J#0247612 2023CT17495 ASD P#3405

ARREST / NOTICE TO APPEAR

1. Arrest (No Warrant) 3. Request for Warrant 6. Arrest (Warrant) 4. Request for Capias 2. N.T.A. 5. Juvenile Referral

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
0500200	Boca Raton Police Department	3 2 2023-012168

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

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
800 MEADOWS RD, 800 MEADOWS RD, BOCA RATON, FL	300 S FEDERAL HWY, BOCA RATON, FL 33432

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
09/27/2023	20:47	09/27/2023	22:00	09/27/2023	22:00	WESTWAY TOWING

DEFENDANT

Name (Last, First, Middle): DIAMOND, SCOTT ANDREW — Alias:

Race (W - White, I - American Indian, B - Black, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	02/25/1964	5'11	220	BROWN	BLACK	LIGHT	Medium

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description): TATT E FULL BODY / VARIOUS TATTOOS — Marital Status: S — Religion — Indication of: Alcohol Influence ☐ Yes ☐ No ☐ Unk. ☒ Drug Influence

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State
108 NE 13TH AVE, POMPANO BEACH, FL 33060				(954) 347-1148	3

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
108 NE 13TH AVE, POMPANO BEACH, FL 33060				(954) 347-1148	FL DL

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
D553781640650 / FL	[redacted]		QUEENS, NY, United	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. Disperses/ 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- PROPERTY DAMAGE/ INJURY TO PROPERTY OR PERSON ENHANCED	316.193(3C1)	

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

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: FAIR — 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
ADAMES 880	ADAMES 880	TOT CJ

Transported By	Date Transported	Time Transported	Other
ADAMES 880			

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: 10/30/2023 08:30:00

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 — Name Verification (Printed by Arrestee) (PRINT) SEP 28 AM 3:12

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Name of Arresting Officer (Print)	I.D. #
ADAMES, L. A.	880

Intake Deputy	I.D. #	Pouch #	Transporting Officer	I.D. #	Agency
[illegible]	7606		ADAMES	880	BRPD

Witness here if subject signed with an "X".

PAGE 1 OF 1

[redacted]

SEP 28 2023

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PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

ADMIN

OBTS Number:

Agency ORI Number: FL FL0500200

Agency Name: BOCA RATON POLICE DEPARTMENT

Agency Report Number: 3 | 2 | 2023-012168

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
DIAMOND, SCOTT ANDREW		W	M	02/25/1964

CHARGES

Charge Description	Charge Description
316.193(3C1) DUI- PROPERTY DAMAGE/ INJURY TO PROPERTY	

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
STATE OF FLORIDA,	U	U	

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
100 NW 2ND AVE, BOCA RATON, FL 33432	(561) 338-1234	

Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation
	(561) -	

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable 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.

☐ was observed by _____ who told _____ that he/she saw the arrested person committ 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 27 day of September, 2023 at 20:47 (Specifically include facts constituting cause for arrest.)

On September 27, 2023, at approximately 1901 hours, I responded to 300 S Federal Hwy in reference to a vehicle crash.

At the scene I met with Officer Super, who informed me that he responded to this location in reference to a call of a vehicle crash. Officer Super advised that when he arrived, he observed a white male unconscious sitting in the driver seat of a black pickup truck with the vehicle in drive. The male was foaming from the mouth and unresponsive. The vehicle`s driver`s window had to be shattered to assist the unconscious male. BRFD personnel administered Narcan (run# 23-14589) and the male became responsive. BRFD Rescue 1 transported the male to Boca Regional Hospital.

I arrived on the scene at approximately 1909 hours. Upon arrival, I observed a black 2016 Ford truck (FL tag GTID09), with the driver window shattered. The vehicle was in a crash with a white BMW SUV (FL tag LPDN36). The Ford truck rear-ended the BMW.

I then went to Boca Regional Hospital and met with Lisa Flickstein, the driver of the white BMW. Flickstein stated she was stopped at a red light when she was rear-ended. Flickstein further stated she observed an unconscious white male later identified as Scott Diamond sitting on the driver seat of the other vehicle unconscious.

Next, I met with Scott Diamond who also appeared at the hospital for treatment. Diamond stated he was driving from his house to a cigar lounge. Diamond only remembers passing out and rear-ending another vehicle. Due to Diamond not being able to provide any more information about the crash, I informed him that the crash investigation was over and that I would be conducting a criminal DUI investigation. I then informed Diamond of his constitutional warnings (Miranda). Diamond stated he understood the warnings. Diamond stated he got home from work and took Melatonin and Advil before leaving to a cigar lounge. I then asked if he was willing to take a Standardized Field Sobriety Exercises

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

KENISTON, ADAM CRAIG
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

09/28/2023
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

ADAMES, LUIS ALBERTO (880)
NAME OF OFFICER (PLEASE PRINT)

09/28/2023
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

SCANNED SEP 28 2023

ADMIN

OBTS Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	JUVENILE
-				

Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2023-012168

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
DIAMOND, SCOTT ANDREW		W	M	02/25/1964

PROBABLE CAUSE STATEMENT

and he agreed.

The first exercise was Horizontal Gaze Nystagmus. I administered the instructions and Diamond stated that he understood. I first ensured that Diamond eyes had equal pupil sizes and tracked equally. I then continued with the exercise. Diamond displayed lack of smooth pursuit. Diamond also moved his head side to side during the exercise.

The second exercise was the Walk and Turn. I administered the instructions and demonstrated how the exercise should be completed. Diamond stated that he understood. Diamond was not able to keep balance while in the starting position, missed heel to toe numerous times, made an improper turn, used his arms for balance, fell off the line, and took an incorrect number of steps.

The third exercise was the One-Leg Stand. I administered the instructions and demonstrated how the exercise should be completed. Diamond swayed, used his arms for balance, and put his foot down during the exercise.

The fourth exercise was the Finger to Nose. I then administered the instructions and Diamond stated he understood. The pattern was L-R-L-R-R-L. Diamond used the bottom of his finger instead of the tip of his finger on two occasions and briefly held his finger in front of his nose on the 4th "right" hand command.

The final exercise was a modified Romberg balance exercise. I administered the instructions and conducted the exercise. Diamond estimated the passage of 30 seconds in 27 seconds.

Based on my investigation, and the totality of the circumstances, I found probable cause to believe that, at the time of the crash, Diamond was operating a vehicle within the state while impaired by alcohol and/or chemical or controlled substances. Diamond was placed under arrest for DUI (property damage) per F.S.S. 316.193(3c1). At this time, I was informed by the nurse attending to Diamond that he would likely remain at the hospital for at least another hour. Based on the nurse`s statement, and the amount of time that had already lapsed from the time of the crash, it was determined that a Breath and/or urine test was impossible and/or impractical.

At approximately 2039 hours, I requested that Diamond to submit to a lawful test of his blood for the purpose of determining its alcohol content and the presence of chemical or controlled substances. Diamond consented to the blood draw and provided a sample consisting of two tubes at 2059 hours. The sample was collected by BRRH Lead Phlebotomist Shereen Smith who used a blood kit provided by BRPD. The tubes were inverted several times following the collection and placed into the blood kit. The blood kit was then sealed and submitted into BRPD evidence with a request for testing.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

KENISTON, ADAM CRAIG
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

09/28/2023
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

ADAMES, LUIS ALBERTO (880)
NAME OF OFFICER (PLEASE PRINT)

09/28/2023
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

SEP 28

ADMIN

OBTS Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	JUVENILE
, •				

Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2023-012168

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
DIAMOND, SCOTT ANDREW		W	M	02/25/1964

PROBABLE CAUSE STATEMENT

After all paperwork was completed, Diamond was transported to Palm Beach County Jail where he will await his final disposition.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

KENISTON, ADAM CRAIG
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

09/28/2023
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

ADAMES, LUIS ALBERTO (880)
NAME OF OFFICER (PLEASE PRINT)

09/28/2023
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

SCANNED SEP 28 2023

23-12168

Diamond, Scott

DUI INFLUENCE REPORT

NOT A CERTIFIED COPY

BOCA RATON POLICE SERVICES DEPARTMENT
100 NW 2nd Avenue
Boca Raton, FL 33432

Revised: July 9, 2018

SCANNED
SEP 28 2023

BOCA RATON POLICE SERVICES DEPARTMENT

DUI INFLUENCE REPORT – PART I

On the 27th day of September, at 2047 AM/PM:

Subject: Scott Dianand Case Number: 23-12168

PERSONAL CONTACT

Driving Pattern: _____

Observation of Driver: _____

Driver's Statement: _____

Odors: _____

GENERAL OBSERVATIONS

Speech: _____

Attitude: _____

Clothing: _____

Medical Problems: _____

Medications: _____

Other: _____

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Horizontal Gaze Nystagmus:

☐ Left eye does not follow smoothly
☐ Left eye jerks at 45 degrees angle or less
☐ Distinct jerking left eye maximum deviation
☐ Right eye does not follow smoothly
☐ Right eye jerks at 45 degrees angle or less
☐ Distinct jerking right eye maximum deviation

Can not do, Why? _____

Walk and turn: _____

Can not do, Why? _____

One leg stand: _____

Can not do, Why? _____

Finger to nose: _____

Can not do, Why? _____

Alphabet (speech pattern): _____

Can not do, Why? _____

Breath/Blood test results: _____

State of Florida, County of Palm Beach,
Sworn and subscribed before me this _____ (date) by _____.

_____ _____
Notary/Clerk of Court/ Officer (FSS 117.10) Date

_____ _____
Signature of Arresting Officer Name of Officer (print)

See NOT A CERTIFIED COPY

SCANNED
SEP 28

ARRESTING OFFICER: L. Adames #880

Name: Ofc. Stephenson Phone # _____ Work # _____

Address: BRPD

Can testify to: _____

Name: ofc. Super Phone # _____ Work # _____

Address: BRPD

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

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-END OF PART ONE-

SEP 28 2023

BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT – PART II

To be filled out at testing facility

Agency Case # 23-12168

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is Wednesday (day), September (month), 27 (date), 2023 (year)

B. The time is now approximately 2039 AM/PM.

C. The following is in reference to case number 23-12168.

D. Present at this time is ofc. Adames/Casas/Stephenson (Officer's Name) of the Boca Raton Police Department.

E. Officer Adames, have you arrested Scott Diamond (Defendant's name) in violation of Florida State Statute 316.193?

F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida? yes

G. Mr./Mrs./Ms. Diamond, I am required to inform you these proceedings are being video recorded.

Operator Note: *Video record breath request, breath sample, and interview.*

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SEP 28

II. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.

Note: Read only the paragraph applicable to the type of test you are requesting.

A. I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.

B. 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.

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

IMPLIED CONSENT WARNINGS

Note: Read only if the subject does not comply with your request.

I am _____ of the _____.

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 is admissible into evidence in any criminal proceeding.

Subject Signature: _____

Note: Also read for CDL holders:

IN ADDITION, your refusal to submit will result in the loss of your commercial privileges for one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from operating a commercial motor vehicle.

Note: After reading the implied consent warning, the arresting officer must request a breath sample again.

(IF REFUSAL THEN)

At this time Mr./Mrs./Ms. ____ has refused to submit to a breath test.

The date is _____ (month), _____ (day), _____ (year), and the time is _____AM/PM.

A refusal form will be completed by the arresting officer.

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BOCA RATON POLICE SERVICES DEPARTMENT

JUVENILE CONSTITUTIONAL WARNINGS

Rights of suspects prior to custodial questioning.
Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

(1) You have the right to remain silent and not answer any questions. *Tell me in your own words what you think this means.*
(You do not have to talk to me or answer any questions about this offense. You can be quiet if you want.)

(2) Any statement you make must be freely and voluntarily given. *Tell me in your own words what you think this means.*
(If you do talk to me it has to be because you want to and not because anyone is forcing you to speak.)

(3) You have a right to the presence and representation of a lawyer of your choice before you make any statement and during any questioning. *Tell me in your own words what you think this means.*
(You can talk to a lawyer before we ask you any questions and you can have him/her with you now, during our questioning.)

(4) If you cannot afford a lawyer, you are entitled to the presence and representation of a court appointed lawyer before you make any statement and during any questioning. *Tell me in your own words what you think this means*
(If you do not have money for a lawyer and you want one, a lawyer will be given to you for free.)

(5) If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent. *Tell me in your own words what you think this means.*
(If you decide to talk to me then change your mind, you can stop answering my questions at any time.)

(6) I can make no threats or promises to induce you to make a statement. This must be of your own free will. *Tell me in your own words what you think this means*
(I am not allowed to threaten you or make you any promises to get you to talk to me. If you decide to talk, it must be because you want to.)

(7) Any statement can be and will be used against you in a court of law. *Tell me in your own words what you think this means*
(Anything you say to me can and will be told to the judge or a jury in court. A judge is a person who decides if you have done something wrong. Sometimes a group of people called a jury decide this, but the Judge is the person who decides what punishment you get.)

(8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: _____ Date: _____ Time: _____

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BOCA RATON POLICE SERVICES DEPARTMENT

TESTING FACILITY TASK REPORT

SUBJECT: _____

CASE #: _____ DATE: _____

BREATH TEST RESULTS

1) TIME _____ AM/PM 2) TIME _____ AM/PM

3) TIME _____ AM/PM 4) TIME _____ AM/PM

BREATH OPERATOR: _____

MAINTENANCE TECHNICIAN: _____

TESTING OFFICER'S OBSERVATIONS

SPEECH: _____

ATTITUDE: _____

CLOTHING: _____

MEDICAL CONDITION: _____

OTHER: _____

_____

COMMENTS: _____

_____

_____

_____

_____

_____

Not conducted

NOT A CERTIFIED COPY

SEP 20

Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

(1) You have the right to remain silent and not answer any questions.
(2) Any statement you make must be freely and voluntarily given.
(3) You have a right to the presence and representation 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 and representation of a court appointed lawyer before you make any statement 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 be and will be used against you in a court of law.
(8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: _____ Date: _____ Time: _____

QUESTIONS AND ANSWERS

Were you operating a motor vehicle at the time of the accident/stop? _____

Where were you going? _____

What street or highway were you on? _____

Direction of travel? _____

Where did you start driving from? _____

What city (county) were you stopped in? _____

What time did you start? _____ AM/PM What time is it now? _____

What is today's date? _____ What day of the week is it? _____

When did you last eat? _____ What did you eat? _____

What have you been doing the past three hours prior to this stop/accident? _____

How much do you weigh? _____ Have you been drinking? _____ What were you drinking? _____
_____

How much? _____ Where? _____ With whom were you drinking? _____

When did you have your first drink? _____ AM/PM When did you stop drinking? _____AM/PM

How did you consume your last two drinks? _____

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Are you under the influence of alcohol now? ☐ Yes ☐ No

Can you feel the effects of alcohol? ☐ Yes ☐ No

Have you consumed alcohol since the accident? ☐ Yes ☐ No

Can you feel the effects of alcohol? ☐ Yes ☐ No

Have you consumed alcohol since the accident? ☐ Yes ☐ No How much? _____

What? _____ Where? _____

What line of work are you in? _____

When did you last work? _____

Do you have any physical defects or injuries? ☐ Yes ☐ No If yes, explain:

_____

Are you sick or injured? ☐ Yes ☐ No If yes, explain:

_____

Do you limp? ☐ Yes ☐ No Did you get a bump on the head? ☐ Yes ☐ No

Were you in an accident today? _____

Have you taken any drugs or smoked marijuana today? _____

What? _____ When? _____

Have you seen a doctor or dentist today? ☐ Yes ☐ No Who? _____

Are you taking any prescription medications? ☐ Yes ☐ No What? _____ When? _____

Do you have: Epilepsy? ☐ Yes ☐ No Inner ear trouble? ☐ Yes ☐ No

Glass eye? ☐ Yes ☐ No Ear infection? ☐ Yes ☐ No

False teeth? ☐ Yes ☐ No Diabetes? ☐ Yes ☐ No

Any problems not correctable by glasses or contact lenses? _____

Do you take insulin? ☐ Yes ☐ No If yes, when was your last injection? _____

Have you ever had a driver's license in any other state? _____

I am now ending this video recording. The time is now approximately _____ AM/PM.

The date is _____ (month), _____ (day), _____ (year).

Not Conducted

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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.	
	☐			
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	☐			
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	☐			
Other	☐	FL CONSTITUTION ARTICLE 1,16(b)	Other: MARSY'S LAW	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2023025530	**Date:** 9/28/2023
	Specialist Name/ID: Pinkneya/7796