26CT 647GASB # 0568037 #3125

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

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 ☐

ADMINISTRATIVE

OBTS Number

Agency ORI Number: 0500400
Agency Name: Delray Beach Police Department
Agency Report Number (N.T.A.'s only): 40 26-006214

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: 3

Location of Arrest (Including Name of Business): I 95/W ATLANTIC AVE DELRAY BEACH FL 3344 4
Location of Offense (Business Name, Address): I 95/W ATLANTIC AVE, DELRAY BEACH, FL 33444

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
05/23/2026	02:05	05/23/2026	02:15			

DEFENDANT

Name (Last, First, Middle): MAGUIRE, MATTHEW RYAN PATRICK
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	M	04/10/1988	6'00	200	Brown	Brown	Fair	MEDIUM

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description):
Marital Status: M
Religion: Not Indicated
Indication of: Alcohol Influence Y ☒ N ☐ Unk ☐ ; Drug Influence Y ☒ N ☐ Unk ☐

Local Address (Street, Apt. Number) (City) (State) (Zip): 2530 NW 71ST ST, BOCA RATON, FL 33496
Mobile Phone:
Residence Type: 1. City 2. County 3. Florida 4. Out of State: C
Permanent Address (Street, Apt. Number) (City) (State) (Zip): 2530 NW 71ST ST, BOCA RATON, FL 33496
Phone:
Address Source: Verbal/ID
Business Address (Name, Street) (City) (State) (Zip):
Phone:
Occupation:

D/L Number, State: M639511335000 / FL
Soc. Sec. Number: [redacted]
INS Number:
Place of Birth (City, State): Greenbrae, CA
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)
(1) 1,000
Residence Phone:
Address (Street, Apt. Number) (City) (State) (Zip)
(2) 250
Business Phone:
Notified by: (Name) Date Time
(3) 250
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 #	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
DUI BREATH ALCOHOL .08 OR MORE PER 210L	1	☐ Y ☒ N	316.193(1)(C)			N	/			
REFUSAL TO SUMIT TO BAL TEST	1	☐ Y ☒ N	316.1939(1)(b)			N	/			
REFUSE TO ACCEPT/SIGN CITATION	1	☐ Y ☒ N	318.14(3)			N	/			
		☐ Y ☐ N								

NOTICE TO APPEAR

Location (Court, Room Number, Address): 200 W Atlantic Ave DELRAY BEACH
Court Date and Time: Month June Day 15 Year 2026 Time 8:30 (A.M.) P.M.

FILED PBC - GUN CLUB
'26 MAY 24 AM 10:27

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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

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
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other
Intake Deputy I.D. # Pouch #
CJ MENDEZ 7206

Signature of Arresting Officer: 1314
Name of Arresting Officer (Print): LEONE, KRISTINA I.D. # 1314
Transporting Officer: LEONE I.D. # 1314 Agency DBPD

Name Verification (Printed by Arrestee) (PRINT): MAY 23 5:29
Witness here if subject signed with an "X":

PAGE 1 OF 1

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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 0500400	DELRAY BEACH POLICE DEPARTMENT	4 0 26-006214

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
MAGUIRE, MATTHEW RYAN PATRICK		W	M	04/10/1986

CHARGES

Charge Description	Charge Description
316.193(1)(C) DUI BREATH ALCOHOL .08 OR MORE PER 210L	316.1939(1) REFUSAL TO SUMIT TO BAL TEST
318.14(3) REFUSE TO ACCEPT/SIGN CITATION	

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 reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.

The Person taken into custody . .

☒ committed the below acts in my presence.

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

☐ confessed to _____ admitting to the below facts.

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

On the 23 day of May, 2026 at 02:35 (Specifically include facts constituting cause for arrest.)

The following incident occurred within the City of Delray Beach, Palm Beach County Florida.

On 05/23/2026 at approximately 0023 hrs Delray Beach Dispatch received a call of a white male stopped in traffic, not moving, and appeared to be passed out at I95/W Atlantic Ave. The vehicle was a white BMW bearing FL tag 71FPBR.

Upon arrival, I made contact with the vehicle and confirmed that there was a male not responding. I knocked on the driver side window multiple times and used my ASP to knock as well with no response. Sgt. Kinney responded and used his ASP to break the from passenger side window. Due to the glass of the window shattering, the male started to shake his head but still was not fully up. After a few more seconds of the window being shattered, the male woke up slowly. He was advised to put the car in park, lower the window, and unlock the doors. The male was escorted out of his vehicle and onto the sidewalk just south of the initial stop. Maguire was slow to move and unstable when walking. The male provided his Driver`s License in which he was identified as Matthew Maguire.

Delray Beach Fire Department also responded to the scene and evaluated Maguire. Maguire`s vitals appeared to be okay but did have an elevated heart rate. Maguire refused any further medical assistance. Maguire also stated that he has no medical issues and take no medication.

While speaking with Maguire, I noticed his eyes were red and glossy. I also smelt an odor of alcohol in his breath. Maguire stated that he went out to dinner at Buccan in West Palm Beach where he had a couple glasses of wine. When asked demographic questions, Maguire did not recite his correct address and paused before answering each. Maguire stated he was in Boca Raton on his way home. Maguire did not recall any moments prior to

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

S. O'Neal

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.

05-23-26

DATE

SHARI L. O'NEAL MY COMMISSION # HH 512128 EXPIRES: June 25, 2028

1314

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

LEONE, KRISTINA (1314)

NAME OF OFFICER (PLEASE PRINT)

05/23/2026

DATE

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

ADMIN

OBTS Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT 4	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 0500400	DELRAY BEACH POLICE DEPARTMENT	4 0 26-006214

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
MAGUIRE, MATTHEW RYAN PATRICK		W	M	04/10/1986

PROBABLE CAUSE STATEMENT

this incident and repeatedly asked officers what happened and if everything/one was okay.

Based on my observations and the facts regarding this case, I believed Matthew Maguire to be driving under the influence of alcohol. I asked Maguire if he would consent to conduct Field Sobriety Tasks to dispel my belief in which he refused twice. Maguire asked what his other option was and I advised him of his Taylor Warnings in which state if he does not consent, I am going to make my arrest based off my observations. Maguire still refused and was placed in custody. Maguire was searched and then placed in my patrol vehicle and transported to the BAT.

While at the BAT, Maguire was asked to provide a breath sample in which he refused. Maguire was read all required documentation and refused to answer any further questions.

Based on the following, there is probable cause to arrest the defendant MATTHEW MAGUIRE with DUI BREATH ALCOHOL .08 OR MORE PER pursuant to F.S.S. 316.193(1)(C) (ref citation AMPRFDE), REFUSAL TO SUMIT TO BAL TEST pursuant to F.S.S. 316.1939(1) (ref citation AMPRFEE), and REFUSE TO ACCEPT/SIGN CITATION pursuant to F.S.S. 318.14(3) (ref citation AMPRFFE).

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. [illegible]10)

05-23-26
DATE

SHARI L. O'NEAL
MY COMMISSION # HH 512128
EXPIRES: June 25, 2028

1314
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

LEONE, KRISTINA (1314)
NAME OF OFFICER (PLEASE PRINT)

05/23/2026
DATE

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

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 23 DAY OF May, 2026 AT 12:23 am
IN THE CITY OF DELRAY BEACH, COUNTY OF PALM BEACH, STATE OF FLORIDA

Case No: 26-006214 **Defendant:** MAGUIRE, MATTHEW RYAN PATRICK
Agency: Delray Beach Police **Arresting Ofc:** Ofc. Leone

PERSONAL CONTACT/DRIVING PATTEDRIVER:

On 05/23/2026 at approximately 0023 hrs Delray Beach Dispatch received a call of a white male stopped in traffic, not moving, and appeared to be passed out at I95/W Atlantic Ave. The vehicle was a white BMW bearing FL tag 71FPBR.

Upon arrival, I made contact with the vehicle and confirmed that there was a male not responding. I knocked on the driver side window multiple times and used my ASP to knock as well with no response. Sgt. Kinney responded and used his ASP to break the from passenger side window. Due to the glass of the window shattering, the male started to shake his head but still was not fully up. After a few more seconds of the window being shattered, the male woke up slowly. He was advised to put the car in park, lower the window, and unlock the doors. The male was escorted out of his vehicle and onto the sidewalk just south of the initial stop. Maguire was slow to move and unstable when walking. The male provided his Driver's License in which he was identified as Matthew Maguire.

Delray Beach Fire Department also responded to the scene and evaluated Maguire. Maguire's vitals appeared to be okay but did have an elevated heart rate. Maguire refused any further medical assistance. Maguire also stated that he has no medical issues and take no medication.

While speaking with Maguire, I noticed his eyes were red and glossy. I also smelt an odor of alcohol in his breath. Maguire stated that he went out to dinner at Buccan in West Palm Beach where he had a couple glasses of wine. When asked demographic questions, Maguire did not recite his correct address and paused before answering each. Maguire stated he was in Boca Raton on his way home. Maguire did not recall any moments prior to this incident and repeatedly asked officers what happened and if everything/one was okay.

Based on my observations and the facts regarding this case, I believed Matthew Maguire to be driving under the influence of alcohol. I asked Maguire if he would consent to conduct Field Sobriety Tasks to dispel my belief in which he refused twice. Maguire asked what his other option was and I advised him of his Taylor Warnings in which state if he does not consent, I am going to make my arrest based off my observations. Maguire still refused and was placed in custody. Maguire was searched and then placed in my patrol vehicle and transported to the BAT.

While at the BAT, Maguire was asked to provide a breath sample in which he refused. Maguire was read all required documentation and refused to answer any further questions.

NOT A CERTIFIED COPY

The foregoing instrument was sworn to before me this 23rd day of May, 2026
by Officer Ofc. Leone

1314
Arresting Officer

Notary/Police Officer (FSS 117.10)

SHARI L. O'NEAL
MY COMMISSION # HH 512128
EXPIRES: June 25, 2028

SUBJECT: MAGUIRE, MATTHEW RYAN PATRICK **CASE NUMBER** 26-006214

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- ☐ LT EYE-LACK OF SMOOTH PURSUIT
- ☐ RT EYE-LACK OF SMOOTH PURSUIT
- ☐ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- ☐ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- ☐ LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- ☐ RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:
Refused.

WALK & TURN:
Refused.

ONE LEG STAND:
Refused.

FINGER TO NOSE:
Refused.

ROMBERG ALPHABET:
Refused.

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

The foregoing instrument was sworn to before me this 23rd day of May, 2026
by Officer Ofc. Leone

1314
Arresting Officer

Notary/Police Officer (FSS 117.10)

SHARI L. O'NEAL
MY COMMISSION # HH 512128
EXPIRES: June 25, 2028

WITNESS LIST

Case No: 26-006214 Defendant: MAGUIRE, MATTHEW RYAN PATRIC

Arresting Officer: Ofc. Leone
Address: 300 W Atlantic Ave, Delray Beach, FL 33444
Phone Numbers: Home: 561-243-7800 Work: _____

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: _____

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TESTING FACILITY TASK REPORT

AGENCY: DBPD OFC. LEONE #1314

SUBJECT: MAGUIRE, MATTHEW R.P.

CASE NUMBER: 26-063057

DATE: 05-23-26

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 01:33 HRS

ENDING TIME: 01:37 HRS

BREATH TESTS RESULTS: 1) R TIME 01:36 A.M. ☒ P.M. ☐ 2) TIME A.M. ☐ P.M. ☐

REFUSED

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:

ATTITUDE: CALM, COOPERATIVE

CLOTHING: SHIRT- GRAY & BLACK PANTS- BLUE JEANS

MEDICAL CONDITIONS: ALLERGIC TO PENICILLIN

MEDICATIONS: NONE

OTHER:

EYES: RED, GLASSY
ODOR OF UNKNOWN ALCOHOLIC BEVERAGE.

COMMENTS:

20 MIN. OBSERVATION DONE BY A/O LEONE #1314

A/O REQUESTED THE BREATH TEST.

D REFUSED THE REQUEST.

A/O READ THE IMPLIED CONSENT ON CAMERA TO THE D.

D UNDERSTOOD THE I/C AS READ.

D STILL REFUSED THE REQUEST AFTER THE I/C WAS READ TO HIM.

C/W READ ON CAMERA TO THE D.

D REFUSED Q&A.

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

PBSO CASE #: 26-063057 **PBSO ZONE:** 4-12

AGENCY CASE #: 26-006214 **DHSMV CRASH #:**

TIME OF CRASH/STOP: 00:23 **DATE:** 05/23/2026 **DAY:** Saturday

DEFENDANT: MAGUIRE , MATTHEW RYAN PATE **RACE:** White **SEX:** Male

HGT: 6'00 **WGT:** 200Lbs **DOB:** 4/10/1986

LOCATION: I95/W Atlantic Ave, Delray Beach

ARRESTING OFC: Ofc. Leone **ID:** 1314 **AGENCY:** Delray Beach Police

DIVISION: Patrol

NOTIFIED BY COMM: No

ARRIVAL AT FACILITY: 0107

TIME OF ARREST: 00:46 HRS

DATE OF ARREST: 05/23/2026

BREATH RESULTS:

1.
2.
3.
4. REFUSED

TESTING OFC. ID: S. O'Neal 6212 **PBSO VIDEOTAPE #:**

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STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST

I, Ofc. Leone, a duly certified Law Enforcement or Correctional Officer, am a
(Name of Officer reading Implied Consent Warning)
member of Delray Beach Police, and I do swear
(Name of Law Enforcement Agency)
or affirm that on or about the 23 day of May, 2026, at 1246 ☐P.M. ☑A.M.
DRIVER Matthew (FIRST NAME) Ryan Patrick (MIDDLE OR MAIDEN NAME) Maguire (LAST NAME),
DL # M639511335000, state of Floricda, was placed under lawful arrest for
the offense of DUI by Ofc. Leone and
(Name of Arresting Officer)
issued citation # AMPRFDF.

That on or about the 23 day of May, 2026, at 0136 ☐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, and that he or she commits a misdemeanor of the second degree by so refusing. Additionally, 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 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, and that he or she commits a misdemeanor of the first degree by so refusing. Nonetheless, the driver refused to submit to the test requested.

13/4
Signature of Law Enforcement Officer or Correctional Officer

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

SHARI L. O'NEAL
MY COMMISSION # HH 512128
EXPIRES: June 25, 2028
(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this 23 day of May, 2026 by _____, 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.

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EFFECTIVE OCTOBER 1, 2025

PALM BEACH COUNTY
SHERIFF'S OFFICE
SHERIFF RIC L. BRADSHAW

DUI Breath Implied Consent

NOT APPLICABLE WITH VOLUNTARY CONSENT

DEFENDANT'S NAME: _____ CASE NO: _____

DATE OF ARREST: _____ TIME OF ARREST: _____

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

Will you take the test? YES_____ NO_____

NOTE: *READ ONLY IF THE ANSWER TO THE ABOVE IS "NO"*

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.

Do you understand what I have just read to you? YES_____ NO_____

Do you still refuse to submit to this test? YES_____ NO_____

NOTE: *IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER LICENSE (CDL), READ THE FOLLOWING, REGARDLESS OF WHETHER THE SUBJECT IS OPERATING A COMMERCIAL MOTOR VEHICLE (CMV)*

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).

Do you understand what I have just read to you? YES_____ NO_____

Do you still refuse to submit to this test? YES_____ NO_____

Date read: _____ Time read: _____ Location read: _____

LAW ENFORCEMENT OFFICER NAME (printed): _____ ID: _____

LAW ENFORCEMENT OFFICER SIGNATURE: _____

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

FORM #0126BR REV 09/25

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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: _____

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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	
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 110 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: 2026013574	**Date:** 5/24/2026
	Specialist Name/ID#: Alexandra Jones ID#38839