JK # 0560433 25CT 12796 SB AH1008

ARREST / NOTICE TO APPEAR

1. Arrest (No Warrant) 3. Request for Warrant
6. Arrest (Warrant) 4. Request for Capias
2. N.T.A. 5. Juvenile Referral

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
0500200	Boca Raton Police Department	3 | 2 | 2025-008545

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

Multiple Clearance Indicator

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
300 E YAMATO RD, BOCA RATON, FL 33431	300 E YAMATO RD, BOCA RATON, FL 33431

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
08/08/2025	03:42	08/08/2025	03:42	08/08/2025	03:42	GUARDIAN TOWING

DEFENDANT

Name (Last, First, Middle): MOSER, MELISSA MARIE — 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	01/22/1992	5'08	130	BLUE	BROWN	LIGHT	Small

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description)	Marital Status	Religion	Indication of: Alcohol Influence / Drug Influence
TATT L FOREARM / WRITINGS; TATT R FOREARM / DOG PAW	D	NONE	Yes [X] No [ ] Unk. [ ]

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State
1000 SCOTIA DR 301, LAKE WORTH, FL 33462				(803) 524-7035	2

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
1000 SCOTIA DR 301, LAKE WORTH, FL 33462				(803) 524-7035	DAVID

Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation
SURTERRA WELNESS, REMOTE WORK					Retail

D/L Number, State	S [redacted]	INS Number	Place of Birth (City, State)	Citizenship
M260553925220 / FL			ROCK HILL, SC,	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 / Other: / Legal Custodian — 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 Department and Released 2. TOT JAC 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 355-2526) informed of any change of address.

School Attended — Grade

Property Crime? ☐ Yes ☒ No — Description of Property — Value of Property

☐ Yes, by: ☐ No:

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. Synthetic U. Unknown Z. Other

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
DRIVE UNDER INFLUENCE ALC	316.193(1A)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		1000

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

FILED PBC - GUN CLUB 25 AUG 5 AM 8:40

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant: FAIR

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By	Released By	Released To
ALMEIDA	ALMEIDA	PBCJ

Transported By	Date Transported	Time Transported	Other
ALMEIDA	08/08/2025	06:55	

NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court
☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): South County 200 W Atlantic Ave Delray Beach, FL 33444
Court Date and Time:

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

No Photo Available

ADMIN

HOLD for Other Agency: ☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other

Signature of Arresting Officer

Name of Arresting Officer (Print): ALMEIDA, T. A. — I.D. #: 877

Name Verification (Printed by Arrestee) (PRINT): AUG 8 AM 8:53

Witness here if subject signed with an "X".

Intake Deputy	I.D. #	Pouch #	Transporting Officer	I.D. #	Agency
Hinks	6760		MCQUISTON	785	BOCA

PAGE 1 OF 1

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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 FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2025-008545

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
MOSER, MELISSA MARIE		W	F	01/22/1992

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 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.

☐ 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 8 day of August, 2025 at 03:07 (Specifically include facts constituting cause for arrest.)

On 08/08/2025, at approximately 0307 hours, BRPD dispatch received multiple 911 calls reporting an SUV traveling southbound in the northbound lanes of I-95, south of the Yamato Rd exit, within the city of Boca Raton, Palm Beach County. Multiple BRPD units began responding to the scene with their emergency lights and sirens activated due to the nature of the emergency.

Soon thereafter, Officer Posset observed the vehicle exiting I-95 onto Yamato Rd through the northbound entrance ramp. Officer Posset observed the vehicle, later determined to be a silver 2025 Toyota 4Runner bearing Florida tag "95JQE," traveling westbound on Yamato Road and subsequently making an illegal U-turn at Yamato Road and the I-95 overpass. Officer Posset continued to follow the vehicle, traveling eastbound on Yamato Rd, and eventually initiated a traffic stop in the area of 300 E Yamato Rd. Upon my arrival at the scene, I met with Officer Posset, who relayed the aforementioned information. Officer Posset also stated he observed the driver, identified as Melissa Moser, to have watery and glossy eyes. Melissa was the vehicle`s sole occupant.

I then made contact with Melissa. I immediately smelled the very strong and distinct odor of alcohol emanating from her person. I also observed her eyes were watery and glossy. I observed her new 2025 vehicle to have significant damage to the front bumper near the driver`s side. Based on the above information, I requested Melissa to step out of the vehicle, to which she complied. While speaking with her outside of her vehicle, I continued to smell an odor of alcohol emanating from her person.

Melissa relayed that she was returning home from dinner at a friend`s house in Delray Beach. She admitted to having "one beer" at approximately 2100 hours last night, 08/07/2025. I learned Melissa resides in Lake Worth, which is located north of Delray Beach. Melissa was under the impression she was traveling north and was currently somewhere in Delray Beach. Melissa stated she had no recollection of traveling the wrong

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

FORBES, RYAN SCOTT
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

08/08/2025
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

ALMEIDA, TIMOTHY ALVES (877)
NAME OF OFFICER (PLEASE PRINT)

08/08/2025
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 | 2025-008545

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
MOSER, MELISSA MARIE		W	F	01/22/1992

PROBABLE CAUSE STATEMENT

way on the interstate. When asked about the damage to her vehicle, Melissa stated there should be no damage because the car is brand new.

Based on the above information, I requested Melissa to participate in standardized field sobriety exercises to dispel my suspicion that she may be driving while impaired, to which she agreed.

The FSEs were conducted as follows:

Horizontal Gaze Nystagmus (HGN)

Melissa identified the stimulus. Melissa had equal pupil size and equal tracking in both eyes. Melissa`s eyes continued to jump as she attempted to follow the stimulus. In conducting the exercise, I was able to observe a Lack of Smooth Pursuit, Distinct and Sustained Nystagmus at Maximum Deviation, and the onset of Nystagmus prior to 45 degrees.

At this point, Melissa admitted to actually having "two or three beers."

Walk and Turn

The surface was flat and hard. Melissa attempted to do the exercise with shoes. I made sure Melissa knew the line she would be using. I began the exercise by instructing and demonstrating to Melissa how to complete the exercise. While giving instructions, Melissa failed to stay in the starting position. In conducting the exercise, Melissa took an incorrect number of steps and completed an improper turn.

One Leg Stand

The surface was flat and hard. Melissa attempted to do the exercise with shoes. Melissa raised her right leg. In conducting the exercise, Melissa did not initially keep her arms down to her side. Melissa counted incorrectly, and her count reached 15 in 30 seconds. Melissa also failed to look at her raised foot during the exercise as instructed.

Finger to nose

The surface was flat and hard. Melissa conducted the exercise with shoes. During the exercise, Melissa failed to return her arms to her side and failed to touch the tip of her finger to the tip of her nose twice.

Romberg Alphabet

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

FORBES, RYAN SCOTT
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

08/08/2025
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

ALMEIDA, TIMOTHY ALVES (877)
NAME OF OFFICER (PLEASE PRINT)

08/08/2025
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 | 2025-008545

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
MOSER, MELISSA MARIE		W	F	01/22/1992

PROBABLE CAUSE STATEMENT

The surface was flat and hard. Melissa conducted the exercise with shoes. Melissa advised she knew the English alphabet and could recite it. Melissa recited the alphabet incorrectly.

Based on this investigation, I reasonably determined that Melissa was driving while impaired, and as a result, I placed her under arrest and charged her with one count of DUI FSS 316.193(1A). I handcuffed Melissa, checking for proper fit and double-locking them.

I transported Melissa to the BRPD DUI room. Officer Nava conducted the 20-minute observation period and operated the Intoxilyzer. I asked Melissa to provide a lawful sample of her breath to determine its alcohol content, to which she agreed. Reference Intoxilyzer 8000 S#80-006622, the breath sample results were .122 and .127.

Melissa was subsequently transported to the Palm Beach County Jail without further incident. Melissa`s vehicle was removed by Guardian Towing.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

FORBES, RYAN SCOTT
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

08/08/2025
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

ALMEIDA, TIMOTHY ALVES (877)
NAME OF OFFICER (PLEASE PRINT)

08/08/2025
DATE

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

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: 08/08/2025

Date of Last Agency Inspection: 07/22/2025
Observation Period Began: 04:18
Subject's Name: MELISSA M MOSER DOB: 01/22/1992 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	04:47
Air Blank	0.000	04:48
Control Test	0.078	04:48
Air Blank	0.000	04:49
Subject Sample #1	0.122	04:52
Air Blank	0.000	04:52
Air Blank	0.000	04:54
Subject Sample #2	0.127	04:55
Air Blank	0.000	04:56
Control Test	0.078	04:56
Air Blank	0.000	04:56
Diagnostics Check	OK	04:56

Cylinder Lot: 01524080A2
Exp: 03/05/2026

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 TIMO J NAVA, 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: 8/8/25
Signature

Sworn to (or affirmed) before me this 8th day of August, 2025

_____ Almeida, T.
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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2025-008545
10-15 : 0342 hours
Observ. : 0418 hours

Melissa Marie Moser
DOB : 01/22/1992
FLDL : M260-553-92-522-0

DUI INFLUENCE REPORT

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

BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT – PART II

To be filled out at testing facility

Agency Case # 2025-0085845

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is Friday (day), August (month), 8 (date), 2025 (year).

B. The time is now approximately 4:49 AM/PM.

C. The following is in reference to case number 25-8545.

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

E. Officer Almeida, have you arrested Melissa Moser (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. Moser, 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 fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine, or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine, or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

Subject Signature: _____

Note: Also read for CDL holders:

IN ADDITION, your refusal to submit will result in the loss of your commercial privileges for one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from operating a commercial motor vehicle.

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: Melissa M. Moser

CASE #: 25-8546 DATE: 8/8/25

BREATH TEST RESULTS

1) TIME 4:52 0.122 AM/PM 2) TIME 4:55 0.127 AM/PM

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

BREATH OPERATOR: Vera

MAINTENANCE TECHNICIAN: Crawford

TESTING OFFICER'S OBSERVATIONS

SPEECH: quiet

ATTITUDE: Calm

CLOTHING: White Tank-top and black shorts

MEDICAL CONDITION: Healthy

OTHER: _____

COMMENTS: _____

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Not questioned

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: _____ 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 _____ (month), _____ (day), _____ (year).

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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: 2025021060	**Date:** 8/9/2025
	Specialist Name/ID#: Angela Pinkney/7796