23 CT - 13893 AWB

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number | Juvenile: 1 | N

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number
FLO 5 0 2 6 0 0	PALM BEACH GARDENS POLICE DEPARTMENT	78 - 23003970

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

Weapon Seized / Type: 2 (1. Yes 2. No) | Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): Gardens East Dr./ E Tall Oaks Dr. PALM BEACH GARDENS, FL, 33410

Location of Offense (Business Name, Address): Burns Rd./ Gardens East Dr. PALM BEACH GARDENS, FL, 33410

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
08/06/2023	04:15					KAUFF'S TOWING AND RECOVERY 4701 EAST AVENUE, WPB, FL 33407

DEFENDANT

Name (Last, First, Middle): McGuckin, Mackenzie, K

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

Race (W - White I - American Indian B - Black 0- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	09/04/1993	504	150	Brown	Brown	Light	Small

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description): None

Marital Status: Single | Religion: NONE | Indication of: Alcohol Influence Y ☑ N ☐ Unk. ☐ | Drug Influence Y ☐ N ☑ Unk. ☐

Local Address (Street, Apt. Number) (City) (State) (Zip): 12701 S Gardens Dr. Apt.102 Palm Beach Gardens, FL 33418 | Phone: (609) 437-6274 | Residence Type: (1. City 2. County 3. Florida 4. Out of State) 1

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 12701 S Gardens Dr. Apt.102 Palm Beach Gardens, FL 33418 | Phone: (609) 437-6274 | Address Source: FCIC/NCIC

Business Address (Name, Street) (City) (State) (Zip): Loggerhead Marina 2700 Donald Ross Rd. Palm Beach Gardens, FL 33410 | Phone: | Occupation: General Manager

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
M225551938240 FL	[redacted]		Voorhees, NJ	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

Notified by: (Name) | Date | Time | Juvenile Disposition 1. Handled/ processed within Dept. and Released. 2. TOT HRS / CYS 3. Incarcerated

Released To: (Name) | Relationship | Date | Time

The above address provided by ☐ defendant and / or ☐ defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2528) 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. Synthetics U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DUI - Normal Faculties Impaired	1	☐Y ☑N	316.193(1)(A)	

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

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

NOTICE TO APPEAR

Location (Court, Room Number, Address): NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700

Court Date and Time: Month September Day 6 Year 2023 Time 10:00 AM ☒ PM

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: 08/06/2023

ADMIN

HOLD for other Agency Name: | Signature of Arresting Officer | Name Verification (Printed by Arrestee)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other: | Name of Arresting Officer (Print): Ofc. James Lovett | I.D. #: 523 | (PRINT)

Intox. Report | I.D. # | Pouch # | Transporting Officer: OFC. James Lovett | ID #: 523 | Agency: PBGPD | Witness here if subject signed with an -X"

PAGE 1 OF 1

NOT A CERTIFIED COPY

T# 0542414

SCANNED AUG 07 2023
FILED PBC - GUN CLUB
'23 AUG 7 AM 7:53

PROBABLE CAUSE AFFIDAVIT

OBTS Number:

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

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FL FL0502600	Palm Beach Gardens Police Department	7 | 8 23-003970

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

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
MCGUCKIN, MACKENZIE KATHERINE		W	F	09/04/1993

CHARGES

Charge Description	Charge Description
316.193(1)(A) DUI - NORMAL FACULTIES IMPAIRED	
Charge Description	Charge Description

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 6 day of August, 2023 at 05:37 (Specifically include facts constituting cause for arrest.)

On August 6th, 2023, at approximately 03:49 a.m., I initiated a traffic stop on a white Ford SUV, bearing FL tag 68BQWW, at the intersection of Burns Rd. and Gardens East Dr. in the City of Palm Beach Gardens, FL. Prior to the stop, I observed the aforementioned vehicle travelling northbound on the 10000 block of SR 811 in the right lane. The vehicle veered left, crossing over the center dividing line, approximately half the width of the vehicle, twice. The vehicle then made a right turn onto Burns Rd. and at the intersection of Burns Rd. and Gardens East Dr., the vehicle made a left turn onto Gardens East Dr. from the through lane when there was a designated left turn lane. While travelling northbound on Gardens East Dr., the vehicle veered right off the roadway, into the grass, three times all while I had my emergency lights activated, and finally came to a stop at the intersection of Gardens East Dr. and E Tall Oaks Dr.

I made contact with the driver and sole occupant of the vehicle Mackenzie K. McGuckin, who verbally identified herself. During my contact with McGuckin, I observed her movements to be slow and lethargic, her eyelids to be drooping, her eyes to be bloodshot and glassy, her speech to be slurred, and I could detect the odor of an unknown alcoholic beverage emitting from her breath at a conversational distance. Also, during this contact McGuckin stated she was coming from Pirates Well (a local bar) where she had one "Loyal" drink that she described as a malt beverage or a seltzer and "a few Miller Lites." I then asked McGuckin to exit the vehicle so I could conduct a DUI investigation and she complied.

During the Pen Light Task, McGuckin stated she understood all instructions. During the task, I observed lack of smooth pursuit in both eyes, distinct and sustained nystagmus in both eyes at maximum deviation, onset nystagmus prior to 45 degrees in both eyes, and vertical nystagmus. Also, during the task she had to be reminded to follow the stimulus and not move her head.

NOT A CERTIFIED COPY

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

L. O'Neal

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)

08/06/2023
DATE

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

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

LOVETT, JAMES (523)
NAME OF OFFICER (PLEASE PRINT)

08/06/2023
DATE

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

SCANNED
AUG 07 2023

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 FL0502600	Palm Beach Gardens Police Department	7 | 8 | 23-003970

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
MCGUCKIN, MACKENZIE KATHERINE		W	F	09/04/1993

PROBABLE CAUSE STATEMENT

During the Walk and Turn Task, McGuckin stated that she understood all the instructions. During the instruction portion of the task, McGuckin broke her feet apart to maintain balance and started too soon. During her first sequence of steps, McGuckin missed heel to toe on steps 4 and 6. She then stopped on step 9 and stated that she did not know how to turn. She then took and counted step 10 and made an improper turn. During her second sequence of steps, she took 11 steps, missed heel to toe on steps 9, 10, and 11, and used her arms for balance,

During the One Leg Stand Task, Mc Guckin stated she understood all the instructions. During the task, she used her arms for balance and placed her foot down twice.

At this time, I placed McGuckin under arrest for Driving Under the Influence. I then transported her to the Breath Alcohol Testing Center (BAT) located at the Palm Beach County Jail. At the BAT, I conducted a 20-minute observation period in which I ensured McGuckin did not ingest anything by mouth and did not regurgitate. At the conclusion of this period, I requested she submit to an approved test of her breath to determine the alcohol content. McGuckin refused, was read implied consent sent to which she stated she understood, and subsequently refused to provide a breath sample.

Based on my investigation, I find probable cause to charge McGuckin wit DUI - Normal Faculties Impaired pursuant to F.S.S. 316.193(1)(A). There is nothing further to report from this officer. My body-worn camera was utilized throughout the duration of this event.

NOT A CERTIFIED COPY

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER PER F.S.S. 117.10

08/06/2023
DATE

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

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

LOVETT, JAMES (523)
NAME OF OFFICER (PLEASE PRINT)

08/06/2023
DATE

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

SCANNED
AUG 07 2023

23003970

DUI WITNESS LIST

Arresting Officer: Ofc. James Lovett 523 Email: @pbgfl.com
Agency Address: 10500 N Military Trail, Palm Beach Gardens, FL 33410 Phone: (561) 799-4445
Can Testify To: Facts of Case

Backup Officers: Ofc. Jason Hennessy (#409) and Ofc. Quinton Speed (#569)
Agency Address: 10500 N Military Trail, Palm Beach Gardens, FL 33410 Phone: (561) 799-4445
Can Testify To: Scene Safety

Crash Investigator: _____ Email: _____
Agency Address: _____ Phone: -

Breathalyzer Technician: O'neal ID: 6212 Agency: PBSO

DRE: _____ ID# _____ Agency Case #: _____
Agency Address: _____ Phone: _____ Email: _____

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ ☐ Wheel Witness

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SCANNED
AUG 07 2023

PALM BEACH GARDENS POLICE DEPARTMENT
DUI TESTING FACILITY INFORMATION SHEET

PBSO Case #: 23-0966944 PBSO Zone: 3-13

Agency Case #: 23003970 Crash Case #:

Incident Information:

Time of Stop/Crash: 03:49 Date of Incident: 08/06/2023 Day: Sunday

Location of Incident: Burns Rd./ Gardens East Dr. PALM BEACH GARDENS, FL, 33410

Arrest Information:

Time of Arrest: 04:15 Date of Arrest: 08/06/2023 Day: Sunday

Location of Arrest: Gardens East Dr./ E Tall Oaks Dr. PALM BEACH GARDENS, FL, 33410

Subject's Name: (L) McGluckin (McGuckin) (F) Mackenzie (M) K

DOB: 09/04/1993 Race: W Sex: F Height: 504 Weight: 150 Hair Brown Eye Brown

Address: 12701 S Gardens Dr. Apt.102 Palm Beach Gardens, FL 33418 Phone: (609) 437-6274

Arresting Officer's Name: Ofc. James Lovett ID#: 523

Agency: PBGPD Division: ROAD PATROL

REFUSED

Breath Results

1) R at 05:08 hrs.
2) _____ at _____ hrs.
3) _____ at _____ hrs.
4) _____ at _____ hrs.

---BAT Use---

BAT Notified:	YES
Arrival Time at BAT:	04:37
Subject Arrest Time:	04:15

Breath Test Operator: O'neal 6212
PBSO

NOT A CERTIFIED COPY

SCANNED
AUG 07 2023

TESTING FACILITY TASK REPORT

AGENCY: PBG OFC. LOVETT #523

SUBJECT: MCGUCKIN, MACKENZIE K.

CASE NUMBER: 23-096694

DATE: 08-06-23

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 05:00 HRS

ENDING TIME: 05:09 HRS

REFUSED

BREATH TESTS RESULTS: 1) R TIME 05:08 A.M. ☒ P.M. ☐ 2) TIME 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, PRONOUNCED

ATTITUDE: EMOTIONAL, CRYING, UPSET, COOPERATIVE, CONFUSED

CLOTHING: SHIRT- KHAKI SHORTS- BLACK

MEDICAL CONDITIONS: BACK PROBLEMS

MEDICATIONS: SEVERAL MEDICATIONS

OTHER:

EYES:VERY RED, GLASSY, WATERY FROM CRYING

COMMENTS:

20 MIN. OBSERVATION CONDUCTED BY A/O LOVETT #523

A/O REQUESTED THE BREATH TEST.
D REFUSED THE BREATH REQUEST.
A/O READ THE IMPLIED CONSENT ON CAMERA TO THE D. (SEVERAL TIMES)
I/C BROKEN DOWN TO THE D.
D EVENTUALLY STILL REFUSED THE BREATH REQUEST AFTER THE I/C WAS READ TO HER.
C/W READ ON CAMERA.
D REFUSED THE Q&A.

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SCANNED
AUG 07 2023

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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SCANNED
AUG 07 2023

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

SCANNED
AUG 07 2023

23003970

STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST

I, Ofc. James Lovett, a duly certified Law Enforcement or Correctional Officer, am a member of PALM BEACH GARDENS POLICE DEPARTMENT, and I do swear or affirm that on or about the 6 day of August, 2023, at 04:15 ☐P.M. ☑A.M.

(Name of Officer reading Implied Consent Warning)

(Name of Law Enforcement Agency)

DRIVER Mackenzie (FIRST NAME) K (MIDDLE OR MAIDEN NAME) McGuckin (LAST NAME),

DL # M225551938240, state of FL, was placed under lawful arrest for the offense of DUI - Normal Faculties Impaired by Ofc. James Lovett (Name of Arresting Officer) and issued citation # AHU7M7E.

That on or about the 6 day of August, 2023, at 05:08 ☐P.M. ☑A.M. 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 Correctional Officer

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

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

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this 06 day of August, 2023 by Ofc. James Lovett, who is personally known to me or who has produced _____ as identification.

Notary Public S. O'Neal

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.

NOT A CERTIFIED COPY

EFFECTIVE OCTOBER 1, 2021

SCANNED
AUG 07 2023

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: 2023020376	**Date:** 8/7/2023
	Specialist Name/ID: R.Castro/40259

SCANNED
AUG 07 2023