0510897 23 CT 15689 3984

# 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: 0500400 | Agency Name: Delray Beach Police Department | Agency Report Number (N.T.A.'s only): 40 | 23-011542

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): 1ST BLK N SWINTON AVE, DELRAY BEACH, FL

Location of Offense (Business Name, Address): 100 NE 1ST ST, DELRAY BEACH, FL 33444

| Date of Arrest | Time of Arrest | Booking Date | Booking Time | Jail Date | Jail Time | Location of Vehicle |
|---|---|---|---|---|---|---|
| 08/31/2023 | 02:49 | 08/31/2023 | 02:59 | 08/31/2023 | 04:52 | 1 N SWINTON AVE DELRAY |

## DEFENDANT

Name (Last, First, Middle): NASCIMENTO, VICTORIA RODRIGUES Alias:

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

| Race (W - White, I - American Indian, B - Black, O - Oriental/Asian) | Sex | Date of Birth | Height | Weight | Eye Color | Hair Color | Complexion | Build |
|---|---|---|---|---|---|---|---|---|
| W | F | 07/24/1998 | 5'03 | 128 | BROWN | BROWN | LIGHT | SMALL |

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

Marital Status | Religion: CHRISTIAN | Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. ☐ Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 2409 ZEDER AVE, DELRAY BEACH, FL 33444 | Phone: (954) 778-0195 | Residence Type. 1. City 3. Florida 2. County 4. Out of State: 1

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 2409 ZEDER AVE, DELRAY BEACH, FL 33444 | Phone: (954) 778-0195 | Address Source: FL DL

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

| D/L Number, State | Soc. Sec. Number | INS Number | Place of Birth (City, State) | Citizenship |
|---|---|---|---|---|
| N255876987640 / FL | [redacted] | | DAVIE, FL, United | US |

## CO-DEF

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

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

## JUVENILE

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

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

Notified by: (Name) | Date | Time | JUVENILE DISPOSITION 1 Handled/Processed within Department and Released 2 TOT JAC 3 Incarcerated

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

The above address was provided by ☐ defendant and/or ☐ defendant's parents.
The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.
☐ Yes, by: ☐ No

School Attended | Grade

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

## CODE

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

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

## CHARGE

| Charge Description | Statute Violation Number | Violation of ORD # |
|---|---|---|
| DUI 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 | | OR |

## 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 | 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

FILED PBC - GUN CLUB
'23 SEP 1 AM 5:48

## NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court
☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): South County 200 W Atlantic Ave Delray Beach, FL 33444

Court Date and Time: 10/05/2023 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 CONTEMPT 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: SCANNED SEP 01 2023

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Intake Deputy: J. Dunn 3616 | I.D. # | Pouch #

Signature of Arresting Officer

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

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

Name Verification (Printed by Arrestee) (PRINT)

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

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# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 31st DAY OF August 20 23, AT 0212 ☑AM ☐PM

SUBJECT: Nascimento, Victoria Rodrigues CASE NUMBER: 23-011542

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 08/31/23 at 0212hrs I was traveling east in the 100 block NE 1st St. A white 2023 Telsa sedan (FL Tag #L4EKB) was traveling west in the 100 block of NE 1st St. The Telsa failed to dim it's high beams when approaching oncoming traffic. The Telsa was traveling very slowly (estimated 10mph) with no other westbound traffic in front of the Telsa. I turned around and activated my emergency lights and siren on my marked Delray Beach Police Department patrol vehicle. The Telsa did not pull over right away instead merged into the left turn lane at the intersection of N. Swinton Ave. The Telsa then turned left (south) onto N. Swinton Ave. and stopped in the 1st block of N. Swinton Ave. I met the white female driver and identified by her FL DL as Victoria Rodrigues Nascimento. Nascimento was sitting in the driver seat with the vehicle turned on and was in possession of the vehicle key in her cell phone. There was nobody else inside the vehicle.

OBSERVATION OF DRIVER:

I smelled an odor of an unknown alcoholic beverage coming from Nascimento. Nascimento's eyes were red and had a glassy appearance. Nascimento spoke with an accent and her speech was slurred. Nascimento was unaware she had the high beams activated and began trying to locate how to turn them off. Nascimento kept pushing buttons on the touchscreen display in the dash attempting to locate the high beam switch. Nascimento was unsteady on her feet after exiting the Telsa. Nascimento swayed in a circular motion while standing still.

DRIVER'S STATEMENTS:

Nascimento denied having any medical conditions or taking any prescription medications that would affect her ability to operate a motor vehicle. Nascimento denied consuming any illegal drugs including marijuana. Nascimento stated she had two alcoholic beverages containing vodka. Nascimento stated she consumed the two drinks between 2330hrs and 0200hrs. Nascimento stated she consumed the alcoholic beverages at Salt 7 located at 32 SE 2nd Ave, Delray Beach, FL 33444. Nascimento stated she was on her way home when she was stopped by the police.

Nascimento agreed to perform roadside tasks to dispel my suspicion she was driving under the influence. After roadside tasks were performed, I placed Nascimento under arrest. Nascimento spontaneously uttered "I'm not drunk", "I only had two Tequila shots" and "I only had two drunks".

ODORS:

I smelled an odor of an unknown alcoholic beverage coming from Nascimento.

## GENERAL OBSERVATIONS

SPEECH: Accent and Slurred

ATTITUDE: Polite and Cooperative

CLOTHING: Black Top, Black Pants and Black Flip Flops

MEDICAL/OTHER: None Stated

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 31st day of August 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)

MADELIN GONZALEZ
Notary Public
State of Florida
Comm# HH225716
Expires 2/7/2026

NOT A CERTIFIED COPY

**SUBJECT:** Nascimento, Victoria Rodrigues **CASE NUMBER** 23-011542

## 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:**

Nascimento had to be instructed several times to keep her head still and only move her eyes.

WALK & TURN:

Nascimento did not remain in the instructional phase position. Nascimento used her arms for balance. Nascimento started to walk without being instructed to begin the roadside task. Nascimento did not count out loud as instructed. Nascimento did not touch heel to toe on several steps on each series of steps. Nascimento took more than nine steps of both series of steps. Nascimento stepped off the yellow line several times to maintain her balance.

ONE LEG STAND:

Nascimento did not count in the sequence I instructed her to do. Nascimento used her arms for balance. Nascimento put her foot down on the ground several times. Nascimento stated her left knee hurt from working out in the gym earlier that day.

FINGER TO NOSE:

Nascimento initially only raised her hand in the air and did not touch her nose. I stopped the roadside task to give Nascimento instructions a second time. Nascimento missed the tip of her nose on several attempts. Nascimento raised her left hand when I instructed her to use her right hand.

ROMBERG ALPHABET:

Nascimento stated she knew the English alphabet. Nascimento recited several letters multiple times. Nascimento stopped reciting and started over from the letter "A" several times. After several attempts, Nascimento stated she was from Brazil and she only knew the English alphabet if she was singing the alphabet song. Nascimento stated she was able to count from 1 to 100. I gave instructions to Nascimento to count starting from 35 and ending with 65. Nascimento reciting several numbers multiple times. Nascimento skipped numbers and recited numbers higher than 65.

**BREATH TEST RESULTS:** 1) .197 | 2) .190 | 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 31st day of August 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)

MADELIN GONZALEZ
Notary Public
State of Florida
Comm# HH225716
Expires 2/7/2026

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# WITNESS LIST

CASE NUMBER: 23-011542

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: TRAFFIC VIOLATION AND DUI PC

NAME: OFC. MITCHELL #947 DBPD

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

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

CAN TESTIFY TO: BACKUP OFFICER

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) _____

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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: _____

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

PBSO CASE # 23-105211 PBSO ZONE 4-11

AGENCY CASE # 23-011542 CRASH CASE # N/A

TIME OF STOP/CRASH 0212 DATE 08/31/23 DAY THURSDAY

SUBJECT'S NAME NASCIMENTO, VICTORIA RODRIGUES RACE W SEX F

HGT 5'03" WGT 128 DOB 07/24/98

LOCATION 100 BLOCK NE 1ST ST, DELRAY BEACH, FL

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

DIVISION: CRD

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0314

ARREST TIME 0249

BREATH RESULTS:

1) .197
2) .190
3) N/A
4) N/A

TESTING OFFICER'S ID 40577 PBSO VIDEOTAPE # N/A

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: 80-006029 Software: 8100.27
Date of Test: 08/31/2023

Date of Last Agency Inspection: 08/11/2023
Observation Period Began: 03:14
Subject's Name: VICTORIA R NASCIMENTO DOB: 07/24/1998 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 | 03:40 |
| Air Blank | 0.000 | 03:41 |
| Control Test | 0.079 | 03:41 |
| Air Blank | 0.000 | 03:42 |
| Subject Sample #1 | 0.197 | 03:42 |
| Air Blank | 0.000 | 03:43 |
| Air Blank | 0.000 | 03:45 |
| Subject Sample #2 | 0.190 | 03:45 |
| Air Blank | 0.000 | 03:46 |
| Control Test | 0.078 | 03:46 |
| Air Blank | 0.000 | 03:47 |
| Diagnostics Check | OK | 03:47 |

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 MADELIN GONZALEZ, 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: 08/31/23
Signature

Sworn to (or affirmed) before me this 31 day of August, 2023

_____ OFC. N. WINDSOR
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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# TESTING FACILITY TASK REPORT

AGENCY: DBPD

SUBJECT: NASCIMENTO, VICTORIA R

CASE NUMBER: 23-105211

DATE: Aug 31, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 03:37

ENDING TIME: 03:48

BREATH TESTS RESULTS: 1) .197 TIME 03:42 A.M. ☒ P.M. ☐ 2) .190 TIME 03:45 A.M. ☒ P.M. ☐

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

BREATH OPERATOR: M. GONZALEZ #40577

MAINTENANCE TECHNICAN: J. KARLECKE# 6467

**TESTING OFFICER'S OBSERVATIONS**

SPEECH: SLURRED

ATTITUDE: CALM , QUIET

CLOTHING: BLACK LEGGINGS, BLACK TOP, BLACK SANDALS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

**OTHER:**

---

**COMMENTS:**

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 03:14 HRS.

SUBJECT: AGREED TO TAKE TEST

A/O: READ RIGHTS
SUBJECT: STATED SHE UNDERSTOOD RIGHTS.

TECH: READ TEST RESULTS
SUBJECT: STATED SHE UNDERSTOOD TEST RESULTS.

A/O: ATTEMPTED Q & A
SUBJECT: REFUSED QUESTIONS

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SUBJECT: _____ CASE NUMBER: 2-011542

# 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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SUBJECT: [illegible] CASE NUMBER: [illegible]

# 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: _____

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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: | |

NOT A CERTIFIED COPY

**REVIEW COMPLETED BY**

| | |
|---|---|
| **Booking Number:** 2023022874 | **Date:** 9/1/2023 |
| | **Specialist Name/ID:** Chantel Daniels/30347 |