

0489967 2017CT13819

489

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

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

1 Juvenile N

ADMINISTRATIVE	OBTS Number		Agency OR# Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number (N.T.A.'s only) <b>06-17-106178</b>	
	Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 2 1. Yes 2. No <b>N/A</b>	
	Location of Arrest (Including Name of Business) <b>3568 NORTHLAKE BLVD PBC PBC, FL, 33418</b>				Location of Offense (Business Name, Address) <b>3568 NORTHLAKE BLVD PBC PBC, FL, 33418</b>			
	Date of Arrest <b>7/24/2017</b>	Time of Arrest <b>0005</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle <b>PRIORITY TOWING</b>	
Name (Last, First, Middle) <b>RINKER, ABIGAIL</b>								Alias (Name, DOB, Soc. Sec. #, Etc.)
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex <b>F</b>	Date of Birth <b>4/17/1997</b>		Height <b>5'05</b>	Weight <b>130</b>	Eye Color <b>BLUE</b>	Hair Color <b>BLONDE</b>
Complexion <b>LIGHT</b>		Build <b>SMALL</b>		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>N/A</b>		Marital Status <b>N/A</b>	Religion <b>NONE</b>	Indication of: Alcohol Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>
Local Address (Street, Apt. Number) <b>9511 MINORCA WAY, PALM BEACH GARDENS, FL, 33418</b>		(City) (State) (Zip)		Phone <b>(561) 222-6456</b>		Residence Type: 1. City 2. County 3. Florida 4. Out of State <b>2</b>		
Permanent Address (Street, Apt. Number) <b>9511 MINORCA WAY, PALM BEACH GARDENS, FL, 33418</b>		(City) (State) (Zip)		Phone <b>(561) 222-6456</b>		Address Source <b>VERBAL</b>		
Business Address (Name, Street) <b>( )</b>		(City) (State) (Zip)		Phone <b>( )</b>		Occupation <b>BARTENDER</b>		
D/L Number, State <b>R526-016-97-637-1</b>		Soc. Sec. Number <b>( )</b>		INS Number		Place of Birth (City, State) <b>DAYTON, OHIO</b>		
Citizenship <b>US</b>		Co-Defendant Name (Last, First, Middle)		Race Sex Date of Birth		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile		
Co-Defendant Name (Last, First, Middle)		Race Sex Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile		
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other:		Name (Last) (First) (Middle)		Residence Phone <b>( )</b>		Business Phone <b>( )</b>		
Address (Street, Apt. Number) <b>( )</b>		(City) (State) (Zip)		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 provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)		School Attended Grade		
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> 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. Synthetics, U. Unknown, Z. Other		Charge Description <b>DRIVING UNDER THE INFLUENCE</b>		Counts <b>1</b>		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		
Statute Violation Number <b>316.193(1)</b>		Violation of ORD #		Drug Activity Drug Type Amount / Unit <b>N N /</b>		Offense # <b>17-106178</b>		
Warrant / Capias Number		Bond		Charge Description		Counts Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		
Violation of ORD #		Bond		Charge Description		Counts Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		
Warrant / Capias Number		Bond		Charge Description		Counts Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		
Violation of ORD #		Bond		Charge Description		Counts Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		
Warrant / Capias Number		Bond		Charge Description		Counts Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		
Violation of ORD #		Bond		Location (Court, Room Number, Address) <b>NORTH COUNTY COURTHOUSE / 3188 PGA BLVD, PALM BEACH GARDENS, FL 33410</b>		Court Date and Time Month <b>AUGUST</b> Day <b>16</b> Year <b>2017</b> Time <b>0830</b> AM <input checked="" type="checkbox"/> PM		
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)				Date Signed				
HOLD for other Agency Name:		Signature of Arresting Officer <b>X [Signature] 21289</b>		Name Verification (Printed by Arrestee) <b>JUL 24 AM 2:19 JUL 26 2017</b>				
<input type="checkbox"/> Dangerous <input type="checkbox"/> Subsidial		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) <b>D/S P SCARLOZZI #21289</b>		I.D. # <b>21289</b>		
Arresting Deputy <b>[Signature]</b>		Pouch #		Transferring Officer <b>SAME</b>		Agency ID # <b>PBSO</b>		
Witness here if subject signed with an -X"						PAGE <b>1 OF 1</b>		

SCANNED  
JUL 26 2017

# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 23RD DAY OF JULY 20 17, AT 2346 AM  PM

SUBJECT: RINKER, ABIGAIL CASE NUMBER: 17-106178

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S P SCARTOZZI #21289

## PERSONAL CONTACT

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

On 7/23/2017 at approximately 2347 hours I was dispatched to investigate a possible suspicious vehicle call in the area of the Checkers, 3568 Northlake Blvd, Palm Beach Gardens, FL, 33418 in unincorporated Palm Beach County. I was driving my marked patrol vehicle asset number 68559 and wearing my Palm Beach County Sheriff's office issued class B uniform. Prior to my arrival I was provided with the following information. An unknown person called 911 from 561-809-2086 to report there was a white female passed out behind the wheel of a vehicle in the drive thru lane of the Checkers restaurant. Upon my arrival I noticed a black in color Volkswagen sedan bearing Florida license plate number I16-6IR stopped in the drive-through lane. The vehicle was running and occupied by a white female wearing a white shirt, blue jean pants and tan shoes. This female was later identified by Florida drivers license as Abigail Rinker. Rinker was the sole occupant in the vehicle and she was sitting behind the driver wheel in actual physical control of the motor vehicle.

## OBSERVATION OF DRIVER:

Immediately upon making contact with Rinker I could smell the very strong odor of an unknown alcoholic beverage emitting from her mouth area, her speech was very slow thick slurred and difficult to understand. Her movements were very slow and uncoordinated, her manual dexterity appeared to be off. She was asked several times to produce her drivers license however when she was looking in her vehicle she did not appear to be looking for her drivers license. She would open the glove box over and over again and move things around in her passenger seat but she never produced her driver's license. I then asked her how much she had to drink tonight and she advised she had "a couple beers". I then asked her if she had any medical problems and she advised "no". I asked her if she

## DRIVER'S STATEMENTS:

took any narcotics tonight legal or illegal and she advised "no". I asked her if she had any physical disabilities and she advised "no". I asked her if she had a speech impediment or if she had any medical condition which would cause her breath to display the strong odor of an unknown alcoholic beverage and she advised "no". I then asked her to step out of her vehicle, she hesitated at first then stepped out of her vehicle using her vehicle for balance for while stepping out.

## ODORS:

I brought her in front of my patrol vehicle where I chose a smooth level portion of the as fault roadway, free of obstructions and debris in order to perform roadside tasks.

## GENERAL OBSERVATIONS

SPEECH: Slow, Thick, Slurred, Sometimes difficult to understand.

ATTITUDE: Cooperative

CLOTHING: White shirt, Blue jean pants, Tan shoes.

MEDICAL/OTHER: The driver denied any medical conditions, physical disabilities, injuries and medication use and or use of recreational drugs.

STATE OF FLORIDA  
COUNTY OF PALM BEACH

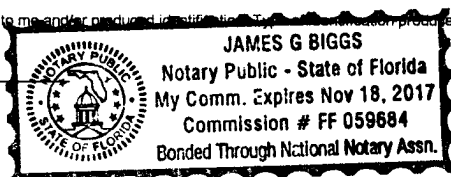
D/S P SCARTOZZI #21289

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 24TH day of JULY 20 17 by D/S P SCARTOZZI #21289

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

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



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SUBJECT: RINKER, ABIGAIL

CASE NUMBER 17-106178

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:

WALK & TURN:

I then asked her to stand with her heels and toes together with her arms down to her side and she first brought her right foot in front of her left foot as if she was in the heel to toe position however that is not what I instructed her to do. I then pointed down at my boots and told her to stand like I was which was with her heels and toes together. She then moved into this position. While standing here she would sway in a side to side back to front manner more than two inches. The odor of an unknown alcoholic beverage was still strong and intensified as she spoke with me. I then asked her if she had problems with her eyes and she advised "no". I then placed a lighted stylus pen approximately 12 inches away from her face just above her eye brow line. It was at this time that she asked what was going on and I explained to her that I was conducting a criminal DUI investigation based on the observations I observed up until this point i felt that she may be under the influence of alcohol and or a controlled substance. I asked her if she was going to cooperate and she advised "no", I then advised her of her Taylor warnings and she still refused to cooperate. Based on the totality of the circumstances Rinker was placed under arrest for operating a motor vehicle while under the influence of alcohol and or a controlled substance. She was placed in PBSO issued handcuffs which were checked for proper fit and double locked

ONE LEG STAND:

She was then transported to the Palm Beach County Sheriff's office breath alcohol testing facility located at the main detention center. After arrival she was observed for a period of twenty minutes during which time she did not take anything by mouth or regurgitate. She was then brought into breath testing room A where I asked her to provide a sample of her breath for the purpose of determining its alcohol content and she refused to do so. She was charged with refusal and booked into the Palm Beach County jail without incident.

FINGER TO NOSE:

N/A

ROMBERG ALPHABET:

N/A

BREATH TEST RESULTS:  1) REFUSAL  2) REFUSAL  3) N/A  4) N/A

STATE OF FLORIDA  
COUNTY OF PALM BEACH

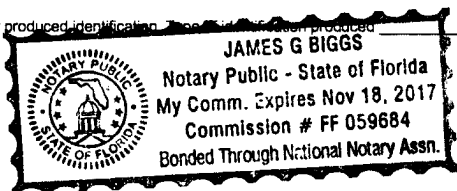
D/S P SCARTOZZI #21289

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 24TH day of JULY 20 17 by D/S P SCARTOZZI #21289

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

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



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WITNESS LIST

CASE NUMBER: 17-106178

ARRESTING OFFICER: D/S P SCARTOZZI #21289

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

PHONE NUMBERS (HOME): 561-688-3000 (WORK) (561)688-4900

CAN TESTIFY TO: DUI INVESTIGATION

NAME:

ADDRESS:

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

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CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

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NOT A CERTIFIED COPY

# TESTING FACILITY TASK REPORT

AGENCY: PBSO-SCARTOZZI

SUBJECT: RINKER, ABIGAIL R

CASE NUMBER: 17-106178

DATE: Jul 24, 2017

VIDEO DVD NUMBER: 63051

BEGINNING TIME: 0052

ENDING TIME: 0106

BREATH TESTS RESULTS: 1) REF TIME 0055 A.M.  P.M.  2) XX TIME XX A.M.  P.M.   
3) XX TIME XX A.M.  P.M.  4) XX TIME XX A.M.  P.M.

BREATH OPERATOR: J Biggs# 7607

MAINTENANCE TECHNICAN: D/S J Karklecke #6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH: TALKATIVE, SLURRED AT TIMES

ATTITUDE: COOPERATIVE, CONFUSED

CLOTHING: WHITE SHIRT, BLUE JEANS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

## OTHER:

EYES GLASSY, RED  
ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE ON SUBJECT  
SWAYING AT TIMES

## COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0030  
SUBJECT REFUSED THE TEST INITIALLY  
IMPLIED CONSENT WAS READ TO THE SUBJECT, SUBJECT ADVISED SHE UNDERSTOOD AND REFUSED  
SUBJECT THEN ASKED WHAT HAPPENS IF SHE DOESNT SUBMIT ONCE AGAIN  
IMPLIED CONSNET WAS READ AND EXPLAINED ONCE AGAIN  
SEE VIDEO, EXTENDED CONVERSTATION ABOUT "WHAT IF'S"  
REFUSAL STOOD AT 0055  
MIRANDA WAS READ  
QUESTIONS WERE NOT ASKED BY A/O

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SUBJECT: Rinker, Abigail R.

CASE NUMBER: 17-106178

## IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.

~~OR~~

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances.

~~OR~~

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

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

I am DIS Scantozzi of the PBSO

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S 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.

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SUSPECT'S SIGNATURE: (X) Read on Camera

# 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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JUL 26 2017



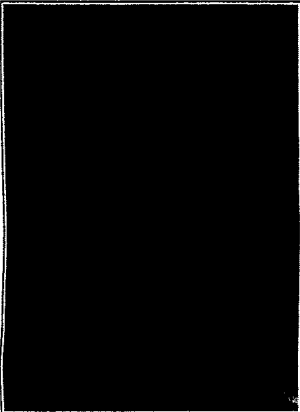
# STATE OF FLORIDA

DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

Time printed: 7/24/2017 12:41:35 AM

## Record Detail

<b>Customer Name:</b> ABIGAIL ROSE RINKER	<b>Driver License Status:</b> Valid	
[REDACTED]	<b>SSN:</b> [REDACTED]	<b>Class:</b> E
<b>Previous DUI: 0</b> <i>This count reflects total DUI convictions on record.</i>	<b>Previous DWLS: 1</b> <i>This count reflects total DWLS convictions on record.</i>	

  <i>Abigail Rinker</i>  Under 21 Until 04/17/2018 ORGAN DONOR REAL ID COMPLIANT	<b>Address:</b> 1151 EGRET CIR S JUPITER, FL 33458-8446	<b>Date of Birth:</b> 04/17/1997	<b>Gender:</b> FEMALE	<b>Height:</b> 5' 3"
	<b>Original License Issue Date:</b> 08/13/2013	<b>Issued:</b> 08/13/2013	<b>Expires:</b> 04/17/2022	<b>Replaced:</b> 02/14/2017
	<b>CDL Status:</b>			
	<b>Form Number:</b> P751702140030			<b>EIN:</b> 0100247956816260
	<b>Citizen Status:</b> US CITIZEN	<b>Country of Birth:</b> US OF AMERICA	<b>State of Birth:</b> OHIO	
	<b>Race:</b> CAUCASIAN			

<b>Restrictions:</b>	<b>Endorsements:</b>	<b>Conditional Messages:</b>
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