C5411471 23CT10534 3633

☐ Marsy's Law CVI FL. Const. Art.1 § 16(b)

☐ Check if Supplement is Attached

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number

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

Juvenile: N

ADMINISTRATIVE

Agency ORI Number: FLO 5 0 0 0 0 0 0 | Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE | Agency Report Number: 0 6 -| 23-078069 ( )

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

Multiple Clearance Indicator

Location of Arrest (including Name of Business): **FOREST HILL BLVD / STATE ROAD 7**

Location of Offense (Business Name, Address): **FOREST HILL BLVD / STATE ROAD 7 , Wellington FL 33414**

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
06/13/2023	00:10					TOWING

DEFENDANT

Name (Last, First, Middle): **CAMPBELL, TIMOTHY, S**

Alias (Name, DOB, Soc. Sec. #, Etc.)

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	10/25/1966	6'06	265	BLUE	GRAY	MED	LG

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)

Marital Status: Married | Religion: CATHOLIC | Indication of: Alcohol Influence Y ☒ N ☐ Unk ☐ / Drug Influence Y ☒ N ☐ Unk ☐

Local Address (Street, Apt. Number) (City) (State) (Zip): **2300 WELLINGTON GREEN DR APT201, WELLINGTON FL 33414**

Mobile Phone: **(303) 475-7980**

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

Permanent Address (Street, Apt. Number) (City) (State) (Zip):

Phone: ( )

Address Source: **DL**

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

Phone: ( )

Occupation: **MANAGER**

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
C514-817-66-385-0,	[redacted]		HONOLULU, HI	US

CO-DEF

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

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

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other: Name (Last) (First) (Middle) | Residence Phone ( )

Address (Street, Apt. Number) (City) (State) (Zip) | Business Phone ( )

Notified by: (Name) | Date | Time | Juvenile Disposition: 1. Handled/Processed within Dept. and Released. 2. TOT HRS/DYS 3. Incarcerated

Released To: (Name) | Relationship | Date | Time

The above address 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 (561) 355-6511) informed of any change of address.

☐ Yes, by: (Name) ☐ No (Reason)

School Attended | Grade

Property Crime? ☐ Yes ☐ No | Description of Property | Value of Property

CODE

Drug Activity: N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Dispense/ Distribute M. Manufacture/ Produce/ Cultivate Z. Other

Drug Type: N. N/A A. Amphetamine B. Barbiturate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other

CHARGE

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

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		23-078069		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

NOTICE TO APPEAR

Location (Court, Room Number, Address): **Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600**

Court Date and Time: Month **JULY** Day **13** Year **2023** Time **0830** A.M. ☒ P.M. ☐

FILED PBC - GUN CLUB '23 JUN 13 AM 7:57

I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED

Signature of Defendant (or Juvenile and Parent/Custodian) SCANNED JUN 13 2023 — Date Signed: 06/13/2023

I consent to receive text reminders of court date(s) and times for this case by automated technology to the mobile number identified above.
I understand that standard text message rates may apply, and that I may revoke this consent via the text message system if I choose. Signature

ADMIN

HOLD for other agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Intake Deputy: QI HONEA-TUCK I.D. # Pouch #

Signature of Arresting Officer: X

Name of Arresting Officer (Print): D.S J. Ramirez 37537 I.D. # 37537

Transporting Officer: D.S. J. Ramirez I.D. # 37537 Agency: PBSO

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X"

PAGE 1 OF 1

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PBSO #0148 REV. 11/22 DISTRIBUTION: COURT COPY STATE ATTORNEY AGENCY AGENCY DEFENDANT (N.T.A.'s ONLY)

ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT

1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capias | 1 | Juvenile | N

Agency ORI Number	Agency Name	Agency Report Number
FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	23-078069

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
CAMPBELL, TIMOTHY, S		W	M	10/25/1966

CHARGES

Charge Description		Charge Description	
Driving Under the Influence	316.193(1A)		
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**
3228 Gun Club Road West Palm Beach FL 33406	(561) 6883000	

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that I have just and reasonable grounds to believe, and do believe that the above named Defendant committed the listed violation(s) 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 commit 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 _____ day of _____ 20 ___ at 23:36 ☐ A.M ☐ P.M (Specifically include facts constituting cause for arrest.)

☐ **Marsy's Law CVI**
FL. Const. Art.1 § 16(b)

On 06/12/2023 while conducting traffic enforcement at Forest Hill Blvd and State Road 7, I observed a white sedan bearing Florida tag 80CDGA traveling westbound on Forest Hill Blvd. I visually estimated it to be going at approximately 62 mph. I then activated my handheld laser and point it to the front of the vehicle confirming the target speed on the digital display of 63 mph in a posted 45 mph zone. I then maintained a visual of the vehicle I proceeded to catch up to the vehicle approaching State Road 7 the vehicle drove through a solid red light. I immediately initiated the traffic stop by activating my emergency red and blue lights and sirens to signal the vehicle to stop. The vehicle continue to travel to the next traffic Light Hunter Drive the vehicle came to a stop at the red solid traffic light. I exit the vehicle and attempted to make contact with the driver the traffic light turned green and the vehicle took off below the posted speed limit. I continue to follow the vehicle where the vehicle turned left turned into Wellington Green Drive and enter the community of The States at Wellington Green Apartments. Once inside the Community, the vehicle pulled into a parking space driver immediately exited the vehicle after giving him commands to stay inside the vehicle. Failure to comply with commands I temporarily detain the driver placing him in handcuffs. After making the scene safe and the back unit arrived on the scene, I removed the handcuffs from the driver. I explained to the driver the reason for my stop. The Driver was identified as Timothy S. Campbell by Florida driver's license. I had Campbell stand in front of my patrol car. While standing still Campbell exhibited a sway. I could smell an odor of an unknown alcoholic beverage coming from his breath, which got stronger when he spoke. Campbell's eyes were glassy. I asked Campbell if he had anything to drink today and he stated that he had three beers in a glass but was not sure of the sizes. Based on my observations and Campbell's admission to drinking I asked him to explain Campbell the reason for the encounter. I asked Campbell if he had anything to drink to perform standard field sobriety tasks, which he agreed to perform.

NOT A CERTIFIED COPY

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

D.S J. Ramirez 37537
(Signature of Arresting Investigative Officer)

SCANNED JUN 13 2023

The foregoing instrument was sworn to or affirmed and subscribed before me this 13 day of June 20 23 by D.S. J. Ramirez

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

Shari O'Neal (#6212)
Notary Public, Clerk of Court, Officer (F.S.S). 117.10)

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # GG 972080
My Comm. Expires Jun 25, 2024
Bonded through National Notary Assn.

PAGE 1 OF 2

PBSO #0004 REV. 4/22 DISTRIBUTION: STATE ATTORNEY AGENCY AGENCY DEFENDANT (NOT A CONVICTION)

PROBABLE CAUSE AFFIDAVIT

OBTS Number:

1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capias

1 Juvenile N

ADMIN

Agency ORI Number: FLO 5 0 0 0 0 0

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 23-078069

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): **CAMPBELL, TIMOTHY, S**

Alias:

Race: **W** Sex: **M** Date of Birth: **10/25/1966**

CHARGES

Charge Description: **Driving Under the Influence** 316.193(1A)

Charge Description:

Charge Description:

Charge Description:

VICTIM

Victim s Name (Last, First, Middle): **STATE of FLORIDA, ,**

Race: Sex: Date of Birth:

Local Address (Street, Apt Number) (City) (State) (Zip): ,

Phone: ( )

Address Source:

Business Address (Name, Street) (City) (State) (Zip): **3228 Gun Club Road West Palm Beach FL 33406**

Phone: **(561) 6883000**

Occupation:

The undersigned certifies and swears that I have just and reasonable grounds to believe, and do believe that the above named Defendant committed the listed violation(s) 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 commit the below acts.

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

On the _____ day of _____ 20 ____ at **23:36** ☐ A.M ☐ P.M (Specifically include facts constituting cause for arrest.)

PROBABLE CAUSE STATEMENT

☐ **Marsy's Law CVI**
FL. Const. Art.1 § 16(b)

I conducted the Standardized Field Sobriety Tasks (SFSTs) in front of my PBSO patrol vehicle using the in-car video system and the Body Worn Camera with the following results. The area appeared flat and even to the naked-eyed, Well Lit and Lit by the lights on my patrol vehicle and clear of any large debris. The first task performed was Horizontal Gaze Nystagmus.

Campbell was placed with his feet together and hands down by his side. Campbell was instructed to await the completion of the instructions before beginning the task. Campbell acknowledged that they clearly understood my instructions. I then instructed Campbell on the task. Campbell stated that they clearly understood my instructions for the task. I placed my stimulus in front of Campbell and ask him if they could see it to which he said "Yes." I asked the defendant what color the stimulus was to which they answered. "Blue.". Upon commencing the task, Campbell moved his head side to side instead of following with his eyes only, anticipated the stimulus, and did not follow the stimulus as instructed. I had to re-instruct Campbell multiple times during the task to follow the stimulus with his eyes only. During the task, I observed that he had equal pupil size and did not exhibit resting nystagmus. Campbell's eyes tracked equally. I observed distinct and sustained Nystagmus in both eyes at maximum deviation. I observed the onset of Nystagmus prior to forty-five degrees in both eyes. I did not observe vertical gaze nystagmus.

NOT A CERTIFIED COPY

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

D.S J. Ramirez 37537
(Signature of Arresting Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 13 day of June 20 ____ by **D.S. J. Ramirez**

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

SCANNED JUN 13 2023

Shari O'Neal (#6212)
Notary Public, Clerk of Court, Officer (F.S.S). 117. 10)

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # GG 972080
My Comm. Expires Jun 25, 2024
Bonded through National Notary Assn.

PBSO #0004 REV. 4/22 DISTRIBUTION: STATE ATTORNEY AGENCY AGENCY DEFENDANT (N.T.A.'S ONLY)

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE_____ DAY OF _____ 20 ____, AT **23:36** AM PM

SUBJECT: **CAMPBELL, TIMOTHY, S** CASE NUMBER: **23-078069**

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: **D.S J. Ramirez 37537**

PERSONAL CONTACT

DRIVING PATTERN: Actual physical control (physical evidence or statements putting def. behind wheel of vehicle)

Speeding 63 mph over 45 mph posted speed. ran a solid red light. fail to stop when emergency light and siren was activated in a timely matter.

OBSERVATION OF DRIVER:

DRIVER'S STATEMENTS:

Pre Miranda/Spontenous Statments: he did not see or heard the light and sirens. he also stated he had three beers

Post Miranda/Enroute to Jail:

At Bat:

ODORS:

I could smell the odor of an unknown alcoholic beverage, based on my training and life experinces, which came from the defendants breath and intensified as they spoke with me.

GENERAL OBSERVATIONS

SPEECH: **Slurred, slow**

ATTITUDE: **Polite, Calm, Belligerent**

CLOTHING: **Disheveled clothing**

MEDICAL/OTHER: **The defendant stated that he had no medical issues. He stated that he had not taken any prescription drugs.**

NOT A CERTIFIED COPY

STATE OF FLORIDA
COUNTY OF PALM BEACH

D.S J. Ramirez 37537
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 13 day of June 20 23 by **D.S J. Ramirez 37537**

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

Shari O'Neal (#6212)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # GG 972080
My Comm. Expires Jun 25, 2024
Bonded through National Notary Assn.

SUBJECT: CAMPBELL, TIMOTHY, S CASE NUMBER 23-078069

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

Other Observations:
SC PC

WALK & TURN:

I placed a yellow strip of masking tape on the surface that formed a line. Campbell identified the tape by giving its color. I positioned Campbell to face the car with his left foot on a yellow line and put his right heel against the toe of his left foot touching heel to toe. I instructed him that he was to keep his hands at his side and stay in this position until I instructed him to do otherwise. After completing, the instructions Campbell advised he understood the instructions and had no questions The following SFST was demonstrated and acknowledged by him prior to his performance: During the task, Campbell did not touch heel to toe on numerous occasions. During the turn, Lopez stopped and did not properly turn as instructed. He was also instructed to stay in the starting position numerous times while giving the instructions. Campbell began the tasks before being instructed.

FINGER TO NOSE:

Campbell was instructed to stand with his feet together and their hands down by their side. Campbell was then instructed to remain in the position throughout the instructions and demonstration until instructed to begin. Campbell acknowledged and stated that he clearly understood the instructions. During the instruction and demonstration of the task, he swayed while standing stationary in the instructional stance. During the task, Campbell was reminded to close his eyes. Campbell missed touching the tip of his nose several times and used the pad of his finger to touch his nose several times. Campbell when instructed to right hand used his left hand and then corrected his mistake.

ONE LEG STAND:

Campbell was instructed to stand with his feet together and their hands down by their side. Campbell was then instructed to remain in the position throughout the instructions and demonstration until instructed to begin. Campbell acknowledged and stated that he clearly understood the instructions. Campbell swayed while in the instructional position. After being told to begin, Campbell use his right hand for balance he also did not properly count in the manner he was instructed. Campbell also put his foot down on numerous occasions and started to count from one each time. Campbell stops the tasks before completing the task.

ROMBERG ALPHABET:

Campbell was instructed to stand with his feet together and their hands down by their side. Campbell was then instructed to remain in the position throughout the instructions and demonstration until instructed to begin. Campbell acknowledged and stated that he clearly understood the instructions. During the instruction and demonstration of the task, he swayed while standing stationary in the instructional stance. During the task, Campbell swayed while standing. Campbell did not keep his eyes close as instructed. Campbell was not able to recite the alphabet as instructed and was not able to complete the task.

BREATH TEST RESULTS: 0.165 0.160

STATE OF FLORIDA
COUNTY OF PALM BEACH

D.S J. Ramirez 37537
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 13 day of June 20 23 by D.S J. Ramirez 37537

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

SC JUN 13 2023

Sharl O'Neal (#6212)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # GG 972080
My Comm. Expires Jun 25, 2024
Bonded through National Notary Assn.

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: PBSO D/S RAMIREZ #37537

SUBJECT: CAMPBELL, TIMOTHY S.

CASE NUMBER: 23-078069

DATE: 06-13-23

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 01:00 HRS

ENDING TIME: 01:13 HRS

BREATH TESTS RESULTS: 1) .165 TIME 01:07 A.M. ☒ P.M. ☐ 2) .160 TIME 01:10 A.M. ☒ P.M. ☐

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

BREATH OPERATOR: S. O'NEAL #6212

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLUR

ATTITUDE: CALM, COOPERATIVE

CLOTHING: SHIRT- LIGHT BLUE PANTS- LIGHT BLUE JEANS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: VERY RED,GLASSY
ODOR OF UNKNOWN ALCOHOLIC BEVERAGE

COMMENTS:

20 MIN. OBSERVATION CONDUCTED BY A/O RAMIREZ #37537

A/O REQUESTED THE BREATH TEST.
D REFUSED BREATH AT FIRST, D STATED HE PREFERRED BLOOD.
IMPLIED CONSENT READ ON CAMERA TO THE D.
D UNDERSTOOD THE I/C AS READ.
D DECIDED TO SUBMIT TO THE BREATH REQUEST AFTER THE I/C WAS READ TO HIM.
D COMPLETED THE TEST CORRECTLY.
EXPLAINED THE BREATH RESULTS TO THE D.
C/W READ ON CAMERA TO THE D, D REFUSED THE Q&A.

NOT A CERTIFIED COPY

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)_____

NOT A CERTIFIED COPY

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? _____ 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: _____

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: 80-006238 Software: 8100.27
Date of Test: 06/13/2023

Date of Last Agency Inspection: 05/19/2023
Observation Period Began: 00:38
Subject's Name: TIMOTHY S CAMPBELL DOB: 10/25/1966 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	01:05
Air Blank	0.000	01:06
Control Test	0.080	01:06
Air Blank	0.000	01:06
Subject Sample #1	0.165	01:07
Air Blank	0.000	01:07
Air Blank	0.000	01:09
Subject Sample #2	0.160	01:10
Air Blank	0.000	01:10
Control Test	0.080	01:11
Air Blank	0.000	01:11
Diagnostics Check	OK	01:11

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

State of Florida, County of Palm Beach.

Personally appeared before me the undersigned authority, who (✓) is personally known to me or (__) produced _____ as identification, and who after being placed under oath, states:

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

Breath Test Operator: S. O'Neal Date: 06-13-23
Signature

Sworn to (or affirmed) before me this 13 day of June, 2023

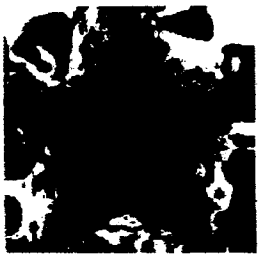
Signature of Notary Public-State of Florida

D/S Ramirez #37537
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 # **23-078069** PBSO ZONE **8-41**

AGENCY CASE # _____ CRASH CASE # _____

TIME OF STOP/CRASH **23:36** DATE **06/12/2023** DAY **Monday**

SUBJECT'S NAME **CAMPBELL, TIMOTHY, S** RACE **W** SEX **M**

HGT **6'06** WGT **265** DOB **10/25/1966**

LOCATION **FOREST HILL BLVD / STATE ROAD 7**

ARRESTING OFFICER'S NAME & ID **D.S J. Ramirez 37537 (37537)** AGENCY **Palm Beach County Sheriff's Office**

DIVISION: _____

NOTIFIED BY COMMO **YES**

ARRIVAL AT FACILITY **00:38**

ARREST TIME **00:10**

BREATH RESULTS:

.165

.160

NOT A CERTIFIED COPY

TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # 1

WITNESS LIST

CASE NUMBER: 23-078069

ARRESTING OFFICER: D.S J. Ramirez 37537

ADDRESS: 3228 Gun Club Rd, West Palm Beach, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) 561-688-3000

CAN TESTIFY TO: DUI Investigation

NAME: D/S Camelleri

ADDRESS: 3228 Gun Club Rd, West Palm Beach, FL 33406

PHONE NUMBERS (HOME) _____ (WORK) 561-688-3000

CAN TESTIFY TO: Wheel Witness

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: _____

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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

SCANNED

JUN 13 2023

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

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☒	316.650(b)	Other: Driver information containted in a uniform traffic citation.	13-15
	☐		Other:	

NOT A CERTIFIED COPY

REVIEW COMPLETED BY

Booking Number: 2023015426	**Date:** 6/13/2023
	Specialist Name/ID: R.Castro/40259