23 CT 14254

# ARREST / NOTICE TO APPEAR

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

1 JUVENILE

## ADMINISTRATION

OBTS Number

Agency ORI Number: 0501700
Agency Name: Jupiter Police Department
Agency Report Number (N.T.A.'s only): 5 1 4 23-003192

Charge Type (Check as many as apply): 1. Felony; 3. Misdemeanor; 5. Ordinance; 2. Traffic Felony; 4. Traffic Misdemeanor; 6. Other
If Weapon Seized — Enter Type: UNARMED
Multiple Clearance Indicator

Location of Arrest (Including Name of Business): 3505 KYOTO GARDENS PBG, FL
Location of Offense (Business Name, Address): 1899 W INDIANTOWN RD/CENTER ST, JUPITER, FL 33458

| Date of Arrest | Time of Arrest | Booking Date | Booking Time | Jail Date | Jail Time | Location of Vehicle |
|---|---|---|---|---|---|---|
| 08/10/2023 | 23:11 | 08/10/2023 | 23:21 | | | |

## DEFENDANT

Name (Last, First, Middle): MORGAN, SHARON LINDA
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 | F | 01/09/1957 | 5'05 | 160 | Blu | Red | Light | Med |

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

Local Address (Street, Apt. Number) (City) (State) (Zip): 2504 SAN PIETRO CIRCLE, PALM BEACH GARDENS, FL 33410
Phone:
Residence Type: 1. City 3. Florida 2. County 4. Out of State
Permanent Address (Street, Apt. Number) (City) (State) (Zip): 2504 SAN PIETRO CIRCLE, PALM BEACH GARDENS, FL 33410
Phone:
Address Source:
Business Address (Name, Street) (City) (State) (Zip):
Phone:
Occupation:

| D/L Number, State | Soc. Sec. Number | INS Number | Place of Birth (City, State) | Citizenship |
|---|---|---|---|---|
| M625792575091 / FL | [redacted] | | KWPB FL | US |

## CO-DEF

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

## 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 0

Charge Description: DUI - BLOOD .08 OR ABOVE
Statute Violation Number: 316.193(1)(B)
Violation of ORD #:

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

## CHARGE 2)

Charge Description: CRASH - HIT & RUN W/ PROPERTY DAMAGE
Statute Violation Number: 316.061(1)
Violation of ORD #:

| Drug Activity | Drug Type | Amount / Unit | Offense # | Counts | Domestic Violence | Warrant / Capias Number | Bond |
|---|---|---|---|---|---|---|---|
| | N | / | | 1 | ☐ Y ☒ N | 5984 | |

## 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:
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:
Transported By:
Date Transported: / /
Time Transported: : :
Other:

## 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): North County PALM BEACH GARD
Court Date and Time: 08/30/2023 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.

No Photo Available

Signature of Defendant (or Juvenile and Parent/Custodian)
Date Signed

## ADMIN

HOLD for Other Agency:
Signature of Arresting Officer:
Name Verification (Printed by Arrestee) (PRINT):
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other
Name of Arresting Officer (Print): COUNTS, RUSSELL L — I.D. # 1150
Intake Deputy: Bonillo — I.D. # 18342 — Pouch #
Transporting Officer: COUNTS — I.D. # 1150 — Agency: JPD
Witness here if subject signed with an "X"



☒ COURT ☒ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P.I.O. ☐ DEFENDANT

SCANNED
NOT A CERTIFIED COPY

0090326

3711

# 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 | Agency Name | Agency Report Number |
|---|---|---|---|
| | FL 0501700 | JUPITER POLICE DEPARTMENT | 5 4 23-003192 |

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 |
|---|---|---|---|---|
| MORGAN, SHARON LINDA | | W | F | 01/09/1957 |

**CHARGES**

| Charge Description | Charge Description |
|---|---|
| 316.193(1)(C) DUI - BREATH .08 OR ABOVE | 316.061(1) CRASH - HIT & RUN W/ PROPERTY DAMAGE |
| 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 10 day of August, 2023 at 23:11 (Specifically include facts constituting cause for arrest.)

On 8/10/23, at 2145 hours, I was dispatched to the area of W. Indiantown Road in Jupiter near the intersection of Center Street, regarding a hit and run crash. Dispatch then advised the call was changed to a careless driver and the vehicle had left Jupiter Jurisdiction.

A short time later, PBGPD advised they had located the vehicle due to the victim of the hit and run following it. PBGPD initiated a traffic stop, which the driver failed to stop with lights and sirens activated, for approximately 3/4 of a mile.

After another short time, I was dispatched to PBGPD traffic stop on Kyoto Gardens Boulevard. Upon arrival at the traffic stop, I made contact with the victim of the hit and run accident. He advised he was driving in the middle lane of Indiantown Road near Center Street when the driver of a small SUV, later identified as WF Sharon L. Morgan DOB: 1/9/57, came into his lane, and the passenger side mirror made contact with his motorcycle, almost causing him to fall.

He pulled up next to Morgan, who rolled the window down. He asked Morgan to pull over, which she just stared at him, and then drove off. He advised he followed Morgan through Jupiter, into PBSO jurisdiction, and then into PBGPD jurisdiction. PBGPD was then able to initiate a traffic stop. He advised Morgan did not stop for a lengthy amount of time before pulling into a parking spot.

I then made contact with Morgan who was still in the driver seat of her vehicle. Her movements were extremely slow. Her eyes were bloodshot and glassy. She was argumentative from the start and refused to answer any questions regarding alcohol.

I then completed the investigation of the crash incident. Although a lengthy amount of time had passed, due to Morgan`s slow movements, bloodshot glassy eyes, and the odor of

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**ADMINISTRATIVE**

SWORN AND SUBSCRIBED BEFORE ME

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

08/11/2023
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

COUNTS, RUSSELL L (1150)
NAME OF OFFICER (PLEASE PRINT)

08/11/2023
DATE



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

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

ADMIN

| Agency ORI Number | Agency Name | Agency Report Number |
|---|---|---|
| FL 0501700 | JUPITER POLICE DEPARTMENT | 5 \| 4 \| 23-003192 |

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 |
|---|---|---|---|---|
| MORGAN, SHARON LINDA | | W | F | 01/09/1957 |

PROBABLE CAUSE STATEMENT

an unknown alcoholic beverage coming from her person, I asked her to complete roadside tasks to determine her ability to drive.

Morgan was argumentative and initially did not want to complete them, however, she advised she would. I asked her to exit the vehicle, which she complied. Morgan then completed roadside tasks. See DUI PC.

Once roadside tasks were completed, Morgan was arrested for DUI and hit and run. Once testing was completed at the BAT facility, Morgan`s BAC results were .077 and .079. Morgan then submitted to a urine sample, which was collected and placed into evidence at the Jupiter Police Department.

In conclusion of the incident, I find probable cause to charge Morgan with DUI per F.S.S. 316.193(1)(C) and hit and run per F.S.S. 316.061(1).

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

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

08/11/2023
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

COUNTS, RUSSELL L (1150)
NAME OF OFFICER (PLEASE PRINT)

08/11/2023
DATE



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

# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE **10th** DAY OF **August** 20 **23**, AT **2311** AM ✔ PM

SUBJECT: **Morgan Morgan Linda** CASE NUMBER: **23-3192**

AGENCY: **Jupiter Police Department** ARRESTING OFFICER: **R. Counts 1150 1150**

## PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)
**Drifting lanes causing minor accident with motorcycle. Subject fled the scene after motorcycle driver asked her pull over. Motorcycle driver followed as she attempted to flee. Traffic stop initiated by PBGPD and driver did not stop for approximately 3/4/of a mile with lights and sirens activated.**

OBSERVATION OF DRIVER:
**Drivers movements are extremely slow. Her eyes bloodshot and glassy. Odor of unknown alcoholic beverage coming from her person. Subject argumentative and hesitant to answer questions pertaining to minor accident and alcoholic beverages.**

DRIVER'S STATEMENTS:
**Driver refused to answer any questions regarding alcohol consumption. Stated the accident was minor. Also advised she was trying o get home and that is why she did not initially stop for police.**

ODORS:
**Unknown alcoholic beverage.**

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## GENERAL OBSERVATIONS

SPEECH: **Slow, slow movements**

ATTITUDE: **Argumentative**

CLOTHING: **Blue jeans, t-shirt, shoes**

MEDICAL/OTHER: **N/A**

---

TATE OF FLORIDA
'OUNTY OF PALM BEACH

ignature of Arresting/Investigative Officer)

he foregoing instrument was sworn to or affirmed and subscribed before me this **10th** day of **August** 20 **23** by **Officer R. Counts 1150 1150**

'rint name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced **Personally Known**

otary Public, Clerk of Court, Officer (F.S.S 117.10)

SUBJECT: Morgan Morgan CASE NUMBER 23-3192

## 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

**)ther Observations:**

WALK & TURN:
**Used her arms for balance. Improper turn.**

ONE LEG STAND:
**Skipped numbers while counting.**

FINGER TO NOSE:
**1st attempt missed tip of nose. Brought up wrong arm when asked to utilize left hand twice in a row.**

ROMBERG ALPHABET:
**Properly completed.**

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**BREATH TEST RESULTS:** 1) .077 2) .079 3) 4)

**TATE OF FLORIDA**
**'OUNTY OF PALM BEACH**

*ignature of Arresting/Investigative Officer)*

ne foregoing instrument was sworn to or affirmed and subscribed before me this 10th day of August 20 23 by Officer R. Counts 1150 1150

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

otary Public, Clerk of Court, Officer (F.S.S 117.10)

SUBJECT: **Morgan, Morgan Linda** CASE NUMBER: **23-3192**

# 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 detecting the presence of chemical or controlled substances.

-OR-

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

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST

I am **Ofc. Counts** of the **Jupiter Police Department**

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.

SUBJECT'S SIGNATURE: **Read on Camea** **Morgan, Morgan Linda**

# CONSTITUTIONAL WARNINGS

**I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:**

You have the right to remain silent and not answer any questions.

Any statement must be freely and voluntarily given.

You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.

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.

If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.

I can make no threats or promises to induce you to make a statement. This must be of your own free will.

Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: **Read on Camera** **Morgan, Morgan Linda**

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23-3192

# STATE OF FLORIDA
# AFFIDAVIT OF REFUSAL TO SUBMIT TO
# BREATH TEST

I, Ofc. Counts, a duly certified Law Enforcement or Correctional Officer, am a
(Name of Officer reading Implied Consent Warning)

member of Jupiter Police Department, and I do swear
(Name of Law Enforcement Agency)

or affirm that on or about the 10 day of August, 20 23, at 2311 ☑P.M. ☐A.M.

DRIVER Morgan (FIRST NAME) Linda (MIDDLE OR MAIDEN NAME) Morgan (LAST NAME),

DL # M625-792-57-509-1, state of FL, was placed under lawful arrest for

the offense of DUI by Ofc. Counts and
(Name of Arresting Officer)

issued citation # AIHUIDE.

That on or about the 11 day of August, 20 23, at 0100 ☐P.M. ☑A.M.

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.)**

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

**(AFFIX SEAL)**

The foregoing instrument was sworn and subscribed before me this 10th day of August, 20 23, by Officer R. Counts 1150 1150, who is personally known to me or who has produced Personally Known as identification.

Notary Public Shari O'Neal (#6212)

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.

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# 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: 80-006477 Software: 8100.27
Date of Test: 08/11/2023

Date of Last Agency Inspection: 07/14/2023
Observation Period Began: 23:35
Subject's Name: SHARON L MORGAN DOB: 01/09/1957 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 | 00:04 |
| Air Blank | 0.000 | 00:05 |
| Control Test | 0.079 | 00:05 |
| Air Blank | 0.000 | 00:06 |
| Subject Sample #1 | 0.077 | 00:07 |
| Air Blank | 0.000 | 00:08 |
| Air Blank | 0.000 | 00:10 |
| Subject Sample #2 | 0.079 | 00:11 |
| Air Blank | 0.000 | 00:11 |
| Control Test | 0.078 | 00:12 |
| Air Blank | 0.000 | 00:12 |
| Diagnostics Check | OK | 00:12 |

Cylinder Lot: 15922080A3
Exp: 08/05/2024

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 JOSHUA J BELL, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____ Date: 08/11/23
Signature

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

_____ OFC. R. Coonts #1150
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

*FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007*

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

PBSO CASE # 23-098360 PBSO ZONE 3-13

AGENCY CASE # 23-003192 CRASH CASE # 26088546

TIME OF STOP/CRASH 2147 DATE 8/10/23 DAY Thursday

SUBJECT'S NAME Morgan (LAST) Sharon (FIRST) L (MID) RACE W SEX F

HGT 5'05 WGT 155 DOB 1/9/57

LOCATION W Indiantown Rd / Center Street

ARRESTING OFFICER'S NAME & ID R. Count 1150 AGENCY Jupiter PD

DIVISION:

NOTIFIED BY COMMO

ARRIVAL AT FACILITY 2335

ARREST TIME 2314

BREATH RESULTS:

1) .077
2) .079
3) —
4) —

URINE

TESTING OFFICER'S ID 8656 PBSO VIDEOTAPE # N/A

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# TESTING FACILITY TASK REPORT

AGENCY: JPD

SUBJECT: MORGAN, SHARON LINDA

CASE NUMBER: 23-098360

DATE: Aug 11, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0002

ENDING TIME: 0029

BREATH TESTS RESULTS: 1) .077 TIME 0007 A.M. ☒ P.M. ☐ 2) .079 TIME 0011 A.M. ☒ P.M. ☐

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

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICAN: J. KARLECKE #6467

**TESTING OFFICER'S OBSERVATIONS**

SPEECH: SLOW

ATTITUDE: QUIET, INQUISITIVE

CLOTHING: GREEN TEE SHIRT, BLUE JEANS, BLUE SHOES

MEDICAL CONDITIONS: OSTEOPOROSIS

MEDICATIONS: FOSAMAX

**OTHER:**

EYES : GLASSY
ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

---

**COMMENTS:**

A/O ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 2336 HOURS

SUBJECT STATED SHE WOULD TAKE BREATH TEST

TECH READ BREATH TEST RESULTS
SUBJECT STATED SHE UNDERSTOO BREATH TEST RESULTS

A/O REQUESTED A URINE SAMPLE
SUBJECT ASKED IF SHE HAD TOO

A/O READ I.C
SUBJECT STATED SHE UNDERSTOOD I.C
SUBJECT STATED SHE WOULD PROVIDE A URINE SAMPLE

A/O READ RIGHTS
SUBJECT STATED SHE UNDERSTOOD HER RIGHTS

A/O CONDUCTED Q AND A
SUBJECT ANSWERED Q AND A

SUBJECT PROVIEDED A URINE SAMPLE AT 0032 HOURS

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# TESTING FACILITY TASK REPORT

AGENCY: JPD

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DATE: Aug 11, 2023

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BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICAN: J. KARLECKE #6467

**TESTING OFFICER'S OBSERVATIONS**

SPEECH: SLOW

ATTITUDE: QUIET, INQUISITIVE

CLOTHING: GREEN TEE SHIRT, BLUE JEANS, BLUE SHOES

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**OTHER:**

EYES: GLASSY
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SUBJECT STATED SHE UNDERSTOOD I.C
SUBJECT STATED SHE WOULD PROVIDE A URINE SAMPLE

A/O READ RIGHTS
SUBJECT STATED SHE UNDERSTOOD HER RIGHTS

A/O CONDUCTED Q AND A
SUBJECT ANSWERED Q AND A

SUBJECT PROVIEDED A URINE SAMPLE AT 0032 HOURS

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SUBJECT: _____ CASE NUMBER: _____

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

SUBJECT: _____ CASE NUMBER: _____

# 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? NI 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? 150 HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? 2000 hrs

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? Slow

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? NO

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? NO

DO YOU TAKE INSULIN? NO IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? NO WHERE? _____

INTERVIEWER: _____

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**PALM BEACH COUNTY**
**SHERIFF'S OFFICE**
**Florida State Statute Exemption Sheet**

## Palm Beach County Sheriff's Office – Arrests Only

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

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**REVIEW COMPLETED BY**

| | |
|---|---|
| **Booking Number:** 2023020875 | **Date:** 8/11/2023 |
| | **Specialist Name/ID:** Chantel Daniels/30347 |