0392899 24CT8289ASB 1240

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

☐ Check if Supplement is Attached

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number
	FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	0 6 -| 24-059410 ( )

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: 0 2

Location of Arrest (including Name of Business)	Location of Offense (Business Name, Address)
8100 block of Glades Road, Boca Raton, FL33434	8100 block of Glades Road, Boca Raton, FL33434

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
05/05/2024	02:58	05/05/2024				

DEFENDANT

Name (Last, First, Middle): **Grikstas, Renardas,** — 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	5/14/1977	5'11	172	brown	brown	light	medium

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description):

Marital Status: Married — Religion: CATHOLIC — Indication of Alcohol Influence / Drug Influence: Y ☒ N ☐ Unk ☒

Local Address (Street, Apt. Number) (City) (State) (Zip): [redacted] — Mobile Phone: [redacted] — Residence Type (1 City, 2 County, 3 Florida, 4 Out of State): 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip): — Phone: ( ) — Address Source: DL

Business Address (Name, Street) (City) (State) (Zip): — Phone: ( ) — Occupation: CEO

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
G623720771740, FL	[redacted]		Lithuania	Lithunia

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) 1. 1009 (First) (Middle) — Residence Phone ( )

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

Notified by: (Name) 2. 259 — 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 #
Driving Under the Influence	1	Y ☒ N	316.193(1)(a)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		24-059410		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Refusing to sign traffic summons	1	Y ☒ N	318.14(3)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		24-059410		

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): South County Courthouse, Courtroom #1, 200 W. Atlantic Ave., Delray Beach, FL 33444 - Ph: (561) 355-2996

Court Date and Time: Month June — Day 4th — Year 2024 — Time 08:30 — 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

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

FILED PBC - CIR CLK
2024 MAY 6 AM 8:17

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): D/S Pointu (#16032) — I.D. #: 16032

Transporting Officer: D/S POINTU P. — I.D. #: 16032 — Agency: PBSO

Name Verification (Printed by Arrestee) (PRINT)

MAY 5 AM 5:40

SCANNED

Witness here if subject signed with an "X"

PAGE 1 OF 1

MAY 06 2024

PBSO #0148 REV. 11/22 DISTRIBUTION: COURT COPY — STATE ATTORNEY — AGENCY — AGENCY — DEFENDANT (N.T.A.'s ONLY)

NOT A CERTIFIED COPY

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: 24-059410

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
Grikstas, Renardas,		W	M	5/14/1977

CHARGES

Charge Description		Charge Description	
Driving Under the Influence	316.193(1)(c)	Refusing to sign traffic summons	318.14(3)
Charge Description		Charge Description	

VICTIM

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

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 5th day of May 20 24 at 02:20 ☒ A.M ☐ P.M (Specifically include facts constituting cause for arrest.)

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

After his refusal to provide a breath sample, I asked Grikstas to sign the DUI citation. I explained it was not an admission of guilt but only a promise to appear in court. Grikstas said he would refuse to sign. I warned him that refusing to sign was an additional misdemeanor charge. He then repeated he would not sign the citation.

I had probable cause Renardas Grikstas did unlawfully and willfully refuse to accept and sign a summons for a violation requiring a mandatory hearing pursuant to F. S. 318.19 or F.S. 316.193(1), a criminal traffic violation, contrary to Florida Statute 318.14(3).

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ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S Pointu (#16032)
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 5th day of May 20 24 by D/S POINTU P.

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

Thomasina Miller (#41017)
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.

PBSO #0004 REV. 12/22

DISTRIBUTION: STATE ATTORNEY AGENCY AGENCY DEFENDANT FAX'S ONLY

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: **24-059410**

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
Grikstas, Renardas,		W	M	5/14/1977

CHARGES

Charge Description		Charge Description	
Driving Under the Influence	316.193(1)(c)		
Charge Description		Charge Description	

VICTIM

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

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

☐ 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 _____ day of _____ 20 24 at _____ ☐ A.M ☐ P.M (Specifically include facts constituting cause for arrest.)

☐ Miranda Law Cite: FL Const. Art. I § 16(b)

On 05/05/2024 at approximately 0226 hours, I was dispatched to 6399 W Glades Rd in reference to a auto burglary call within the City limits of Boca Raton. While canvassing the area at approximately Jog and Glades I observed a black BMW traveling west bound in the east bound lanes. Multiple vehicles served out of the way of the Black BMW to avoid a head on collision.

A traffic stop was conducted at the intersection of the Turnpike and Glades Rd. Lights and sirens were activated and the vehicle again took off finally stopping at 8221 W Glades Rd. A white male named Renardas Grikstas was behind the wheel of a running vehicle.

PBSO Deputies arrived and took over the investigation.

Officer Gonzalez ID# 859

PROBABLE CAUSE STATEMENT

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

Christian Gonzalez PD 859
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 5th day of May 20 24 by [redacted]

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

David Williams
Notary Public, Clerk of Court, Officer (F.S.S). 117.10)
BRPD 868

PAGE 1 OF 2

PBSO #0004 REV. 12/22 DISTRIBUTION: STATE ATTORNEY AGENCY AGENCY DEFENDANT (N.T.A.'s ONLY)

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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 5th DAY OF May 20 24 AT 02:20 ✓AM PM

SUBJECT: Grikstas, Renardas, CASE NUMBER: 24-059410

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S Pointu (#16032)

PERSONAL CONTACT

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

Officer Gonzalez (#859) from Boca Raton Police Department was investigating a burglary call within the City limits of Boca Raton, Palm Beach County, Florida. While canvassing the area of Glades Road and Jog road, he observed a black BMW bearing Florida tag LPBY32 traveling westbound in the eastbound lane. Multiple vehicles swerved out the way of the BMW to avoid a head on collision. A traffic stop was conducted and the vehicle came to a stop in he 8100 block of Glades Road in unincorporated Boca Raton. The driver identified himself as Renardas Grikstas. He was not carrying his Florida driver license.

OBSERVATION OF DRIVER:

Grikstas was still seating on the driver seat of the BMW. His eyes were glassy and bloodshot. A strong odor of unknown alcoholic beverage was coming from his person and became stronger when he talked. While I returned to my car, he switched to the front passenger seat. Once asked to exit his vehicle, he stumbled. The odor of unknown alcoholic beverage followed him.

DRIVER'S STATEMENTS:

[redacted]

ODORS:

Strong odor of unknown alcoholic beverage that became stronger when he talked.

GENERAL OBSERVATIONS

SPEECH: **Slurred, slow, low**

ATTITUDE: **Initially cooperative, then argumentative and not following commands.**

CLOTHING: **White t-shirt, blue shorts, black sneakers**

MEDICAL/OTHER: **None disclosed.**

NOT A CERTIFIED COPY

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S Pointu (#16032)
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 5th day of May 20 24 by D/S Pointu (#16032)

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

Thomasina Miller (#41017)
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.

SUBJECT: Grikstas, Renardas, **CASE NUMBER** 24-059410

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:

Pupils round and equal. No resting nystagmus. Equal tracking. Onset of HGN at approximately 35 degrees. VGN present. LOC present. Swayed during the task. Did not follow the stimulus at all time.

WALK & TURN:

Grikstas could not maintain the instructional stance. Once asked to start he used his arms to balance, took 15 steps, not touching heel to toes on every steps, he also stepped off the line. He then stopped asking for instructions. He did not turn as instructed and walked back all the way to the beginning of the line, again using his arms to balance, taking an improper number of steps and stepping off the line.

ONE LEG STAND:

Grikstas did not extend his leg. He attempted to raise his right leg but put his foot down on the ground multiple times. He used his arms to balance and swayed.

FINGER TO NOSE:

Grikstas had to be reminded on tasks 1, 2, 4, 5 and 6 to lower his hand. He swayed during the tasks and opened his eyes multiple times. On task 6 he touched his septum.

ROMBERG ALPHABET:

Grikstas could not complete his alphabet. He swayed, opened his eyes and tilted his head forward.

NOT A CERTIFIED COPY

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

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S Pointu (#16032)
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 5th day of May 20 24 by D/S Pointu (#16032)

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

Thomasina Miller (#41017)
Notary Public, Clerk of Court, Officer (F S S 117 10)

THOMASINA MILLER
Notary Public - State of Florida
Commission # HH 319641
My Comm. Expires Dec 7, 2026
Bonded through National Notary Assn.

WITNESS LIST

CASE NUMBER: **24-059410**

ARRESTING OFFICER: **D/S Pointu (#16032)**

ADDRESS: **Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406**

PHONE NUMBERS (HOME): _____ (WORK) [redacted]

CAN TESTIFY TO: **DUI Investigation, see PC**

NAME: **Officer Gonzalez (#859)**

ADDRESS: **Boca Raton Police Department, 100 NW Boca Raton Blvd, Boca Raton, FL 33432**

PHONE NUMBERS (HOME) () _____ (WORK) [redacted]

CAN TESTIFY TO: **Driving pattern, wheel witness. See supplemental PC.**

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 _____

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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: _____

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: GRIKSTAS, RENARDAS

CASE NUMBER: 24-059410

DATE: May 5, 2024

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 03:57

ENDING TIME: 04:03

BREATH TESTS RESULTS: 1) R TIME 04:03 A.M. ☒ P.M. ☐ 2) N/A TIME N/A 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: ACCENT

ATTITUDE: TALKATIVE, ARGUMENTATIVE

CLOTHING: WHITE SHIRT, BLUE SHORTS, WHITE SNEAKERS

MEDICAL CONDITIONS [redacted]

MEDICATIONS: NONE

REFUSED

OTHER:

EYES: GLASSY

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 03:33 HRS.

SUBJECT: STATED I DONT KNOW WHEN ASKED IF HE WOULD TAKE TEST.
SUBJECT: ASKED TO TALK TO HIS LAWYER.

A/O: READ I/C & EXPLAINED.
SUBJECT: STATED HE UNDERSTOOD I/C AND REFUSED TO TAKE TEST.

NO RIGHTS WERE READ.

NO Q & A CONDUCTED.

REFUSED

NOT A CERTIFIED COPY

SUBJECT: Griksta, Renardas CASE NUMBER: 24-059410

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)_____

NOT A CERTIFIED COPY

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

SUBJECT: Griksta, Renardas CASE NUMBER: 24-059410

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: _____

NOT A CERTIFIED COPY

STATE OF FLORIDA

AFFIDAVIT OF REFUSAL TO SUBMIT TO

BREATH TEST

I, **Deputy P. POINTU** (Person reading Implied Consent Warning), a duly certified Law Enforcement Officer or Correctional Officer, am a member of **Palm Beach County Sheriffs Office** (Name of enforcement agency), and I do swear or affirm that on or about the **FIFTH** day of **May**, **2024**, at **2:58 AM**

DRIVER (Type or Print) **RENARDAS** FIRST **GRIKSTAS** MIDDLE OR MAIDEN LAST,

DL # **G623720771740**, state of **FL**, was placed under lawful arrest for the offense of **DUI** by **Deputy P. POINTU** (Name of Arresting Officer) and issued Citation # **AIKV5HE**.

That on or about the **FIFTH** day of **May**, **2024**, at **4:03 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 Correctional Officer

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

THOMASINA MILLER
Notary Public - State of Florida
Commission # HH 339641
My Comm. Expires Dec 1, 2026
Bonded through National Notary Assn

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this 05 day of May, 20 24

by _____

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

Notary Public Thomasina Miller

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****

NOT A CERTIFIED COPY

Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☒	119.071(2)(e)	Confession	5
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	1-2
	☐	119.0712(2)	Personal information contained in a motor vehicle record	
	☒	316.650(11)	Driver information contained in a uniform traffic citation	12-15
	☒	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	7
Florida Rules of Judicial Administration 2.420	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses	
	☐			
	☐			
Other	☐			
	☐			
	☐			
	☐			

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REVIEW COMPLETED BY

Booking Number: 2024012092	**Date:** 5/6/2024
	Specialist Name/ID#: J. Gaines/ 44177