24 CT - 12326 AMND 1

☐ 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: FL0 5 0 0 0 0 0 | Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE | Agency Report Number: 0 6 -| 24076942 ( )

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 NONE

Multiple Clearance Indicator: 0 1

Location of Arrest (including Name of Business): 8145 FOREST HILL BLVD, WEST PALM BEACH, FL, 33413

Location of Offense (Business Name, Address): 8145 FOREST HILL BLVD, WEST PALM BEACH, FL, 33413

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
07/02/2024	03:25					Big City Towing, 601 Industrial St., Lake Worth 33467, (561) 547-4092

DEFENDANT

Name (Last, First, Middle): Madden, Vincent, J

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	8/12/1960	5'10	204 LBS	GREEN	BROWN	FAIR	LARGE

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): 600 S Dixie Hwy Apt 607, West Palm Beach, FL 33401

Mobile Phone: (561) 252-9297

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

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

Phone: ( )

Address Source: DRIVER'S LICENSE/VERBAL

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

Phone: ( )

Occupation: PHARMICIST

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
M350870602920, FL	[redacted]		PHILADELPHIA,PA	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 ( )

$1,000

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	1	☐ Y ☒ N	316.193(1)(A)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		24076942		

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

FILED PBC - GUN CLUB
'24 JUL 2 AM 7:08

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 25th Year 2024 Time 08:30 A.M. ☒ P.M. ☐

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

X Signature of Defendant (or Juvenile and Parent/Custodian) Date Signed 07/02/2024

SCANNED JUL 02 2024

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 ☐ Suicidal ☐ Resisted Arrest ☐ Other:

Signature of Arresting Officer: x #36758

Name of Arresting Officer (Print): Inv. K. Barreras I.D. #: 36798

Name Verification (Printed by Arrestee) (PRINT)

JUL 2 AM 5:40

Witness here if subject signed with an "X"

Intake Deputy I.D. # Pouch #

Transporting Officer: Inv. K. Barreras I.D. #: 36798 Agency: PBSO

PAGE 1 OF 1

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

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PROBABLE CAUSE AFFIDAVIT

OBTS Number | 1 Arrest 2 NTA | 3 Request for Warrant 4 Request for Copies | Juvenile: N

ADMIN

Agency ORI Number: FLO 5 0 0 0 0 0 | Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE | Agency Report Number: 24076942

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): Madden, Vincent, J | Alias: | Race: W | Sex: M | Date of Birth: 08/12/1990

CHARGES

Charge Description: | Charge Description: DUI

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) | Phone ( ) | Occupation:

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 2nd day of July 20 24 at 0232 ☑ A.M ☐ P.M (Specifically include facts constituting cause for arrest.)

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

On 7/2/2024 at approximately 0232 hours, I was dispatched to 8145 Forest Hill Blvd, located in unincorporated West Palm Beach, FL, in reference to a male sleeping behind the wheel of his vehicle. Dispatch advised Palm Beach County Rescue to stop out with the vehicle and find the male behind the wheel sleeping.

Upon my arrival, I observed a silver Toyota 4runner stopped in the middle lane of Forest Hill Blvd. I made contact with the male who was still behind the wheel. I asked the male where was he going, and he stated he was going home. I asked where was he coming from, and he did not remember. I asked if he knew what county he was in, and he stated he was in Palm Beach County, but he was not sure where in Palm Beach County. I asked how much he had to drink, [redacted] I asked the male for his driver's license, and I was able to identify the male through his FL DL as Vincent Madden. DUI investigator Barreras arrived on the scene, and this case was TOT her.

ADMINISTRATIVE

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 2nd day of July 20 24 by _____

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

#86798 Inv. K. Barreras

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

PAGE 1 OF 1

SCANNED JUL 02 2024

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DISTRIBUTION WHITE – Court Copy GREEN – State Attorney YELLOW – Agency PINK – Agency

PBSO #0004 REV. 04/22

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 2nd DAY OF July 20 24, AT 02:32 ✓ AM PM

SUBJECT: Madden, Vincent, J CASE NUMBER: 24076942

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. K. Barreras

PERSONAL CONTACT

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

On July 2, 2024, I responded to a traffic stop located at 8145 Forest Hill Blvd within unincorporated West Palm Beach, Palm Beach County, FL. I met and spoke with D/S S. Anderson ID# 32400 who advised me on the incident and provided me with a supplemental probably cause affidavit stating the following, "On 7/2/2024 at approximately 0232 hours, I was dispatched to 8145 Forest Hill Blvd, located in unincorporated West Palm Beach, FL, in reference to a male sleeping behind the wheel of his vehicle. Dispatch advised Palm Beach County Rescue to stop out with the vehicle and find the male behind the wheel sleeping. Upon my arrival, I observed a silver Toyota 4runner stopped in the middle lane of Forest Hill Blvd. I made contact with the male who was still behind the wheel. I asked the male where was he going, and he stated he was going home. I asked where was he coming from, and he did not remember. I asked if he knew what county he was in, and he stated he was in Palm Beach County, but he was not sure where in Palm Beach County. I asked how much he had to drink, and he stated he had four beers. I asked the male for his driver's license, and I was able to identify the male through his FL DL as Vincent Madden. DUI investigator Barreras arrived on the scene, and this case was TOT her."

OBSERVATION OF DRIVER:

Upon making contact with the driver, who was identified by his FL Driver's License, I immediately detected an obvious and strong odor of an unknown alcoholic beverage emitting from his person and face area. The odor intensified as I spoke to him. Madden appeared tired and disoriented. Madden's eyelids were droopy. Madden had an unsteady gate while walking to my patrol vehicle and had difficulties following directions. Madden had red, glassy, and watery eyes. Madden swayed while standing and leaned on my patrol vehicle for balance. Madden had difficulties remembering where he was and where he was coming from.

DRIVER'S STATEMENTS:

[redacted]

Madden consented to breath.

Madden refused to participate in the Q&A.

ODORS:

An obvious odor of an unknown alcoholic beverage coming from his breath which intensified as he spoke with me.

GENERAL OBSERVATIONS

SPEECH: **Slurred, thick and at times difficult to understand.**

ATTITUDE: **Polite, Calm, Cooperative**

CLOTHING: **Blue shirt, Blue Jeans, brown shoes**

MEDICAL/OTHER: **Pre-diabetic, hypertension**

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. K. Barreras 36755
(Signature of Arresting/Investigative Officer)

SCANNED
JUL 02 2024

The foregoing instrument was sworn to or affirmed and subscribed before me this 2nd day of JULY 2024 by Inv. K. Barreras

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

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

SHARI L. O'NEAL
MY COMMISSION # HH 512128
EXPIRES: June 25, 2028

NOT A CERTIFIED COPY

SUBJECT: Madden, Vincent, J CASE NUMBER 24076942

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:
Madden was swaying during the task in a side to side motion. Madden had to be reminded numerous times to track the stimulus with his eyes only. Madden did not keep feet together and did not keep head still.

WALK & TURN:
I explained and demonstrated the instructions for the Walk and Turn Task to Madden, whom advised he understood. During the task, Madden was swaying in a side to side manner. Madden was having trouble maintaining his balance during the instructional phase. Madden took an incorrect number of steps and stepped off line. Madden did not step heel to toe and did not keep arms at sides. Madden used arms to balance by raising them over 6 inches. Madden performed an improper turn other than which was demonstrated, task was conducted on a paved road surface. Yellow tape was utilized.

ONE LEG STAND:
I explained and demonstrated the instructions for the One Leg Stand Task to Madden, whom advised he understood. Madden raised he right leg. During the task, Madden was swaying in a side to side manner. Madden used arms to balance by raising them over 6 inches. Madden put his foot down numerous times to regain balance before the 30 second time period had elapsed. Madden also did not keep feet together and did not raise foot 6 inches above ground. Madden did not count in appropriate manner (1001,1002,1003,etc.) Task was not completed for safety purposes.

FINGER TO NOSE:
I explained and demonstrated the instructions for the Finger to Nose Task to Madden, whom advised he understood. During the task, Madden was swaying in a side to side manner. Madden did not keep his eyes closed. Madden did not touch the tip of his nose with the tip of his finger. Madden touched the bridge of his nose and did not immediately bring hand back to side. The sequence used in this task was L,R,L,R,R,L.

ROMBERG ALPHABET:
I explained and demonstrated the instructions for the Romberg Alphabet Task to Madden, whom advised he understood. During the task, Madden was swaying in a side to side manner. Madden did not keep arms at sides and spoke in a rhythmic manner. Madden stopped early. Madden did not recite alphabet in correct manner after several attempts.

BREATH TEST RESULTS: 1) .196 | 2) .199 | 3) | 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. K. Barreras 36758
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 2nd day of JULY 2024 by Inv. K. Barreras

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

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

SHARI L. O'NEAL
MY COMMISSION # HH 512128
EXPIRES: June 25, 2028

SCANNED
JUL 02 2024

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

PBSO CASE # 24076942 PBSO ZONE 1-24

AGENCY CASE # _____ CRASH CASE # _____

TIME OF STOP/CRASH 02:32 DATE 07/02/2024 DAY Tuesday

SUBJECT'S NAME Madden, Vincent, J RACE W SEX M

HGT 5'10 WGT 204 LBS DOB 8/12/1960

LOCATION 8145 FOREST HILL BLVD, WEST PALM BEACH, FL, 33413

ARRESTING OFFICER'S NAME & ID Inv. K. Barreras (36798) AGENCY Palm Beach County Sheriff's Office

DIVISION: TRAFFIC/DUI

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 03:52

ARREST TIME 03:25

BREATH RESULTS:

1) .196
2) .194
3)
4)

TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # /

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SCANNED
JUL 02 2024

TESTING FACILITY TASK REPORT

AGENCY: PBSO INV. BARRERAS #36798

SUBJECT: MADDEN, VINCENT J.

CASE NUMBER: 24-076942

DATE: 07-02-24

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 04:13 HRS

ENDING TIME: 04:25 HRS

BREATH TESTS RESULTS: 1) .196 TIME 04:19 A.M. ☒ P.M. ☐ 2) .199 TIME 04:21 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: LOW, MUMBLE

ATTITUDE: CALM, COOPERATIVE

CLOTHING: SHIRT- TURQOISE GREEN PANTS- NAVY BLUE

MEDICAL CONDITIONS: DIABETIC, HIGH BLOOD PRESSURE NO ALLERGIES

MEDICATIONS: SEVERAL MEDS.

OTHER:

EYES: RED, GLASSY
ODOR OF UNKNOWN ALCOHOLIC BEVERAGE

COMMENTS:

20 MIN. OBSERVATION DONE BY A/O BARRERAS #36798

A/O REQUESTED THE BREATH TEST.
D SUBMITTED TO THE REQUEST.
D COMPLETED THE TEST CORRECTLY.
BREATH RESULTS EXPLAINED TO THE D.
C/W READ ON CAMERA TO THE D.
D REFUSED Q&A, WANTED HIS ATTORNEY.

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SCANNED
JUL 02 2024

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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SCANNED JUL 02 2024

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? _____ 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

SCANNED JUL 02 2024

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CSO
Instrument Serial Number: 80-006239 Software: 8100.27
Date of Test: 07/02/2024

Date of Last Agency Inspection: 06/14/2024
Observation Period Began: 03:52
Subject's Name: VINCENT J MADDEN DOB: 08/12/1960 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	04:17
Air Blank	0.000	04:17
Control Test	0.079	04:18
Air Blank	0.000	04:18
Subject Sample #1	0.196	04:19
Air Blank	0.000	04:19
Air Blank	0.000	04:21
Subject Sample #2	0.199	04:21
Air Blank	0.000	04:22
Control Test	0.080	04:22
Air Blank	0.000	04:23
Diagnostics Check	OK	04:23

Cylinder Lot: 14323080A3
Exp: 09/05/2025

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: 07-02-24
Signature

Sworn to (or affirmed) before me this 02 day of July, 2024

Signature of Notary Public-State of Florida

Inv. Barrecas #36798
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

SCANNED
JUL 02 2024



NOT A CERTIFIED

SCANNED
JUL 02 2024

WITNESS LIST

CASE NUMBER: 24076942

ARRESTING OFFICER: Inv. K. Barreras

ADDRESS: TRAFFIC DIV/DUI

PHONE NUMBERS (HOME): _____ (WORK) 561-688-3400

CAN TESTIFY TO: FACTS OF THE CASE AND DUI INVESTIGATION.

NAME: D/S S. ANDERSON #32400

ADDRESS: 3228 GUN CLUB ROAD, WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME) _____ (WORK) 561-688-3400

CAN TESTIFY TO: WHEEL WITNESS, SIGNS OF IMPAIRMENT

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) 0

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: _____

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SCANNED JUL 02 2024

Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☒	119.071(2)(e)	Confession	3-4
Public Info. Exemptions	☐	FL Const. Art. I, s. 16(b)(5)	Marsy's Law – victim information shall be redacted. The term "victim" also includes the victim's lawful representative, the parent or guardian of a minor, or the next of kin of a homicide victim. The term "victim" does not include the accused (ref. page 99 of the CRTM for additional information)	
	☐	119.071(2)(j)	Home/employment telephone number, home/employment address, or personal assets of a person who has been the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence	
	☒	119.0712(2)	Personal information contained in a motor vehicle record	13
	☒	316.650(11)	Driver information contained in a uniform traffic citation	12
	☐	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
Florida Rules of Judicial Administration 2.420	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses	
	☐			
	☐			
Other	☐			
	☐			
	☐			
	☐			

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REVIEW COMPLETED BY

Booking Number: 2024017887	**Date:** 7/2/2024
	Specialist Name/ID#: Joe Kovach 44820

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JUL 02 2024