17CF 8030

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 ORI Number: FLO 500000

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number (N.T.A.'s only): 06- 17-112533

Charge Type: Check as many as apply: [X] 1. Felony [ ] 2. Traffic Felony [ ] 3. Misdemeanor [X] 4. Traffic Misdemeanor [ ] 5. Ordinance [ ] 6. Other

Weapon Seized / Type: 2 (1. Yes 2. No) N/A

Multiple Clearance Indicator: 02

Location of Arrest (Including Name of Business): 1695 LINDA LOU DR, WEST PALM BEACH, FL 33415

Location of Offense (Business Name, Address): 1695 LINDA LOU DR, WEST PALM BEACH, FL 33415,

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
08/09/2017	0358					AT HIS RESIDENCE IN DRIVEWAY

DEFENDANT

Name (Last, First, Middle): TORRALBO , ABNER,

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

Race (W - White I - American Indian B - Black 0- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	05/31/1973	5'07	175	BROWN	BROWN	MED	MED

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

Marital Status: MARRIED

Religion: NONE

Indication of: Alcohol Influence [X] Y [ ] N [ ] Unk.; Drug Influence [ ] Y [ ] N [X] Unk.

Local Address (Street, Apt. Number) (City) (State) (Zip): 1695 LINDA LOU DR, WEST PALM BEACH, FL 33415

Phone: ( ) NONE

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

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

Phone: ( )

Address Source: FL DL

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

Phone: ( )

Occupation: CONSTRUCTION

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
T641000731910, FL	[redacted]		HAVANA, CUBA	USA

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 [ ] Legal Custodian [ ] Other:

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 provided by [ ] defendant and / or [ ] 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.
[ ] 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. Synthetics U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DUI	1	[ ] Y [X] N	316.193(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant I Capias Number	Bond
N	N	N/A	17-112533		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
POSESSION OF COCAINE	1	[ ] Y [X] N	893.13(6)(a) G.C.	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
P	C	N/A	17-112533		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Refusal to sign	1	[ ] Y [X] N	318.14 3	

Drug Activity	Drug Type	Amount I Unit	Offense #	Warrant / Capias Number	Bond
N	N		17-112533		

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): TO BE SET

Court Date and Time: Month Day Year Time AM 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): 08/09/2017 Date Signed

ADMIN

HOLD for other Agency Name:

Signature of Arresting Officer: X

Name Verification (Printed by Arrestee)

[ ] Dangerous [ ] Resisted Arrest [ ] Suicidal [ ] Other:

Name of Arresting Officer (Print): D/S CONCEPCION #27814 27814

Intake Facility: Pouch #

Transporting Officer: D/S [illegible] ID #: Agency: PBSO

Witness here if subject signed with an -X"

PAGE 1 OF 1

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PBSO #148 REV. 8/97

(1) Not Realtime

S. Levey 9415

PROBABLE CAUSE AFFIDAVIT

OBTS Number | 1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias | 1 | Juvenile | N

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 17-112533

ChargeType: Check as many as apply. [X] 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
TORRALBO , ABNER,		W	M	05/31/1973

CHARGES

Charge Description		Charge Description	
DUI	316.193(1)	POSESSION OF COCAINE	893.13(6b)
Charge Description		Charge Description	
Refusal to sign	318.14		

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
				( )	

The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation 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.
[X] was found to have commited the below acts, resulting from my (described) investigation.

On the 09 day of 08 20 17 at 0311 [X] A. M. [ ] P.M. (Specifically include facts constituting cause for arrest.)

PROBABLE CAUSE STATEMENT

I requested to have criminal citations signed by Abner Torralbo. Abner refused by using verbal insults. I attempted to advice Abner of the consequences of not signing citations. Abner responded by over speaking me with verbal insults and threats.

Due to the events that occured I find probable cause to charge Abner Torralbo with 1 count of Refusal to sign F.S.S. 318.14

A copy of citations where submitted as personal property for Abner Torralbo.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S CONCEPCION #27814
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 09 day of 08 20 17 by D/S CONCEPCION #27814

(Print name of Arresting/Investigative Officer) who is personally known to me or has produced identification. Type of identification produced FL DL

Sue Owen (#3184)
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

B. SUE OWEN
State of Florida-Notary Public
Commission # FF093160
My Commission Expires
May 30, 2018

PAGE ____ OF ____

PBSO #0004 REV. 04/01

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY

PROBABLE CAUSE AFFIDAVIT

OBTS Number:

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

Juvenile: N

ADMIN

Agency ORI Number: FLO 500000

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 06- 17-112533

Charge Type: Check as many as apply. [x] 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
TORRALBO , ABNER,		W	M	05/31/1973

CHARGES

Charge Description		Charge Description	
DUI	316.193(1)	POSESSION OF COCAINE	893.13(6b)
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**
	( )	

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation 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.
[x] was found to have commited the below acts, resulting from my (described) investigation.

On the 09 day of 08 20 17 at 0311 [x] A. M. [ ] P.M. (Specifically include facts constituting cause for arrest.)

Upon arrest of Abner Torralbo a clear bag containing a white substance was found in his wallet. The white substance was tested with results of positive for cocaine using the Scott Regent Test Kit and negative using the marquis regent test kit.

Due to the events above I find probable cause to charge Abner Torralbo with Possession of cocaine F.S.S. 893.13(6b)

White substance was sealed and submitted to evidence for further processing.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S CONCEPCION #3
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 09 day of 08 20 17 by D/S CONCEPCION

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

Sue Owen (#3184)
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

B. SUE OWEN
State of Florida-Notary Public
Commission # FF093160
My Commission Expires
May 30, 2018

PAGE ____ OF ____

PBSO #0004 REV. 04/01 DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY

PROBABLE CAUSE AFFIDAVIT

ADMIN.

OBTS Number:

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

Juvenile: N

Agency ORI Number: FLO 5 0 0 0 0 0 0

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 0 6 1 1 7 1 1 2 5 3 3 ( )

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): Torrabo, Abner

Alias:

Race: H Sex: M Date of Birth: 05/31/73

CHARGES

Charge Description:

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) Phone ( ) Occupation

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above Defendant committed the following violation of law.
The person taken into custody...

- [X] 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 9 day of Aug 2017 at 3:09 [X] A.M. [ ] P.M. (Specifically include facts constituting cause for arrest.)

I WAS TRAVELING WEST BOUND ON FOREST HILL BLVD APPROACHING HAVERHILL ROAD WHEN I OBSERVED A WHITE CARGO VAN RUN THE RED LIGHT ON NORTHBOUND HAVERHILL ROAD TO GO WEST BOUND ON FOREST HILL. A VEHICLE IN FRONT OF HE HAD TO SLAM ON ITS BREAKS TO AVOID AN ACCIDENT. THE VAN CONTINUED WEST BOUND DRIVING IN A VERY RECKLESS MANNER. THE VAN TURNED ONTO LINDA LEE DRIVE AND PULLED INTO THE DRIVEWAY OF 1695. I ACTIVATED MY EMERGENCY EQUIPMENT AND STOP HIM IN THE DRIVEWAY. THE DRIVER AND SOLE OCCUPANT EXITED THE VEHICLE AND WAS VERY UNSTEADY ON HIS FEET AND WOULD NOT OBEY MY COMMANDS AS I WANTED HIM TO WALK TO THE REAR OF HIS VAN. HE BEGAN WALKING TOWARDS HIS FRONT DOOR SO I RAN UP TO HIM AND ESCORTED HIM TO THE REAR OF THE VAN AND TOLD HIM TO HAVE A SEAT. AS I WAS DOING THIS I COULD SMELL AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM HIM HE WAS ALSO VERY UNSTEADY ON HIS FEET AND APPEARED TO BE IN SLOW MOTION

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S [signature] 6609
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 9th day of August 2017 by D/S P. Heckler

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

Inv. S. Levey [signature] #9415
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

PAGE 1 OF 1

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 09 DAY OF 08 20 17, AT 0311 ✓ AM PM

SUBJECT: TORRALBO , ABNER, CASE NUMBER: 17-112533

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S CONCEPCION #27814

PERSONAL CONTACT

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

On 08/09/2017 at approximately 0311 hours I was dispatched to 1695 Linda Lou Dr. West Palm Beach, FL 33415 in response to a fellow officer D/S Heckler #6609 advising he witnessed Abner Torralbo identified by FL DL run a red light WESTBOUND on forest hill and haverhill and almost hit a oncoming vehicle in a white Ford van bearing FL tag 872PRH. Torralbo was then stopped at 1695 Linda Lou Dr.

I was later handed a supplemental PC from D/S Heckler in regards to his observations. His in vehicle video that observed the violations, was later uploaded as well.

OBSERVATION OF DRIVER:

Upon approach to the rear of the vehicle, where D/S Heckler was, I smelled an odor of an unknown alcoholic beverage resonating from Torralbo's person, and as he spoke with me the odor became stronger. Torralbo swayed to his left and right approximately 6 inches as he stood. Torralbo had the zipper for his pants down and refused to zip his pants back up when requested. Torralbo was observed to be leaning on the vehicle during our contact, and had to be continually called away from it. Torralbo continued to keep his hands in his pockets even after being requested to keep his hands where they would be visible numerous times.

DRIVER'S STATEMENTS:

I requested Torralbo's permission to search him for possible weapons. Torralbo advised he would allow me to search his person. I read Torralbo his miranda warning in Spanish due to Torralbo advising he preferred to be spoken to in Spanish. Torralbo advised he understood what I read to him off of my PBSO issued miranda card. Torralbo advised he was driving a white ford bearing tag (872PRH) from an undisclosed location. I noticed slurred speech as Torralbo spoke to me. Torralbo advised he had a drink several hours before hand. I asked Torralbo if he would be willing to submit to SFST's, Torralbo advised he would complete the tasks.

ODORS:

odor of an unknown alcoholic beverage resonating from Torralbo's person, and as he spoke with me the odor became stronger

GENERAL OBSERVATIONS

SPEECH: **Slurred, slow, short at times**

ATTITUDE: **Aggravated, rude, interupting**

CLOTHING: **Red pattern shirt, Blue pants, Black socks**

MEDICAL/OTHER: **originally stated no injuries on sene, then after HGN and walk and turn, he claimed an injury to his left leg. ****All roadside tasks were conducted on video.****

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S CONCEPCION #27814
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 09 day of 08 20 17 by D/S CONCEPCION #27814

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

Sue Owen (#3184)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

B. SUE OWEN
State of Florida-Notary Public
Commission # FF093160
My Commission Expires
May 30, 2018

SUBJECT: TORRALBO , ABNER, CASE NUMBER 17-112533

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] 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:

Torralbo was instructed to remain in the instructional stance during instruction. Torralbo advised he understood instructions after having to repeat instructions several times in english and spanish. Torralbo moved from the instructional position more than five times, and had to be continually reminded to return to it. Torralbo moved his head multiple times as well, after being instructed not to. Torralbo swayed in a circular motion during this process.

WALK & TURN:

Torralbo was instructed to remain in the instructional stance during instruction. Torralbo advised he understood instructions after having to repeat instructions several times in english and spanish. Torralbo was unable to maintain the instructed stance, and the instructions were eventually explained to him as he stood and watched. As he did this, he began without being instructed to do so. As he conducted the task, missed heel to toe on the majority of steps, stepped off of line,conducted the turn improperly, and took an incorrect number of steps (eight on the return).

It should be noted that Torralbo stopped counting during walk and turn. Torralbo also did not stay in a heel to toe position during walk or during instructional phase. He also had to be reminded about the task as it was being done, and was going to do another set of the task once he turned for the second time.

ONE LEG STAND:

Torralbo was placed into the instructional stance for this task, where he was given the instrctions. He stated that he understood the instructions. Torralbo was advised to begin. Torralbo was unable to maintain his foot 6 inches from the ground. Torralbo was swaying while balancing. Torralbo continued to place his foot back to the ground and showed trouble with keeping his balance. The one leg stand task was stopped for the safety of Toralbo. Torralbo showed a possibility of injuring himself if the task continued. Torralbo was not looking at his foot during the task.

FINGER TO NOSE:

Torralbo was placed into the instructional stance for this task, where he was given the instrctions. He stated that he understood the instructions. After being instructed to touch his nose with his left hand, Torralbo hesitated and reached with the wrong hand. Torralbo corrected him self and touched his nose with the correct hand. Torralbo kept his finger on his nose after being instructed to bring his hand back down to his side after touching his nose. Torralbo missed the tip of his nose multiple times and failed to return his arm to the side multiple times. Torralbo was swaying during the task. He also did not keep his eyes closed during the task.

ROMBERG ALPHABET:

Torralbo was placed into the instructional stance for this task, where he was given the instrctions. He stated that he understood the instructions. Torraldo was advised to count to 50 in Spanish. Torraldo counted to 58 and then advised he counted to 60.

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

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S CONCEPCION #27814
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 09 day of 08 20 17 by D/S CONCEPCION #27814

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

Sue Owen (#3184)
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

S. SUE OWEN
State of Florida-Notary Public
Commission # FF093160
My Commission Expires
May 30, 2018

Palm Springs Grill LLC
3174 Lake Worth Road
Palm Springs, Florida 33461
CREDIT SALE: 8/9/2017 2:29 AM
<Customer>
Name - #FIRSTNAME# Visit Count - 3
Total Points - 853
</Customer>
Card Name: EXPRESS/DIAL ONE
Trans.#: 4 | APPROVAL 112159 | Auth Code: 112159
Card: VISA-XXXX-[redacted] | Entry: Chip
Ref.#: 17080922932 | APPLAB: VISA DEBIT
AID: A0000000031010 | ATC: 0400 | TSI: 6800
TVR: 8080008000 | TC: 39E9C3E8258C2249

ITEM	QTY	EACH	SUBTOTAL	TOTAL
Dance Dollar $10	70	$10	$700.00	$840.0

70 DD Certificates - $700.00
0 ITEM Certificates - $0.00
Service Charge $140.00
SubTotal $840.00

Tip - _____
($0.00)

Total - _____
($840.00)

X_____
Signature (EXPRESS/DIAL ONE)

PALM SPRINGS GRILL LLC
3174 LAKE WORTH DR
PALM SPRINGS FL 33461
561-649-2000

08/09/2017 02:25:25
DEBIT CARD
DEBIT SALE

Card #	XXXXXXXXXXX8872
Network:	VISA
Chip Card:	US DEBIT
AID:	A0000000980840
ATC:	03FF
TC:	CE8B6C2886DEE4E0
SEQ #:	3
Batch #:	8
Trans #:	3
Approval Code:	161736
TRANS ID:	007221224153000
Entry Method:	Chip Read
Mode:	Issuer

SALE AMOUNT $33.00
TIP AMOUNT _____
TOTAL AMOUNT _____

Gratuity Guidelines
18% = $5.94 20% = $6.60
22% = $7.26

THANK YOU

CUSTOMER COPY

WITNESS LIST

CASE NUMBER: 17-112533

ARRESTING OFFICER: D/S CONCEPCION #27814
ADDRESS: 3228 GUN CLUB RD. WEST PALM BEACH, FL 33406
PHONE NUMBERS (HOME): N/A (WORK) 561-688-3000
CAN TESTIFY TO: ARRESTING OFFICER - SEE REPORT

NAME: D/S HECKLER # 6609
ADDRESS: 3228 GUN CLUB RD. WEST PALM BEACH, FL 33406
PHONE NUMBERS (HOME) N/A (WORK) 561-688-3000
CAN TESTIFY TO: TRAFFIC STOP - SEE SUPPLEMENTAL PC AND IN CAR VIDEO

NAME: INV. S. LEVEY #9415
ADDRESS 3228 GUN CLUB RD. WEST PALM BEACH, FL 33406
PHONE NUMBERS (HOME) N/A (WORK) 561-688-3000
CAN TESTIFY TO: TRAINING OFFICER

NAME:
ADDRESS
PHONE NUMBERS (HOME) () (WORK) ()
CAN TESTIFY TO:

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PHONE NUMBERS (HOME) (WORK)
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CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: Torralbo, Abner CASE NUMBER: 17-112533

DATE: 8/09/17 ~~VIDEO TAPE NUMBER:~~ DVD# 63161

BEGINNING TIME: 0439 ENDING TIME: 0451

BREATH TESTS RESULT: REFUSED 1) TIME 0450 A.M./P.M. 2) TIME A.M./P.M.

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

BREATH OPERATOR: S. Owen # 3184

MAINTENANCE TECHNICIAN: J. Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Spoke English

ATTITUDE: arrogant, un-co-operative

CLOTHING: socks, jeans, plaid LS shirt

MEDICAL CONDITIONS: none

MEDICATIONS: none

OTHER:

(Entire procedure done in Spanish by A/O)

COMMENTS: A/O & D arrived at 0413 hrs
A/O observed 20 minutes (wouldn't give intro questions)
A/O requested breath test, (asked for lawyer)
wouldn't answer just asked for lawyer.
(over & over) Inv Levey was present and
asked D refused, started doing
procedure in English. D then asked
for Spanish A/O read I/C, & COL I/C,
kept saying he wanted a lawyer.

SUBJECT: Torralbo, Abner CASE NUMBER: 17-112533

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 D/S Concepcion 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 In Spanish

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) asked for attorney

SUBJECT: Torralbo, Abner CASE NUMBER: 17-112533

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? Asked

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? For

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? Attorney 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: _____