#0291551 23CT 10447 NB Pch # 3160

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number | 1 | Juvenile: N

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number
FLO ORI NUMBER	Riviera Beach Police Department	AG - 23-04206

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

Weapon Seized / Type: 2 (1. Yes 2. No) | Multiple Clearance Indicator: 1

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
2000 Broadway, Riviera Beach, FL 33404	2100 Broadway, Riviera Beach, FL 33404

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle TOW COMPANY NAME
06/09/2023	14:04					KAUFF'S TOWING

DEFENDANT

Name (Last, First, Middle): Milazzo, Rhonda, Marie | Alias (Name, DOB, Soc. Sec. #, Etc.)

Race (W - White I - American Indian B - Black 0- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	12/14/1970	5'10	180	Green	Black	FAIR	MED

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description): NONE | Marital Status: Single | Religion: CHRISTIAN | Indication of: Alcohol Influence Y ☑ N ☐ Unk. ☐; Drug Influence Y ☐ N ☐ Unk. ☑

Local Address (Street, Apt. Number) (City) (State) (Zip): 4204 WATERVIEW CIR, PALM SPRINGS, FL 33461 | Phone: (561) 568-6664 | Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 4204 WATERVIEW CIR, PALM SPRINGS, FL 33461 | Phone | Address Source: DEFENDANT

Business Address (Name, Street) (City) (State) (Zip) | Phone | Occupation: HIGH SCHOOL TEACHER

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
O632-423-84-296-0 Florida	[redacted]		CINCINNATI, OH	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 ☐ 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 provided by ☐ defendant and / or ☐ defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) 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. Synthetics U. Unknown Z. Other

CHARGE

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

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	N/A	23-04206		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

FILED PBC - CUN C UD
'23 JUN 10 AM 8:00

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): NORTH COUNTY COURT HOUSE, 3188 PGA BLVD, PALM BEACH GARDENS, FL

Court Date and Time: Month JULY Day 12 Year 2023 Time ~~13:30~~ 8:30 AM PM X (TP)

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 _____ 06/09/2023
Signature of Defendant (or Juvenile and Parent /Custodian) | Date Signed

ADMIN

HOLD for other Agency Name: | Signature of Arresting Officer X | Name Verification (Printed by Arrestee)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other: | Name of Arresting Officer (Print) K. Torres | I.D. # 6107 | (PRINT)

Intake Deputy | I.D. # | Pouch # | Transporting Officer K. Torres | ID # 6107 | Agency RBPD | Witness here if subject signed with an X

SCANNED

PAGE 1 OF 1

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

JUN 10 2023

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D.U.I. PROBABLE CAUSE AFFIDAVIT

On the 9 day of JUNE 2023 at 14:04:10 ☐ AM ☑ PM

Subject: Milazzo, Rhonda, Marie Case Number: 23-04206

Agency: *Riviera Beach Police Department* Arresting Officer: K. Torres 6107

PERSONAL CONTACT

DRIVING PATTERN: (Actual Physical Control; Physical Evidence or Statements Putting Defendant Behind Wheel of Vehicle)

On June 9, 2023 at approximately 2:00pm, while completing a unrelated traffic stop in the 10 block of West 22nd Street just west of Broadway, I, Officer Torres observed a gray 2018 Ford SUV driving south on Broadway passing West 22nd Street. I observed the vehicle to be driving approximately 10 mph or less in the right lane, causing traffic to back up. Upon making contact with the vehicle, the vehicle made a right turn on West 21st Street, then a left turn into the parking lot of the business BB&T located at 2000 Broadway. Prior to the vehicle parking in a parking space, I observed a white female driver with her attention to her cellphone which was raised at eye level. Upon stopping, the vehicle aggressively made contact with the parking block causing the driver to forward and back.

OBSERVATION OF DRIVER:

Upon conducting a traffic stop, the driver identified herself by Florida Driver License as Rhonda Milazzo (12/14/1970). When I asked for License and Registration, Milazzo who fumbled to retrieve paperwork, presented warranty paperwork as registration. While in contact, Milazzo failed to control her emotions. Milazzo had the strong odor of an unknown alcoholic beverage.

DRIVER STATEMENTS:

When I asked where she was coming from, Milazzo stated to had left the local bar restaurant, "Two Drunken Goats" located on Singer Island. Milazzo stated to had a few alcoholic drinks due to recently being divorce. Milazzo stated to have a drinking problem. Post arrest and while in route to Palm Beach County Jail, Milazzo asked to be released at her residence in exchange for oral sex and approximately $40,000. When Milazzo became irate, she yelled racial slurs and explained she teaches 10th grade at Forest Hill High School.

ODORS: Strong odor of an unknown alcohol

GENERAL OBSERVATIONS

SPEECH: insulting, slurred, thick

ATTITUDE: talkative, agitated, insulting, demanding, obnoxious, uncooperative, emotional, inquisitive

CLOTHING: dirty, isarray

MEDICAL/OTHER: none observed

STATE OF FLORIDA
COUNTY OF PALM BEACH

#6107

SIGNATURE OF ATTESTING OFFICER

The forgoing instrument was sworn to or affirmed and subscribed before me this 9 day of June 2023 by K. Torres 6107 who is ☐ personally known to me or ☐ produced _____.

Notary Public, Clerk of Court, Officer (FSS 117.10)

Notary Public State of Florida
Renee Ragin
My Commission GG 966418
Expires 03/05/2024

SCANNED
STAMP
JUN 10 2023

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D.U.I. PROBABLE CAUSE AFFIDAVIT Cont.

Subject: **Milazzo, Rhonda, Marie** Case Number: **23-04206**

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

LEFT EYE	*RIGHT EYE*
☐ Lack of Smooth Pursuit	☐ Lack of Smooth Pursuit
☐ Distinct & Sust. Nystag. at Max. Deviation	☐ Distinct & Sust. Nystag. at Max. Deviation
☐ Onset of Nystagmus Prior to 45 Degrees	☐ Onset of Nystagmus Prior to 45 Degrees

Other Observations:

N/A - REFUSED

Walk and Turn

N/A - REFUSED

One Leg Stand

N/A - REFUSED

Rhomberg

N/A - REFUSED

Finger to Nose

N/A - REFUSED

BREATH RESULTS: 1) .173 @ 15:23 2) .173 @ 15:26 3) _____ @ _____ 4) _____ @ _____

STATE OF FLORIDA
COUNTY OF PALM BEACH

#6107

SIGNATURE OF ATTESTING OFFICER

The forgoing instrument was sworn to or affirmed and subscribed before me this 9 day of June 20 23 by K. Torres 6107 who is ☐ personally known to me or ☐ produced _____.

Notary Public, Clerk of Court, Officer (FSS 117.10)

Notary Public State of Florida
Renee Ragin
My Commission GG 966418
Expires 03/05/2024

SCANNED

STAMP JUN 10 2023

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Riviera Beach Police Department

DUI TESTING FACILITY INFORMATION SHEET

PBSO Case #: 23-076960 PBSO Zone: 3-21

Agency Case #: 23-04206 Crash Case #: _____

Incident Information:

Time of Stop/Crash: 14:04:10 Date of Incident: 06/09/2023 Day: Friday

Location of Incident: 2100 Broadway, Riviera Beach, FL 33404

Arrest Information:

Time of Arrest: 14:04 Date of Arrest: 06/09/2023 Day: Friday

Location of Arrest: 2000 Broadway, Riviera Beach, FL 33404

Subject's Name: (L) Milazzo, (F) Rhonda, (M) Marie

DOB: 12/14/1970 Race: W Sex: F Height: 5'10 Weight: 180

Arresting Officer's Name: K. Torres ID#: 6107

Agency: RBPD Division: Patrol

---BAT Use---

BAT Notified: 14:20

Arrival Time at BAT: 14:35

Subject Arrest Time: 14:04

Breath Results

1) .173 at 15:23 hrs.
2) .173 at 15:26 hrs.
3) _____ at _____ hrs.
4) _____ at _____ hrs.

Breath Test Operator: O'Neal
6212

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SCANNED
JUN 10 2023

Riviera Beach Police Department **23-04206**

BAT OFFICER NOTE SHEET

Date of Incident: 06/09/2023 Time of Stop/Crash: 14:04:10 Location of Incident: 2100 Broadway, Riviera Beach, FL 33404

Date of Arrest: 06/09/2023 Time of Arrest: 14:04 Location of Arrest: 2000 Broadway, Riviera Beach, FL 33404

Subject's Name: Milazzo, Rhonda, Marie DOB: 12/14/1970 Phone: (561) 568-6664

Address: 4204 WATERVIEW CIR, PALM SPRINGS, FL 33461

Hair: Black Eye: Green Race: W Sex: F Height: 5'10 Weight: 180

☐ Requested Bathroom ☐ Drank Water ☐ Observation Restarted at _____hrs.

Speech	Demeanor	Attitude	
O T	O T	O T	O T
☐ ☐ Accent	☐ ☐ Belching	☐ ☐ Abusive Language	☐ ☐ Insulting
☐ ☐ Confusing	☐ ☐ Blank Stare	☐ ☐ Belligerent	☐ ☐ Mood Swings
☐ ☐ Drooling	☐ ☐ Body Tremors	☐ ☐ Carefree	☐ ☐ Paranoia
☐ ☐ Incoherent	☐ ☐ Crying	☐ ☐ Cocky	☐ ☐ Polite
☐ ☐ Low	☐ ☐ Dry Mouth	☐ ☐ Combative	☐ ☐ Relaxed
☐ ☐ Mumbled	☐ ☐ Excessive Spitting	☐ ☐ Confused	☐ ☐ Restless
☐ ☐ Normal	☐ ☐ Eyelid Tremors	☐ ☐ Cooperative	☐ ☐ Sarcastic
☐ ☐ Not Understandable	☐ ☐ Fighting	☐ ☐ Dazed	☐ ☐ Sleepy
☐ ☐ Raspy	☐ ☐ Grinding Teeth	☐ ☐ Emotional	☐ ☐ Talkative
☐ ☐ Slurred	☐ ☐ Hiccupping	☐ ☐ Excited	☐ ☐ Tense
☐ ☐ Stuttering	☐ ☐ Laughing	☐ ☐ Fighting	☐ ☐ Uncooperative
	☐ ☐ Urination	☐ ☐ Flirtatious	
	☐ ☐ Vomiting	☐ ☐ Indifferent	

Notable Statements:

Requested Breath at _____hrs.
I/C Read at _____hrs.
Breath Sample 1 _____ at _____hrs.
Breath Sample 2 _____ at _____hrs.
Refusal at _____hrs.
☐Unable to Perform/Follow Instructions
☐Sucking Air
☐Inadequate Breath Sample

Requested Urine at _____hrs.
I/C Read at _____hrs.
Refused/Provided at _____hrs.
☐Unable to Perform DRE ☐ Y ☐N

Miranda Read at _____hrs.
☐Q&A Conducted
☐ Refused ☐ Invoked

Notable Statements:

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JUN 10 2023

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: 80-006238 Software: 8100.27
Date of Test: 06/09/2023

Date of Last Agency Inspection: 05/19/2023
Observation Period Began: 14:35
Subject's Name: RHONDA M MILAZZO DOB: 12/14/1970 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	15:21
Air Blank	0.000	15:22
Control Test	0.081	15:22
Air Blank	0.000	15:22
Subject Sample #1	0.173	15:23
Air Blank	0.000	15:23
Air Blank	0.000	15:25
Subject Sample #2	0.173	15:26
Air Blank	0.000	15:26
Control Test	0.080	15:27
Air Blank	0.000	15:27
Diagnostics Check	OK	15:27

Cylinder Lot: 29122080A1
Exp: 12/05/2024

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 SHARI L O'NEAL, 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: S. O'Neal Date: 06-09-23
Signature

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

Signature of Notary Public-State of Florida

Ofc. Torres #6107
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.

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JUN 10 2023

TESTING FACILITY TASK REPORT

AGENCY: RBPD OFC. TORRES #6107

SUBJECT: MILAZZO, RHONDA M.

CASE NUMBER: 23-076960

DATE: 06-09-23

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 15:16 HRS

ENDING TIME: 15:30 HRS

BREATH TESTS RESULTS: 1) .173 TIME 15:23 A.M.☐ P.M.☒ 2) .173 TIME 15:26 A.M.☐ P.M.☒

3) TIME A.M.☐ P.M.☐ 4) TIME A.M.☐ P.M.☐

BREATH OPERATOR: S. O'NEAL #6212

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: EMOTIONAL, UPSET, CRYING, MOODSWINGS, PROFANE, VERY RACIST, BELIGERENT

CLOTHING: SHIRT- WHITE BATHING SUIT JUMPER- LIGHT BLUE JEAN

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: VERY RED,GLASSY & WATERY FROM CRYING EYES
STRONG ODOR OF UNKNOWN ALCOHOLIC BEVERAGE.

COMMENTS:

20 MIN. OBSERVATION CONDUCTED BY A/O TORRES #6107

A/O REQUESTED THE BREATH TEST.
D SUBMITTED TO THE REQUEST, THEN ASKED WHAT HAPPENED IF SHE SAID NO.
A/O READ THE IMPLIED CONSENT ON CAMERA.
D UNDERSTOOD THE I/C AS READ.
D STILL DECIDED TO SUBMIT AFTER THE I/C WAS READ TO HER.
D COMPLETED THE TEST CORRECTLY.
EXPLAINED THE BREATH RESULTS TO THE D.
A/O READ THE C/W ON CAMERA TO THE D.
D REFUSED THE Q&A.
D WAS PLACED IN THE HOLDING CELL, SHE BECAME VERY BELIGERENT, RACIST AND VULGAR.
D KEPT CALLING THE A/O AND I "NIGGER'S", SHE TOLD THE A/O TO SUCK HER "DICK".

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JUN 10 2023

SUBJECT: MILAZZO, RHONDA CASE NUMBER: 23-04206

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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SCANNED
JUN 10 2023

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

SUBJECT: MILAZZO, RHONDA CASE NUMBER: 23-04206

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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JUN 10 2023

DUI WITNESS LIST

23-04206

Arresting Officer: K. Torres 6107 Email: ktorres@rbpublicsafety.org
Agency Address: 600 West Blue Heron Blvd., Riviera Beach, FL Phone: (561) 845-4123
Can Testify To: driving pattern, driver seat, observation

Backup Officers: G. Meyer
Agency Address: 600 West Blue Heron Blvd., Riviera Beach, FL Phone: (561) 845-4123
Can Testify To: driver seat, observation

Crash Investigator: _____ Email: _____
Agency Address: _____ Phone: _____

Breathalyzer Technician: O'Neal ID: 6212 Agency: 6212

DRE: _____ ID# _____ Agency Case #: _____
Agency Address: _____ Phone: _____ Email: _____

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ ☐ Wheel Witness

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SCANNED
JUN 10 2023

PALM BEACH COUNTY
SHERIFF'S OFFICE

Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2023015153	**Date:** 6/10/2023
	Specialist Name/ID: Pinkneya/7796

SCANNED
JUN 10 2023