0543020 23CT15714 1532

☐ 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: FL0 5 0 0 0 0 0

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 06 - 23-105179 ( )

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): 2646 OKEECHOBEE BV WEST PALM BEACH FL

Location of Offense (Business Name, Address): OKEECHOBEE BV (W) OF MILITARY TRAIL, WEST PALM BEACH FL 33409

| Date of Arrest | Time of Arrest | Booking Date | Booking Time | Jail Date | Jail Time | Location of Vehicle |
|---|---|---|---|---|---|---|
| 08/30/2023 | 2332 | | | | | PANTHER TOWING |

**DEFENDANT**

Name (Last, First, Middle): MOLNAR, OLIVIA, A

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 | 11/15/1985 | 503 | 110 | BLU | BRO | FAIR | SMALL |

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

Marital Status: Single

Religion: CHRISTIAN

Indication of: Alcohol Influence, Drug Influence — Y ☒ / N ☐ / Unk ☐

Local Address (Street, Apt. Number) (City) (State) (Zip): 610 CLEMATIS ST. APT 308 , WEST PALM BEACH FL 33401

Mobile Phone: ( 248 ) 462 3542

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

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

Phone: ( )

Address Source: DEFENDANT

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

Phone: ( )

Occupation: NURSE

| D/L Number, State | Soc. Sec. Number | INS Number | Place of Birth (City, State) | Citizenship |
|---|---|---|---|---|
| M-456-641-85-915-0, | [redacted] | | ROMANIA | 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 |
| 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 ☒ N | 316.193(1)A | |

| Drug Activity | Drug Type | Amount / Unit | Offense # | Warrant / Capias Number | Bond |
|---|---|---|---|---|---|
| N | N | | 23-105179 | | OR |

**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

Court Date and Time: Month SEPTEMBER Day 28 Year 2023 Time 0800 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: 08/30/2023

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

☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other:

Intake Deputy: J. Duran I.D. # 3446 Pouch #

Signature of Arresting Officer: X

Name of Arresting Officer (Print): INV. E.K. WHITE I.D. # 7209

Transporting Officer: INV. E.K. WHITE I.D. # 7209 Agency: PBSO

Name Verification (Printed by Arrestee) (PRINT)

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

**ADMIN**

OBTS Number:

1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capias: 1

Juvenile: N

Agency ORI Number: FLO 5 0 0 0 0 0

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 23-105179

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 |
|---|---|---|---|---|
| MOLNAR, OLIVIA, A | | W | F | 11/15/1985 |

**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.

☐ 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 30 day of AUGUST 20 23 at 2311 ☐ A.M ☒ P.M (Specifically include facts constituting cause for arrest.)

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

**On Wednesday, August 30, 2023 at approximately 2310 hours, while patrolling eastbound on Okeechobee Boulevard, west of Military trail, West Palm Beach (Palm Beach County) Florida, I conducted a traffic stop on a blue Ford Escape for excessive speed. During my patrol I had my Dual Stalker Radar unit activated. The speed limit on Okeechobee Bv. is 45 miles per hour. The Ford utility vehicle changed to the outside lane as it sped pass me. I switched my Radar unit to the front same mode and captured a speed of 63 mph. As the vehicle pulled away from me I noticed it was weaving from side to side within the travel lane. I accelerated and caught up to it at the previously mentioned intersection. I called in the traffic stop to dispatch. After the traffic light cycled green I activated my emergency lights near a safe area for the vehicle to pull over and exit the roadway. The driver of the vehicle did not heed the emergency lights and later did not acknowledged the siren. I watched it drive off the roadway and straddle the edge line. It would often stop and accelerate. I sounded my air horn in combination with the flashing of the emergency lights and siren. We reached the parking lot at the Cumberland Store, located at 2646 Okeechobee Bv, where the vehicle pulled into the left turn entrance lane. It slowed and stopped momentarily. I could see a white female driver. The vehicle pulled into the parking lot and made a right turn. It traveled west toward the rear gas pumps and made a left turn alongside the pumps. The vehicle veered toward the southern most gas pump and nearly collided with it. It came to a stop afterward. I exited my patrol vehicle and approached her vehicle from the driver side. She began spraying perfume on her body and inside the vehicle. I made a conciliatory comment toward her spraying the fragrance. I later identified her as Olivia Anca Molnar by her Florida driver license. She appeared confused and unaware of her location. Her eyelids were droopy and her face was flushed. Her pupils were dilated and her eyes were red, watery and glossy. Her mouth was dry and she slurred her speech while speaking. Her movements were slow and lethargic. I could only smell the odor of the fragrance of perfume she sprayed on her and inside the car. She was wearing pink and white flowery dress. I told her the reason for stopping her and how uncontrollably her vehicle traveled prior to her stopping. She reported she was coming from Boca Raton from a friend's house. She explained she was traveling southbound to reach our current location. She thought she was on Highway 71, but did not know her direction of travel. I explained I had a suspicion she was impaired by either alcohol beverages, a chemical or controlled substance or a combination of them all. She told me she was not drinking. Based on my suspicion I asked if she would perform Standardized Field Sobriety Tasks to determined if she was in fact impaired while operating her vehicle. She obliged. Prior to her performance I asked if she had any physical issues with her body and if she was taking medication. She reported he neither has any physical issues with her body, nor is she taking medication. I escorted her to a level surface that was smooth and free from any obstruction and debris.**

**ADMINISTRATIVE**

STATE OF FLORIDA
COUNTY OF PALM BEACH

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

The foregoing instrument was sworn to, affirmed and subscribed before me this 31 day of AUGUST 20 23 by INV. E.K. WHITE

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

KNOWN LEO

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.



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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 | 23-105179 |

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 |
|---|---|---|---|---|
| MOLNAR, OLIVIA, A | | W | F | 11/15/1985 |

**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.
☐ 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 30 day of AUGUST 20 23 at 2311 ☐ A.M ☒ P.M (Specifically include facts constituting cause for arrest.)

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

**This area was well illuminated by lighting around the gas pumps. I could now smell a strong odor of an unknown alcoholic beverage coming from her breath that intensified when she spoke. I placed a yellow strip of tape on the surface that formed a line. The defendant identified the tape by announcing its color and placing her left foot on it when prompted to do so. I also offered her to remove her shoes if she like. She told me she was okay with them on. The following tasks were explained, demonstrated and acknowledged by her prior to her performance: HGN, THE WALK AND TURN, ONE LEG STAND (Omitted), FINGER TO NOSE AND THE ROMBERG ALPHABET RECITATION. Her deficiencies were recorded on another form on this work packet. At the conclusion of the tasks, coupled with the speeding violation and unsteady driving behavior of her vehicle and my observation of personal indicators of impairment exhibited by the defendant, probable cause was established for DUI. I told the defendant she was being placed under lawful arrest for the charge. She was handcuffed (checked for proper fit) prior to being seated into the rear of my patrol vehicle. A search of her vehicle revealed eight (8) sealed miniature bottles of Smirnoff Vodkas. Two additional bottles were consumed. Panther Towing responded on a rotation request and impounded the defendant's vehicle to their lot. Meanwhile I began transport to the main jail's breath analysis facility for further processing. Upon our arrival I escorted the defendant into the facility and began a 20 minute observation period. During this time the defendant did not ingest anything into her body orally or otherwise. Neither did she regurgitate. Afterward I escorted her into the testing room and asked her to provide breath samples for the purpose of detecting her alcohol content. She obliged and was turned over to the breath technician. The defendant provided one adequate breath samples that rendered result .275. She provided an inadequate sample on her next attempt. As she provided the sample I watched her stop blowing, breathe during the sample and make small puffs throughout her attempt. Her "Volume not met" on this attempt was ".234". The technician gave clear and precise instructions on how to provide the sample. After her inadequate attempt I read implied consent in which she acknowledged. I also told her this would be her last chance to provide a proper breath sample. I warned her not to allow the instrument to time out by not providing the sample in the time limit required. On her third and final attempt she continued to provide inadequate samples by repeating the her methods prior. The instrument timed out and she was deemed a "refusal" at 0050 hours. Her "Volume not met" was ".255". She was cited for excessive speed and booked into the main jail for DUI.**

**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 31 day of AUGUST 20 23 by INV. E.K. WHITE

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

Notary Public, Clerk of Court, Deputy Clerk (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.

PAGE 2 OF 2

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# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 30 DAY OF AUGUST 20 23, AT 2311 AM ✓ PM

SUBJECT: MOLNAR, OLIVIA, A CASE NUMBER: 23-105179

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**

OBSERVATION OF DRIVER:

**SEE PC AFFIDAVIT**

DRIVER'S STATEMENTS:

**I HAVE NOT BEEN DRINKING**

ODORS:

**STRONG ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM THEIR BREATH.**

## GENERAL OBSERVATIONS

SPEECH: **SLURRED**

ATTITUDE: **LETHARGIC, INATTENTIVE,COOPERATIVE**

CLOTHING: **NORMAL**

MEDICAL/OTHER: **NONE**

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**STATE OF FLORIDA**
**COUNTY OF PALM BEACH**

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

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

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: MOLNAR, OLIVIA, A CASE NUMBER 23-105179

## ROADSIDE TASKS

### HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] 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:**

**Defendant was asked to stand erect with their feet together. They were told to remain in this position until the task was completed. They were asked to identify the stimulus that was held in front of their face. Afterward they were asked to follow the stimulus with their eyes and not to turn their head. They understood the instructions. The defendant showed equal pupil size and had no resting Nystagmus. During the tasks the defendant lacked smooth pursuit in both eyes. The defendant turned her head to assisted in following the stimulus. Defendant had to me reminded not turn their head. She swayed and ultimately failed to follow my instructions. She was unable to complete 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 their balance while placed in the instructional position (feet separated as they lost their balance). During the walking phase subject missed heel to toe, stepped of line, stopped on line to steady,took an incorrect number of steps, 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 put foot down, This task was omitted since the defendant was wearing a dress and the wind was blowing**

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 and could not maintain balance while standing, failed to touch the tip of finger to the tip of nose as instructed, rather touched underneath, sides, bridge of nose with the pad of finger. Subject searched for the nose by slowing approach when nearing their nose. On the counter subject flinched the wrong arm**

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. Failed to recite the alphabet correctly.**

**BREATH TEST RESULTS:** 1) .275 | 2) VNM .234 | 3) VNM .255 | 4) REFUSED

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 31 day of AUGUST 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

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.

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

PBSO CASE # **23-105179** PBSO ZONE **3-22**

AGENCY CASE # _____ CRASH CASE # _____

TIME OF STOP/CRASH **2311** DATE **08/30/2023** DAY **Wednesday**

SUBJECT'S NAME **MOLNAR, OLIVIA, A** RACE **W** SEX **F**

HGT **503** WGT **110** DOB **11/15/1985**

LOCATION **2646 OKEECHOBEE BV WEST PALM BEACH FL**

ARRESTING OFFICER'S NAME & ID **INV. E.K. WHITE (7209)** AGENCY **Palm Beach County Sheriff's Office**

DIVISION: **CID/DUI**

NOTIFIED BY COMMO **YES**

ARRIVAL AT FACILITY 0006

ARREST TIME **2332**

BREATH RESULTS:

1) .275
2) .234 vvm
3) .255 vvm
4) —

**REFUSED**

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TESTING OFFICER'S ID 8656 PBSO VIDEOTAPE # _____

# TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: MOLNAR, OLIVIA ANCA

CASE NUMBER: 23-105179

DATE: Aug 31, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0032

ENDING TIME: 0051

BREATH TESTS RESULTS: 1) .275 TIME 0038 A.M. ☒ P.M. ☐ 2) .234VM TIME 0044 A.M. ☒ P.M. ☐

REFUSED

3) .255VM TIME 0050 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: REPETITIVE, ARGUMENTATIVE, UNCOOPERATIVE

CLOTHING: FLORAL DRESS, BLACK SANDALS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

**OTHER:**

EYES: BLOODSHOT, GLASSY

ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

---

**COMMENTS:**

A/O ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0006 HOURS

SUBJECT STATED SHE WOULD TAKE BREATH TEST

SUBJECT DID NOT FOLLOW BREATH TEST INSTRUCTIONS, STOPPED BLOWING BEFORE BEING TOLD TO, PUFFING BREATH NOT BLOWING CONTINUOUSLY, DID NOT MAKE A TIGHT SEAL ON THE MOUTH PIECE, MOVING HER HEAD UP DOWN AND AROUND.

A/O READ I.C
SUBJECT STATED SHE UNDERSTOOD I.C, SUBJECT STATED SHE WANTED TO CONTINUE BREATH TEST

SUBJECT AGAIN DID NOT FOLLOW BREATH TEST INSTRUCTIONS, SUBJECT WAS ARGUMENTATIVE, STOPPED BLOWING BEFORE BEING TOLD TO, PUFFING BREATH NOT BLOWING CONTINUOUSLY, DID NOT MAKE A TIGHT SEAL ON THE MOUTH PIECE, MOVING HER HEAD UP DOWN AND AROUND.

A/O CALLED A REFUSAL AT 0050 HOURS

A/O READ RIGHTS / SUBJECT STATED SHE UNDERSTOOD BREATH TEST RESULTS

Q AND A NOT CONDUCTED

REFUSED

---

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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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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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# 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: 80-006478 Software: 8100.27
Date of Test: 08/31/2023

Date of Last Agency Inspection: 08/11/2023
Observation Period Began: 00:06
Subject's Name: OLIVIA A MOLNAR DOB: 11/15/1985 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 | 00:35 |
| Air Blank | 0.000 | 00:35 |
| Control Test | 0.080 | 00:35 |
| Air Blank | 0.000 | 00:36 |
| Subject Sample #1 | 0.275 | 00:38 |
| Air Blank | 0.000 | 00:39 |
| Air Blank | 0.000 | 00:41 |
| Subject Sample #2 | VNM* | 00:44 |
| Air Blank | 0.000 | 00:45 |
| Air Blank | 0.000 | 00:47 |
| Subject Sample #3 | VNM** | 00:50 |
| Air Blank | 0.000 | 00:51 |
| Control Test | 0.075 | 00:51 |
| Air Blank | 0.000 | 00:52 |
| Diagnostics Check | OK | 00:52 |

*Volume Not Met (0.234 - Breath Sample Not Reliable to Determine Breath Alcohol Level)
**Volume Not Met (0.255 - Breath Sample Not Reliable to Determine Breath Alcohol Level)

Cylinder Lot: 08622080A1
Exp: 06/05/2024

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 JOSHUA J BELL, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____ Date: 08/31/23
Signature

Sworn to (or affirmed) before me this 31 day of August, 2023

_____ INV. E. K. White #7209
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

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

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

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**STATE OF FLORIDA**

**AFFIDAVIT OF REFUSAL TO SUBMIT TO**

# BREATH TEST

I, Inspector E.K. WHITE, a duly certified Law Enforcement Officer or Correctional Officer,
(Person reading Implied Consent Warning)

am a member of Palm Beach County Sheriffs Office, and I do swear
(Name of enforcement agency)

or affirm that on or about the THIRTIETH day of August, 2023, at 11:32 PM

DRIVER (Type or Print) OLIVIA (FIRST) ANCA (MIDDLE OR MAIDEN) MOLNAR (LAST),

DL # M456641859150, state of FL, was placed under lawful arrest for

the offense of DUI by Inspector E.K. WHITE and
(Name of Arresting Officer)

issued Citation # AHACTCE.

That on or about the THIRTY-FIRST day of August, 2023, at 12:50 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 31 day of August, 2023, by INV. E.K. White #7209 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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# WITNESS LIST

CASE NUMBER: 23-105179

ARRESTING OFFICER: INV. E.K. WHITE

ADDRESS: CID/DUI

PHONE NUMBERS (HOME): (863) 227-4287 (WORK)

CAN TESTIFY TO: FACTS

NAME: INV. C. WARD

ADDRESS: CID/DUI

PHONE NUMBERS (HOME) (WORK) 561 688 3000

CAN TESTIFY TO: BWC FOOTAGE

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

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PHONE NUMBERS (HOME) (WORK)

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CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

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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 | 6-9 |
| | ☐ | | Other: | |

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**REVIEW COMPLETED BY**

| | |
|---|---|
| **Booking Number:** 2023022864 | **Date:** 9/1/23 |
| | **Specialist Name/ID:** T.Howard/7185 |