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

0540040 23CT7800 MB

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

☐ Check If Supplement is Attached 3827

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
FL0 5 0 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	0 6 -| 23-062476 ( )

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: 0 1

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
W Atlantic Ave and S Military Trl , Delray Beach, FL	W Atlantic Ave and S Military Trl , Delray Beach, FL

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
04/29/2023	0108					Priority Towing

DEFENDANT

Name (Last, First, Middle): Carone, Michael, Vito

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

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	1/30/1958	5'10	220	Blue	Bro	Light	Med

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)

Marital Status: Divorced — Religion: Catholic — Indication of: Alcohol Influence Y ☒ N ☐ Unk ☐; Drug Influence Y ☐ N ☒ Unk ☐

Local Address (Street, Apt. Number) (City) (State) (Zip)	Mobile Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State
8956 Briarwood MEadow Ln, Boynton Beach, FL 33473	(914) 224-1406	2

Permanent Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
,	( )	FL DL

Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation
	( )	Delivery

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
C650558580300, FL	[redacted]		New York City, New York	US

CO-DEF

Co-Defendant (Last, First, Middle)	Race	Sex	Date of Birth	1. Arrested 2. At Large	3. Felony 4. Misdemeanor 5. Juvenile
				☐ ☐	☐ ☐ ☐
Co-Defendant (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) CLOR (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: 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	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Driving Under the Influence	01	☐ Y ☒ N	316.193(1A)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		23-062476		

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

FILED PBC - GUN CLUB 23 APR 30 AM 9:04

NOTICE TO APPEAR

Location (Court, Room Number, Address): Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600

Court Date and Time: Month May — Day 18 — Year 2023 — Time 0830 — 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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED

Signature of Defendant (or Juvenile and Parent/Custodian) — Date Signed 04/29/2023

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

Signature of Arresting Officer X

Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other:

Name of Arresting Officer (Print): Inv. C. Ward 16305 — I.D. # 16305

Intake Deputy — I.D. # — Pouch #

Transporting Officer: Inv. C. Ward — I.D. # 16305 — Agency PBSO

Witness here if subject signed with an "X"

PAGE 1 OF 1

PBSO #0148 REV. 11/22 DISTRIBUTION: COURT COPY STATE ATTORNEY AGENCY AGENCY DEFENDANT (N.T.A.'s ONLY)

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PROBABLE CAUSE AFFIDAVIT

OBTS Number:

1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capias | 1 | Juvenile: N

ADMIN

Agency ORI Number: FLO 5 0 0 0 0 0 | Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE | Agency Report Number: 23-062476

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

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
Carone, Michael, Vito		W	M	1/30/1958

CHARGES

Charge Description		Charge Description	
Driving Under the Influence	316.193(1A)		
Charge Description		Charge Description	

VICTIM

Victim s Name (Last, First, Middle)	Race	Sex	Date of Birth
State of Floirda, ,	–	–	–

Local Address (Street, Apt Number) (City) (State) (Zip)	Phone	Address Source
,	( )	
Business Address (Name, Street) (City) (State) (Zip)	**Phone**	**Occupation**
	( )	

The undersigned certifies and swears that I have just and reasonable grounds to believe, and do believe that the above named Defendant committed the listed violation(s) 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 commit 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 29 day of April 20 23 at 0040 ☒ A.M ☐ P.M ($pecifically include facts constituting cause for arrest.)

PROBABLE CAUSE STATEMENT

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

I asked the defendant if I could check his eyes. The defendant stated that I could with the following results.

Horizontal Gaze Nystagmus (HGN)

The defendant was placed with their feet together and hands down by their side. The defendant was instructed to await the completion of the instructions prior to beginning the task. The defendant acknowledged that they clearly understood my instructions. I then instructed the defendant on the task. The defendant stated that they clearly understood my instructions for the task. I placed my stimulus in front of the defendant and ask the defendant if they could see it to which he said "yes." I asked the defendant what color the stimulus was to which they answered. "red.". Upon commencing the task the defendant moved their head side to side instead of following with their eyes only, anticipated the stimulus, and did not follow the stimulus as instructed. During the task, I observed that the defendant had equal pupil size and did not exhibit resting nystagmus. The defendant's eyes tracked equally. I observed a lack of smooth pursuit in both of the defendant's left and right eyes. I observed a distinct and sustained nystagmus, a quivering/jerking from side to side, while the stimulus was held at maximum deviation in both of the defendant's left and right eyes. I observed the onset of nystagmus with the stimulus held prior to 45 degrees in both of the defendant's left and right eyes.

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ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. C. Ward 16305
(Signature of Arresting /Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 29 day of April 20 23 by Inv. C. Ward
(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of I... Known I.D.

Thomasina Miller (#41017) Thomasina Miller
Notary Public, Clerk of Court, Officer (F.S.S). 117.10)

THOMASINA MILLER
Notary Public - State of Florida
Commission # HH 339641
My Comm. Expires Dec 7, 2026
Bonded through National Notary Assn.

PBSO #0004 REV. 12/22 DISTRIBUTION: STATE ATTORNEY AGENCY AGENCY DEFENDANT (N.T.A. ONLY)

OBTS Number

PROBABLE CAUSE AFFIDAVIT

1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capias | 1 | Juvenile | N

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	23-062476

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
Carone, Michael, Vito		W	M	1/30/1958

CHARGES

Charge Description	Charge Description
Driving Under the Influence 316.193(1A)	
Charge Description	Charge Description

VICTIM

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

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 I have just and reasonable grounds to believe, and do believe that the above named Defendant committed the listed violation(s) 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 commit 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 29 day of April 20 23 at 0040 ☒ A.M ☐ P.M (Specifically include facts constituting cause for arrest.)

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

At this time I found probable cause to believe that the defendant was impaired for the purposes of operating and/or being in actual physical control of a motor vehicle pursuant to Florida State Statute 316.193(1a). I handcuffed the denfedant to the rear. I checked the handcuffs for proper fit and double locked them. I then placed the defendant in the rear of my PBSO patrol vehicle.

An inventory search of the vehicle was conducted prior to tow per PBSO policy. I located the following a bottle or medication in the vehicle which was issued to the defendant inside the vehicle. The medication bottle instructed not to be taken with alcohol. The vehicle was towed by rotation by Priority to their impound lot.

I transported the Defendant to the Palm Beach County Jail Breath Alcohol Testing (B.A.T.) center.

Once at the Breath Alcohol Testing Center I placed the defendant in a centrally located position where they could be easily monitored. I observed the defendant for 20 uninterrupted minutes during which time they did not ingest anything and/or regurgitate. After the 20 minute observation period the defendant was escorted into and isolated testing room which was video recorded. Once inside the room I requested a lawful sample of the defendant's breath for the purposes of determining its blood alcohol content. The defendant asked what his options were. The defendant was then read implied consent from a pre-printed PBSO implied consent form. The defendant continued asking about his options. It was explained to him that since he did not appear to have a previous refusal his option were that he could give a lawful sample of his breath or he could choose not to give a lawful sample of his breath. If he choose not to give a lawful sample of his breath then his license would be suspended for a period of one year. The defendant was again requested to give a lawful sample of their breath to which the defendant consented. The defendant gave two lawful samples of his breath resulting in a BAC of .112 and .109.

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ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. C. Ward 16305
(Signature of Arresting /Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 29 day of April 20 23 by Inv. C. Ward

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced: Known LEO

Thomasina Miller (#41017)
Notary Public, Clerk of Court, Officer (F.S.S). 117. 10)

THOMASINA MILLER
Notary Public - State of Florida
Commission # HH 339641
My Comm. Expires Dec 7, 2026
Bonded through National Notary Assn.

PAGE ___ OF 2

PBSO #0004 REV. 12/22 DISTRIBUTION: STATE ATTORNEY AGENCY AGENCY DEFENDANT

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 29 DAY OF April 20 23, AT 0040 ✓AM PM

SUBJECT: Carone, Michael, Vito CASE NUMBER: 23-062476

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. C. Ward 16305

PERSONAL CONTACT

DRIVING PATTERN: Actual physical control (physical evidence or statements putting def. behind wheel of vehicle)

I was patrolling/monitoring traffic in the area of S Military Trl and Atlantic Ave, in unincroproated Delray Beach, Palm Beach County when I observed the defendant's vehicle, Black Kia bearing FL tag IFWR24, which I estimated to be traveling 60 mph in a 45 mph zone. I activated by Applied Concepts, Inc, Stalker DSR 2x (Serial # DP018864) radar using the front antenna (Serial # KR019256) in opposite direction mode. The radar gave a digital read out of 60 mph with a matching audio Doppler tone. I followed the vehicle northbound to the light at S Military Trl and Atlantic Ave. The vehicle turned left to you west bound on Atlantic Ave. The vehicle was swerving within its lane will traveling. The roadways were Dry, empty and well lit. I activated my overhead emergency lights, stopping the vehicle. The vehicle stopped in the middle of the travel lane prior to being told to move off the roadway.

OBSERVATION OF DRIVER:

I made contact with the defendant, later identified by their Florida Driver's License as, Michael Carone. I observed that the defendant had watery, bloodshot eyes. The defendant had lethargic speech and fumbled over his words. The defendant had the strong odor of colonge as well as the oder of an unknown alcoholic beverage, based on my training and life experiences, that came from their breath which intensified as they spoke to me. The defendant stated that he was coming form pompano where he met some friends and was heading him. He stated that he had one glass of wine. I asked the defendant if they had any medical problems and he stated that he has INR. He stated that he takes a blood thinner medication at night but hadnt taken it today. He did not mention any other medications at this time.

I asked the defendant to exit the vehicle. The defendant swayed while standing, stumbled while walking. While walking to my vehicle the defendant stated that he was unsteady on his feet due to a previous stroke that he had in 2007.

I asked the defendant to perform voluntary field sobriety tasks. The defendant consented. Due to the defendants previous stroke and he statements that he was unsteady on his feet Seated tasks were completed with the following results.

DRIVER'S STATEMENTS:

I asked the defendant if they had any medical problems and he stated that he has INR. He stated that he takes a blood thinner medication at night but hadnt taken it today. He did not mention any other medications at this time.

I asked the defendant to exit the vehicle. The defendant swayed while standing, stumbled while walking. While walking to my vehicle the defendant stated that he was unsteady on his feet due to a previous stroke that he had in 2007.

ODORS:

Te defendant had the strong odor of colonge as well as the odor of an unknown alcoholic beverage, that came from his breath and intensified as he spoke to me.

GENERAL OBSERVATIONS

SPEECH: **Lethargic, Stubmumbled**

ATTITUDE: **inattentice, defiant**

CLOTHING: **Dark color collared shirt, Gray Slacks, Gray Shoes**

MEDICAL/OTHER: **I asked the defendant if they had any medical problems and he stated that he has INR. He stated that he takes a blood thinner medication at night but hadnt taken it today. He did not mention any other medications at this time. I asked the defendant to exit the vehicle. The defendant swayed while standing, stumbled while walking. While walking to my vehicle the defendant stated that he was unsteady on his feet due to a previous stroke that he had in 2007. defendant if they had any medical problems or had taken any medications and the defendant said no. I asked how much they had had to drink. The defendant said, "two beers."**

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TATE OF FLORIDA
'OUNTY OF PALM BEACH

Inv. C. Ward 16305
ignature of Arresting/Investigative Officer)

he foregoing instrument was sworn to or affirmed and subscribed before me this 29 day of April 20 23 by Inv. C. Ward 16305

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Thomasina Miller (#41017) Thomasina Miller

otary Public, Clerk of Court, Officer (F.S.S 117.10)

THOMASINA MILLER
Notary Public - State of Florida
Commission # HH 339641
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SUBJECT: Carone, Michael, Vito CASE NUMBER 23-062476

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

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

)ther Observations:
See P.C.

HAND COORDINATION:

I placed, had the defendant sit in a chair with his feet in front of him. I had the defendant make a fist with his left hand a put it against his chest which he did. He was then told to make a fist with his right hand and put it against the left which he did. I instructed the defendant to remain in the position throughout my instructions and demonstration. The defendant stated that he did not understand the instructions due to the stroke from 2007. The defendant was again given the instruction. The defendant continued to be uncooperative stating that he did not understand the instructions. The defendant advised that if he chose not to complete the task as they were being instructed then I would have to base my decision to arrest on the evidence I had already seen, to include his driving patter, admission of drinking alcohol. The defendant was advised that his refusal to complete the task could be used against him in criminal court. The defendant stated that he understood. The defendant again stated that he would complete the task. The defendant was again instructed on the task. The defendant started that task and imporperly stepped his hand out, stopping on step four. The defendant asked for additional instructions. The defendant did not clap his hands as instructed. The defendant then improperly stepped hi hands back. The defendant again asked for additional instructions. The defendant did not open his hands or bring them down to his thighs as instructed.

PALM PAT:

The defendant was instructed to sit with their hands in front of them one on top of the other. They were then instructed to remain in the position throughout the instructions and demonstration until instructed to begin. The defendant acknowledged and stated that they clearly understood the instructions. The defendant rolled and chopped his pats. The defendant did not speed up without being instructed to do so.

FINGER TO NOSE:

The defendant was instructed to sit with their hands down by their side. The defendant was then instructed to remain in the position throughout the instructions and demonstration until instructed to begin. The defendant acknowledged and stated that they clearly understood these instructions. The defendant mimicked me by tilting their head back prior to being told to start. I instructed the defendant on the task and demonstrated the task. The defendant acknowledged the instructions stating that they clearly understood them. The defendant proceeded to miss/search for the tip of their nose with the tip of their finger, started with the wrong hand, and did not bring their hand immediately bring back as instructed.

ROMBERG ALPHABET:

The defendant was instructed to sit. The defendant was then instructed to remain in the position throughout the instructions and demonstration until instructed to begin. The defendant acknowledged and stated that they clearly understood these instructions. The defendant swayed while in the instructional position. The defendant mimicked me by tilting their head back prior to me telling them to begin. The defendant stated that they knew their English alphabet from A to Z. I instructed them on the task and then demonstrated the task. The defendant then proceeded to misstate their alphabet. T

BREATH TEST RESULTS: .112 .109

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TATE OF FLORIDA
:OUNTY OF PALM BEACH

Inv. C. Ward 16305
ignature of Arresting/Investigative Officer)

ne foregoing instrument was sworn to or affirmed and subscribed before me this 29 day of April 2023 by Inv. C. Ward 16305

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Thomasina Miller (#41017) Thomasina Miller

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THOMASINA MILLER
Notary Public - State of Florida
Commission # HH 339641
My Comm. Expires Dec 7, 2026
Bonded through National Notary Assn.

WITNESS LIST

CASE NUMBER: 23-062476

ARRESTING OFFICER: Inv. C. Ward 16305

ADDRESS: 3228 Gun Cub Rd, West PAlm Beach, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) 561-851-1130

CAN TESTIFY TO: DUI Investigation

NAME: D/S W. Walther # 38633

ADDRESS: 3228 Gun Club Rd, West Palm Beach, FL 33406

PHONE NUMBERS (HOME) _____ (WORK) 561-688-3000

CAN TESTIFY TO: Back Up Officer/Tow

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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ADDRESS _____

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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: PBSO

SUBJECT: CARONE, MICHAEL .V.

CASE NUMBER: 23-062476

DATE: Apr 29, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 02:09

ENDING TIME: 02:27

BREATH TESTS RESULTS: 1) .112 TIME 02:17 A.M.☒ P.M.☐ 2) .109 TIME 02:21 A.M.☒ P.M.☐

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

BREATH OPERATOR: T. MILLER #41017

MAINTENANCE TECHNICAN: J. KARLECKE# 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: CRANKY, IRRITATED,TALKATIVE

CLOTHING: BLACK SHIRT, GRAY PANTS, GRAY SNEAKERS

MEDICAL CONDITIONS: STROKE

MEDICATIONS: MANY MEDICATIONS

OTHER:

EYES: GLASSY
PRESENT: D/S. W. WALTHER

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 01:45 HRS.

SUBJECT: DID NOT ANSWER IF HE WOULD TAKE TEST ASKED WHAT ARE HIS CHOICES.

A/O: READ I/C AND EXPLAIN I/C.
SUBJECT: ACKNOWLEDGE HE UNDERSTOOD I/C AND AGREED TO TAKE TEST.

A/O: READ RIGHTS.
SUBJECT: STATED HE UNDERSTOOD RIGHTS.

TECH: READ TEST RESULTS.
SUBJECT: ACKNOWLEDGE HE UNDERSTOOD TEST RESULTS.

A/O: ATTEMPTED Q & A.
SUBJECT: REFUSED QUESTIONS.

NOT A CERTIFIED COPY

SUBJECT:_____ CASE NUMBER:_____

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

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

OR

I am now requesting that you submit to a lawful test of your ***URINE*** for the purpose of determining the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am _____ of the _____

If you refuse to take the test I have requested of you, your driving privilege will be suspended for a period of one (1) year for a FIRST REFUSAL, or eighteen (18) months if your driving privilege has been PREVIOUSLY SUSPENDED, or if you have been PREVIOUSLY FINED under s. 327.35215, for refusing to submit to a lawful test of your breath, urine, or blood. Additionally, if you refuse to take the test I have requested of you, and if your driving privilege has been previously suspended, or if you have been previously fined under s. 327.35215, for a refusal to submit to a lawful test of your ***breath, urine*** or blood, you will be committing a misdemeanor, in addition to any other penalties which can be imposed by law.

Refusal to submit to the test I have requested is admissible into evidence in any criminal proceeding.

Do you understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO

NOTE: IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER'S LICENSE (CDL), READ THE FOLLOWING,

If you are a Commercial Driver License (CDL) holder or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privilege for a period of one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from holding a CDL or operating a CMV.

Do you understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO

SUBJECTS SIGNATURE: (X)_____

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X)_____

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

SUBJECT: _____ CASE NUMBER: _____

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE:
- EPILEPSY? _____
- GLASS EYE? _____
- FALSE TEETH? _____
- EAR INFECTION? _____
- INNER EAR TROUBLE? _____
- DIABETES? _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: _____

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PALM BEACH COUNTY
SHERIFF'S OFFICE
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☒	316.650(b)	Other: Driver information contained in a uniform traffic citation.	11-12
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2023011104	**Date:** 4/29/2023
	Specialist Name/ID: R.Castro/40259