50-2024-CT-021560ANB

Marcy's Law CVI FL. Const. Art. 1 § 16(b) — Agency Case # 78-24-005473 — PA # 385

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number
	FLO 5 0 2 6 0 0	PALM BEACH GARDENS POLICE DEPARTMENT	78 - 24-005473

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)	Location of Offense (Business Name, Address)
5727 NORTHLAKE BLVD, PALM BEACH GARDENS, FL, 33410	5727 NORTHLAKE BLVD, PALM BEACH GARDENS, FL, 33410

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle KAUFF'S TOWING AND RECOVERY
11/13/2024	22:40					4701 EAST AVENUE, WPB, FL 33407

DEFENDANT

Name (Last, First, Middle): **BECKERICH, MICHAEL, PAUL** — 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	M	08/29/1950	5'10	210	Bro	Gray	Light	Medium

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

Marital Status: SINGLE — Religion: N/A

Indication of: Alcohol Influence ☐ Y ☑ N ☐ Unk. — Drug Influence ☐ Y ☑ N ☐ Unk.

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Residence Type (1. City 2. County 3. Florida 4. Out of State)
13 Saint Giles Rd, Palm Beach Gardens, FL 33418	(914) 588-5454	1

Permanent Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
13 Saint Giles Rd, Palm Beach Gardens, FL 33418		Drivers License

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
B262555503090	[redacted]		Manhattan, NYC	USA

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) — 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 provided by ☐ defendant and / or ☐ defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) 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 .150 or above	1	☐Y ☒N	316.193(4)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant I Capias Number	Bond
N	N	N/A	24005473		

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 12 Day 18 Year 2024 Time 1000 AM X 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: 11/13/2024

NR

ADMIN

HOLD for other Agency Name: — Signature of Arresting Officer: X

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Name of Arresting Officer (Print): OFC. NIKITA KUZNETSOV — I.D. #: 580

Name Verification (Printed by Arrestee) (PRINT)

NOV 14 AM 2:45

Intake Deputy: OFC NORIEGA 7206 — I.D. # — Pouch #

Transporting Officer: OFC. N. KUZNETSOV — ID #: 580 — Agency: PBGPD

Witness here if subject signed with an "X"

PAGE 1 OF 1

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PROBABLE CAUSE AFFIDAVIT

1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capias **1** JUVENILE

ADMIN

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number
	FL FL0502600	Palm Beach Gardens Police Department	7 8 24-005473

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
BECKERICH, MICHAEL P		W	M	08/29/1950

CHARGES

Charge Description	Charge Description
316.193(4) DUI - BAC ABOVE .15	
Charge Description	Charge Description

VICTIM

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

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 14 day of November, 2024 at 01:17 (Specifically include facts constituting cause for arrest.)

On 11/13/2024, at 2215 hours, I was patrolling in a marked Palm Beach Gardens police vehicle in Palm Beach Gardens, Palm Beach County, Florida. I then responded to an incident at the south security checkpoint at 5727 Northlake Blvd for a vehicle that went through the security checkpoint.

Upon arrival, I proceeded to speak with the wheel witness, Mr. Kirill Murray, who stated that the driver, Mr. Micheal Paul Beckerich was revving his engine and then proceeded to go through the security checkpoint causing it to pop out. I then made contact with the driver, Mr. Micheal Paul Beckerich who had a strong odor of an alcoholic beverage emitting from his person. Additionally, he had watery eyes and a heavy slurred speech.

I then asked if Mr. Beckerich would be ok with performing field sobriety tasks, and he agreed. While conducting the tasks, I observed 6 clues for the Horizontal Gaze Nystagmus task, 0 clues for the Walk & Turn task due to not following instructions and heavily unsteady on his feet, and 0 clues for the One Leg Stand Task. After the completion of the tasks, I proceeded to place Mr. Beckerich in custody for driving while under the influence. The following were observed:

HGN: Both Eyes: Lack of smooth pursuit, Distinct & Sustained Nystagmus at Maximum Deviation and Onset Nystagmus prior to 45 degrees.

Walk & Turn: Could not conduct Walk & Turn due to not following instructions and being heavily unsteady on his feet.

One Leg Stand: After agreeing that he understood the instructions. He proceeded to advance towards me and kept saying yes.

Mr. Beckerich`s vehicle was inventoried and taken by Kauff`s Towing Company.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

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

11/14/2024
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

KUZNETSOV, NIKITA (580)
NAME OF OFFICER (PLEASE PRINT)

11/14/2024
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 FL0502600	Palm Beach Gardens Police Department	7 | 8 24-005473

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
BECKERICH, MICHAEL P		W	M	08/29/1950

PROBABLE CAUSE STATEMENT

Lastly, I drove Mr. Beckerich to the Palm Beach County Breath Alcohol Testing Center to conduct a breath analysis test. Mr. Beckerich provided a breath sample into the breathalyzer at 2345hrs and the results showed .184 and .190 at 2348hrs. Mr. Beckerich was transferred to the Palm Beach County Jail without incident.

Based on my investigation, I find probable cause to charge Michael Paul Beckerich with driving on the streets of Palm Beach Gardens, Palm Beach County, while under the influence on the extent his normal faculties were impaired, in violation of Florida State Statute 316.193(4) [AKE9J0E]. All paperwork associated with this case was submitted.

My department-issued body-worn camera was utilized throughout the incident.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F S S 117 10)

11/14/2024
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

KUZNETSOV, NIKITA (580)
NAME OF OFFICER (PLEASE PRINT)

11/14/2024
DATE

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

D.U.I. PROBABLE CAUSE AFFIDAVIT

On the 13th day of November 2024 at 22:15 ☐ AM ☐ PM

Subject: BECKERICH, MICHAEL, PAUL Case Number: 24-005473

Agency: *PALM BEACH GARDENS POLICE DEPARTMENT* Arresting Officer: OFC. NIKITA KUZNETSOV 580

PERSONAL CONTACT

DRIVING PATTERN: (Actual Physical Control; Physical Evidence or Statements Putting Defendant Behind Wheel of Vehicle)

Per the security officer, Mr. K. Murray. Mr. Beckrich revved his engine and hit a security entrance causing it to pop out of place.

OBSERVATION OF DRIVER:

Driver had watery eyes and slurred speech. Urinated on himself and very unsteady on his feet.

DRIVER STATEMENTS:

Stated he was driving back from a restaurant at around 10:30 and had some wine. Additionally, he stated he was driving home and did not know what is wrong with all the police standing there.

ODORS: Strong odor of an alcoholic beverage emitting from his person.

GENERAL OBSERVATIONS

SPEECH: Slurred

ATTITUDE:

CLOTHING:

MEDICAL/OTHER:

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STATE OF FLORIDA
COUNTY OF PALM BEACH

SIGNATURE OF ATTESTING OFFICER

The forgoing instrument was sworn to or affirmed and subscribed before me this 11 day of November 2024 by OFC. NIKITA KUZNETSOV 580 who is ☑ personally known to me or ☐ produced _____.

Notary Public, Clerk of Court, Officer (FSS 117.10)

STAMP

D.U.I. PROBABLE CAUSE AFFIDAVIT Cont.

Subject: **BECKERICH, MICHAEL, PAUL** Case Number: **24-005473**

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

LEFT EYE	*RIGHT EYE*
☑ Lack of Smooth Pursuit	☑ Lack of Smooth Pursuit
☑ Distinct & Sust. Nystag. at Max. Deviation	☑ Distinct & Sust. Nystag. at Max. Deviation
☑ Onset of Nystagmus Prior to 45 Degrees	☑ Onset of Nystagmus Prior to 45 Degrees

Other Observations:

Walk and Turn

- Could not conduct Walk & Turn due to not following instructions and being heavily unsteady on his feet.

One Leg Stand

- After agreeing that he understood the instructions. He proceeded to walk towards me and kept saying "yes".

Rhomberg

Finger to Nose

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BREATH RESULTS: 1) .184 @ 2345 **2)** .190 @ 2348 **3)** _____ @ _____ **4)** _____ @ _____

STATE OF FLORIDA
COUNTY OF PALM BEACH

_____
SIGNATURE OF ATTESTING OFFICER

The forgoing instrument was sworn to or affirmed and subscribed before me this 14th day of NOVEMBER 20 2024 by OFC. NIKITA KUZNETSOV 580 who is ☑ personally known to me or ☐ produced _____.

_____
Notary Public, Clerk of Court, Officer (FSS 117.10)

STAMP

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

*Original

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

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, 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_____ 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)*

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_____ 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: _____

*Original

NOT A CERTIFIED COPY

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

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

DUI Breath Implied Consent

NOT APPLICABLE WITH VOLUNTARY CONSENT

DEFENDANT'S NAME: Beckerich, Mikhail P. CASE NO: 24 [illegible] 473

DATE OF ARREST: 11-13-24 TIME OF ARREST: 22:40

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 X

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, 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 ✓ NO_____

Do you still refuse to submit to this test? YES_____ NO X

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)*

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_____ NO_____

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

Date read: 11/13/24 Time read: 23:37 Location read: BAT

LAW ENFORCEMENT OFFICER NAME (printed): Ofc. N. Kuznetsov ID: 580

LAW ENFORCEMENT OFFICER SIGNATURE: [signature] 580

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

FORM #0126BR REV 08/24

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*Original

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

*Dark Copy

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

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

DUI Breath Implied Consent

NOT APPLICABLE WITH VOLUNTARY CONSENT

DEFENDANT'S NAME: [redacted] CASE NO: [redacted]

DATE OF ARREST: 11-1-24 TIME OF ARREST: 2210

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 X

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, 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 ✓ 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)*

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_____ NO_____

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

Date read: 11-1-24 Time read: 2210 Location read: [redacted]

LAW ENFORCEMENT OFFICER NAME (printed): [redacted] ID: [redacted]

LAW ENFORCEMENT OFFICER SIGNATURE: [redacted]

*Dark Copy

NOT A CERTIFIED COPY

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

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

DUI Breath Implied Consent

NOT APPLICABLE WITH VOLUNTARY CONSENT

DEFENDANT'S NAME: Beckerich, Michael P. CASE NO: 24-005473

DATE OF ARREST: 11-13-24 TIME OF ARREST: 22:40

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 X

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, 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 ✓ NO____

Do you still refuse to submit to this test? YES____ NO X

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)*

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____ NO____

Do you still refuse to submit to this test? YES____ NO____

Date read: 11/13/24 Time read: 23:37 Location read: BAT

LAW ENFORCEMENT OFFICER NAME (printed): Ofc N Kuznetsov ID: 580

LAW ENFORCEMENT OFFICER SIGNATURE: 580

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

FORM #0126BR REV 08/24

*Dark Copy

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DUI WITNESS LIST

24-005473

Arresting Officer: OFC. NIKITA KUZNETSOV 580 Email: nkuznetsov@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. R. Smith #489 & Ofc. K. Luscavich #513
Agency Address: 10500 N Military Trail, Palm Beach Gardens, FL 33410 Phone: (561) 799-4445
Can Testify To: Initial encounter.

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

Breathalyzer Technician: _____ ID: TECH ID # Agency: PBSO

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

Name: Mr. Kirill Murray Involvement: First Encounter (Security)
Address: KirillMurray01@aol.com Phone: (830) 385-5069
Can Testify To: Seeing the Operation Of the motor vehicle. ☑ 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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PALM BEACH GARDENS POLICE DEPARTMENT
DUI TESTING FACILITY INFORMATION SHEET

PBSO Case #: 24-116685 PBSO Zone: 3-13

Agency Case #: 24-005473 Crash Case #: _____

Incident Information:

Time of Stop/Crash: 22:15 Date of Incident: 11/13/2024 Day: Wednesday

Location of Incident: 5727 NORTHLAKE BLVD, PALM BEACH GARDENS, FL, 33410

Arrest Information:

Time of Arrest: 22:40 Date of Arrest: 11/13/2024 Day: Wednesday

Location of Arrest: 5727 NORTHLAKE BLVD, PALM BEACH GARDENS, FL, 33410

Subject's Name: (L) BECKERICH, (F) MICHAEL, (M) PAUL

DOB: 08/29/1950 Race: W Sex: M Height: 5'10 Weight: 210 Hair Gray Eye Bro

Address: 13 Saint Giles Rd, Palm Beach Gardens, FL 33418 Phone: (914) 588-5454

Arresting Officer's Name: OFC. NIKITA KUZNETSOV ID#: 580

Agency: PBGPD Division: ROAD PATROL ☐ Marcy's Law CVI FL. Const. Art. 1 § 16(b)

Breath Results

1) .184 at 23:45 hrs.
2) .190 at 23:48 hrs.
3) _____ at _____ hrs.
4) _____ at _____ hrs.

---BAT Use---

BAT Notified: YES
Arrival Time at BAT: 23:10
Subject Arrest Time: 22:40

Breath Test Operator: 16877 TECH ID #
PBSO

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PALM BEACH GARDENS POLICE DEPARTMENT
DUI TESTING FACILITY INFORMATION SHEET

PBSO Case #: 24-1166685 PBSO Zone: 3-13

Agency Case #: 24-005473 Crash Case #: _____

Incident Information:

Time of Stop/Crash: 22:15 Date of Incident: 11/13/2024 Day: Wednesday

Location of Incident: 5727 NORTHLAKE BLVD, PALM BEACH GARDENS, FL, 33410

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2) .190 at 23:48 hrs.
3) _____ at _____ hrs.
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---BAT Use---

BAT Notified: YES
Arrival Time at BAT: 23:10
Subject Arrest Time: 22:40

Breath Test Operator: 16877 TECH ID #
PBSO

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TESTING FACILITY TASK REPORT

AGENCY: PBG

SUBJECT: Beckerich, Michael P.

CASE NUMBER: 24-116685

DATE: Nov 13, 2024

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 23:35

ENDING TIME: 00:03

BREATH TESTS RESULTS: 1) .184 TIME 23:45 A.M.☐ P.M.☒ 2) .190 TIME 23:48 A.M.☐ P.M.☒

3) N/A TIME ---------- A.M.☐ P.M.☐ 4) N/A TIME ---------- A.M.☐ P.M.☐

BREATH OPERATOR: R. Ragin #16877

MAINTENANCE TECHNICAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred, mumbled

ATTITUDE: Yelling, talkative, argumentative, rude, repetitive, mood swings

CLOTHING: Urinated blue shorts, white polo shirt, blue shoes

MEDICAL CONDITIONS: Jerk off Blood and a lot of things

MEDICATIONS: Yes 14 of them

OTHER:

Eyes are glassy & bloodshot
odor of unknown alcoholic beverage on breath, swaying and unsteady on feet
Subject stated in Q&A he had 1 Rum & tonic and 1 Gin & tonic

COMMENTS:

Arrived at center A/O started 20 minute observation period at 23:10 hrs.

Subject stated I don't know.

A/O read I/C.

Subject agreed to take test.

A/O read rights.

A/O conducted Q&A.
Subject answered Q&A.

Tech read breath test results.

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CSO
Instrument Serial Number: 80-006240 Software: 8100.27
Date of Test: 11/13/2024

Date of Last Agency Inspection: 10/25/2024
Observation Period Began: 23:10
Subject's Name: MICHAEL P BECKERICH DOB: 08/29/1950 Sex: M

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	23:40
Air Blank	0.000	23:41
Control Test	0.081	23:41
Air Blank	0.000	23:41
Subject Sample #1	0.184	23:45
Air Blank	0.000	23:45
Air Blank	0.000	23:47
Subject Sample #2	0.190	23:48
Air Blank	0.000	23:48
Control Test	0.078	23:48
Air Blank	0.000	23:49
Diagnostics Check	OK	23:49

Cylinder Lot: 14323080A3
Exp: 09/05/2025

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 RENEE M RAGIN, 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: 11/13/24
Signature

Sworn to (or affirmed) before me this 13 day of Nov, 2024

_____ Ofc. N. Kuznetsov #580
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☐	119.071(2)(e)	Confession	
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 99 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: 2024030228	**Date:** 11/14/2024
	Specialist Name/ID#: C. Daniels/ 30347