0547631 24 CT4147 1201

ARREST / NOTICE TO APPEAR

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

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500400 | Agency Name: Delray Beach Police Department | Agency Report Number (N.T.A.'s only): 4 0 24-003250

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: UNARMED | Multiple Clearance Indicator: 1

Location of Arrest (Including Name of Business): I95/W ATLANTIC AVE DELRAY BEACH FL 33444

Location of Offense (Business Name, Address): I95 & W ATLANTIC AVE, DELRAY BEACH, FL 33444

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
03/08/2024	00:47	03/08/2024	00:57			

DEFENDANT

Name (Last, First, Middle): CAMPOS, PEDRO QUEIROZ | Alias (Name, DOB, Soc. Sec #, Etc.): Alias:

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	01/25/1984	5'10	180	BROW	BROWN	LIGHT	

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description) | Marital Status: U | Religion | Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 3105 SPANISH WELLS DR C, DELRAY BEACH, FL 33445 | Phone: (484) 844-7018 | Residence Type: 1. City 2. County 3. Florida 4. Out of State

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 3105 SPANISH WELLS DR C, DELRAY BEACH, FL 33445 | Phone: (484) 844-7018 | Address Source

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

D/L Number, State	[redacted]	INS Number	Place of Birth (City, State)	Citizenship
C512675840250 / FL			Sao Paulo Brazil	US

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Other ☐ Legal Custodian | 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 Department and Released 2 TOT JAC 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 355-2526) informed of any change of address.
☐ Yes, by: ☐ No:

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. Disperse/ 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	Statute Violation Number	Violation of ORD #
DUI-DAMAGE TO PERSON/PROPERTY	316.193(3)(C)(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		1,500

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant | Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By	Released By	Released To

Transported By	Date Transported	Time Transported	Other
VASQUEZ	03/08/2024	00:53	

FILED PBC - BOM PULSE

NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court
☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): South County 200 W Atlantic Ave Delray Beach, FL 33444

Court Date and Time: 03/08/2024 00:49:44

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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian) | Date Signed

No Photo Available

ADMIN

HOLD for Other Agency | Signature of Arresting Officer

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Name of Arresting Officer (Print)	I.D. #
VASQUEZ, FELIPE	1256

Name Verification (Printed by Arrestee) (PRINT)

Intake Deputy	I.D. #	Pouch #
J DUNN	3681	

Transporting Officer	I.D. #	Agency
VASQUEZ	1256	DBPD

Witness here if subject signed with an "X"

PAGE 1 OF 1

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P.I.O. ☒ DEFENDANT

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M

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 08 DAY OF March, 2024 AT 2345 HRS,

IN THE CITY OF Delray Beach, COUNTY OF PALM BEACH, STATE OF FLORIDA,

SUBJECT: Pedro Campos CASE NUMBER: 24-003250

AGENCY: Delray Beach Police ARRESTING OFFICER: Vasquez

PERSONAL CONTACT

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

On Thursday 03/08/2024, I responded to W. Atlantic and I95 in reference to a vehicle accident. Upon arrival I made contact with Pedro Campos (DOB 01/25/1984) who was standing on the side walk in front of a white Subaru bearing FL tag JPWW42. Campos stated that he wanted to document the damages to his car due to the vehicle being his baby. I then made contact with Daniel Williams who stated that he was driving in the right lane, west bound on W Atlantic Ave when he heard tires screeching. Williams stated that he managed to switch lanes and he observed as the white Subaru drove past him and crashed into the back of a black vehicle. Williams was able to identify Pedro Campos as the driver of the white Subaru.

OBSERVATION OF DRIVER:

The defendant appeared to be impaired. The defendant had red glossy eyes, slurred and mumbled speech, and I could smell the odor of an unknown alcoholic beverage coming from his breath.

DRIVERS STATEMENTS:

Campos stated that he wanted to document the damages to his vehicle because it was his baby. Campos also stated that he was not under the influence due to only having one beer.

ODORS:

DEFENDANT HAD THE ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM HIS BREATH.

GENERAL OBSERVATIONS

SPEECH: Slurred, Slow, mumbled

ATTITUDE: Confused.

CLOTHING: Green/Blue Shirt, grey pants, Blue socks

MEDICAL/OTHER: None

STATE OF FLORIDA
COUNTY OF PALM BEACH

(SIGNATURE OF ARRESTING OFFICER)

THE FORGOING INSTUMENT WAS SWORN TO OR AFFIRMED AND SUBSCRIBED BEFORE ME THIS 08 DAY OF March, 2024 BY Vasquez,

WHO IS PERSONALLY KNOWN TO ME AND/OR PRODUCED IDENTIFICATION. TYPE OF IDENTIFICATION PRODUCED _____

1142

NOTARY PUBLIC, CLERK OF COURT, OFFICER (FSS 117.10)

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SUBJECT: Pedro Campos CASE #: 24-003250

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS: OF 6

☐ 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:

Refusesd

WALK & TURN: OF 8

Refused

ONE LEG STAND: OF 4

Refused

***FINGER TO NOSE:* OF 4**

Refused

ROMBERG ALPHABET: OF 4

Refused

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BREATH TEST RESULTS: 1) medical 2) 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

(SIGNATURE OF ARRESTING OFFICER)

THE FORGOING INSTUMENT WAS SWORN TO OR AFFIRMED AND SUBSCRIBED BEFORE ME THIS 08 DAY OF March, 2024 BY Vasquez

WHO IS PERSONALLY KNOWN TO ME AND/OR PRODUCED IDENTIFICATION. TYPE OF IDENTIFICATION PRODUCED _____

1147

NOTARY PUBLIC, CLERK OF COURT, OFFICER (FSS 117.10)

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO

BLOOD TEST

I, Felipe Vasquez (Name of Officer reading Implied Consent Warning), a duly certified Law Enforcement Officer or Correctional Officer,

am a member of Delray Beach police department (Name of law enforcement agency), and I do swear

or affirm that on or about the 8 day of march, 20 24, at 1244 ☐ P.M ☒ A.M.

DRIVER (Type or Print) Pedro (FIRST NAME) Queiroz (MIDDLE OR MAIDEN NAME) Campos (LAST NAME),

DL# C512-675-84-025-0, state of Florida, appeared for treatment at a hospital,

clinic, or other medical facility pursuant to s. 316.1932(1)(c), Florida Statutes, and a breath or urine test was impossible or impractical.

That on or about the 8 day of march, 20 24, at 1244 ☐ P.M ☒ A.M.

in palm beach County.

I requested that the driver submit to a **blood test** to determine his or her blood alcohol level and/or the presence of chemical or controlled substances in his or her blood. I informed the driver that refusal to submit to a blood 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 for refusing to submit to a breath, urine or blood test. I also informed the driver that if he or she holds a CDL, or was operating a CMV, refusal would result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she had been previously disqualified as a result of a refusal to submit to a breath, urine or blood test. The driver nonetheless refused to submit to a blood test.

Signature of Law Enforcement Officer or Correctional Officer

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

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this _____ day of _____, 20 _____,

by _____,

who is personally known to me or who has produced _____ as identification

Notary Public _____

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title OFC. R.N. C

Date 03/08/24

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.

HSMV-BAR1002 (REV. 10/16)

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SUBJECT: Pedro Campos CASE NUMBER: 24-003250

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 detecting the presence of chemical or controlled substances.

-OR-

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence o chemical or controlled substances.

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

I am Ofc. Vasquez of the Delray Beach Police Dept.

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen 18 months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you as admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: refused

CONSTITUTIONAL WARNINGS

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

You have the right to remain silent and not answer any questions.

Any statement must be freely and voluntarily given.

You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.

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.

If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.

I can make no threats or promises to induce you to make a statement. This must be of your own free will.

Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: refused

PBSO #01298 REV 11/03

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D.U.I. WITNESS LIST

CASE #: 24-003250

ARRESTING OFFICER: Vasquez
ADDRESS: 300 W Atlantic Ave, Delray Beach, FL 33444
PHONE NUMBERS (HOME): 561-243-7800 (WORK):
CAN TESTIFY TO: DUI investigation

NAME: Ofc. Reid
ADDRESS: 300 W Atlantic Ave, Delray Beach FL 33444
PHONE NUMBERS (HOME): 561-243-7800 (WORK):
CAN TESTIFY TO:

NAME: Ofc. Cooper
ADDRESS: 300 W Atlantic Ave, Delray Beach FL 33444
PHONE NUMBERS (HOME): 561-243-7800 (WORK):
CAN TESTIFY TO:

NAME: Ofc. Bello
ADDRESS: 300 W Atlantic Ave, Delray Beach FL 33444
PHONE NUMBERS (HOME): 561-243-7800 (WORK):
CAN TESTIFY TO:

NAME: Ofc. Stickley
ADDRESS: 300 W Atlantic Ave, Delray Beach FL 33444
PHONE NUMBERS (HOME): 561-243-7800 (WORK):
CAN TESTIFY TO:

NAME: Daniel Van Williams
ADDRESS: 899 Jeffrey St Unit 205
PHONE NUMBERS (HOME): 4084013211 (WORK):
CAN TESTIFY TO: Driver I.D and Crash

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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Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☐	119.071(2)(e)	Confession	
Public Info. Exemptions	☐	FL Const. Art. I, s. 16(b)(5)	Marsy's Law – victim information shall be redacted. The term "victim" also includes the victim's lawful representative, the parent or guardian of a minor, or the next of kin of a homicide victim. The term "victim" does not include the accused (ref. page 99 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	
	☐	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	☐			
	☐			
	☐			
	☐			

NOT A CERTIFIED COPY

REVIEW COMPLETED BY

Booking Number: 2024006341	**Date:** 3/8/2024
	Specialist Name/ID#: C.Daniels 30347