J#0562436 25CT16923SB PH 446

☐ Marsy's Law CVI FL. Const. Art.1 § 16(b) ☐ Check if Supplement is Attached

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number
FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	0 6 - 25-109065

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)	
W. Palmetto Park Road/ Lyons Road	Boca Raton, Florida 33428	W. Palmetto Park Road/ Lyons Road	Boca Raton, Florida 33428

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
10/25/25	0416					

DEFENDANT

Name (Last, First, Middle)			Alias (Name, DOB, Soc. Sec. #, Etc.)
Matos	Nicolle	Marie	

Race (W - White, B - Black, I - American Indian, O -Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	09/12/1995	5-06	130	BROWN	BROWN	MEDIUM	MEDIUM

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)	Marital Status	Religion	Indication of:	Y	N	Unk
tattoos right wrist, lower back, stomach	Single	Catholic	Alcohol Influence	☒	☐	☐
			Drug Influence	☐	☐	☒

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Mobile Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State
299 SW 7th Street Apt 105	Boca Raton, Florida 33432			561-558-3885	2

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

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
M246491730000,	[redacted]		New York, 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
1. Low			( )

Address (Street, Apt. Number)	(City)	(State)	(Zip)	Business Phone
2. Low				( )

Notified by: (Name)	Date	Time	Juvenile Disposition 1. Handled/Processed within Dept. and Released. 2. TOT HRS/DYS 3. Incarcerated
3. 250			

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 #
D.U.I.	1	☐ Y ☒ N	316.193(1A)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	Refused	25-109065		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Refusal to Submit to Testing	1	☐ Y ☒ N	316.1939(1E)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		25-109065		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Refusal to Accpet Summons	1	☐ Y ☒ N	318.14(3)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		25-109065		

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

Court Date and Time: Month November Day 20th 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: 10/25/25

25 OCT 28 AM 8:21

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	Name Verification (Printed by Arrestee)
☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other:	X	OCT 25 AM 7:10 (PRINT)
	Name of Arresting Officer (Print) K. Noel I.D. # 7660	
Intake Deputy I.D. # Pouch #	Transporting Officer K. Noel I.D. # 7660 Agency PBSO	Witness here if subject signed with an "X"

PAGE 1 OF 1

PBSO #0148 REV. 01/23 DISTRIBUTION: COURT COPY STATE ATTORNEY AGENCY AGENCY DEFENDANT (N.T.A.'s ONLY)

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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: FLO 5 0 0 0 0 0 0

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 25109065

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
Matos, Nicolle		w	f	09/12/1995

CHARGES

Charge Description	Charge Description
DUI	

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 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.

☐ confessed to _____ admitting to the below facts.

☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.

☐ was found to have committed the below acts, resulting from my (described) investigation.

On the _____ day of _____, 20 ____ at _____ ☐ A.M ☐ P.M (Specifically include facts constituting cause for arrest.)

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

On October 25, 2025, at approximately 0311, while on routine patrol, I observed a black Mercedes bearing FL tag (QCTQ26) facing Westbound on Palmetto Park Rd in the turn lane just East of Lyons Rd.

I stepped checked out with the vehicle and observed a white female in the passenger seat, head down, with loud music playing. I knocked on the driver's side window several times but got no response from the driver. Palm Beach County Fire Rescue 57 responded to the scene under run # PBC25127875 and made entry to the vehicle through the rear passenger side door.

As I entered the vehicle, I smelled a potent smell of alcohol while unresponsive in the driver's seat of the vehicle before being woken up by Fire Rescue. Fire rescue made multiple attempts to wake the driver. The driver was woken up, she responded by slurring her words, and was unaware of her location, and I smelled the odor of alcohol emitting from her breath.

Investigator K. Noel #7660 responded to the scene and conducted his investigation.

NOT A CERTIFIED COPY

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

49971
(Signature of Arresting/Investigating Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 25th day of October 20 25 by _____

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

7660
Notary Public, Clerk of Court, Officer (F.S.S): 117.10)

PAGE 1 OF 1

PBSO #0004 REV.4/22 DISTRIBUTION: Court Copy State Attorney Agency Agency

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 25th DAY OF October 20 25 , AT 0312 ☒ AM ☐ PM

SUBJECT: Matos Nicolle Marie CASE NUMBER: 25-109065

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: K. Noel 7660

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

On October 25th 2025 at approximately 3:20 a.m., I responded to the area of W. Palmetto Park Road and Lyons Road in reference to a possible impaired motorist per the request of D/S R. Fisher ID 43371. This area is located in unincorporated Boca Raton, Florida, Palm Beach County. Upon arrival, I met with D/S Fisher and learned the following through a sworn P.C Affidavit:

"On October 25, 2025, at approximately 0311, while on routine patrol, I observed a black Mercedes bearing FL tag (QCTQ26) facing Westbound on Palmetto Park Rd in the turn lane just East of Lyons Rd. I stepped checked out with the vehicle and observed a white female in the passenger seat, head down, with loud music playing. I knocked on the driver's side window several times but got no response from the driver. Palm Beach County Fire Rescue 57 responded to the scene under run # PBC25127875 and made entry to the vehicle through the rear passenger side door. As I entered the vehicle, I smelled a potent smell of alcohol while unresponsive in the driver's seat of the vehicle before being woken up by Fire Rescue. Fire rescue made multiple attempts to wake the driver. The driver was woken up, she responded by slurring her words, and was unaware of her location, and I smelled the odor of alcohol emitting from her breath. Investigator K. Noel #7660 responded to the scene and conducted his investigation."

OBSERVATION OF DRIVER:

I observed the driver to be still seated behind the wheel of the above mentioned vehicle. It should be noted that D/S Fisher had shut the vehicle, which is key fob controlled. I observed the driver to be wearing a black dress and top with high heel shoes. The driver was identified by her FL DL as the above listed and was the registered owner of the above mentioned vehicle. The driver presented as confused asking, "What's going on" as I approached and greeted her. I asked the driver to step out of the vehicle where we began our conversation. The driver could not remember that PBCFR medical personnel had checked her clinicals as I noticed the circular stick pads on her arms and ankle; the driver had no knowledge that they were on her; also not realizing that PBCFR had to break her vehicle rear corner window to do a sternum rub in order to wake her up; being passed out asleep behind the wheel being a common indicator(s) of impairment. PBCFR run number 25127875. As the driver exited the vehicle, I asked her to stand in front of me, facing me in front of my vehicle. As the driver stood in front of me, I observed an obvious odor of alcohol, which intensified through a Spanish accent. I observed the drivers eyes to be glassy and red bloodshot as she stood swaying noticeably. The driver was very confused about everything. While checking the drivers eyes, the driver had difficulty following instructions by continuously moving her head and not properly following the stimulus.

DRIVER'S STATEMENTS:

[redacted] **The driver stated that she was in Ft. Lauderdale then Delray on Atlantic Ave "hanging out."**

ODORS:

obvious odor of alcohol

GENERAL OBSERVATIONS

SPEECH: **Spanish accent**

ATTITUDE: **mood swings**

CLOTHING: **see above**

MEDICAL/OTHER: **none known**

TATE OF FLORIDA
OUNTY OF PALM BEACH

K. Noel **7660**
Signature of Arresting/Investigative Officer)

25th **October** **25** **K. Noel** **7660**
he foregoing instrument was sworn to or affirmed and subscribed before me this day of 20 by

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

otary 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.

NOT A CERTIFIED COPY

SUBJECT: Matos Nicolle **CASE NUMBER** 25-109065

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS / LIGHTED PEN STIMULUS TASK: SFST

☒ 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:

Due to the drivers inability to follow the stimulus properly, I was unable to get an accurate angle of onset. VGN was observed. The driver displayed occasional mood swings during the tasks, also being indicative of alcohol impairment.

WALK & TURN: SFST

The driver was placed on a solid yellow piece of tape line, which the roadway was flat, level and well lit. The driver could not maintain the instructions stance while talking over my instructions repeatedly. The driver staggered nine steps, hands not to the side, stepping off the line, etc. The driver did not turn properly, as instructed then walked back about ten steps in the same manner.

ONE LEG STAND: SFST

During the instructional stance, the driver did sway noticeably. The driver used her right foot for the task. The driver was unable to keep her foot up, putting it down two or three times while using her arms for balance.

FINGER TO NOSE:

During the instructional stance, the driver did sway noticeably , again talking over my instructions causing me to repeat them several times. The driver did not follow any of the instructions for this tasks.

ROMBERG ALPHABET:

During the instructional stance, the driver did sway noticeably. The driver sang the alphabet.

NOT A CERTIFIED COPY

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

STATE OF FLORIDA
COUNTY OF PALM BEACH

K. Noel 7660
gnature of Arresting/Investigative Officer)

e foregoing instrument was sworn to or affirmed and subscribed before me this 25th day of October 20 25 by K. Noel 7660

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

tary 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.

PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

NOT A CERTIFIED COPY

PBSO CASE # **25-109065** PBSO ZONE **7-42**

AGENCY CASE # **N/A** CRASH CASE # **N/A**

TIME OF STOP/CRASH **0312** DATE **10/25/2025** DAY **Saturday**

SUBJECT'S NAME **Matos** (LAST) **Nicolle** (FIRST) (MID)

DOB **09/12/1995** HGT **5-06** WGT **130** RACE **W** SEX **F**

LOCATION **W. Palmetto Park Road/ Lyons Road** **Boca Raton, Florida 33428**

ARRESTING OFFICER'S NAME & ID **K. Noel** **7660** **Palm Beach County Sheriff's Office** (AGENCY)

DIVISION: **Road Patrol**

NOTIFIED BY COMMO **yes**

BREATH RESULTS:

1)
2) REFUSED
3)
4)

ARRIVAL AT FACILITY **0458**

ARREST TIME **0416**

Bell 8656

BAT TECH. OFFICER NAME & ID

PBSO VIDEOTAPE #

WITNESS LIST

CASE NUMBER: 25-109065

ARRESTING OFFICER: K. Noel

ADDRESS: PBSO

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

CAN TESTIFY TO: DUI

NAME: D/S R. Fisher ID 43371

ADDRESS: PBSO

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

CAN TESTIFY TO: traffic stop

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: _____

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: _____

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: MATOS, NICOLLE MARIE

CASE NUMBER: 25-109065

DATE: Oct 25, 2025

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0522

ENDING TIME: 0531

BREATH TESTS RESULTS: 1) R TIME 0526 A.M. ☒ P.M. ☐ 2) XX TIME XX A.M. ☐ P.M. ☐

REFUSED

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: TALKATIVE, REPETITIVE, ARGUMENTATIVE

CLOTHING: BLACK DRESS, BLACK HEELS

MEDICAL CONDITIONS: UNKNOWN

MEDICATIONS: UNKNOWN

OTHER:

EYES: BLOODSHOT, GLASSY

ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

COMMENTS:

ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0458 HOURS

SUBJECT STATED SHE WOULD NOT TAKE BREATH TEST

A/O READ I.C 2 TIMES AT 0524
SUBJECT STATED SHE UNDERSTOOD I.C
SUBJECT AGAIN STATED SHE WOULD NOT TAKE BREATH TEST

REFUSAL TIME 0526

SUBJECT STATED SHE WILL NOT SIGN HER CITATIONS
A/O ADVISED SUBJECT SHE WILL BE CHARGED FOR NOT SIGNING

REFUSED

NOT A CERTIFIED COPY

STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST

I, K. Noel 7660, a duly certified Law Enforcement or Correctional Officer, am a
(Name of Officer reading Implied Consent Warning)
member of Palm Beach County Sheriff's Office, and I do swear
(Name of Law Enforcement Agency)
or affirm that on or about the 25th day of October, 2025, at 0416 ☐P.M. ☒A.M.
DRIVER Nicolle Marie Matos,
FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME
DL # M246491730000, state of FLORIDA, was placed under lawful arrest for
the offense of D.U.I. 316.193(1) by K. Noel 7660 and
(Name of Arresting Officer)
issued citation # ALA9GHE.

That on or about the 25th day of October, 2025, at 0526 ☐P.M. ☒A.M.
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, and that he or she commits a misdemeanor of the second degree by so refusing. Additionally, 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 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, and that he or she commits a misdemeanor of the first degree by so refusing. Nonetheless, the driver refused to submit to the test requested.

7660
Signature of Law Enforcement Officer or Correctional 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 25 day of October, 2025, by INV NOEL, who is personally known to me or who has produced _____ as identification.

Notary Public Joshua Bell

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.

NOT A CERTIFIED COPY

EFFECTIVE OCTOBER 1, 2025

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

DUI Breath Implied Consent

NOT APPLICABLE WITH VOLUNTARY CONSENT

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

DATE OF ARREST: 10/25/25 TIME OF ARREST: 04:16

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. Additionally, if you refuse to take the test I have requested of you, you will be committing a misdemeanor of the SECOND DEGREE if this is your first refusal, in addition to any other penalties which can be imposed by law. If you refuse to take the test I have requested of you, and if your driving privilege has been PREVIOUSLY SUSPENDED, or if you have been PREVIOUSLY FINED under s. 327.35215, for a refusal to submit to a lawful test of your breath, urine, or blood, your driving privilege will be suspended for a period of eighteen (18) months. Additionally, you will be committing a misdemeanor of the FIRST DEGREE, in addition to any other penalties which can be imposed by law. Refusal to submit to the test I have requested is admissible into evidence in any criminal proceeding.

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)*

In addition, if you hold a Commercial Driver's License (CDL), or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privileges for one year from today. If this is your second refusal, you will be permanently disqualified from operating a Commercial Motor Vehicle (CMV).

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: 10/25/25 Time read: 05:24 Location read: [illegible] WAT

LAW ENFORCEMENT OFFICER NAME (printed): K. Nicol ID: 7110

LAW ENFORCEMENT OFFICER SIGNATURE: [signature]

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

FORM #0126BR REV 09/25

NOT A CERTIFIED COPY

SUBJECT: Mat[illegible] Nicolle Marie CASE NUMBER: 25-1C1C65

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: INV K Nrel # 7((C

NOT A CERTIFIED COPY

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	4
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	12-14
	☐	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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Booking Number: 2025028595	**Date:** 10/26/2025
	Specialist Name/ID#: Joseph Kovach/44820