JKA 0441859   PCN 407

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number:

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 17064685

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): 2 | Multiple Clearance Indicator: 01

Location of Arrest (Including Name of Business): 150 N Military Trail, West Palm Beach FL 33415

Location of Offense (Business Name, Address): 106 N Military Trail, West Palm Beach FL 33415

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
04/14/2017	2014					Towed by JD Towing

DEFENDANT

Name (Last, First, Middle): Walker, Amy Michelle

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	F	08/14/1980	5'7"	115	Blue	Blonde	Fair	Small

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description): 9 tattoos on body

Marital Status: Single | Religion: NONE

Indication of: Alcohol Influence (Y / N / Unk.): ☐ ☐ ☐ | Drug Influence: ☑ Y ☐ N ☐ Unk.

Local Address (Street, Apt. Number) (City) (State) (Zip): 9 Elton Place, Boyton Beach FL 33426 | Phone: (904) 4004258

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

Permanent Address (Street, Apt. Number) (City) (State) (Zip): Same as above | Phone: ( )

Address Source: FL DL

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

Occupation: Unemployed

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
W426013807940, FL	[redacted]		Gainesville, Florida	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: 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 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 Crash with property damage	1	☐Y ☑N	316.193(3)(c)(C)1	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		17064685		

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 / 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): Criminal Justice Complex: 3228 Gun Club Road, West Palm Beach FL 33406

Court Date and Time: Month May Day 11 Year 2017 Time 0830 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) | Date Signed

ADMIN

HOLD for other Agency Name: | Signature of Arresting Officer: x [signature] 8368 | Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other: | Name of Arresting Officer (Print): Inv. Christopher Ficarra 8368 | I.D. #: 8368

Intake Deputy: Sparn | I.D. #: 8101 | Pouch #: | Transporting Officer: Inv. Christopher Ficarra 8368 | ID #: | Agency: PBSO

Witness here if subject signed with an "X" | PAGE 1 OF 1

SCANNED APR 17 2017

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

PBSO #148 REV. 8/97

OBTS Number

PROBABLE CAUSE AFFIDAVIT

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

1 Juvenile N

Agency ORI Number	Agency Name	Agency Report Number
FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	06 17064685

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

Special Notes

Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth
WALKER AMY	W	F	08/14/1980

Charge	Charge
D.U.I.	
Charge	Charge

Victim 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 (Street, Apt. Number)	City	State	Zip	Phone	Occupation

The undersign 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.

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

On the 14TH day of APRIL 20 16 at 7:18 ☐ AM ☒ PM

While off duty in uniform sitting at Don's Cafe eating dinner I observed a two car crash directly in front of me. Both vehicles were driving North in the #2 lane. The silver Pontiac driven stopped in that lane for no apparent reason. I did not see any reason for her to stop. As she stopped the Pontiac was rear ended by a silver Kia SUV (See PBSO Crash case 17-064659).
With in seconds I approached both cars to check on the occupants and possible injuries also to gather their information. The driver of the Pontiac was identified as Amy Walker (def). She claimed injury to her neck. I summoned fire rescue to evaluate her. The other driver was identified as Michael Challenor with no reported injuries. As I was speaking with Amy she was unable to recall why she stopped in the middle of the roadway. Then she added there was a bird standing in her lane. I did not see anything there. She had a confused look on her flushed face, her pupils were dilated, she had slurred speech, she could not complete sentences or thoughts. With these signs I called for an on duty DUI unit for a complete more thorough investigation. TOT Inv. Ficarra DUI 17.

The foregoing instrument was sworn to ~~and~~ affirmed before me this 14TH day of APRIL 20 17, by:

W C FICARRA 3367
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)

W C
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)

Deputy Rieger, M 2820
Name of Arresting/Investigating Officer

M R
Signature of Arresting/Investigating Officer

Page ___ of ___

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 14th DAY OF April 20 17, AT 1903 AM ✓ PM

SUBJECT: Walker, Amy Michelle CASE NUMBER: 17064685

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. Christopher Ficarra

PERSONAL CONTACT

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

On 04/14/2017 at approximately 1951 hours I responded to 150 N Military Trail (a pawn shop parking lot), in unincorporated Palm Beach County, in reference to a DUI crash investigation. Upon my arrival I observed a silver Pontiac G5 bearing Florida tag Y55SEN and a silver Kia Sportage beaing Florida tag Y11RTQ, parked in the parking lot in front of the pawn shop. The Pontiac had minor rear end damage and the Kia had minor front end damage. I observed a white female, later identified as Amy Michelle Walker through her Florida issued driver's license, wearing a blue shirt, black tights, a black shoe, and a black leg brace sitting in the driver's seat of the Pontiac. I observe a white male, later identified as Michael Challenor, standing by the pawn shop next to the Kia. I then met with the witnessing deputy to the incident, D/S Reiger ID: 2820 who stated to me the following: He was inside Don Cafe eating when he observed the Pontiac stop in the middle of the road for no apparent reason. The Kia then rear ended the Pontiac. He then made contact with Amy and stated that she appeared "loopy" which may have been due to her injuries. Palm Beach County Fire Rescue responded to the scene to medically assess Amy (run number 17041550). Fire Rescue advised D/S Reiger that he should look into Amy more because drug impairment may have been an issue. He stated that he did not observe an odor of alcohol on her breath however. D/S Reiger also advised that during the crash investigation Amy attempted to leave the area because she was tire of waiting. In order to stop her from leaving prior to the crash report being completed he reached into her vehicle, turned the car off, and removed the keys (see attached supplemental probable cause affidavit). D/S Schnell ID: 21303 conducted the crash investigation (crash case number 17064659).

OBSERVATION OF DRIVER:

I then spoke with Michael about the crash. Michael stated to me the following: Amy pulled into his lane and threw on the brakes. He was in the middle lane and she stopped for no reason. Michael was not injured and he stated that Amy appeared, "high as a kite." (see attached sworn written statement for further) I then made contact with Amy who was still sitting in the driver's seat of the Pontiac. I spoke with Amy about the crash. As I spoke with Amy I observed that her face was flush and droopy. He eyes appeared red, glassy, and droopy. Amy's pupil's appeared to be larger than they should have been in that lighting condition. Amy's speech appeared slow and mumbled at times. Amy stated that she was not injured from the crash and had already been checked out by Fire Rescue. No apparent injuries were noted on Amy at that time. Amy stated she broke her foot recently which explained the leg/foot brace. I asked Amy to step out of her vehicle which she did. She followed me to the front of her car. Amy was forgetful while speaking about specifics of the crash. As I stood closer to Amy I was able to smell a faint but obvious odor of an unknown alcoholic beverage coming from her breath as she spoke. After we spoke about the crash I informed Amy that the crash investigation was completed and a DUI investigation was starting.

DRIVER'S STATEMENTS:

I read to Amy her Constitutional Warnings which she stated she understood. Post-Warnings she stated the following: She did not need any medical attention and had no medical issues normally but stated she was asthmatic (took Albuterol inhaler for it). She broke her left foot approximately 3.5 weeks prior. Amy had no other physical defects or injuries besides her foot. She did not have any issues with her eyes that were not corrected by glasses or contacts. She stated she took prescription medication such as the following: Zoloft, Topamax, Lamictal, Trazodone, Clonidine, and Singular. She stated she takes the medication for migraines, insomnia, mood stabilizer, depression, and allergies. Amy stated she took the medication last night and normally took the medication at night and all at the same time. Amy stated she did not take any that day. Amy stated she did not take any illegal drugs but last took marijuana and cocaine years prior. Amy stated she did not have anything to drink that night. She did not take or drink anything since the crash. Amy stated that the Pontiac was her vehicle, which was registered to her and she was driving it with no one else inside at the time of the crash. Base on my above observations I asked Amy to submit to standardized field sobriety tasks which she stated she would do. Amy stated she did not slur her words normally, did not have red or glassy eyes normally, but wore glasses for reading. Due to the boot on Amy's foot seated tasks were conducted. It should be noted that Amy's muscle tone appeared flaccid (soft and loose) after being arrest.

ODORS:

Faint but obvious odor of unknown alcoholic beverage on breath as she spoke.

GENERAL OBSERVATIONS

SPEECH: **Slurred, mumbled**

ATTITUDE: **Calm, compliant, defiant at BAT**

CLOTHING: **blue shirt, black tights, black shoe, black leg brace**

MEDICAL/OTHER: **Injury to her left foot, no other physical defects or injuries, no medical issues (such as diabetes or seizures), took prescription medication such as the following: Zoloft, Topamax, Lamictal, Trazodone, Clonidine, and Singular, no alcohol taken**

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. Christopher Ficarra
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 14th day of April 20 17 by Inv. Christopher Ficarra 8368

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

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

GARY J. PARENT
Notary Public - State of Florida
My Comm. Expires Jun 21, 2017
Commission # FF 007485
Bonded Through National Notary Assn.

SCANNED
APR 17 2017

SUBJECT: Walker, Amy Michelle **CASE NUMBER** 17064685

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:

The overhead blue police lights were turned off prior to the tasks. The push bumper of Inv. Levey's ID: 9415 patrol vehicle was used as the seat. Amy's eyes tracked equally, the pupils were the same size but larger than should be given the lighting conditions. Vertical gaze nystagmus was administered and was observed. Lack of convergence was administered and was observed. Amy's left eye converged normally but her right eye looped in, down then out. Amy anticipated the movement of the stimulus by looking ahead of it.

FINGER TO NOSE:

I read and demonstrated the instructions for the finger to nose task to Amy who stated that she understood. Amy knew her left from her right and was shown the tip of the finger and tip of the nose which she stated she understood. During the task I observed that Amy had the following cues: Instruction stage: unable to follow instructions, started at wrong time (tilted head back and closed eyes before being told to do so); Performance stage: did not close eyes (peaked), used wrong hand on: 5th instructed hand, hesitated (slowed before touching nose) on: 3rd instructed hand, searched (used finger to find nose did not go straight to tip) on: 3rd instructed hand, missed tip of nose on: 1st, 2nd, 4th, 5th, and 6th instructed hand (side of nose on each).

PALM PAT:

I read and demonstrated the instructions for the palm pat task to Amy who stated that she understood. During the task I observed that Amy had the following cues: Instruction stage: unable to follow instructions (feet and legs brought together instead of shoulder width as instructed), never increased speed throughout tasks even after being reminded during task.

HAND COORDINATION:

I read and demonstrated the instructions for the hand coordination task to Amy who stated that she understood. During the task I observed that Amy had the following cues: Instruction stage: unable to follow instructions (moved from instructional position), started at wrong time (during explanation of instructions); Performance stage: Task 1: improper touch (started moving hands over each other then went to side, started with right hand on chest not left as instructed), forgot task after first 4 hand movements asking if she had to clap; Task 2: improper count (4 claps not 3); Task 3: improper count (no count), improper touch (only three hand movements back not 4 as instructed), did not return left fist to chest.

ROMBERG ALPHABET:

I read and demonstrated the instructions for the Romberg with recitation task to Amy who stated that she understood. I asked her to say and not sing her ABCs from A to Z without stopping which she stated she could. During the task I observed that Amy had the following cues:tilted head back before being told to do so; incorrectly recites alphabet: stated to Q then stated R, V, S, T, U, V, W, X, Y then paused for approximately 3 seconds before stating "and Z."

BREATH TEST RESULTS: | 1) .110 | 2) .104 | 3) | 4) |

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. Christopher Ficarra IM C8367
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 14th day of April 20 17 by Inv. Christopher Ficarra 8368

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

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

GARY J. PARENT
Notary Public - State of Florida
My Comm. Expires Jun 21, 2017
Commission # FF 007485
Bonded Through National Notary Assn.

WITNESS LIST

CASE NUMBER: 17064685

ARRESTING OFFICER: Inv. Christopher Ficarra

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

PHONE NUMBERS (HOME): ______ (WORK) 5616883000

CAN TESTIFY TO: The elements of the crime of DUI

NAME: D/S Reiger ID: 2820

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

PHONE NUMBERS (HOME) ______ (WORK) 5616883000

CAN TESTIFY TO: The elements of the crime of DUI

NAME: D/S Schnell ID: 21303

ADDRESS 3228 Gun Club Road, West Palm Beach FL 33406

PHONE NUMBERS (HOME) ______ (WORK) 5616883000

CAN TESTIFY TO: Crash investigation

NAME: Inv. Levey ID: 9415

ADDRESS 3228 Gun Club Road, West Palm Beach FL 33406

PHONE NUMBERS (HOME) ______ (WORK) 5616883000

CAN TESTIFY TO: Inventory of vehicle and impairment issues

NAME: Michael Challenor

ADDRESS 13264 48TH CT N ROYAL PALM BEACH, FL 33411

PHONE NUMBERS (HOME) 5619511928, 5617934572 (WORK) 5616151705

CAN TESTIFY TO: DUI crash incident

NAME:

ADDRESS

PHONE NUMBERS (HOME) ______ (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) ______ (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) ______ (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) ______ (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) ______ (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) ______ (WORK)

CAN TESTIFY TO:

TESTING FACILITY TASK REPORT

AGENCY: _____

SUBJECT: _____ CASE NUMBER: _____

DATE: _____ VIDEO TAPE NUMBER: _____

BEGINNING TIME: _____ ENDING TIME: _____

BREATH TESTS RESULTS: 1) _____ TIME _____ A.M./P.M. 2) _____ TIME _____ A.M./P.M.

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

BREATH OPERATOR: _____

MAINTENANCE TECHNICIAN: _____

TESTING OFFICER'S OBSERVATIONS

SPEECH: _____

ATTITUDE: _____

CLOTHING: _____

MEDICAL CONDITIONS: _____

MEDICATIONS: _____

OTHER: _____

COMMENTS: _____

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

SUBJECT: Willar Amy CASE NUMBER: 17 - 3616[illegible]

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 _____ of the _____.

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) _____

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) _____

SUBJECT: _____ CASE NUMBER: _____

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

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

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE:
- EPILEPSY? _____
- GLASS EYE? _____
- FALSE TEETH? _____
- EAR INFECTION? _____
- INNER EAR TROUBLE? _____
- DIABETES? _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: _____

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

Per FL statute 837.012, whoever 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 #: 1706485	ZONE: 1-13	SUSPECT: Amy Michelle Walker	DATE & TIME OF ORIGINAL EVENT/OFFENSE: 4/14/17 1903
EVENT TYPE: DUI CRASH		DEPUTY: FICARRA	ID#: 8368

COMPLETE EVERYTHING BELOW – PRINT LEGIBLY

LAST NAME: Challenor	FIRST NAME: Michael	MIDDLE INITIAL: M.	RACE: W	SEX: M

DATE OF BIRTH: (MM/DD/YYYY) 10-7-65	YOUR HEIGHT: 6-3	YOUR WEIGHT: 280	YOUR HAIR COLOR: Blonde	YOUR EYE COLOR: Blue Green

YOUR HOME ADDRESS: 13264 48 TN ☐ CHECK IF HOMELESS	CITY: W.P.B.	STATE: Fla.	ZIP: 33411
YOUR WORK NAME & ADDRESS: Publix 127 STATE RD. 7. ☐ CHECK IF UNEMPLOYED OR RETIRED	CITY: W.P.B	STATE: Fla.	ZIP:

WORK PHONE: ☐ CHECK IF NONE 561 615 1205	CELL PHONE: ☐ CHECK IF NONE 561 951-1928	HOME PHONE: ☐ CHECK IF NONE 561 793-4572	EMAIL: ☐ CHECK IF NONE

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

1 YOUR NAME: Michael Challenor

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

I was on military going north. in the center Lane and. and. car pull in my Lane ever FAST slam. on the Brakes which. no time to Turn away I slam. on my Brakes. And there was no car. in Front of her. For no reason she slam on. Brakes. she was wering Leg case and. she. seen To Be on. somthing. when she got of of the car. her eye. were. Bug out moving side To side.

PAGE 1 OF 1

READ AND SIGN

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

YOUR SIGNATURE: X Michael Challenor

☐ DEPUTY SHERIFF ☐ NOTARY PUBLIC FSS: 117.10

SWORN TO AND SUBSCRIBED BEFORE ME TODAY:

DATE: 4/14/17 TIME: 2012 ID:

SIGNATURE:

*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

ORGAN DONOR

Operation of a motor vehicle constitutes consent to any sobriety test required by law.