0507988 19CT9089 # 2836

ARREST / NOTICE TO APPEAR

1 Arrest 3 Request for Warrant
2 NTA 4 Request for Capias
5 Juvenile Referral

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500200
Agency Name: Boca Raton Police Department
Agency Report Number (N T A's only): 3 , 2 | 2019-006998

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/not Applicable
Multiple Clearance Indicator: N

Location of Arrest (Including Name of Business): 700 N FEDERAL HIGHWAY
Location of Offense (Business Name, Address): 700 N FEDERAL HWY, BOCA RATON, FL 33432

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
05/18/2019	18:22	05/18/2019	18:22	05/18/2019	18:22	TOWED TO WESTWAY

DEFENDANT

Name (Last, First, Middle): MARLOWE, ADRIENNE
Alias (Name, DOB, Soc Sec #, Etc): Alias:

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	06/09/1959	5'05	135	BROWN	SANDY	LIGHT	Medium

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description): DIA
Marital Status: M
Religion: NONE
Indication of Alcohol Influence: ☒ Yes ☐ No ☐ Unk
Drug Influence: ☐ Yes ☒ No ☐ Unk

Local Address (Street, Apt Number) (City) (State) (Zip): 101 E CAMINO REAL 1015, BOCA RATON, FL 33432
Phone: (561) 789-4473
Residence Type (1 City, 2 County, 3 Florida, 4 Out of State): 1

Permanent Address (Street, Apt Number) (City) (State) (Zip): 101 E CAMINO REAL 1015, BOCA RATON, FL 33432
Phone: (561) 789-4473
Address Source: DEFENDANT

Business Address (Name, Street) (City) (State) (Zip): GRANT PROPERTY, 1599 NW 9TH AVE, BOCA RATON, FL
Phone: (561) 417-4100
Occupation: Owner

DVL Number, State	Soc Sec Number	INS Number	Place of Birth (City, State)	Citizenship
M640000597090 / FL	[redacted]		NEW YORK CITY, NY,	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

1-OR

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 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	Statute Violation Number	Violation of ORD #
DUI	316.193(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ 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		

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: GOOD
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: DEEN
Date Transported: 05/18/2019 | Time Transported: 18:22 | Other

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: 06/17/2019 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

Signature of Defendant (or Juvenile and Parent/Custodian) — Date Signed: 5/19/19

No Photo Available

ADMIN

HOLD for Other Agency
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other
Signature of Arresting Officer: 768
Name of Arresting Officer (Print): DEEN, A. — ID #: 768
Name Verification (Printed by Arrestee): (PRINT)
Intake Deputy: B. SHATARA — ID #: #1023 — Pouch #
Transporting Officer: DEEN — ID #: 768 — Agency: BRPD
Witness here if subject signed with an "X"
PAGE 1 OF 1

D/S

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P.I.O. ☐ DEFENDANT

PROBABLE CAUSE AFFIDAVIT

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

ADMIN

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number
	FL 0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2019-006998

Charge Type (Check as many as apply): ☐ 1 Felony ☐ 2 Traffic Felony ☒ 3 Misdemeanor ☐ 4 Traffic Misdemeanor ☐ 5 Ordinance ☐ 6 Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
MARLOWE, ADRIENNE		W	F	06/09/1959

CHARGES

Charge Description	Charge Description
316.193(1) DUI	

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
100 NW 2ND AVE, BOCA RATON, FL 33432	(561) -	DEFENDANT

Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation
	(56) -	

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 committ the below acts.

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

On the 18 day of May, 2019 at 18:22 (Specifically include facts constituting cause for arrest.)

On May 18, 2019, at approximately 1739 hours, I dispatched to the area of 700 N. Federal Highway in reference to a two-vehicle traffic accident. Officer Gannon (ID#775) was also on scene as a support officer.

Upon my arrival, I made contact with two drivers; W/F, Adrienne Marlowe who was in operation of a black, 2017 Maserati Ghibli bearing Florida tag# HMHU18. I also made contact with W/M, Arthur Lerner who was in operation of a white, 2019 Dodge Journey bearing Florida tag#KCWJ46. It was later determined via my accident investigation that Marlowe was the at-fault driver whom caused the accident. Both parties were given a BRPD case card with the case number along with their vehicle documentations at the conclusion of my accident investigation. See my accident report for further details.

Upon my making contact with Marlowe, I observed signs of impairment. I immediately detected the strong smell of an alcoholic beverage emanating from Marlowe`s person. While speaking to Marlowe, she was slurring her words and her eyes were glassy and red. Marlowe`s pupil appeared dilated. Additionally, Marlowe`s face was red and flushed. Marlowe movements were extremely slow and deliberate. When she exited her vehicle, she was uneasy on her feet and I informed her several times to be careful as I did not want to her to stumble. Marlowe also stumbled into the door frame of her vehicle when she stood up to exit her vehicle.

It should be noted that Officer Gannon asked Marlowe for the vehicular insurance card and she provided him with her health insurance card two times before finally providing him with the vehicular insurance card.

I asked Marlowe to exit the vehicle at which time I provided and informed her of a citation (A8EV1RE) she received resulting from the vehicle accident, a case card with case number, her registration card, and vehicle insurance card. Once my accident

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

BURKE, ZACHARY D
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)

05/18/2019
DATE

768
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

DEEN, ALYIA (768)
NAME OF OFFICER (PLEASE PRINT)

05/18/2019
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL 0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2019-006998

Charge Type (Check as many as apply): ☐ 1 Felony ☐ 2 Traffic Felony ☒ 3 Misdemeanor ☐ 4 Traffic Misdemeanor ☐ 5 Ordinance ☐ 6 Other

Special Notes

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
MARLOWE, ADRIENNE		W	F	06/09/1959

PROBABLE CAUSE STATEMENT

investigation was complete, I read Marlowe her Constitutional Warnings from an agency issued Miranda Card.

I asked Marlowe where she was coming from and she stated from her residence and she stated that she was going to pick up her dog from the grooming salon. I asked Marlowe if she had consumed any alcoholic beverages and she stated that she did not consume any alcohol.

I asked Marlowe to perform several field sobriety tasks to dispel my alarm that she was impaired. Marlowe stated that she did not want to perform field sobriety tasks. I asked Marlowe once more if she would perform several field sobriety tasks to dispel my alarm that she was impaired and also asked her if she understood my question. She stated that she understood my question and stated again that she did not want to perform field sobriety tasks to dispel my alarm that she was impaired.

I informed Marlowe that when I made contact with her I smelled alcohol on her breath and observed that her eyes were glossy and red. I then informed her that my decision would be based on my observations of her and asked her again if she wanted to perform field sobriety tasks to dispel my alarm that she was impaired. Marlowe stated that she did not want to perform the field sobriety tasks.

On May 18, 2019, at 1822 hours, Adrienne Marlowe was placed under arrest for DUI pursuant to F.S.S 316.193(1). She was given a court date of Monday June 17, 2019 at 0830 hours at the Delray Beach courthouse. She was subsequently transported to BRPD booking facility in marked BRPD unit (345). Officer Renteria (ID#800) was inside the holding facility for the Intoxilyzer 8000 testing. I asked Marlowe if she would submit to a lawful test of her breath for the purpose of determining its alcohol content. She stated that she would submit.

At 1904 hours, she provided a breath sample of 0.277. There was then a purge fail on the Intoxilyzer 8000 machine. Marlowe subsequently provided the following breath results: 0.279 at 1910 hours, 0.250 at 1914 hours, and 0.255 at 1917 hours.

Marlowe was transported to Palm Beach County Jail. Her vehicle was inventoried by Officer Gannon (ID#775) and towed by Westway Towing. It should be noted that Arthur Lerner observed/witnessed Marlowe in control of her vehicle. Lerner completed a sworn written statement which was submitted into BRPD evidence.

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

BURKE, ZACHARY D
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F S S 117 10)

05/18/2019
DATE

768
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

DEEN, ALYIA (768)
NAME OF OFFICER (PLEASE PRINT)

05/18/2019
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: BOCA RATON PD
Instrument Serial Number: 80-006622 Software: 8100.27
Date of Test: 05/18/2019

Date of Last Agency Inspection: 04/19/2019
Observation Period Began: 18:35
Subject's Name: ADRIENNE MARLOWE DOB: 06/09/1959 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	19:08
Air Blank	0.000	19:08
Control Test	0.075	19:08
Air Blank	0.000	19:09
Subject Sample #1	0.279	19:10
Air Blank	0.000	19:11
Air Blank	0.000	19:13
Subject Sample #2	0.250	19:14
Air Blank	0.000	19:14
Air Blank	0.000	19:16
Subject Sample #3	0.255	19:17
Air Blank	0.000	19:18
Control Test	0.076	19:18
Air Blank	0.000	19:18
Diagnostics Check	OK	19:18

Cylinder Lot: 13518080A5
Exp: 08/05/2020

State of Florida, County of Palm Beach,

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

I BARTOLO SEUTERIA, 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: 5-18-19
Signature

Sworn to (or affirmed) before me this 18th day of May, 2019

X _____ X A. Deen
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.

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: BOCA RATON PD
Instrument Serial Number: 80-006622 Software: 8100.27
Date of Test: 05/18/2019

Date of Last Agency Inspection: 04/19/2019
Observation Period Began: 18:35
Subject's Name: ADRIENNE MARLOWE DOB: 06/09/1959 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	19:00
Air Blank	0.000	19:01
Control Test	0.079	19:01
Air Blank	0.000	19:02
Subject Sample #1	0.277	19:04
Air Blank	PUP*	19:05
Air Blank	0.000	19:06

*Purge Fail

Cylinder Lot: 13518080A5
Exp: 08/05/2020

State of Florida, County of Palm Beach,

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

I BIANCA RENTERIA, 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: 5-18-19
Signature

Sworn to (or affirmed) before me this 18th day of May, 2019

_____ A. Deen
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

2019006998
obs. 1835
10-15 1822

DUI INFLUENCE REPORT

BOCA RATON POLICE SERVICES DEPARTMENT
100 NW 2nd Avenue
Boca Raton, FL 33432

Revised: July 9, 2018

ARRESTING OFFICER: Ofc. Deen

Name: Ofc. Gannon Phone # _____ Work # _____

Address: _____

Can testify to: Roadsides

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

-END OF PART ONE-

[redacted]

BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT – PART II

To be filled out at testing facility

Agency Case # 2019006998

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is Saturday (day), May (month), 18 (date), 2019 (year).

B. The time is now approximately 659 AM/(PM)

C. The following is in reference to case number 2019006998.

D. Present at this time is ofc. Deen of the Boca Raton Police Department. (Officer's Name)

E. Officer Deen, have you arrested ADRIENNE MARLOWE in violation of Florida State Statute 316.193? (Defendant's name)

F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida? yes

G. Mr./(Mrs.)/Ms. Marlowe, I am required to inform you these proceedings are being video recorded.

Operator Note: *Video record breath request, breath sample, and interview.*

II. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.

Note: Read only the paragraph applicable to the type of test you are requesting.

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

B. 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.

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

IMPLIED CONSENT WARNINGS

Note: Read only if the subject does not comply with your request.

I am Ofc. Deen of the BRPD.

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 Signature: _____

Note: Also read for CDL holders:

IN ADDITION, your refusal to submit will result in the loss of your commercial privileges for one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from operating a commercial motor vehicle.

Note: After reading the implied consent warning, the arresting officer must request a breath sample again.

(IF REFUSAL THEN)

At this time Mr./Mrs./Ms. _____ has refused to submit to a breath test.

The date is _____ (month), _____ (day), _____ (year), and the time is _____ AM/PM.

A refusal form will be completed by the arresting officer.

[redacted]

BOCA RATON POLICE SERVICES DEPARTMENT

TESTING FACILITY TASK REPORT

SUBJECT: Adrienne Marlowe

CASE #: 2019006998 DATE: 5-18-19

BREATH TEST RESULTS

1) TIME .279 / 1910 AM/PM 2) TIME .250 / 1914 AM/PM

3) TIME .255 / 1917 AM/PM 4) TIME — AM/PM

BREATH OPERATOR: Ofc. Renteria

MAINTENANCE TECHNICIAN: Ofc. Van Camp

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slow, slurred

ATTITUDE: Calm

CLOTHING: blk shirt, Multi color pants, wt Sandlas

MEDICAL CONDITION: Asma

OTHER:

COMMENTS: Adrienne has slurred speech, has a strong oder of alcohol emenating from her breath.

Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

(1) You have the right to remain silent and not answer any questions.
(2) Any statement you make must be freely and voluntarily given.
(3) You have a right to the presence and representation 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 and representation of a court appointed lawyer before you make any statement 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 be and will be used against you in a court of law.
(8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: See video Date: _____ Time: _____

QUESTIONS AND ANSWERS

Were you operating a motor vehicle at the time of the accident/stop? yes

Where were you going? Pick up dog from @ salon

What street or highway were you on? Federal

Direction of travel? north

Where did you start driving from? Camino

What city (county) were you stopped in? Camino

What time did you start? unknown AM/PM What time is it now? unknown

What is today's date? 05/16/19 What day of the week is it? Saturday

When did you last eat? Today 11 am What did you eat? eggs

What have you been doing the past three hours prior to this stop/accident? exercises

How much do you weigh? 140 Have you been drinking? yes What were you drinking? wine

How much? bottle Where? home With whom were you drinking? alone

When did you have your first drink? 1300hrs AM/PM When did you stop drinking? 1600 AM/PM

How did you consume your last two drinks? sipping on wine

Are you under the influence of alcohol now? ☐ Yes ☒ No

Can you feel the effects of alcohol? ☐ Yes ☒ No

Have you consumed alcohol since the accident? ☐ Yes ☒ No

Can you feel the effects of alcohol? ☐ Yes ☒ No

Have you consumed alcohol since the accident? ☐ Yes ☒ No How much? _____

What? _____ Where? _____

What line of work are you in? property management

When did you last work? may 17, 2019

Do you have any physical defects or injuries? ☐ Yes ☒ No If yes, explain:

_____

Are you sick or injured? ☐ Yes ☒ No If yes, explain:

_____

Do you limp? ☐ Yes ☒ No Did you get a bump on the head? ☐ Yes ☒ No

Were you in an accident today? yes

Have you taken any drugs or smoked marijuana today? NO

What? _____ When? _____

Have you seen a doctor or dentist today? ☐ Yes ☒ No Who? _____

Are you taking any prescription medications? ☒ Yes ☐ No What? _____ When? 5/18/19 0900

Do you have: Epilepsy? ☐ Yes ☒ No Inner ear trouble? ☐ Yes ☒ No

Glass eye? ☐ Yes ☒ No Ear infection? ☐ Yes ☒ No

False teeth? ☐ Yes ☒ No Diabetes? ☐ Yes ☒ No

Any problems not correctable by glasses or contact lenses? NO

Do you take insulin? ☐ Yes ☒ No If yes, when was your last injection? _____

Have you ever had a driver's license in any other state? New York

I am now ending this video recording. The time is now approximately 1926 AM/PM.

The date is May (month), 18 (day), 2019 (year).

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:	

REVIEW COMPLETED BY

Booking Number: 2019016562	**Date:** 05/19/2019
	Specialist Name/ID: AM/31562