C54C384 23CT8501MB 1907

☐ 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

Juvenile: 1 | 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 - 23066759 ( )

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 N/A

Multiple Clearance Indicator:

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
13000 S. STATE RD 7, DELRAY BEACH, FL 33473	13000 S. STATE RD 7, DELRAY BEACH, FL 33473

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
05/12/2023	0016					PRIORITY TOWING

DEFENDANT

Name (Last, First, Middle): LALIBERTE, RAYMOND, JOSEPH

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	M	1/19/1963	6'00	210	HAZ	WHITE	MED	MED

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

Marital Status: Married | Religion: CHRISTIAN | Indication of: Alcohol Influence ☒ Y ☐ N ☐ Unk; Drug Influence ☐ Y ☒ N ☐ Unk

Local Address (Street, Apt. Number) (City) (State) (Zip): 9701 PORTA LEONA LN, BOYNTON BEACH, FL 33472

Mobile Phone: (561) 239-7250

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

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

Phone: ( )

Address Source: VERBAL - FL DL

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

Phone: ( )

Occupation: OPERATIONS MANAGER

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
L416730630190, FL	[redacted]		CLINTON, MA	YES

CO-DEF

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

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

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other: Name (Last) (First) (Middle) | Residence Phone ( )

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

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

Released To: (Name) | Relationship | Date | Time

The above address was provided by ☐ defendant and / or ☐ defendant's parents. The child and / or parent was told to keep the Juvenile Court Clerk's Office (Phone (561) 355-6311) informed of any change of address.
☐ Yes, by: (Name) ☐ No (Reason)

School Attended | Grade

Property Crime? ☐ Yes ☐ No | Description of Property | Value of Property

CODE

Drug Activity: N. N/A, P. Possess, S. Sell, B. Buy, T. Traffic, R. Smuggle, D. Deliver, E. Use, K. Dispense/Distribute, M. Manufacture/Produce/Cultivate, Z. Other

Drug Type: N. N/A, A. Amphetamine, B. Barbiturate, C. Cocaine, E. Heroin, H. Hallucinogen, M. Marijuana, O. Opium/Deriv., P. Paraphernalia/Equipment, S. Synthetic, U. Unknown, Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Driving Under the Influence	1	☐ Y ☒ N	316.193(1)(A)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
U	U		23066759		

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

FILED PBC - GUN CLUB
'23 MAY 11 AM 6:33

Court Date and Time: Month JUNE Day 8th Year 2023 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

X _____ 05/12/2023
Signature of Defendant (or Juvenile and Parent/Custodian) Date Signed

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

ADMIN

HOLD for other agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Intake Deputy I.D. # Pouch #

Signature of Arresting Officer: X

Name of Arresting Officer (Print) I.D. #: Inv. Cisson J. 24091

Transporting Officer I.D. # Agency: Inv. Cisson J. 24091 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)

NOT A CERTIFIED COPY

ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

Agency ORI Number: FLO 500000

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 06- 23-066759

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
Laliberte Raymond Joseph		W	M	01/19/1963

CHARGES

D.U.I.	316.193(1)

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 he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation 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 commited the below acts, resulting from my (described) investigation.

On the 10th day of May 2023 at 11:25 ☐ 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 05/10/2023 at approximately 2325 hrs, I was conducting traffic enforcement on State Road 7 just north of Atlantic Ave in unincorporated Delray Beach, Palm Beach County, FL. I observed a dark colored vehicle traveling north on State Road 7 in the left thru lane at a high rate of speed. I visually estimated the speed to be 75 mph. Utilizing my PBSO issued Stalker DSR 2x Radar [Antenna s/n: KC219175 & s/n KR050261. Counting box s/n DB025493] in stationary mode, I got a speed reading of 74 mph in a posted 55 mph zone. I identified the vehicle as a gray GMC truck bearing FL tag # HSTV68 and thus began to initiate a traffic stop on the vehicle.

The vehicle stopped on State Road 7 on the right shoulder just south Lee Rd in unincorporated Boynton Beach, Palm Beach County, FL. I made contact with sole operator and advised him the reason for the stop was his excessive speed. I then asked him for his drivers license and vehicle registration. The operator, later identified as Raymond Laliberte, via his FL drivers license, had lethargic body movements along with slurred speech. Laliberte struggled to remove his drivers license from his wallet

In speaking with Laliberte, I noted the oder of an alcoholic beverage emanating from the vehicle. I inquired if Laliberte had consumed any alcohol and he stated he had 4 Heineken's with dinner. I asked about what time his last drink was at and he just sighed and stared at me blankly. I asked if he knew what time it presently was and he couldn't find any words to say aloud.

After telling him I was concerned he was unable to tell me the current time, Laliberte looked at me and said "this isn't looking good for me is it?" I told him it didn't look great and he replied with "I understand if you have to take me".

Based on my observations, I requested a DUI unit to respond. Shortly after Investigator Cisson arrived on scene and took over the investigation.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S Galloway (ID #) 39654
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 11 day of May 20 23 by D/S Galloway 39654
(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced KNOWN

Inv. Cisson J ID #24091
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

PAGE 1 OF 1

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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 10th DAY OF MAY 20 23, AT 2325 AM ✓ PM

SUBJECT: LALIBERTE, RAYMOND, JOSEPH CASE NUMBER: 23066759

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. Cisson J.

PERSONAL CONTACT

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

On Wednesday, May 10th 2023 at approximately 2335 hours, I responded to the 13000 block of S. State Road 7 (US 441) in unincorporated Delray Beach, FL 33473 (Palm Beach County). Upon arrival at 2348 hours, I had already spoken with Deputy Galloway ID# 39654 via cell phone and he relayed the following to me: On 05/10/2023 at approximately 2325 hrs, I was conducting traffic enforcement on State Road 7 just north of Atlantic Ave in unincorporated Delray Beach, Palm Beach County, FL. I observed a dark colored vehicle traveling north on State Road 7 in the left thru lane at a high rate of speed. I visually estimated the speed to be 75 mph. Utilizing my PBSO issued Stalker DSR 2x Radar [Antenna s/n: KC219175 & s/n KR050261. Counting box s/n DB025493] in stationary mode, I got a speed reading of 74 mph in a posted 55 mph zone. I identified the vehicle as a gray GMC truck bearing FL tag # HSTV68 and thus began to initiate a traffic stop on the vehicle. The vehicle stopped on State Road 7 on the right shoulder just south Lee Rd in unincorporated Boynton Beach, Palm Beach County, FL. I made contact with sole operator and advised him the reason for the stop was his excessive speed. I then asked him for his drivers license and vehicle registration. The operator, later identified as Raymond Laliberte, via his FL drivers license, had lethargic body movements along with slurred speech. Laliberte struggled to remove his drivers license from his wallet In speaking with Laliberte, I noted the oder of an alcoholic beverage emanating from the vehicle. I inquired if Laliberte had consumed any alcohol and he stated he had 4 Heineken's with dinner. I asked about what time his last drink was at and he just sighed and stared at me blankly. I asked if he knew what time it presently was and he couldn't find any words to say aloud. After telling him I was concerned he was unable to tell me the current time, Laliberte looked at me and said "this isn't looking good for me is it?" I told him it didn't look great and he replied with "I understand if you have to take me". Based on my observations, I requested a DUI unit to respond. Shortly after Investigator Cisson arrived on scene and took over the investigation.

OBSERVATION OF DRIVER:

I observed the defendant, Raymond Joseph Laliberte who was wearing a dark gray polo shirt, light gray shorts and black sandals. The defendant was sitting in the driver seat of his vehicle and he was alone. I asked the defendant to step out and walk over to the front of my vehicle and speak with me. While walking over to my vehicle, the defendant was unsteady on his feet and staggered as walked. While standing stationary the defendant swayed. I could see the defendants eyes were bloodshot and glossy. He had an obvious odor of an unknown alcoholic beverage emitting from his breath that grew stronger as he spoke. The defendants speech was slow and slurred.

DRIVER'S STATEMENTS:

The defendant said he did not have any physical defects or preexisting injuries, diabetes, or receive a bump on the head. He was wearing contacts. The defendant said he had three Heineken beers to drink. He said he was driving the vehicle. I asked the defendant to submit to roadside field sobriety tasks to which he agreed.

ODORS:

An obvious odor of an unknown alcoholic beverage

GENERAL OBSERVATIONS

SPEECH: **Slow, Slurred**

ATTITUDE: **Calm, Compliant**

CLOTHING: **Neat, Clean**

MEDICAL/OTHER: **NONE**

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. Cisson J.
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 11th day of May 2023 by Inv. Cisson J.

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Known LEO ID# 24091

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

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

NOT A CERTIFIED COPY

SUBJECT: LALIBERTE, RAYMOND, JOSEPH CASE NUMBER 23066759

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:

The defendant swayed while standing stationary. I had to remind the defendant to straighten his head up as he was tilting it sideways.

WALK & TURN:

The task was explained and demonstrated. The defendant stated he understood the instructions. During the task the defendant failed to maintain the instructional stance and started too soon. The defendant swayed while standing stationary. The defendant did not touch heel to toe multiple times, stepped off the line, stopped to regain balance.

ONE LEG STAND:

The task was explained and demonstrated. The defendant stated he understood the instructions. The defendant swayed while standing stationary. During the task the defendant used arms for balance, put his foot down multiple times before 30 seconds elapsed, and hopped while attempting to regain his balance.

FINGER TO NOSE:

The task was explained and demonstrated. The defendant stated he understood the instructions. The defendant swayed while standing stationary. During the task the defendant missed the tip of his nose multiple times and failed to return his hand to his side after touching his nose.

ROMBERG ALPHABET:

The task was explained and demonstrated. The defendant stated he understood the instructions. The defendant swayed while standing stationary. During the task the defendant recited the alphabet fast.

NOT A CERTIFIED COPY

BREATH TEST RESULTS: | 1) 0.134 | 2) 0.141 | 3) | 4) |

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. Cisson J.
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 11th day of May 2023 by Inv. Cisson J.

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Known LEO ID# 24091

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

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

WITNESS LIST

CASE NUMBER: 23066759

ARRESTING OFFICER: Inv. Cisson J.

ADDRESS: PBSO 3228 GUN CLUB RD, WEST PALM BEACH, FL 33406

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

CAN TESTIFY TO: Facts of the case

NAME: DEPUTY Galloway ID# 39654

ADDRESS: PBSO

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: TRAFFIC STOP, INDICATORS OF IMPAIRMENT, SUPPLEMENTAL PC

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

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ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: Laliberte, Raymond J.

CASE NUMBER: 23-066759

DATE: May 11, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 01:15

ENDING TIME: 01:25

BREATH TESTS RESULTS: 1) .134 TIME 01:19 A.M. ☒ P.M. ☐ 2) .141 TIME 01:22 A.M. ☒ P.M. ☐

3) N/A TIME ——— A.M. ☐ P.M. ☐ 4) N/A TIME ——— A.M. ☐ P.M. ☐

BREATH OPERATOR: R. Ragin #16877

MAINTENANCE TECHNICAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Calm, Talkative

CLOTHING: Gray shorts, black shirt, black flip-flops

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER:

Eyes are glassy & bloodshot
odor of unknown alcoholic beverage on breath

COMMENTS:

Arrived at center A/O started 20 minute observation period at 00:46 hrs.

Subject agreed to perform breath test.

A/O read rights.
Subject stated he understood rights.

Tech read breath test results.
Subject stated he understood breath test results.

A/O attempted Q&A.
Subject invoked the right to counsel.

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SUBJECT: Elliott, Sydnee T. CASE NUMBER: 22 046751

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) Read on Camera

NOT A CERTIFIED COPY

SUBJECT: Lilliefors, Ryan T. CASE NUMBER: 22-0471

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

PBSO CASE # **23066759** PBSO ZONE **4-31**

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

TIME OF STOP/CRASH **2325** DATE **05/10/2023** DAY **Wednesday**

SUBJECT'S NAME **LALIBERTE, RAYMOND, JOSEPH** RACE **W** SEX **M**

HGT **6'00** WGT **210** DOB **1/19/1963**

LOCATION **13000 S. STATE RD 7, DELRAY BEACH, FL 33473**

ARRESTING OFFICER'S NAME & ID **Inv. Cisson J. (24091)** AGENCY **Palm Beach County Sheriff's Office**

DIVISION: **CID - DUI**

NOTIFIED BY COMMO **YES**

ARRIVAL AT FACILITY **0046**

ARREST TIME **0016**

BREATH RESULTS:

1) .134
2) .141
3)
4)

NOT A CERTIFIED COPY

TESTING OFFICER'S ID **16877** PBSO VIDEOTAPE # N/A

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: 80-006240 Software: 8100.27
Date of Test: 05/11/2023

Date of Last Agency Inspection: 04/14/2023
Observation Period Began: 00:46
Subject's Name: RAYMOND J LALIBERTE DOB: 01/19/1963 Sex: M

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	01:17
Air Blank	0.000	01:18
Control Test	0.081	01:18
Air Blank	0.000	01:18
Subject Sample #1	0.134	01:19
Air Blank	0.000	01:20
Air Blank	0.000	01:21
Subject Sample #2	0.141	01:22
Air Blank	0.000	01:22
Control Test	0.080	01:23
Air Blank	0.000	01:23
Diagnostics Check	OK	01:23

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 RENEE M RAGIN, 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: 05/11/23
Signature

Sworn to (or affirmed) before me this 11 day of May, 2023

_____ Inv. J. Cisson #24091
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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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	5-8
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2023012297	**Date:** 05/11/2023
	Specialist Name/ID: T.Howard/7185