50-2023-CT-000358ASB

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500400

Agency Name: Delray Beach Police Department

Agency Report Number (N.T.A.'s only): 40 23-000307

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: 1

Location of Arrest (Including Name of Business): N CONGRESS AVE/LAKE IDA RD, DELRAY BEACH

Location of Offense (Business Name, Address): 699 N CONGRESS AVE/LAKE IDA RD, DELRAY BEACH, FL

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
01/07/2023	01:22	01/07/2023	01:32	01/07/2023	03:18	699 N CONGRESS AVE/LAKE

DEFENDANT

Name (Last, First, Middle): SPELMAN, THOMAS JOSEPH

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	06/01/1976	6'03	240	BROWN	BROWN	FAIR	LARGE

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

Marital Status: S

Religion: CATHOLIC

Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. Drug Influence ☒

Local Address (Street, Apt. Number) (City) (State) (Zip): 11 BUXTON LN, BOYNTON BEACH, FL 33426

Phone: (561) 376-6882

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 11 BUXTON LN, BOYNTON BEACH, FL 33426

Phone: (561) 376-6882

Address Source: FL DL

Business Address (Name, Street) (City) (State) (Zip):

Phone:

Occupation:

D/L Number, State: S145830762010 / FL

[redacted]

INS Number:

Place of Birth (City, State): PENSACOLA, FL,

Citizenship: 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) GOR (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 BREATH ALCOHOL .08 OR MORE PER 210L	316.193(1)(C)	

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		

JOSEPH ABRUZZO, CLERK PALM BEACH COUNTY, FL 2023 JAN 30 AM 8:30 FILED GUN CLUB

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): South County 200 W Atlantic Ave Delray Beach, FL 33444

Court Date and Time: 02/02/2023 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:

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Signature of Arresting Officer:

Name of Arresting Officer (Print): WINDSOR, NICHOLAS I.D. #: 1029

Name Verification (Printed by Arrestee) (PRINT):

Intake Deputy: CPI MONEAL 7206 Pouch #:

Transporting Officer: WINDSOR I.D. #: 1029 Agency: DBPD

Witness here if subject signed with an "X":

PAGE 1 OF 1

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

NOT A CERTIFIED COPY

05537249

3299

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 7th DAY OF January 20 23, AT 0041 ☑AM ☐PM

SUBJECT: Spelman, Thomas Joseph CASE NUMBER: 23-000307

AGENCY: DELRAY BEACH PD ARRESTING OFFICER: Windsor #1029

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

The following occurred in the City of Delray Beach, County of Palm Beach, FL.
On 01/07/23 at 0041hrs a report of a silver 2018 Ford F-150 (FL Tag #Y87YIA) was stopped in the roadway at the intersection of N. Congress Ave. and Lake Ida Rd. The unidentified complainant stated the Ford had flat tires and the male driver appeared to be intoxicated. Ofc. Sitz #1107 DBPD responded to the intersection and approached the white male driver inside the Ford. The white male driver was sitting in the driver seat with the vehicle key in the ignition and vehicle in the drive gear. The white male driver was attempted to start the engine but it would not start due to the vehicle still being in the drive gear. I arrived on scene and identified the white male driver by his FL DL as Thomas Joseph Spelman. When I arrived on scene, Spelman was leaning against the side of the Ford for balance.

OBSERVATION OF DRIVER:

I smelled an odor of an unknown alcoholic beverage coming from Spelman. Spelman's eyes were red and had a glassy appearance. Spelman had difficulty maintaining his balance and leaned against the side of the Ford for balance. Spelman's speech was slurred and thick. Spelman swayed in a circular motion when he was not leaning against the Ford. Spelman was disoriented on what his current location was stating he was in the City of Lantana. Spelman was cooperative and polite during this incident. Spelman's shorts fell down to his ankles while he was standing still.

DRIVER'S STATEMENTS:

Spelman denied having any medical conditions that would affect his ability to operate a motor vehicle. Spelman denied consuming any prescription medications that would affect his ability to operate a motor vehicle. Spelman stated he smoked marijuana 6 hours prior to my interaction with him. Spelman stated he consumed one alcoholic beverage at his residence and two beers with one cocktail at a bar called "Boulevard" on Boynton Beach Blvd. Spelman stated he starting drinking at 1700hrs and finished his last drink two hours prior to my interaction with him. Spelman stated he was driving the Ford and hit a curb damaging two of his tires and wheels. Spelman did not know the location of the curb he hit but there was physical evidence on the roadway 800ft north on N. Congress Ave. Spelman stated he was the only person inside the Ford and he was driving to his residence. I asked Spelman if he knew where he currently was and he asked to read the road signs. After looking at the road signs, Spelman stated he was on Lake Ida in Lantana. Spelman stated he was drunk and to take him to jail. I requested Spelman perform roadside tasks and he replied he could not perform the roadsides if he was sober.

ODORS:

Odor of an unknown alcoholic beverage coming from Spelman.

GENERAL OBSERVATIONS

SPEECH: Slurred and Thick

ATTITUDE: Polite and Cooperative

CLOTHING: Orange Shirt, Navy Shorts and Black Flip Flops

MEDICAL/OTHER: Depression and Anxiety

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 7th day of January 20 23 by Ofc. Windsor #1029

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

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

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

NOT A CERTIFIED COPY

SUBJECT: Spelman, Thomas Joseph **CASE NUMBER** 23-000307

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- ☐ LT EYE-LACK OF SMOOTH PURSUIT
- ☐ RT EYE-LACK OF SMOOTH PURSUIT
- ☐ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- ☐ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- ☐ LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- ☐ RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

ROADSIDES WERE NOT PERFORMED DUE TO MY CONCERNS FOR SPELMAN'S SAFETY.

WALK & TURN:

ROADSIDES WERE NOT PERFORMED DUE TO MY CONCERNS FOR SPELMAN'S SAFETY.

ONE LEG STAND:

ROADSIDES WERE NOT PERFORMED DUE TO MY CONCERNS FOR SPELMAN'S SAFETY.

FINGER TO NOSE:

ROADSIDES WERE NOT PERFORMED DUE TO MY CONCERNS FOR SPELMAN'S SAFETY.

ROMBERG ALPHABET:

ROADSIDES WERE NOT PERFORMED DUE TO MY CONCERNS FOR SPELMAN'S SAFETY.

NOT A CERTIFIED COPY

BREATH TEST RESULTS: 1) .262 | 2) .269 | 3) | 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 7th day of January 20 23 by Ofc. Windsor #1029

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

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

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

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

PBSO CASE # 23-023233 PBSO ZONE 4-11

AGENCY CASE # 23-000307 CRASH CASE # N/A

TIME OF STOP/CRASH 0041 DATE 01/07/23 DAY SATURDAY

SUBJECT'S NAME SPELMAN, THOMAS JOSEPH RACE W SEX M

HGT 5"09" WGT 240 DOB 06/01/76

LOCATION N. CONGRESS AVE/LAKE IDA RD, DELRAY BEACH, FL

ARRESTING OFFICER'S NAME & ID WINDSOR #1029 AGENCY DELRAY BEACH PD

DIVISION: CRD

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0147

ARREST TIME ~~0041~~ 0122

BREATH RESULTS:

1) .262
2) .269
3) N/A
4) N/A

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

NOT A CERTIFIED COPY

SUBJECT: [illegible] CASE NUMBER: [illegible]

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 [illegible] of the [illegible]

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) READ ON CAMERA

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) READ ON CAMERA

NOT A CERTIFIED COPY

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

SUBJECT: SULLIVAN, THOMAS JOSEPH CASE NUMBER: 23-000307

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: CPC J. JANOSKI 1137

NOT A CERTIFIED COPY

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: 80-006239 Software: 8100.27
Date of Test: 01/07/2023

Date of Last Agency Inspection: 12/22/2022
Observation Period Began: 01:47
Subject's Name: THOMAS J SPELMAN DOB: 06/01/1976 Sex: M

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	02:15
Air Blank	0.000	02:16
Control Test	0.080	02:16
Air Blank	0.000	02:16
Subject Sample #1	0.262	02:17
Air Blank	0.000	02:18
Air Blank	0.000	02:20
Subject Sample #2	0.269	02:20
Air Blank	0.000	02:21
Control Test	0.079	02:21
Air Blank	0.000	02:22
Diagnostics Check	OK	02:22

Cylinder Lot: 02021080A1
Exp: 03/05/2023

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: 01/07/23
Signature

Sworn to (or affirmed) before me this 07 day of January, 2023

_____ Ofc. N. Windsor #1029
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

NOT A CERTIFIED COPY

WITNESS LIST

CASE NUMBER: 23-000307

ARRESTING OFFICER: OFC. WINDSOR #1029 DBPD

ADDRESS: 300 W ATLANTIC AVE, DELRAY BEACH, FL 33444

PHONE NUMBERS (HOME): _____ (WORK) 561-243-7800

CAN TESTIFY TO: DUI PC

NAME: OFC. SITZ #1107 DBPD

ADDRESS: 300 W ATLANTIC AVE, DELRAY BEACH, FL 33444

PHONE NUMBERS (HOME) _____ (WORK) 561-243-7800

CAN TESTIFY TO: DRIVER IDENTIFICATION

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: DBPD

SUBJECT: SPELMAN, THOMAS JOSEPH

CASE NUMBER: 23-023233

DATE: Jan 7, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0212

ENDING TIME: 0224

BREATH TESTS RESULTS: 1) .262 TIME 0217 A.M. ☒ P.M. ☐ 2) .269 TIME 0220 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: SLURRED

ATTITUDE: TALKATIVE, FIDGETY, COOPERATIVE,

CLOTHING: ORANGE SHORT SLEEVE BUTTON UP, BLACK SHORTS, BLACK FLIP FLOPS

MEDICAL CONDITIONS: DEPRESSION, ANXIETY

MEDICATIONS: 2 FOR DEPRESSION AND ANXIETY

OTHER:

EYES: BLOODSHOT, GLASSY

ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

COMMENTS:

A/O ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0147 HOURS

SUBJECT STATED HE WOULD TAKE BREATH TEST
SUBJECT ASKED WHAT IF HE DID NOT TAKE BREATH TEST

A/O READ I.C
SUBJECT STATED HE UNDERSTOOD I.C / SUBJECT STATED HE WOULD TAKE BREATH TEST

TECH READ BREATH TEST RESULTS / SUBJECT STATED HE UNDERSTOOD BREATH TEST RESULTS

A/O READ RIGHTS
SUBJECT STATED HE UNDERSTOOD HIS RIGHTS

SUBJECT DECLINED TO ANSWER Q AND A

NOT A CERTIFIED COPY

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:	

NOT A CERTIFIED COPY

REVIEW COMPLETED BY

Booking Number: 2023000623	**Date:** 01/07/2023
	Specialist Name/ID: T.Howard/7185