05 38098 23CT2555MG 2548

☐ 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 0	PALM BEACH COUNTY SHERIFF'S OFFICE	0 6 -| 23-034639 ( )

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)	Location of Offense (Business Name, Address)
AERO CLUB RD AND PALM BEACH POINT BV WELLINGTON FL	AERO CLUB RD AND PALM BEACH POINT BV, WELLINGTON FL 33414

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
02/08/2023	2316					D&D TOWING

DEFENDANT

Name (Last, First, Middle): **Burns, Olivia, Cabot**

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	7/12/1996	5'05	125	BLU	BRO	FAIR	SMALL

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): NONE

Marital Status: Single — Religion: NONE

Indication of: Alcohol Influence [X] Y ☐ N ☐ Unk; Drug Influence ☐ Y ☐ N [X] Unk

Local Address (Street, Apt. Number) (City) (State) (Zip): 15684 Ocean Breeze Ln, Wellington, FL 33414

Mobile Phone: ( )

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

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

Phone: ( )

Address Source: FL DL

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

Phone: ( )

Occupation:

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
B652643967520, FL	[redacted]		Boston MA	US

CO-DEF

Co-Defendant (Last, First, Middle)	Race	Sex	Date of Birth	
				☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
				☐ 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 #
DUI	1	☐ Y [X] N	316.193(1)A	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		23-034639		

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): 3228 GUN CLUB RD WEST PALM BEACH FL 33406 - Ph: (561) 355-2996

Court Date and Time: Month MARCH Day 2 Year 2023 Time 0800 A.M. [X] 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 (and Parent/Guardian if Juvenile) — Date Signed: 02/08/2023

SCANNED FEB 09 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 ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Name of Arresting Officer (Print) I.D. #: INV E. K. WHITE

Intake Deputy I.D. # Pouch #: D. DUNN 5616 2

Transporting Officer I.D. # Agency: INV. E. K. WHITE 7209 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	Agency Name	Agency Report Number
FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	23-034639

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
Burns, Olivia, Cabot		W	F	7/12/1996

CHARGES

Charge Description	Charge Description
DUI 316.193(1)A	
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**
	( )	

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 8 day of FEBRUARY 20 23 at 2217 ☐ A.M ☒ P.M (Specifically include facts constituting cause for arrest.)

PROBABLE CAUSE STATEMENT

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

On Wednesday, February 8, 2023 at approximately 2225 hours, I responded to Aero Club Road and Palm Beach Point Boulevard to assist Deputy Miller with a "Mobile Eyes" complaint of a vehicle a vehicle traveling with three (3) tires blown out. The complainant followed the vehicle and made contact with a white female driver. He tried speaking with her and she drove off. Deputies arrived in the area in search of the vehicle. D/S Miller located the vehicle at the previous mentioned location. After speaking with the driver he suspected her to be impaired. He asked for a DUI unit to respond to assess the driver further for possibly being impaired. Upon my arrival I noticed several patrol units on scene. A white Cadillac utility vehicle, bearing current Florida license plates "67 DBHN", was stopped ahead of the patrol cars on the north shoulder of the roadway. The vehicle incurred damage to its passenger side and front driver side wheels. The entire rubber portion of the tires were ruptured and removed from the rims. Parts of the exposed rims were missing. A white female was seated in the driver seat. She was later identified as Olivia Cabot Burns by her Florida driver license. Her eyes were red, watery and glossy. Her cheeks were flushed, mouth dry and she slurred her speech while speaking. I could smell a faint odor of an unknown alcoholic beverage emanating from the inside of her vehicle. She was wearing a black dress and pink high heel shoes. I told her a complaint was made against a white utility vehicle for traveling on its rims. Deputies responded and made contact with the vehicle with her being the driver. Additionally I explained I had a suspicion that she had been drinking an unspecified amount of alcoholic beverages. She told me she drank two drinks at dinner. She attributes her tires being blown out for her inability to see well. As a result of her limited vision she told me she struck the concrete roundabout which caused her tires to blow. Based on my suspicion I asked if she would consent to performing Standardized Field Sobriety Evaluations (SFSTs) for the purpose of determining if she was impaired while operating a motor vehicle. She obliged. I gave her the opportunity to remove her high heels for the purpose of performing the tasks. She removed her shoes and walked over to the area where I administered the tasks.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV E. K. WHITE
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 8 day of FEBRUARY 20 23 by INV E. K. WHITE

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

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.

DISTRIBUTION WHITE — YELLOW – Agency PINK – Agency

PBSO #0004 REV. 04/22

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PROBABLE CAUSE AFFIDAVIT

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

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	23034639

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
? ?		W	F	07/12/1996

CHARGES

Charge Description	Charge Description
DUI	
Charge Description	Charge Description

VICTIM

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

Local Address (Street, Apt Number) (City) (State) (Zip)	Phone	Address Source
	( )	

Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation
3228 Gun Club Road, West Palm Beach, FL 3401	( ) (561) 688-3000	

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 8 day of February 2023 20 ___ at 2313 ☐ A.M ☒ P.M (Specifically include facts constituting cause for arrest.)

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

On Wednesday, February 8, 2023 at approximately 2217hrs I responded to a report of a Mobile Eyes or possible intoxicated driver. The original caller advised that she had observed a white Cadillac Escalade SUV traveling on Paddock Dr on two blown tires. I located the caller at the intersection of Greenview Shores Blvd and Paddock Dr where a destroyed vehicle tire was laying in the roadway. I picked up the tire to clear the roadway and felt that it was hot to the touch. The caller stated that she had last seen the Escalade traveling south from the intersection. I could see fresh white gouge marks in the roadway from where the tire had been. I followed the gouge marks which proceeded in a general southwesterly direction. As I followed I observed debris in the roadway including pieces of tire and plastic. The gouge marks eventually led me to the intersection of Greenbriar Blvd and Palm Beach Point Blvd. I noticed a white Cadillac Escalade parked on the side of the southbound lane of Palm Beach Point Blvd. I pulled behind the Escalade bearing FL tag #67DBHN and activated my rear overhead lights. I approached the vehicle which was not running, on the passenger side where I observed the sole occupant seated in the driver seat. I opened the passenger door and asked the driver, later identified as W/F Olivia Burns, what had happened to her car. Burns stated that she was driving home when she struck a roundabout somewhere in the roadway. As Burns spoke her words seemed slurred and her eyes were watery. Burns was on a call with AAA and stated that he was just trying to make it home. I asked Burns if she was having a medical emergency to which she answered no. Additional deputies arrived on scene and one asked where she was coming from and if she'd had anything to drink. Burns stated that she was returning home from Kontiki, a local sushi restaurant, and that she had one drink with dinner. I then examined the Escalade noting that three of its four tires were gone and the wheels were heavily damaged. Based on my observations of Burns and the vehicle I suspected that Burns may have been under the influence of alcohol. I requested a DUI investigator to respond to the scene. Inv. White arrived a short time later and took over the investigation. This concluded my involvement in the case.

NOT A CERTIFIED COPY

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

24991
(Signature of Arresting /Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 8 day of February 20 23 by D/S Miller #24991

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

Known

Inv. E. K. White JE 7209
Notary Public, Clerk of Court, Officer (F.S.S). 117.10

PAGE 1 OF 1

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PBSO #0004 REV. 04/22

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: 23-034639

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
Burns, Olivia, Cabot		W	F	7/12/1996

CHARGES

Charge Description	Charge Description
DUI 316.193(1)A	
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 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 8 day of FEBRUARY 20 23 at 2217 ☐ A.M ☒ P.M (Specifically include facts constituting cause for arrest.)

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

On Wednesday, February 8, 2023 at approximately 2225 hours, I responded to Aero Club Road and Palm Beach Point Boulevard to assist Deputy Miller with a "Mobile Eyes" complaint of a vehicle a vehicle traveling with three (3) tires blown out. The complainant followed the vehicle and made contact with a white female driver. He tried speaking with her and she drove off. Deputies arrived in the area in search of the vehicle. D/S Miller located the vehicle at the previous mentioned location. After speaking with the driver he suspected her to be impaired. He asked for a DUI unit to respond to assess the driver further for possibly being impaired. Upon my arrival I noticed several patrol units on scene. A white Cadillac utility vehicle, bearing current Florida license plates "67 DBHN", was stopped ahead of the patrol cars on the north shoulder of the roadway. The vehicle incurred damage to its passenger side and front driver side wheels. The entire rubber portion of the tires were ruptured and removed from the rims. Parts of the exposed rims were missing. A white female was seated in the driver seat. She was later identified as Olivia Cabot Burns by her Florida driver license. Her eyes were red, watery and glossy. Her cheeks were flushed, mouth dry and she slurred her speech while speaking. I could smell a faint odor of an unknown alcoholic beverage emanating from the inside of her vehicle. She was wearing a black dress and pink high heel shoes. I told her a complaint was made against a white utility vehicle for traveling on its rims. Deputies responded and made contact with the vehicle with her being the driver. Additionally I explained I had a suspicion that she had been drinking an unspecified amount of alcoholic beverages. She told me she drank two drinks at dinner. She attributes her tires being blown out for her inability to see well. As a result of her limited vision she told me she struck the concrete roundabout which caused her tires to blow. Based on my suspicion I asked if she would consent to performing Standardized Field Sobriety Evaluations (SFSTs) for the purpose of determining if she was impaired while operating a motor vehicle. She obliged. I gave her the opportunity to remove her high heels for the purpose of performing the tasks. She removed her shoes and walked over to the area where I administered the tasks.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV E. K. WHITE
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 8 day of FEBRUARY 20 23 by INV E. K. WHITE

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

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.

PAGE 1 OF 2

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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 8 DAY OF FEBRUARY 20 23, AT 2217 AM PM

SUBJECT: Burns, Olivia, Cabot CASE NUMBER: 23-034639

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV E. K. WHITE

PERSONAL CONTACT

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

SEE PC AFFIDAVIT

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OBSERVATION OF DRIVER:

SEE PC AFFIDAVIT

DRIVER'S STATEMENTS:

ADMITTED TO DRINKING TWO DRINKS

ODORS:

FAINT ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE EMANATING FROM SUBJECT'S BREATH.

GENERAL OBSERVATIONS

SPEECH: **SLURRED**

ATTITUDE: **LETHARGIC, COOPERATIVE, INATTENTIVE, EMOTIONAL**

CLOTHING: **TIGHT**

MEDICAL/OTHER: **DEPRESSION**

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV E. K. WHITE
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 8 day of FEBRUARY 2023 by INV E. K. WHITE

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

Thomasina Miller

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

THOMASINA MILLER
Notary Public - State of Florida
Commission # HH 334641
My Comm. Expires Dec 7, 2026
Bonded through National Notary Assn.

SUBJECT: Burns, Olivia, Cabot CASE NUMBER 23-034639

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

Other Observations:

Subject was asked to stand with their feet together and place their hands by their side. They were asked to focus on the stimulus and follow it with their eyes. Lastly they were told not to move their head to assist in following the stimulus with their eyes. Subject showed equal pupil size that tracked equally. Both eyes lacked a smooth pursuit. I saw distinct and sustained Nystagmus at maximum deviation. I also saw an onset of Nystagmus prior to 45 degrees in both eyes. Subject swayed while performing this task.

WALK & TURN:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE WALK AND TURN. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject was unable to maintain balance while placed in the instructional position, swayed and abandoned the position altogether. During the performance subject failed to touch heel to toe, stepped off the line, could not maintain balance while walking the line, stopped on line to steady, took an incorrect number of steps and turned improperly

ONE LEG STAND:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE ONE LEG STAND. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject swayed while standing, she did not keep her arms by her side as instructed-did not look at elevated foot.

FINGER TO NOSE:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE FINGER TO NOSE. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject swayed while placed in the instructional position, failed to touch the tip of his finger to the tip of his nose on all six attempts, rather searched for the tip of her nose by slowing her approach once she neared it. She made contact underneath, the bridge of her with the pad of the finger. She failed to return her arm to her side after making contact with her nose.

ROMBERG ALPHABET:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE ROMBERG ALPHABET TASK. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject swayed while performing this task. Did not recite the alphabet correctly on her first attempt. She did not perform this task as instructed on her second attempt.

BREATH TEST RESULTS: 1) .135 | 2) .119 | 3) | 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV E. K. WHITE
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 8 day of FEBRUARY 20 23 by INV E. K. WHITE

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

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.

NOT A CERTIFIED COPY

WITNESS LIST

CASE NUMBER: 23-034639

ARRESTING OFFICER: INV E. K . WHITE

ADDRESS: CID/DUI

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

CAN TESTIFY TO: FACTS

NAME: D/S MARSHALL MILLER

ADDRESS: DIST 8

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

CAN TESTIFY TO: MAKING CONTACT WITH THE VEHICLE AND SEEING THE DEFENDANT IN THE DRIVER SEAT

NAME: JOHN FLANAGAN

ADDRESS 401 RINKER WAY SUITE 1 LAKE WORTH FL 33641

PHONE NUMBERS (HOME) 561248 3315 (WORK) 561 533 7068

CAN TESTIFY TO: MAKING THE MOBILE EYES COMPLAINT

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) 0

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: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

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ADDRESS _____

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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: _____

NOT A CERTIFIED COPY

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: Inv. F. L. WHITE 729

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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

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: BURNS, OLIVIA .C.

CASE NUMBER: 23-034639

DATE: Feb 8, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 00:18

ENDING TIME: 00:32

BREATH TESTS RESULTS: 1) .135 TIME 00:24 A.M. ☒ P.M. ☐ 2) .119 TIME 00:28 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: MUMBLED

ATTITUDE: CRYING, EMOTIONAL, MOODY, PROFANITY

CLOTHING: BLACK DRESS, NO SHOES

MEDICAL CONDITIONS: PANIC ATTACKS

MEDICATIONS: A LOT OF MEDICATIONS

OTHER:

PRESENT: M. GONZALEZ
BLOODSHOT AND GLASSY EYES.

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 23:54 HRS.

SUBJECT: AGREED TO TAKE TEST.

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

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

NO Q & A CONDUCTED.

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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 CO SO
Instrument Serial Number: 80-001741 Software: 8100.27
Date of Test: 02/09/2023

Date of Last Agency Inspection: 01/13/2023
Observation Period Began: 23:54
Subject's Name: OLIVIA C BURNS DOB: 07/12/1996 Sex: F

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	00:22
Air Blank	0.000	00:22
Control Test	0.079	00:23
Air Blank	0.000	00:23
Subject Sample #1	0.135	00:24
Air Blank	0.000	00:25
Air Blank	0.000	00:26
Subject Sample #2	0.119	00:28
Air Blank	0.000	00:28
Control Test	0.078	00:29
Air Blank	0.000	00:29
Diagnostics Check	OK	00:29

Cylinder Lot: 15922080A3
Exp: 08/05/2024

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 THOMASINA E MILLER, 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: Thomasina Miller Date: 02/09/23
Signature

Sworn to (or affirmed) before me this 09 day of February, 2023

Signature of Notary Public-State of Florida

Ivy E.M White
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

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	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2023003765	**Date:** 2/9/2023
	Specialist Name/ID: M. Tooks #8557