50-2026-CT-004317ASB
0566838

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

ARREST / NOTICE TO APPEAR

☐ Check if Supplement is Attached

2420

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

1

Juvenile ☐

ADMINISTRATIVE

OBTS Number

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
0500200	Boca Raton Police Department	32 2026-003642

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)
899 INDIAN RIVER ST/DADE AVE, BOCA RATON, FL 33431	1000 W GLADES RD, BOCA RATON, FL 33431

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
04/05/2026	23:45	04/05/2026	23:55	04/06/2026	01:07	899 INDIAN RIVER ST/DADE

DEFENDANT

Name (Last, First, Middle): WINNERLING, MCKENZIE ELLE

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	09/26/2006	5'09	110	GREEN	BROWN	LIGHT	Thin

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

Marital Status: S

Religion:

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

Local Address (Street, Apt. Number) (City) (State) (Zip): 921 INDIAN RIVER ST DORM 466, BOCA RATON, FL 33431

Mobile Phone: (732) 337-1328

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

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 921 INDIAN RIVER ST DORM 466, BOCA RATON, FL 33431

Phone:

Address Source: OFFENDER

Business Address (Name, Street) (City) (State) (Zip): TORTUGA BEACH COMPANY,

Phone:

Occupation: Coffee Barista

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
W45105366559066 / NJ	000-00-1098		MIAMI, FL, United States Of	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
				☐ 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/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	/	26-3642		

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): 200 W Atlantic Ave, Delray Beach, Fl 33444 DELRAY BEACH FL

Court Date and Time: Month May Day 11 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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian) Date Signed

FILED PBC - GUN CLUB - 7TH CRIM FLOOR 139

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

Signature of Arresting Officer 870

Name of Arresting Officer (Print): SANGER, M. I.D. #: 870

Name Verification (Printed by Arrestee) (PRINT)

Intake Deputy: W Hojda I.D. #: 7206 Pouch #

Transporting Officer: SHIVER I.D. #: 911 Agency: BRPD

Witness here if subject signed with an "X".

PAGE 1 OF 1

PBSO #0148 REV. 10/22

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

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PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE ☐

ADMIN

OBTS Number:

Agency ORI Number: **FL FL0500200**

Agency Name: **BOCA RATON POLICE DEPARTMENT**

Agency Report Number: **3 | 2 | 2026-003642**

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
WINNERLING, MCKENZIE ELLE		**W**	**F**	**09/26/2006**

CHARGES

Charge Description	Charge Description
316.193(1A) DUI	
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 **5** day of **April**, **2026** at **22:53** (Specifically include facts constituting cause for arrest.)

On April 5, 2026, I was traveling westbound on West Glades Rd. at approximately the 600 block when I observed a vehicle, later identified as a 2013 silver Cadillac sedan, in the middle lane a couple of vehicles back through my mirror, with its front passenger headlight out. After the light turned green, the vehicle did not immediately begin driving and eventually slowly crept forward until I got behind it. I then observed the vehicle fail to maintain a single lane of travel, crossing over the lane lines and entering the adjacent lane.

I initiated a traffic stop on the vehicle at approximately the 1000 block of West Glades Road by activating my overhead lights. The vehicle did not stop, despite having multiple opportunities to pull over. I then activated my siren and honked my air horn multiple times, but the vehicle still did not come to a stop. I continued following the vehicle until it eventually turned into a parking lot on the FAU campus known as Lot 21, where the vehicle came to a stop.

I made contact with the sole occupant of the vehicle, identified via a NJ probationary auto license as Mckenzie Winnerling.

FAU Police Officer Jennyfer Rene (ID 578) backed me up on the traffic stop and remained on scene until the stop was completed.

I asked Winnerling why she did not stop after I was behind her with my lights and siren activated, and she responded, "just at FAU, just at FAU location." I then advised Winnerling that she was being stopped for having her headlight out, to which she stated she was aware and was waiting for her grandfather to help her fix it. While speaking with Winnerling, I detected a strong odor of an alcoholic beverage coming from her person. I also observed that Winnerling was slurring her words, appeared disoriented, and had bloodshot, watery, and glassy eyes.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

KENISTON, ADAM CRAIG
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

04/05/2026
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

SANGER, MOOKIE (870)
NAME OF OFFICER (PLEASE PRINT)

04/05/2026
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 | 2026-003642

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
WINNERLING, MCKENZIE ELLE		W	F	09/26/2006

PROBABLE CAUSE STATEMENT

I requested Winnerling to step out of the vehicle. Winnerling then turned her vehicle on, even though I had previously instructed her to turn it off. I had to advise Winnerling again to turn off the vehicle and exit. Winnerling stumbled as she exited the vehicle and had to catch her balance.

I then conducted a DUI investigation in the parking lot, safely out of the roadway. I asked Winnerling several questions. When asked the approximate time, Winnerling stated it was 2200 hours; the actual time was 2240 hours. Winnerling stated she had not taken any legal or illegal drugs. She stated she consumed three "typical pours" of Pinot Grigio at The Standard Bar in Boca Raton, Florida. Winnerling stated the last time she ate was approximately 1500 hours and that she had lunch at her aunt's home in Miami, consisting of salad and ham. Winnerling stated she had vision in both eyes, did not have any physical or medical conditions, was not diagnosed with diabetes, and had no recent brain injuries.

I then conducted SFSTs. Winnerling displayed six out of six clues on the HGN test, as well as vertical nystagmus. She swayed and lost her balance at one point during the HGN. Winnerling displayed six out of eight clues on the walk-and-turn and four out of four clues on the one-leg stand.

Based on the totality of the circumstances and the information gathered, I placed Winnerling under arrest for DUI. I observed Winnerling to be in actual physical control of a vehicle within this state and believed she was affected to the extent that she had lost her normal faculties and was too impaired to operate a motor vehicle in an area where the public has access. Due to the above, Winnerling was in violation of F.S.S. 316.193(1)(a), DUI.

I transported Winnerling to BRPD's BAT facility, where she agreed to provide two breath samples: 0.222 at 2354 hours and 0.205 at 2357 hours.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

KENISTON, ADAM CRAIG
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

04/05/2026
DATE

870
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

SANGER, MOOKIE (870)
NAME OF OFFICER (PLEASE PRINT)

04/05/2026
DATE

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

26-3642
1015: 2253
20min. 2310
Vinnerling, McKenzie

DUI INFLUENCE REPORT

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

Revised: July 9, 2018

Horizontal Gaze Nystagmus:

☐ Left eye does not follow smoothly ☐ Right eye does not follow smoothly

☐ Left eye jerks at 45 degrees angle or less ☐ Right eye jerks at 45 degrees angle or less

☐ Distinct jerking left eye maximum deviation ☐ 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: .222 | .205

State of Florida, County of Palm Beach,
Sworn and subscribed before me this 4/5/26 (date) by LEO.

Notary/Clerk of Court/ Officer (FSS 117.10) — Date: 4/5/26

Signature of Arresting Officer 870 — Name of Officer (print): Mookie Sanger 870

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ARRESTING OFFICER: Singer

Name: Ofc. Shiver Phone # 561-368-6201 Work # _____

Address: 100 NW 2nd Ave

Can testify to: SFSTS

Name: Ofc. Hanson Phone # " Work # _____

Address: "

Can testify to: Breath Tech operator

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

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 # 2026-00 3642

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is Sunday (day), April (month), 5 (date), 2026 (year).

B. The time is now approximately 2349 AM/PM.

C. The following is in reference to case number 26-3642.

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

E. Officer Sanger, have you arrested Mckenzie Winnerling (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. Winnerling, 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: Winnerling, Mckenzie

CASE #: 26-3642 DATE: 4/5/26

BREATH TEST RESULTS

1) TIME (0.222) 2354 AM/PM 2) TIME (0.255) 2357 AM/PM

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

BREATH OPERATOR: Harrison

MAINTENANCE TECHNICIAN: Crawford

TESTING OFFICER'S OBSERVATIONS

SPEECH: _____

ATTITUDE: crying

CLOTHING: dress

MEDICAL CONDITION: _____

OTHER: odor of unk alcoholic beverage, swaying

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: Read on camera Date: 04/06/2026 Time: 1201 HRS 04/06/2026

QUESTIONS AND ANSWERS

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

Where were you going? Campus

What street or highway were you on? federal hwy

Direction of travel? north

Where did you start driving from? Mizner Park Boca

What city (county) were you stopped in? Boca

What time did you start? 8/9 AM/PM What time is it now? 11 PM (1202)

What is today's date? 03/07/26 What day of the week is it? Sunday

When did you last eat? 3 PM What did you eat? Salad / Ham

What have you been doing the past three hours prior to this stop/accident? Hanging out w/ friend at Lime Standard

How much do you weigh? 113 165 Have you been drinking? yes What were you drinking? WINE

How much? 3 Glasses Where? Standard Boca (bar) With whom were you drinking? 2 SAE in sorority

When did you have your first drink? 5 AM/PM When did you stop drinking? 9 AM/PM

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How did you consume your last two drinks? Sipping

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~~ stop? ☐ Yes ☑ No NA

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? Barista

When did you last work? last Saturday

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? No

Have you taken any drugs or smoked marijuana today? NO

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? NO

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? NO

I am now ending this video recording. The time is now approximately 12:09 AM/PM

The date is April (month), 5 (day), 2026 (year).

Florida - Someone from FAU BM thin build got it a couple of months ago Cogan Canton freshman or sophomore didn't ID at the standard $88

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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: 04/05/2026

Date of Last Agency Inspection: 03/11/2026
Observation Period Began: 23:10
Subject's Name: MCKENZIE E WINNERLING DOB: 09/26/2006 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	23:52
Air Blank	0.000	23:52
Control Test	0.077	23:53
Air Blank	0.000	23:53
Subject Sample #1	0.222	23:54
Air Blank	0.000	23:55
Air Blank	0.000	23:57
Subject Sample #2	0.205	23:57
Air Blank	0.000	23:58
Control Test	0.076	23:58
Air Blank	0.000	23:59
Diagnostics Check	OK	23:59

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: 4/6/26
Signature

Sworn to (or affirmed) before me this 6th day of April, 2026

#870 MOOKIE SANGER
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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