1 23CT19609 SB

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: 0500200
Agency Name: Boca Raton Police Department
Agency Report Number (N.T.A.'s only): 3 | 2 | 2023-013519

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): 7600 N. DIXIE HWY, BOCA RATON FL 33487, 7600 N DIXIE HWY,
Location of Offense (Business Name, Address): 7600 N DIXIE HWY, BOCA RATON, FL 33487

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
10/28/2023	22:20	10/28/2023	22:30	10/29/2023	00:12	WESTWAY TOWING

DEFENDANT

Name (Last, First, Middle): EISENBERG, SCOTT TAFF
Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	06/09/1967	5'08	160	BROWN	BLACK	LIGHT	Medium

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

Local Address (Street, Apt. Number): 9415 LAKE SERENA DR, BOCA RATON, FL 33496 (City) (State) (Zip)
Phone: (561) 212-8641
Residence Type: 1. City 3. Florida 2. County 4. Out of State: 2

Permanent Address (Street, Apt. Number): 9415 LAKE SERENA DR, BOCA RATON, FL 33496 (City) (State) (Zip)
Phone: (561) 212-8641
Address Source: DEF

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
E251798672090 / FL	[redacted]		WASHINGTON, DC,	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) (19 OR (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	316.193(1) (a)	

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: TALKATIVE
Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain:

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

PROPERTY - Received By	Released By	Released To
HARRISON	PBCJ	OWNER

Transported By	Date Transported	Time Transported	Other
HARRISON	10/29/2023	00:12	

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: 11/27/2023 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
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Signature of Arresting Officer:
Name of Arresting Officer (Print): HARRISON, D. M. I.D. #: 856

Name Verification (Printed by Arrestee) (PRINT)

Intake Deputy: G. O'Neal 7049 I.D. # Pouch #
Transporting Officer: HARRISON I.D. # 856 Agency: BRPD
Witness here if subject signed with an "X".

FILED PBC -1GUN CLUB-- '23 OCT 30 AM 8:04 PAGE

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OBTS Number

PROBABLE CAUSE AFFIDAVIT

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

DMIN

Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 2023-013519

Special Notes:

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

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
EISENBERG, SCOTT TAFF		W	M	06/09/1967

CHARGES

Charge Description	Charge Description
316.193(1) (a) DUI	
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 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.

☐ confessed to _____ admitting to the below facts.

☐ was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.

☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 28 day of October, 2023 at 22:20 (Specifically include facts constituting cause for arrest.)

On 10/28/2023 at approximately 2145 hours, I responded to the area of Hidden Valley Blvd and N. Dixie Hwy in reference to a two-vehicle accident.

Upon arrival, I met with Ofc. Henderson who was first on scene just as the accident had taken place. According to Ofc. Henderson, he observed a white male later identified by his FL DL to be Scott Eisenberg, seated inside of the blue Mazda bearing FL tag LFSA39, which was involved in the accident. Ofc. Henderson observed Eisenberg reverse the vehicle quickly and then attempt to drive forward, at which point Ofc. Henderson told Eisenberg to stop. Ofc. Henderson had concluded his accident investigation prior to my arrival.

I then met with Eisenberg. While asking him what happened, Eisenberg appeared to be in an excited state and animated. He was slurring his speech, and I could smell a strong odor of an unknown alcoholic beverage emanating from his breath and person. Based on the totality of the circumstances, I became concerned that Eisenberg had been operating a motor vehicle while under the influence of alcohol and/or a chemically controlled substance. I then informed him that the other officer was conducting the accident investigation and I would be conducting a criminal DUI investigation. Eisenberg advised he understood. According to Eisenberg, he was coming from his mother`s house in Delray Beach and heading to his residence in West Boca Raton. He stated he consumed 2-3 drinks about an hour ago while at his mother`s house. He also advised he takes two prescription medications for sleeping and depression, one of which is Trazodone. He advised he has no medical issues, no physical injuries, no issues with his eyes not corrected by contact lenses or glasses, and his highest level of education is a graduate degree. I then asked Eisenberg if he would be willing to participate in field sobriety tasks to dispel my alarm that he is under the influence of alcohol and/or chemically controlled substance. Eisenberg agreed to participate in the tasks. I explained and demonstrated each task. The tasks were performed on a solid white line on a flat and dry surface.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

IMMLER, AMANDA
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

10/29/2023
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

HARRISON, DANIELLE MARIE (856)
NAME OF OFFICER (PLEASE PRINT)

10/29/2023
DATE

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

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 | 2023-013519

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
EISENBERG, SCOTT TAFF		W	M	06/09/1967

PROBABLE CAUSE STATEMENT

Eisenberg agreed the line was straight, he pointed to it and stated it was "white." Eisenberg chose to participate in the tasks barefoot and was given the option to wear his one sandal available to him. Eisenberg had a minor scratch to his left elbow, which he was not aware of.

The first task was the Horizontal Gaze Nystagmus. After explaining the instructions, I asked Eisenberg if he had any questions. He replied "no." I then asked if he understood the task, and he replied "yes." I noticed a lack of smooth pursuit, distinct and sustained nystagmus at maximum deviation in both eyes, and nystagmus in both eyes prior to 45 degrees. Eisenberg was also swaying the entire time.

The second task was the Walk and Turn. After explaining the instructions, I asked Eisenberg if he had any questions. He replied "no." I then asked if he understood the task, and he replied "yes." Eisenberg did not remain in the starting position as I instructed him to. Eisenberg used his arms to steady himself, stepped off the line multiple times, and took an incorrect number of steps back.
The third task was the One Leg Stand. After explaining the instructions, I asked Eisenberg if he had any questions. He replied "no." I then asked if he understood the task, and he replied "yes." Upon asking which leg he would be raising, he pointed to his left leg and said "right." He then corrected himself. Eisenberg chose to balance on his right leg and lift his left leg. On his first attempt, he forgot to count out loud. On his second attempt, he counted incorrectly and stopped before I told him to. On his third attempt, he was hopping on his right leg. He was swaying backwards.

The fourth task was the Finger to Nose (L-R-L-R-R-L). After I explained and demonstrated the task, he advised he understood. He showed me he knew what hand was his left and right. He also showed me he knew what his index/pointer finger was, and where the tip of his nose was. On his third right, he started using his left finger then switched midway and used his right finger.

The fifth task was the Rhomberg Alphabet. He advised he understood the task and did not have any questions. He completed this task without issue.

The sixth and final task was the Rhomberg Balance (estimate 30 sequence). He advised he understood and did not have any questions. He estimated 30 seconds in 23 seconds.

Based on the above information, I developed probable cause to arrest Scott Eisenberg for DUI. I handcuffed Eisenberg, checked for tightness and proper fit. Ofc. Henderson conducted a search of his person and then placed him inside of my marked police vehicle. I then transported Eisenberg to BRPD booking to obtain a breath sample. Ofc. Price responded to BRPD booking as the breath tech operator. Upon arrival, a 20-minute observation was conducted and then Eisenberg was taken into the BRPD BAT room. I requested Eisenberg to provide a sample of his breath for the purposes of determining

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

IMMLER, AMANDA
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

10/29/2023
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

HARRISON, DANIELLE MARIE (856)
NAME OF OFFICER (PLEASE PRINT)

10/29/2023
DATE

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

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 | 2023-013519

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
EISENBERG, SCOTT TAFF		W	M	06/09/1967

PROBABLE CAUSE STATEMENT

the alcohol content. Eisenberg asked what would happen if he did not or if him providing the sample is "worse". I then read Eisenberg his Florida Implied Consent Warnings, and he replied he understood. I then asked Eisenberg if he would provide a breath sample with those Implied Consent Warnings in mind. He then agreed to provide a breath sample. He then provided two breath samples of 0.116 and 0.107. I then read Eisenberg his Constitutional Warnings, and he advised he understood. He answered my questions. See DUI influence report.

Scott Eisenberg is being charged with DUI pursuant to F.S.S. 316.193(1)(a). I issued Eisenberg a DUI citation (#AG44LCE). Eisenberg was medically cleared at Boca Raton Regional Hospital and then transported to Palm Beach County Jail without issue.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

IMMLER, AMANDA 7169
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

10/29/2023
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

HARRISON, DANIELLE MARIE (856)
NAME OF OFFICER (PLEASE PRINT)

10/29/2023
DATE

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

BRPD Case number: 2023-013519
Arresting Officer: Harrison
1015 Time: 2220
Breath Tech: Frie
Start 20min: 2240

DUI INFLUENCE REPORT

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

Revised: July 9, 2018

BOCA RATON POLICE SERVICES DEPARTMENT

DUI INFLUENCE REPORT – PART I

On the _____day of _____, at _____ AM/PM:

Subject: _____ Case Number: _____

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: .116 / .107

State of Florida, County of Palm Beach,
Sworn and subscribed before me this 10/28/23 (date) by personally known.

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

_____ D. Hamsa
Signature of Arresting Officer Name of Officer (print)

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ARRESTING OFFICER: Hanson

Name: Frue Phone # _____ Work # _____

Address: _____

Can testify to: BTD

Name: Henderson Phone # _____ Work # _____

Address: _____

Can testify to: Crash investigator

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-

BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT – PART II

To be filled out at testing facility

Agency Case # 2023-013519

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is Saturday (day), October (month), 28 (date), 2023 (year).

B. The time is now approximately 11:03 AM/PM.

C. The following is in reference to case number 2023-013519.

D. Present at this time is OFC Harrison (Officer's Name) of the Boca Raton Police Department.

E. Officer Harrison, have you arrested Scott Eisenberg (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. Eisenberg, 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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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: Read on Camera

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: Scott Eisenberg

CASE #: 2023-013519 DATE: 10/28/2023

BREATH TEST RESULTS

1) TIME .116 AM/PM 2) TIME .107 AM/PM

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

BREATH OPERATOR: Price

MAINTENANCE TECHNICIAN: Crawford

TESTING OFFICER'S OBSERVATIONS

SPEECH: _____

ATTITUDE: _____

CLOTHING: _____

MEDICAL CONDITION: _____

OTHER: _____

_____

COMMENTS: _____

_____

_____

_____

_____

_____

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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: Read on camera Date: _____ Time: _____

QUESTIONS AND ANSWERS

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

Where were you going? Home - west from mother's house in Delray

What street or highway were you on? Dixie Hwy coming from Hidden Valley

Direction of travel? South

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? 11:08 pm

What is today's date? 10/27/23 What day of the week is it? Saturday

When did you last eat? 5 hrs ago What did you eat? don't remember

What have you been doing the past three hours prior to this stop/accident? mother's house celebrating anniversary

How much do you weigh? 160 lbs 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? 2-3 drinks, beer & glass of wine 48 mins before police arrival

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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? Self employed

When did you last work? today

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? Yes

Have you taken any drugs or smoked marijuana today? No

What? _____ When? _____

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

Are you taking any prescription medications? ☒ Yes ☐ No What? Trazodone (antidepressant) 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? No

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? CA, MD, MA, NH, Maine

I am now ending this video recording. The time is now approximately 2321 AM/PM

The date is October (month), 28 (day), 2023 (year).

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Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☐	119.071(2)(e)	Confession	
Public Info. Exemptions	☐	FL Const. Art. I, s. 16(b)(5)	Marsy's Law – victim information shall be redacted. The term "victim" also includes the victim's lawful representative, the parent or guardian of a minor, or the next of kin of a homicide victim. The term "victim" does not include the accused (ref. page 99 of the CRTM for additional information)	
	☐	119.071(2)(j)	Home/employment telephone number, home/employment address, or personal assets of a person who has been the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence	
	☐	119.0712(2)	Personal information contained in a motor vehicle record	
	☐	316.650(11)	Driver information contained in a uniform traffic citation	
	☐	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
Florida Rules of Judicial Administration 2.420	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses	
	☐			
	☐			
Other	☐			
	☐			
	☐			
	☐			

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REVIEW COMPLETED BY

Booking Number: 2023028538	**Date:** 10/30/2023
	Specialist Name/ID#: ANGELA PINKNEY/7796