal faculties were impaired; or while having a blood alcohol level of .08 or more grams of alcohol per 100 milliliters of blood or breath alcohol level of .08 or more grams of alcohol per 210 liters of breath, contrary to Florida Statute 316.193(1). At 0247 hours, I placed Luisa Cuesta under arrest for DUI.

I transported Cuesta to the Boca Raton Police Department for breath testing. Officer Harrison conducted the twenty-minute observation process. I requested Cuesta to provide a sample of her breath for breath testing, she agreed. At 0350 hours she provided a breath sample of .068g/210L and at 0353 hours she provided a breath sample of .058g/210L. Based upon her breath results and suspicion of drug use, I requested her to provide a sample of her urine, to which she agreed. At 0401 hours she provided a urine sample, which was later dropped into evidence. I advised Cuesta of her constitutional warnings to which she stated she understood and agreed to speak with me; see breath testing video for her answers. Cuesta was TOT PBCJ.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

CARUSO, MARK RICHARD
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

09/09/2026
DATE

938
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

TOMAZ, DANIEL MARTINS (938)
NAME OF OFFICER (PLEASE PRINT)

09/09/2026
DATE

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

26- 9282
1015: 0247
20mins: 0318
C 200 57377400 0
Cuesta, Luisa
2/25/67

DUI INFLUENCE REPORT

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BOCA RATON POLICE SERVICES DEPARTMENT
100 NW 2nd Avenue
Boca Raton, FL 33432

Revised: July 9, 2018

BOCA RATON POLICE SERVICES DEPARTMENT

DUI INFLUENCE REPORT – PART I

On the 9 day of September, 2026, at 0247 AM/PM:

Subject: Cuesta, Luisa A Case Number: 26-9282

PERSONAL CONTACT

Driving Pattern: _____

Observation of Driver: _____

Driver's Statement: _____ See PC

Odors: _____

GENERAL OBSERVATIONS

Speech: _____

Attitude: _____

Clothing: _____

Medical Problems: _____

Medications: _____

Other: _____

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Horizontal Gaze Nystagmus:

☐ Left eye does not follow smoothly
☐ Left eye jerks at 45 degrees angle or less
☐ Distinct jerking left eye maximum deviation
☐ Right eye does not follow smoothly
☐ Right eye jerks at 45 degrees angle or less
☐ Distinct jerking right eye maximum deviation

Can not do, Why? _____

Walk and turn: _____

Can not do, Why? _____

One leg stand: _____

Can not do, Why? _____

Finger to nose: _____

Can not do, Why? _____

Alphabet (speech pattern): _____

Can not do, Why? _____

Breath/Blood test results: _____

State of Florida, County of Palm Beach,
Sworn and subscribed before me this 9/9/26 (date) by Known.

_____ 9/9/26
Notary/Clerk of Court/ Officer (FSS 117.10) Date

_____ 938 Tomaz
Signature of Arresting Officer Name of Officer (print)

NOT A CERTIFIED COPY

ARRESTING OFFICER: Tomaz

Name: Harrison Phone # 561-368-6201 Work # _____

Address: 100 nw 2nd Ave, Boca Raton

Can testify to: BTO

Name: Crawford Phone # " Work # _____

Address: "

Can testify to: SFSTs

Name: Leonard Phone # " Work # _____

Address: "

Can testify to: SFSTs

Name: Ayala Phone # " Work # _____

Address: "

Can testify to: SFSTs

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

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-END OF PART ONE-

BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT – PART II

To be filled out at testing facility

Agency Case # 26- 9282

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is Wednesday (day), September (month), 9 (date), 2026 (year).

B. The time is now approximately 0345 (AM)/PM.

C. The following is in reference to case number 26- 9282.

D. Present at this time is Ofc. Tomaz & Ofc. Crawford of the Boca Raton Police Department. (Officer's Name)

E. Officer Tomaz, have you arrested Luisa Cuesta (Defendant's name) in violation of Florida State Statute 316.193?

F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida? Yes

G. Mr./Mrs./(Ms.) Cuesta, I am required to inform you these proceedings are being video recorded.

Operator Note: *Video record breath request, breath sample, and interview.*

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II. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.

Note: Read only the paragraph applicable to the type of test you are requesting.

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

B. 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.

C. I am now requesting that you submit to a lawful test of your **BLOOD** for the purpose of determining its alcohol content and the presence of chemical or controlled substances.

IMPLIED CONSENT WARNINGS

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. 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

Subject Signature: _____

Note: Also read for CDL holders:

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).

Note: After reading the implied consent warning, the arresting officer must request a breath sample again.

(IF REFUSAL THEN)

At this time Mr./Mrs./Ms. ____ has refused to submit to a breath test.

The date is _____ (month), _____ (day), _____ (year), and the time is _____AM/PM.

A refusal form will be completed by the arresting officer.

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BOCA RATON POLICE SERVICES DEPARTMENT

JUVENILE CONSTITUTIONAL WARNINGS

Rights of suspects prior to custodial questioning.
Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

(1) You have the right to remain silent and not answer any questions. *Tell me in your own words what you think this means.*
(You do not have to talk to me or answer any questions about this offense. You can be quiet if you want.)

(2) Any statement you make must be freely and voluntarily given. *Tell me in your own words what you think this means.*
(If you do talk to me it has to be because you want to and not because anyone is forcing you to speak.)

(3) You have a right to the presence and representation of a lawyer of your choice before you make any statement and during any questioning. *Tell me in your own words what you think this means.*
(You can talk to a lawyer before we ask you any questions and you can have him/her with you now, during our questioning.)

(4) If you cannot afford a lawyer, you are entitled to the presence and representation of a court appointed lawyer before you make any statement and during any questioning. *Tell me in your own words what you think this means*
(If you do not have money for a lawyer and you want one, a lawyer will be given to you for free.)

(5) If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent. *Tell me in your own words what you think this means.*
(If you decide to talk to me then change your mind, you can stop answering my questions at any time.)

(6) I can make no threats or promises to induce you to make a statement. This must be of your own free will. *Tell me in your own words what you think this means*
(I am not allowed to threaten you or make you any promises to get you to talk to me. If you decide to talk, it must be because you want to.)

(7) Any statement can be and will be used against you in a court of law. *Tell me in your own words what you think this means*
(Anything you say to me can and will be told to the judge or a jury in court. A judge is a person who decides if you have done something wrong. Sometimes a group of people called a jury decide this, but the Judge is the person who decides what punishment you get.)

(8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: _____ Date: _____ Time: _____

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BOCA RATON POLICE SERVICES DEPARTMENT

TESTING FACILITY TASK REPORT

SUBJECT: Cuesta, Luisa A.

CASE #: 26-9282 DATE: 9/9/26

BREATH TEST RESULTS

1) TIME _____ AM/PM 2) TIME _____ AM/PM

3) TIME _____ AM/PM 4) TIME _____ AM/PM

BREATH OPERATOR: Harrison

MAINTENANCE TECHNICIAN: Crawford

TESTING OFFICER'S OBSERVATIONS

SPEECH: _____

ATTITUDE: _____

CLOTHING: _____

MEDICAL CONDITION: _____

OTHER: _____

_____

COMMENTS: _____

_____

_____

_____

_____

_____

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Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

(1) You have the right to remain silent and not answer any questions.
(2) Any statement you make must be freely and voluntarily given.
(3) You have a right to the presence and representation 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 and representation of a court appointed lawyer before you make any statement 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 be and will be used against you in a court of law.
(8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: Redacted Date: _____ Time: _____

QUESTIONS AND ANSWERS

Were you operating a motor vehicle at the time of the accident/stop? _____

Where were you going? _____

What street or highway were you on? _____

Direction of travel? _____

Where did you start driving from? _____

What city (county) were you stopped in? _____

What time did you start? _____ AM/PM What time is it now? _____

What is today's date? _____ What day of the week is it? _____

When did you last eat? _____ What did you eat? _____

What have you been doing the past three hours prior to this stop/accident? _____

How much do you weigh? _____ Have you been drinking? _____ What were you drinking? _____
_____

How much? _____ Where? _____ With whom were you drinking? _____

When did you have your first drink? _____ AM/PM When did you stop drinking? _____AM/PM

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How did you consume your last two drinks? _____

Are you under the influence of alcohol now? ☐ Yes ☐ No

Can you feel the effects of alcohol? ☐ Yes ☐ No

Have you consumed alcohol since the accident? ☐ Yes ☐ No

Can you feel the effects of alcohol? ☐ Yes ☐ No

Have you consumed alcohol since the accident? ☐ Yes ☐ No How much? _____

What? _____ Where? _____

What line of work are you in? _____

When did you last work? _____

Do you have any physical defects or injuries? ☐ Yes ☐ No If yes, explain:

_____

Are you sick or injured? ☐ Yes ☐ No If yes, explain:

_____

Do you limp? ☐ Yes ☐ No Did you get a bump on the head? ☐ Yes ☐ No

Were you in an accident today? _____

Have you taken any drugs or smoked marijuana today? _____

What? _____ When? _____

Have you seen a doctor or dentist today? ☐ Yes ☐ No Who? _____

Are you taking any prescription medications? ☐ Yes ☐ No What? _____ When? _____

Do you have: Epilepsy? ☐ Yes ☐ No Inner ear trouble? ☐ Yes ☐ No

Glass eye? ☐ Yes ☐ No Ear infection? ☐ Yes ☐ No

False teeth? ☐ Yes ☐ No Diabetes? ☐ Yes ☐ No

Any problems not correctable by glasses or contact lenses? _____

Do you take insulin? ☐ Yes ☐ No If yes, when was your last injection? _____

Have you ever had a driver's license in any other state? _____

I am now ending this video recording. The time is now approximately _____ (AM)/PM.

The date is September (month), 9 (day), 2026 (year).

NOT A CERTIFIED COPY

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: BOCA RATON PD
Instrument Serial Number: 80-006622 Software: 8100.27
Date of Test: 09/09/2026

Date of Last Agency Inspection: 08/17/2026
Observation Period Began: 03:18
Subject's Name: LUISA A CUESTA DOB: 02/25/1967 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	03:48
Air Blank	0.000	03:48
Control Test	0.076	03:48
Air Blank	0.000	03:49
Subject Sample #1	0.068	03:50
Air Blank	0.000	03:51
Air Blank	0.000	03:53
Subject Sample #2	0.058	03:53
Air Blank	0.000	03:54
Control Test	0.075	03:54
Air Blank	0.000	03:55
Diagnostics Check	OK	03:55

Cylinder Lot: 08425080A2
Exp: 05/05/2027

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 DANIELLE M HARRISON, 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: 9/9/26
Signature

Sworn to (or affirmed) before me this 09 day of September, 2026

_____ Daniel Tonac
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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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	
	☐	119.071(2)(j)1.e.	Name of a law enforcement officer who, in the course of their duties became a victim, is confidential and exempt for 72 hours after the incident. This information is exempt for an additional 60 days after the initial 72 hours	
Public Info. Exemptions	☐	119.071(2)(j)1.b.(I)	Identity, home or employment phone number, home or employment address, or any other information that could be sued to locate or harass the victim	
	☐	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: 2026024683	**Date:** 9/10/2026
	Specialist Name/ID#: Howardt/7185