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

25CTI555DMB

☐ Check if Supplement is Attached

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number
FLO 5 0 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	0 6 -| 25-100783 ( )

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: 1

Location of Arrest (including Name of Business): **Boynton Beach Blvd / Military Trl.**

Location of Offense (Business Name, Address):

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
09/27/2025	0323					Kauffs TOWING

DEFENDANT

Name (Last, First, Middle): **Kettner, Michelle, Estrella**

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	F	5/5/1982	5'04	130	BRN	BRN	MED	MED

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

Marital Status:

Religion: NONE

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

Local Address (Street, Apt. Number) (City) (State) (Zip): **6197 Country Fair Cir, Boynton Beach, FL 33437**

Mobile Phone: **(561-) 371-1888**

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

Permanent Address (Street, Apt. Number) (City) (State) (Zip):

Phone ( )

Address Source: **FL DL**

Business Address (Name, Street) (City) (State) (Zip):

Phone ( )

Occupation: **restaurant server**

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
K356545826650, FL	[redacted]		Manhattan, NY	USA

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) (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 property damage / personal injury	1	☐ Y ☒ N	316.193(3)(c)1	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
U	U		25-100783		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Refusal to submit to breath test 2nd subsequent	1	☐ Y ☒ N	316.1939(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
U	U		25-100783		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Refuse to sign / accept summons	1	☐ Y ☒ N	318.14(3)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
U	U		25-100783		

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): **Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600**

Court Date and Time: Month **October** Day **23** Year **2025** 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

I consent to receive text reminders of court date(s) and times for this case by automated technology to the mobile number identified above. I understand that standard text message rates may apply, and that I may revoke this consent via the text message system if I choose. Signature

ADMIN

HOLD for other agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Intake Deputy I.D. # Pouch #

Signature of Arresting Officer: X

Name of Arresting Officer (Print): **D/S Galloway** I.D. # **39654**

Transcribing Officer: **D/S Galloway** I.D. # **39654** Agency **PBSO**

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X"

PAGE 1 OF 1

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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: 06- 25-100783

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): **Kettner, Michelle, Estrella**

Alias:

Race: W | Sex: F | Date of Birth: 5/5/1982

CHARGES

Charge Description: **Driving Under the Influence property damage / personal injury** — 316.193(3)(c)1

Charge Description: **Refusal to submit to breath test 2nd subsequent** — 316.1939(1)

Charge Description: **Refuse to sign / accept summons** — 318.14(3)

Charge Description:

VICTIM

Victim s Name (Last, First, Middle): **STATE OF FLORIDA, ,**

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 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 27th day of September 20 25 at 0444 hrs ☒ A.M ☐ P.M (Specifically include facts constituting cause for arrest.)

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

On 09/27/2025 at approximately 0430 hrs, while at the Breath Alcohol Testing Facility; Kettner refused to submit to a lawful request for a breath sample after previously failing to submit to a breath test on 04/09/2013 as confirmed on DAVID. Kettner also refused to sign for the DUI citation after being advised that her signature did not constitute an admission of guilt and that refusal to sign would result in an additional misdemeanor charge to which she acknowledged she understood.

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ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S Galloway
(Signature of Arresting /Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 27th day of September 20 25 by D/S Galloway

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

Joshua Bell (#8656)
Notary Public, Clerk of Court, Officer (F.S.S). 117.10

JOSHUA BELL
Notary Public - State of Florida
Commission # HH 418882
My Comm. Expires Jul 9, 2027
Bonded through National Notary Assn.

PBSO #0004 REV. 12/22

DISTRIBUTION: STATE ATTORNEY AGENCY AGENCY DEFENDANT (N.T.A.'s ONLY)

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 27th DAY OF September 20 25, AT 0444 hrs ✓ AM PM

SUBJECT: Kettner, Michelle, Estrella CASE NUMBER: 25-100783

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S Galloway

PERSONAL CONTACT

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

I responded to the area just east of Boynton Beach Blvd / Military Trl, in unincorporated Boynton Beach, Palm Beach County, in reference to a 2-vehicle crash. Upon arrival, I conducted a civil crash investigation and ultimately determined the defendant was operating a white Chrysler sedan bearing FL tag LQDQ67 through my on-scene investigation to inlude a sworn statement from Matthew Regalado, the operator of the black Hyundai sedan bearing FL tag 14DNJY which was the other vehicle involved in the crash.

OBSERVATION OF DRIVER:

I observed the defendant, Michelle Kettner, who was wearing a blue tank top, blue jeans and clear heeled shoes. The defendant was standing outside the vehicle in the center median. Eventually, I asked the defendant to walk over to the front of my vehicle and speak with me. While standing stationary the defendant swayed. I could see the defendants eyes were bloodshot and glossy. She had an obvious odor of an unknown alcoholic beverage emitting from her breath that grew stronger as she spoke. The defendants speech was slurred.

DRIVER'S STATEMENTS:

The defendant said she did not wear glasses and was unsure if she had diabetes. The defendant stated she been involved in the car crash. The defendant said she had zero alcoholic beverages. The defendant said she was coming from a friends house in Boynton Beach, FL and was headed to another friends house. She said she was driving the vehicle. I asked the defendant to submit to roadside field sobriety tasks to which she initially agreed. However the defendant refused to follow directions and repeatedly moved her head while following the stimulus to check her eyes and eventually would only look into my eyes. I moved on to the walk and turn at which point she indicated she no longer wished to perform the tasks. I read the defendant a Taylor warning which included the verbiage "If you fail to submit to the roadside tasks I am requesting, it can be used against you in court. If you fail to submit to the roadside tasks I am requesting, I will be forced to conclude my investigation and base my decision as to your impairment solely on the facts at hand." . I asked the defendant if she was still unwilling to perform the tasks and she stated she would not perform the tasks.

ODORS:

Obvious odor of an unknown alcoholic beverage

GENERAL OBSERVATIONS

SPEECH: **Slurred**

ATTITUDE: **Calm, Compliant, Repetitive**

CLOTHING: **Neat and Clean**

MEDICAL/OTHER: **complained of wrist pain**

NOT A CERTIFIED COPY

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S Galloway
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 27th day of September 20 25 by D/S Galloway

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

Joshua Bell (#8656)
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

JOSHUA BELL
Notary Public - State of Florida
Commission # HH 418882
My Comm. Expires Jul 9, 2027
Bonded through National Notary Assn.

SUBJECT: Kettner, Michelle, Estrella **CASE NUMBER** 25-100783

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

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

Other Observations:
The defendant swayed while standing stationary. The defendant failed to keep her feet together. I had to remind the defendant to not turn her head multiple times.

WALK & TURN:
Refused

ONE LEG STAND:
Refused

FINGER TO NOSE:
Refused

ROMBERG ALPHABET:
Refused

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

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S Galloway
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 27th day of September 20 25 by D/S Galloway

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

Joshua Bell (#8656)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

JOSHUA BELL
Notary Public - State of Florida
Commission # HH 418882
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PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # **25-100783** PBSO ZONE **6-32**

AGENCY CASE # **N/A** CRASH CASE # **25-100778**

TIME OF STOP/CRASH **0220 hrs** DATE **09/27/2025** DAY **Saturday**

SUBJECT'S NAME **Kettner, Michelle, Estrella** RACE **H** SEX **F**

HGT **5'04** WGT **130** DOB **5/5/1982**

LOCATION **Boynton Beach Blvd / Military Trl.**

ARRESTING OFFICER'S NAME & ID **D/S Galloway (39654)** AGENCY **Palm Beach County Sheriff's Office**

DIVISION: **Patrol**

NOTIFIED BY COMMO **YES**

ARRIVAL AT FACILITY **0354**

ARREST TIME **0323**

BREATH RESULTS:

1)
2)
3)
4)

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TESTING OFFICER'S ID **8656** PBSO VIDEOTAPE #

WITNESS LIST

CASE NUMBER: 25-100783

ARRESTING OFFICER: D/S Galloway

ADDRESS: PBSO

PHONE NUMBERS (HOME): _____ (WORK) 561- 385-7441 (Night Shift)

CAN TESTIFY TO: Facts of the case - Crash Investigation, Indicators of Impairment

NAME: MATTHEW REGALADO

ADDRESS: 7743 BISHOPWOOD RD LAKE WORTH FL 33467

PHONE NUMBERS (HOME) 717-833-4360 (WORK) _____

CAN TESTIFY TO: Witness to actual physical control of the vehicle

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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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: KETTNER, MICHELLE ESTRELLA

CASE NUMBER: 25-100783

DATE: Sep 27, 2025

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0432

ENDING TIME: 0437

BREATH TESTS RESULTS: 1) R TIME 0434 A.M. ☒ P.M. ☐ 2) XX TIME XX A.M. ☐ P.M. ☐

3) XX TIME XX A.M. ☐ P.M. ☐ 4) XX TIME XX A.M. ☐ P.M. ☐

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: COOPERATIVE

CLOTHING: BLUE SLEEVELESS SHIRT, BLUE JEANS, GOLD HEELS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: BLOODSHOT, GLASSY

COMMENTS:

ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0354 HOURS

SUBJECT STATED SHE WOULD NOT TAKE BREATH TEST

A/O READ I.C AT 0434
SUBJECT STATED SHE UNDERSTOOD I.C 100%
SUBJECT AGAIN STATED SHE WOULD NOT TAKE BREATH TEST

REFUSAL TIME 0434 HOURS

A/O READ RIGHTS
SUBJECT STATED SHE UNDERSTOOD HER RIGHTS 100%

SUBJECT ASKED FOR A LAWYER / Q AND A NOT CONDUCTED

SUBJECT STATED SHE WOULD NOT SIGN HER DUI CITATION
A/O ADVISED SUBJECT IF SHE DID NOT SIGN SHE WOULD BE CHARGED FOR IT
SUBJECT AGAIN STATED SHE WOULD NOT SIGN HER DUI CITATION

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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: _____

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

FORM #0126BR REV 08/24

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SUBJECT: _____ CASE NUMBER: _____

QUESTIONS AND ANSWERS

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

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

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

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

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

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

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

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

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

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

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

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

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

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

WHAT? _____ WHERE? _____ WHEN? _____

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

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

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

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

WERE YOU IN AN ACCIDENT TODAY? _____

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

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

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

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

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

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

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

INTERVIEWER: _____

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STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST

I, Deputy SEAN GALLOWAY (Person reading Implied Consent Warning), a duly certified Law Enforcement Officer or Correctional Officer, am a member of Palm Beach County Sheriffs Office (Name of enforcement agency), and I do swear or affirm that on or about the TWENTY-SEVENTH day of September, 2025, at 5:33 AM

DRIVER (Type or Print) MICHELLE (FIRST) ESTRELLA (MIDDLE OR MAIDEN) KETTNER (LAST),

DL # K356545826650, state of FL, was placed under lawful arrest for the offense of DUI by Deputy SEAN GALLOWAY (Name of Arresting Officer) and issued Citation # ALA9EKE.

That on or about the TWENTY-SEVENTH day of September, 2025, at 4:34 AM in Palm Beach County,

I requested that the driver submit to a **BREATH** test for the purpose of determining its alcohol content. I informed the driver that the refusal to submit to such test would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended, or if he or she had been previously fined under s. 327.35215, F.S., for refusing to submit to a breath, urine, or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended, or if he or she has been previously fined under s. 327.35215, F.S., for refusal to submit to a lawful test of his or her breath, urine, or blood. Nonetheless, the driver refused to submit to the test requested.

Signature of Law Enforcement Officer or Corrctional Officer

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

JOSHUA BELL
Notary Public - State of Florida
Commission # HH 418882
My Comm. Expires Jul 9, 2027
Bonded through National Notary Assn.

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this 27 day of September, 2025, by D/S Galloway who is personally known to me or who has produced known as identification.

Notary Public

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title

Date

Note: Mail or hand deliver to the designated Bureau of Administrative Reviews office, Department of Highway Safety and Motor Vehicles, with the driver's license, the appropriate copy of the UTC, and the probable cause affidavit.

****EFFECTIVE OCTOBER 1, 2021****

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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	6-11
	☐	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: 2025025969	**Date:** 9/28/2025
	Specialist Name/ID#: Angela Pinkney/7796