

048306a

16010219m

1029

ARREST / NOTICE TO APPEAR

A D M I N I S T R A T I O N	OBTS Number		Agency ORI Number 0500800		Agency Name West Palm Beach Police Department		Agency Report Number (N.T.A.'s only) 9, 4 2016-0021271		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias 1		JUVENILE								
	Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type		Multiple Clearance Indicator														
D E F E N D A N T	Location of Arrest (Including Name of Business) N ROSEMARY / BANYAN BLVD						Location of Offense (Business Name, Address) 199 N ROSEMARY AVE/BANYAN BLVD, WEST PALM BEACH,												
	Date of Arrest 11/26/2016	Time of Arrest 05:14	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle												
D E F E N D A N T	Name (Last, First, Middle) MILLER, AMANDA						Alias (Name, DOB, Soc. Sec. #, Etc.) Alias:												
	Race W - White B - Black O - Oriental/Asian W	Sex F	Date of Birth 06/07/1990	Height 5'05	Weight 120	Eye Color BROWN	Hair Color BROWN	Complexion LIGHT	Build Small										
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status S	Religion NONE	Indication of Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>										
	Local Address (Street, Apt. Number) (City) (State) (Zip) 1074 SW 13TH ST, BOCA RATON, FL 33432						Phone (561) 503-7368		Residence Type: 1. City 3. Florida 2. County 4. Out of State 1										
	Permanent Address (Street, Apt. Number) (City) (State) (Zip) 1074 SW 13TH ST, BOCA RATON, FL 33432						Phone (561) 503-7368		Address Source VERBAL										
	Business Address (Name, Street) (City) (State) (Zip)						Phone		Occupation Registrant										
	D/L Number, State		Soc. Sec. Number		INS Number		Place of Birth (City, State) SOUTH KOREA, Korea		Citizenship US										
	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								
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"/> Other: _____		Name (Last, First, Middle)						Residence Phone											
<input type="checkbox"/> Legal Custodian		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															
The above address was 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's Office (Phone 355-2526) informed of any change of address.		School Attended		Grade															
<input type="checkbox"/> Yes, by: _____ <input type="checkbox"/> No:		Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property													
Drug Activity N. N/A S. Sell B. Buy P. Possess		R. Smuggle D. Deliver E. Use		K. Disperse/ 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 Description DRIVING WHILE UNDER INFLUENCE - Property Injuries		State Violation Number 316.1930 3C1		Violation of ORD #															
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number		Bond											
	N	/	2016-0021271	1	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	625													
Charge Description		State Violation Number		Violation of ORD #															
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number		Bond											
					<input type="checkbox"/> Y <input type="checkbox"/> N														
Charge Description		State Violation Number		Violation of ORD #															
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number		Bond											
					<input type="checkbox"/> Y <input type="checkbox"/> N														
Health / Apparent Physical Condition of Defendant		Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries Explain:																	
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail		PROPERTY - Received By		Released By		Released To													
<input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health		Date Transported		Time Transported		Other													
Transported By		Date Transported		Time Transported		Other													
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.		Location (Court, Room) Criminal Justice CRIMINAL JUSTICE COMPLEX Court Date and Time 12/29/2016 08:30:00 3228 GUN CLUB ROAD																	
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.		No Photo Available																	
Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed																	
HOLD for Other Agency		Signature of Arresting Officer		Name Verification (Printed by Arresting Officer)		SCANNED													
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Name of Arresting Officer (Print) DONDE, JAY		I.D. # 01530		(PRINT) NOV 28 2016		PAGE 1 OF 1											
Agency		Pouch #		Signature of Arresting Officer THOMAS L BOB WRBPO		I.D. # 16010219		Agency West Palm Beach											
Witness here if subject signed with an "X".																			

MAR 20 2017

NOV 26 AM 6:37

DUI PROBABLE CAUSE AFFIDAVIT

On the 26th Day of November at 0119 A.M. P.M.
Subject: Miller, Amanda Marie Case Number: 16-21271
Agency: West Palm Beach Police Department Arresting Officer: Donde 1530

Personal Contact

Driving Pattern

Actual physical control (physical evidence putting the driver behind the wheel)

Subject was driving south on Rosemary crossing Banyan Blvd in her white 2016 Kia FI tag GXDE17. She disobeyed the red light and entered the intersection. She was impacted by a marked patrol vehicle traveling east on Banyan at Rosemary. The passenger in the subjects car Carla Ragnott confirmed the subject drove through the red light "not paying attention". Soly Borno was also traveling east bound on Banyan Blvd behind the marked Police car. He watched the subjects car come across the intersection as the patrol car enter the intersection.

Observation of Driver

"Im concerned about my friend" (who was ok), "I'm nervous"

Drivers Statements:

During crash investigation my head is fucking pounding 30 plus minutes after crash. Was gathering items from car prior road side. Mentioned she was nervous and "adrenalin was going".

Odors:

clear distinct odor of unknown alcoholic beverage as she spoke

General Observations

Speech: clear slow slurred at times

Attitude: cooperative

Clothing: black pant blue top platform heels clothing dry

Medical Problems/Medications: none none

Other:

DUI PROBABLE CAUSE AFFIDAVIT

Subject: Miller, Amanda Marie Case Number: 16-21271

Roadside Tasks

Horizontal Gaze Nystagmus

- | | |
|--|---|
| <input checked="" type="checkbox"/> Left Eye Does Not Follow Smoothly | <input checked="" type="checkbox"/> Right Eye Does Not Follow Smoothly |
| <input checked="" type="checkbox"/> Left Eye Jerks at 45 Degree Angle or Less | <input checked="" type="checkbox"/> Right Eye Jerks at 45 Degree Angle or Less |
| <input checked="" type="checkbox"/> Distinct Jerking Left Eye at Maximum Deviation | <input checked="" type="checkbox"/> Distinct Jerking Right Eye at Maximum Deviation |

– light brown with contacts. Upon starting this task, I showed her how I wanted her to follow the light. The driver did follow the pen with her eyes. She slightly turned her head as she followed the pen. I observed the driver swaying slightly side to side during the exercise.

Walk and Turn Task

– I instructed the driver to stand with her left on the line with her right foot directly in front of the left touching heel to toe with her hands down by his sides. The line white chalk line. Attempted first on a double yellow line though she was uncomfortable on it. * also remove platform type heels her request*. The driver was told to remain in that position until told to begin the task. I explained and demonstrated the exercise and she said she understood the instructions. Reexplain with chalk line. stepped out of stance during instruction phase had to explain her first step was one she appeared to be confused. Upon starting arms were more than 6 inches away from body. Forward steps were as instructed This assisted with the driver balance. Driver question how to make the turn told As Directed. Turn was more of a pivot. First step on return lost balance used arms

One Leg Stand

I had the driver stand with her feet together and arms/hands down at her sides. I explained and demonstrated the exercise and she stated she understood the instructions. When told to begin, the driver lifted her left foot off the ground. Was more than 6 inches foot was pointed up. Driver had a slight sway side to side 1-2 inches.

Finger To Nose

– I had the driver stand with her feet together, arms/hands down at her sides and index fingers pointed out. I explained and demonstrated the exercise and she stated she understood the instructions. I asked the driver to tilt her head back and close her eyes. Driver had eye lid tremors and appeared to not close eyes completely during task. On the first left touched tip, first right the driver touched the side of her nose. The driver had her head slightly forward and eye lid tremors to the point her eyes were not completely closed on second left touched tip as well as right. On the third right driver moved left arm approx 3-5 inches. then brought right arm per task touching tip third left was as instructed. I observed the driver swaying side to side.

Romberg Alphabet

I requested the driver to stand with her feet together arms by her side I explained I would like her to estimate the passage of 30 seconds. I explained she needed her head back an her eyes closed. Once she finished she needed to tilt her forward and open eyes saying done. Driver had a slight sway side to side Upon her stop I was 4 second over 30 by my count and the videos. The driver advise she counted slow 1,2,3,4.

Breath Results from Instrument

1st Result

.112

2nd Result

.101

3rd Result

If Applicable

State of Florida

County of Palm Beach

The Following Instrument was notarized or sworn before me this



Personally Known



Produced Identification



Notary Public

Officer

Officer

Notary / Clerk of Courts / Officer (FSS: 117.10)

Signature of Arresting Officer

West Palm Beach Police Department

600 Banyan Blvd
West Palm Beach, Florida 33401
(561)822-1900

Witness List:

Arresting Officer: Donde 1530 **Case Number:** 16-21271
Address: (West Palm Beach Police Department) 600 Banyan Blvd, West Palm Beach, FL 33401
Phone Number Home: _____ **Cell:** _____ **Work:** (561)822-1900
Can Testify to: _____

Witness Name: Ofc Ryan Secord **Case Number:** 16-21271
Address: West Palm Beach Police Department - 600 Banyan Blvd, West Palm Beach, FL 33401
Phone Number Home: _____ **Cell:** _____ **Work:** 561-822-1869
Can Testify to: Agency Intox Inspector

Witness Name: Anjos **Case Number:** 16-21271
Address: West Palm Beach Police Department - 600 Banyan Blvd, West Palm Beach, FL 33401
Phone Number Home: 56 822 1900 **Cell:** _____ **Work:** _____
Can Testify to: witness

Witness Name: Carla Ragnott **Case Number:** 16-21271
Address: 2217 NE 3RD CT BOYNTON BEACH FL 33435
Phone Number Home: 803 834 2074 **Cell:** _____ **Work:** _____
Can Testify to: passenger

Witness Name: Borno, Soly **Case Number:** 16-21271
Address: 318 HURON PLACE WEST PALM BEACH FL 33409
Phone Number Home: 561 612 1921 **Cell:** _____ **Work:** _____
Can Testify to: witness

Witness Name: _____ **Case Number:** 16-21271
Address: _____
Phone Number Home: _____ **Cell:** _____ **Work:** _____
Can Testify to: _____

VI. Information or evidence to be supplied later:

Item(s): _____
Date will be furnished: _____
Why not supplied at filing: _____

Note: It is the responsibility of the officer filing the case to insure that the foregoing list is complete and correct

Signature of the Filing Officer

Date

11/26/18

DEFENDANT: Miller, Amanda Marie

CASE NUMBER: 16-21271

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 OPERATION A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT: Yes sir

WHERE WERE YOU GOING? Home

WHAT STREET OR HIGHWAY WERE YOU ON? to be honest head throbbing

DIRECTION OF TRAVEL? south WHERE DID YOU START FROM? near Clematis

WHAT TIME DID YOU START? no sir WHAT TIME IS IT NOW? no sir guess early morning sat

WHAT IS TODAY'S DATE? Saturday 26 nov 2016 WHAT DAY OF THE WEEK IS IT? Saturday

WHAT COUNTY AND CITY ARE YOU IN NOW? Palm Beach County West Palm beach

WHEN DID YOU LAST EAT? Fri evening 6-7 WHAT DID YOU EAT? Rice Ham

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE(3) HOURS? been with you (me)

HOW MUCH DO YOU WEIGHT? 125 HAVE YOU BEEN DRINKING? YES WHAT? SOMETHING

HOW MUCH? unsure WHERE? WPB WITH WHOM? Calra passenger

WHEN DID YOU HAVE YOUR FIRST DRINK? before mid AND YOUR LAST DRINK? before mid

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? no full recollection

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? no sir

ARE YOU UNDER THE INFLUENCE? do not believe so

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? no HOW MUCH? na

WHAT? na WHERE? na WHEN? na

WHAT LINE OF WORK ARE YOU IN? registration

WHEN DID YOU LAST WORK? Wednesday

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? see breath WHAT? see breath test report

ARE YOU SICK OR INJURED? yes WHAT'S WRONG? headache

DO YOU LIMP? "umm" uncomfortable to answer DID YOU RECEIVE A BUMP ON YOUR HEAD RECENTLY? yes

WERE YOU IN AN ACCIDENT TODAY? yes

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? no WHEN? na

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? no WHO? na WHEN? na

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? no WHAT? na WHEN? na

DO YOU HAVE:
EPILEPSY? no

GLASS EYE? no

FALSE TEETH? no

EAR INFECTION? don't believe

INNER EAR TROUBLE? allergies

DIABETES? no

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTABLE BY GLASSES? no

DO YOU TAKE INSULIN? no IF SO, WHEN WAS YOUR LAST INJECTION? na

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? New York WHERE? na

INTERVIEWER: Donde 1530

SUBJECT: Miller, Amanda Marie

CASE NUMBER: 16-21271

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

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

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

OR

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

OR

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

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

I am Donde of the West Palm Beach Police Department. 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.

SUBJECTS SIGNATURE: _____ not read

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 can not 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.

SUBJECTS SIGNATURE: _____ Read on camera



**West Palm Beach Police Department
Breath Testing Facility Report**



Defendant: Miller, Amanda Marie Case #: 16-21271
 Arresting Officer: Donde 1530 Date: 11/26/16

Breath Test Results: .112 g/210L _____ Time .101 g/210L _____ Time
 _____ g/210L _____ Time _____ g/210L _____ Time
Note: Times are in Military Time

Breath Operator: Donde
 Maintenance Technician Ofc. R. Secord #1639

Testing Officer Observations:

Speech: clear
 Attitude: cooperative
 Clothing: black pants and blue top
 Medical Conditions: none
 Medications: none
 Other: n/a

Arrival Time at Facility/ Time Twenty (20) Minute Observation Started: 0255 / 0330

Comments:

waited in car while typing report was present entire time

During questions drinking said yes unknown what " assume" it was alcohol. Some questions about drinking complained of head throbbing and focus was off.

Could not answer time of drinking

Evasive about physical defects and or injuries. "They should not effect walk talk drive"

Has one leg shorter than the other right leg shorter. Was wearing platform heels and walked well

DEFENDANT: Miller, Amanda Marie

CASE NUMBER: 16-21271

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ARE YOU UNDER THE INFLUENCE? do not believe so

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? no HOW MUCH? na

WHAT? na WHERE? na WHEN? na

WHAT LINE OF WORK ARE YOU IN? registration

WHEN DID YOU LAST WORK? Wednesday

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? see breath WHAT? see breath test report

ARE YOU SICK OR INJURED? yes WHAT'S WRONG? headache

DO YOU LIMP? "umm" uncomfortable to answer DID YOU RECEIVE A BUMP ON YOUR HEAD RECENTLY? yes

WERE YOU IN AN ACCIDENT TODAY? yes

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? no WHEN? na

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? no WHO? na WHEN? na

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? no WHAT? na WHEN? na

DO YOU HAVE:

EPILEPSY? no

GLASS EYE? no

FALSE TEETH? no

EAR INFECTION? don't believe

INNER EAR TROUBLE? allergies

DIABETES? no

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTABLE BY GLASSES? no

DO YOU TAKE INSULIN? no IF SO, WHEN WAS YOUR LAST INJECTION? na

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? New York WHERE? na

INTERVIEWER: Donde 1530

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: WEST PALM BEACH PD
Instrument Serial Number: 80-001235 Software: 8100.27
Date of Test: 11/26/2016

Date of Last Agency Inspection: 11/25/2016
Observation Period Began: 03:30
Subject's Name: AMANDA M MILLER

DOB: 06/07/1990 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	04:13
	Air Blank	0.000	04:14
	Control Test	0.077	04:14
	Air Blank	0.000	04:15
	Subject Sample #1	0.112	04:16
	Air Blank	0.000	04:17
	Air Blank	0.000	04:19
	Subject Sample #2	0.101	04:21
	Air Blank	0.000	04:21
	Control Test	0.078	04:21
	Air Blank	0.000	04:22
	Diagnostics Check	OK	04:22

Cylinder Lot: 152169
Exp: 10/30/2018

State of Florida, County of RB

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

I JAY DONDE, 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: [Signature] Date: 11/26/16
Signature

Sworn to (or affirmed) before me this 26 day of Nov, 2016

[Signature] 1528 Signature of Notary Public-State of Florida
CHARLES BRIDEAU 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.