17CT014023

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Juvenile:

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 17-108264

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

Weapon Seized / Type: 1. Yes 2. No

Multiple Clearance Indicator: 1

Location of Arrest (Including Name of Business): 17049 S STATE ROAD 7 DELRAY BEACH FL 33446

Location of Offense (Business Name, Address): 17049 S STATE ROAD 7 DELRAY BEACH FL 33446

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
07/28/2017	2242					

DEFENDANT

Name (Last, First, Middle): POPOV ALEXANDR

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	02/18/1968	509	160	BRO	PEPPER	MED	MED

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description): NONE

Marital Status: M

Religion: ORTHO

Indication of: Alcohol Influence (Y ☒ N ☐ Unk. ☐) Drug Influence (Y ☐ N ☒ Unk. ☐)

Local Address (Street, Apt. Number): 9809 MONTPELLIER DRIVE (City): DELRAY BCH (State): FL (Zip): 33346

Phone: (561) 5069505

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

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

Phone: ( )

Address Source: FL DL

Business Address (Name, Street): 2300 GLADES RD STE 310 W (City): BOCA RATON (State): FL (Zip): 33431

Phone: ( )

Occupation: BUSINESS OWNER

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
(FL) P110000680580	[redacted]		LATIA EUROPE	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 ☐ 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 W/ PROPERTY DAMAGE AND MINOR INJURIES	1	☐Y ☒N	316.193(3)C1	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant I Capias Number	Bond
/	/	/	17-108264		

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 I 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

NOTICE TO APPEAR

Location (Court, Room Number, Address): 3228 GUN CLUB ROAD WEST PALM BEACH FL 33406

Court Date and Time: Month AUGUST Day 24 Year 2017 Time 0830 AM X 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: 07/28/2017

ADMIN

HOLD for other Agency Name:

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Intake Deputy I.D. # Pouch #

Signature of Arresting Officer: X

Name of Arresting Officer (Print): INV E. K. WHITE I.D. #: 7209

Transporting Officer: E. K. WHITE ID #: 7209 Agency: PBSO

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an -X"

PAGE OF

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

PBSO #148 REV. 8/97

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 28 DAY OF JULY - 20 17, AT 2130 AM ✓ PM

SUBJECT: POPOV ALEXANDR CASE NUMBER: 17-108264

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV E. K. WHITE

PERSONAL CONTACT

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

On Friday, July 28, 2017 at approximately 2145 hours, I was dispatched to State Road 7, south of Seven Bridges, Delray Beach (Palm Beach County) Florida to assist Deputy Jacob Frey with a traffic crash that involved a possible drunk driver. While en route to this location deputies on scene advised the crash consisted of several vehicles with one driver being transported to the hospital. Upon my arrival I noticed several emergency vehicles stopped in the southbound lanes of SR 7. I noticed a black vehicle resting in the southbound inside lane facing southwest. The vehicle had severe front end damage. Scattered debris marked the path of the vehicle before it came to final rest. I saw a white vehicle stopped in the grass median with rear end damage. Another vehicle was stopped in bushes on the west shoulder of the roadway. D/S Frey and I met with the driver of a BMW who identified himself as Garen Kalender. He told us he was traveling south in the inside lane on SR 7. As he reached the intersection of Seven Bridges a white Mercedes drove through the intersection and straddled the edge of the grass median. It drove into the path of his vehicle. He slammed on brakes in an effort to avoid colliding with the vehicle. He struck the vehicle on its rear side with the front side of his vehicle. Kalender pulled his vehicle onto the west shoulder of the roadway. He watched the driver of the Mercedes, whom he described as tall with glasses and wearing a button down shirt and blue shorts, stop his vehicle in the roadway. The driver exited his vehicle and walked over to him. They both witnessed an additional crash as a result of the vehicle being left in the roadway. D/S Frey and I met with the driver of the Mercedes who was positively identified as Alexander Popov by his Florida driver license. I noticed he was unsteady while standing. He swayed from side to side. His eyes were glassy and his speech was slurred. I could smell a strong odor of an unknown alcoholic beverage coming from his breath that intensified when he spoke. I told him I was required to inform him of his Constitutional Rights before talking to him. I advised him of his "rights"and asked if he understood them. He told us he did understand his "rights". I asked if he was willing to talk about the crash. He obliged. Popov told us he was driving his vehicle when someone hit him. He said he was leaving Seven Bridges when the crash occurred.

D/S Frey and I began assessing the crash scene. We later determined that there were two crashes. On the first crash we observed scattered debris that was matched the damage from the BMW. The BMW incurred damage to its right front side. This damage lined up with the damage to the Mercedes' left rear side.

We determined after the Mercedes was left on the roadway caused the white vehicle to swerve toward the grass median in an effort to miss colliding with the vehicle left in the roadway. Another vehicle stopped in time to prevent colliding with the parked vehicle. The black vehicle was unable to stop in time and struck that vehicle on its rear side with the front side of it. The collision forced that vehicle off the roadway and into the bush on the west shoulder. The black vehicle continued forward and began to rotate clockwise. It later struck the white vehicle before coming to rest in the roadway.

OBSERVATION OF DRIVER:

I made contact with the driver who was standing near the grass median. I explained that I had completed my assistance with the crash investigation and would now be conducting a criminal investigation for DUI. I explained the indicators of impairment I observed: eyes watery and glassy, speech slurred, mouth dry and cheeks flushed, laboring in maintaining his balance and the strong smell of an unknown alcoholic beverage emanating from his breath that intensified as he spoke: This I explained gave me a suspicion of his alcoholic beverage consumption. He later admitted to drinking. I asked if he would consent to performing Standardized Field Sobriety Evaluations (SFSTs) for the purpose of determining if he was impaired while operating a motor vehicle. He initially consented to performing the SFSTs, but later thought the SFSTs to be silly and did not want to cooperate further. I gave the Taylor Warnings and explained the evidence that I already had against him (I.E. all the previous mentioned indicators) would be strong basis for him being arrested. He later said he would cooperate with the SFSTs. Prior to administering the SFSTs, I asked if he had been seen by the paramedics regarding the crash. I also asked if he had any previous physical problems with his body that would inhibit him from performing light physical movements. I also asked if he was on medication. The defendant conveyed he was fine and had no physical problems with his body, nor was he on medication. I escorted him to a smooth and level surface that was free from obstructions and debris. The area was well lighted by the lights from my patrol car. I asked him to identify with the orange edge line on the roadway. He successfully did so by placing his left foot on it when asked to do so. The following SFSTs were explained, demonstrated and acknowledged by him prior to his performance: HGN, The Walk and Turn, The One Leg Stand and The Finger to Nose. His deficiencies were noted on another form on this packet.

DRIVER'S STATEMENTS:

I HAVE BEEN DRINKING

ODORS:

STRONG ODOE OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM SUBJECT'S BREATH.

GENERAL OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: LETHARGIC CONFUSED

CLOTHING: LIGTH COLORED BUTTON DOWN SHIRT/ BLUE PANTS BROWN FLIP FLOPS

MEDICAL/OTHER: NONE

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV E. K. WHITE
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 28 day of JULY 20 17 by INV E. K. WHITE

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

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

SCANNED
JUL 31 2017

SUBJECT: POPOV ALEXANDR CASE NUMBER 17-108264

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:

Subject was asked to stand with their feet together and place their hands by their side. They were asked to focus on the stimulus and follow it with their eyes. Lastly they were told not to move their head to assist in following the stimulus with their eyes. During this task both of the defendants pupils were equal in size and they tracked equally. Both of his eyes lacked a smooth pursuit. I saw distinct and sustained Nystagmus at maximum deviation. I also saw an onset of Nystagmus prior to 45 degrees. He swayed while performing this task and often turned his head while tracking the stimulus.

WALK & TURN:

The def was placed in the instructional stance for the Walk & Turn and given instructions. The def stated that they understood my instructions. Subject was unable to maintain his balance while placed in the instructional position. He swayed and hopped before ultimately abandoning the position all together. During this task he did not touch heel to toe. He was unable to maintain his balance while walking. He stepped off the line. He took an incorrect number of steps before turning improperly.

ONE LEG STAND:

The def was placed in the instructional stance for the One Leg Stand and given instructions. The def stated that they understood my instructions. Subject was unable to maintain his balance while performing this task. He hopped and began traveling to his left. He dropped his foot on the roadway 3 times. He was unable to complete this task due to a concern for his safety.

FINGER TO NOSE:

The def was placed in the instructional stance for the Finger to Nose and given instructions. The def stated that they understood my instructions. Subject swayed while performing this task. He failed to touch the tip of his finger to the tip of his nose 4 out of 6 times. On his failed attempts I watched him touch underneath, the side and bridge of his nose. He flinched the wrong hand on one occasion.

ROMBERG ALPHABET:

BREATH TEST RESULTS: refused

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV E. K. WHITE
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 28 day of JULY 2017 by INV E. K. WHITE

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

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

PALM BEACH COUNTY SHERIFF'S OFFICE – **SWORN STATEMENT**

Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.

☒ WITNESS ☐ VICTIM ☐ OTHER

CASE #: 17-108264	ZONE:	SUSPECT:	DATE & TIME OF ORIGINAL EVENT/OFFENSE:
EVENT TYPE:	DEPUTY:		ID#:

COMPLETE EVERYTHING BELOW – PRINT LEGIBLY

LAST NAME:	FIRST NAME:	MIDDLE INITIAL:	RACE:	SEX:

DATE OF BIRTH: (MM/DD/YYYY)	YOUR HEIGHT:	YOUR WEIGHT:	YOUR HAIR COLOR:	YOUR EYE COLOR:

YOUR HOME ADDRESS: ☐ CHECK IF HOMELESS	CITY:	STATE:	ZIP:

YOUR WORK NAME & ADDRESS: ☐ CHECK IF UNEMPLOYED OR RETIRED	CITY:	STATE:	ZIP:

WORK PHONE: ☐ CHECK IF NONE ( )	CELL PHONE: ☐ CHECK IF NONE ( )	HOME PHONE: ☐ CHECK IF NONE ( )	EMAIL: ☐ CHECK IF NONE

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL – PRINT LEGIBLY

I — YOUR NAME: I Grover Kalenda — DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...

The man in the SUV was hit hard and went into the bushes, came out with a bloody face + neck, called paramedics.

READ AND SIGN

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:

YOUR SIGNATURE: X

☐ DEPUTY SHERIFF ☐ NOTARY PUBLIC FSS: 117.10

SWORN TO AND SUBSCRIBED BEFORE ME TODAY:

DATE: 7/28/17 TIME: 2300

SIGNATURE: _____ ID: 709

*IF YOU **DO NOT WISH TO PROSECUTE**, COMPLETE THE ABOVE STATEMENT, READ THIS DISCLAIMER AND INITIAL BELOW:* I AM OF LEGAL AGE AND I AM THE REPORTED VICTIM OF A CRIME UNDER FLORIDA LAW. I HEREBY STATE THAT I **WILL NOT** COOPERATE ANY FURTHER WITH THE INVESTIGATION OF THE ALLEGED CRIME. I FURTHER RELEASE THE PALM BEACH COUNTY SHERIFF'S OFFICE OF ANY PRESENT OR FUTURE RESPONSIBILITY AS TO MY CASE. I ACKNOWLEDGE THAT I UNDERSTAND MY RIGHTS AS A CRIME VICTIM, **PARTICULARLY REGARDING VICTIM COMPENSATION ELIGIBILITY**, WHICH INCLUDES SUCH BENEFITS AS REIMBURSEMENT FOR: DISABILITY; LOST WAGES; LOSS OF SUPPORT; MEDICAL, DENTAL, MENTAL HEALTH COUNSELING AND FUNERAL EXPENSES. I AM AWARE THAT BY GIVING UP THESE RIGHTS FOR MY FAMILY AND MYSELF BY INITIALLING BELOW. I AM TAKING THIS POSITION OF MY OWN FREE WILL KNOWING THAT THE CASE CAN ONLY BE FURTHER INVESTIGATED AND PROSECUTED WITH MY COOPERATION.

☐ DO NOT WISH TO PROSECUTE (INITIAL _____)

(PROSECUTION WAIVER NOT TO BE USED FOR CASES INVOLVING DOMESTIC OR DATING VIOLENCE PER G.O. 508.00)

WHITE **- RECORDS COPY** ***CANARY*** **- STATE ATTORNEY COPY** ***PINK*** **- OFFICER'S COPY** ***GOLD*** **- WITNESS / VICTIM COPY**

PALM BEACH COUNTY SHERIFF'S OFFICE – **SWORN STATEMENT**

Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.

☒ WITNESS ☐ VICTIM ☐ OTHER

CASE #: 17-108264	ZONE:	SUSPECT:	DATE & TIME OF ORIGINAL EVENT/OFFENSE:
EVENT TYPE:	DEPUTY:		ID#:

COMPLETE EVERYTHING BELOW – PRINT LEGIBLY

LAST NAME:	FIRST NAME:	MIDDLE INITIAL:	RACE:	SEX:

DATE OF BIRTH: (MM/DD/YYYY)	YOUR HEIGHT:	YOUR WEIGHT:	YOUR HAIR COLOR:	YOUR EYE COLOR:

YOUR HOME ADDRESS: ☐ CHECK IF HOMELESS	CITY:	STATE:	ZIP:

YOUR WORK NAME & ADDRESS: ☐ CHECK IF UNEMPLOYED OR RETIRED	CITY:	STATE:	ZIP:

WORK PHONE: ☐ CHECK IF NONE ( )	CELL PHONE: ☐ CHECK IF NONE ( )	HOME PHONE: ☐ CHECK IF NONE ( )	EMAIL: ☐ CHECK IF NONE

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL – PRINT LEGIBLY

I — YOUR NAME: I Gaven Kalender — DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...

and pulled over on the side of the road. Due to a truck/suv tailgating, he didn't see the issue at and slammed the breaks as well. The Grey Charger had slammed the breaks to avoid hitting the SUV but, ended up hitting it as well, but it wasn't his fault. If it was it due to the SUV tailgating and the Mercedes parked in the middle of the road w/o hazard lights, the second crash wouldn't have occurred. I witnessed the second one while I was on the phone with 911. The man driving the mercedes turned on his hazard lights after the second accident.

PAGE 2 OF 3

READ AND SIGN

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:

YOUR SIGNATURE: X

☐ DEPUTY SHERIFF ☐ NOTARY PUBLIC FSS: 117.10

SWORN TO AND SUBSCRIBED BEFORE ME TODAY:

DATE: 7/28/17 TIME: 2200

SIGNATURE: ID: 7209

*IF YOU **DO NOT WISH TO PROSECUTE**, COMPLETE THE ABOVE STATEMENT, READ THIS DISCLAIMER AND INITIAL BELOW.* I AM OF LEGAL AGE AND I AM THE REPORTED VICTIM OF A CRIME UNDER FLORIDA LAW. I HEREBY STATE THAT I **WILL NOT** COOPERATE ANY FURTHER WITH THE INVESTIGATION OF THE ALLEGED CRIME. I FURTHER RELEASE THE PALM BEACH COUNTY SHERIFF'S OFFICE OF ANY PRESENT OR FUTURE RESPONSIBILITY AS TO MY CASE. I ACKNOWLEDGE THAT I UNDERSTAND MY RIGHTS AS A CRIME VICTIM, **PARTICULARLY REGARDING VICTIM COMPENSATION ELIGIBILITY**, WHICH INCLUDES SUCH BENEFITS AS REIMBURSEMENT FOR: DISABILITY; LOST WAGES; LOSS OF SUPPORT; MEDICAL, DENTAL, MENTAL HEALTH COUNSELING AND FUNERAL EXPENSES. I AM AWARE I MAY BE GIVING UP THESE RIGHTS FOR MY FAMILY AND MYSELF BY INITIALLING BELOW. I AM TAKING THIS POSITION OF MY OWN FREE WILL KNOWING THAT THE CASE CAN ONLY BE FURTHER INVESTIGATED AND PROSECUTED WITH MY COOPERATION.

☐ DO NOT WISH TO PROSECUTE (INITIAL _____)

(PROSECUTION WAIVER NOT TO BE USED FOR CASES INVOLVING DOMESTIC OR DATING VIOLENCE PER G.O. 508.00)

WHITE - RECORDS COPY ***CANARY*** - STATE ATTORNEY COPY ***PINK*** - OFFICER'S COPY ***GOLD*** - WITNESS / VICTIM COPY

PBSO #0134 REV. 12/11

PALM BEACH COUNTY SHERIFF'S OFFICE – **SWORN STATEMENT**

7 Bridges

Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.

☒ WITNESS ☐ VICTIM ☐ OTHER

CASE #:	ZONE:	SUSPECT:	DATE & TIME OF ORIGINAL EVENT/OFFENSE:
17-108264	4-32		7/28/17 2130

EVENT TYPE:	DEPUTY:	ID#:
DUI/CRNSH	WHITE	7209

COMPLETE EVERYTHING BELOW – PRINT LEGIBLY

LAST NAME:	FIRST NAME:	MIDDLE INITIAL:	RACE:	SEX:
Kalender	Garen		white	M

DATE OF BIRTH: (MM/DD/YYYY)	YOUR HEIGHT:	YOUR WEIGHT:	YOUR HAIR COLOR:	YOUR EYE COLOR:
9/5/00	5'09	185	BRO	BRO

YOUR HOME ADDRESS: ☐ CHECK IF HOMELESS	CITY:	STATE:	ZIP:
15618 Messina Isle Court	DelRay Bch	FL	33446
YOUR WORK NAME & ADDRESS: ☐ CHECK IF UNEMPLOYED OR RETIRED	**CITY:**	**STATE:**	**ZIP:**

WORK PHONE: ☐ CHECK IF NONE	CELL PHONE: ☐ CHECK IF NONE	HOME PHONE: ☐ CHECK IF NONE	EMAIL: ☐ CHECK IF NONE
( )	(561) 252 6935	(561) 704 5626	garenkalender@gmail.com

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL – PRINT LEGIBLY

I **YOUR NAME:** I Garen Kalender

DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...

the
[redacted] was driving a mercedes, tall with glasses, wearing a button down and shorts came full speed end of the 7 Bridges on 441. He went on the edge of the grass and the idled in the middle of the two lanes and slammed the breaks, I hit the breaks as hard as possible so I don't hid the car, but at that point it was too late and I ended up rear ending the mercedes. I pulled over to the side of the road, and the man in the mercedes parked in the middle of the road in the left lane with no hazard lights. That initiated the second accident between 3 vehicles. There was a silver sedan that slammed the breaks

PAGE 1 OF 3

READ AND SIGN

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:

YOUR SIGNATURE: X [signature]

☐ DEPUTY SHERIFF ☐ NOTARY PUBLIC FSS: 117.10

SWORN TO AND SUBSCRIBED BEFORE ME TODAY:

DATE: 7/28/17 TIME: 2300

SIGNATURE: [signature] ID: 7209

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☐ DO NOT WISH TO PROSECUTE (INITIAL: _____)

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WHITE - RECORDS COPY *CANARY* - STATE ATTORNEY COPY *PINK* - OFFICER'S COPY *GOLD* - WITNESS / VICTIM COPY