

U219809 / 1270

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBT Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-18132920	
Charge Type: Check as many as apply <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 2. Yes NONE 1. No	
Location of Arrest (Including Name of Business) 4317 OAK TERRACE DRIVE, GREENACRES, FL 33463				Location of Offense (Business Name, Address) 4317 OAK TERRACE DRIVE, GREENACRES, FL 33463			
Date of Arrest 10/14/2018	Time of Arrest 02:39	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle 4317 OAK TERRACE DR	
Name (Last, First, Middle) LITTLE JR., BARRY, THEODORE				Alias (Name, DOB, Soc. Sec #, Etc.)			
Race W - White I - American Indian B - Black O - Oriental/Asian W	Sex M	Date of Birth 07/12/1982	Height 6'00"	Weight 205	Eye Color GREEN	Hair Color BROWN	Complexion FAIR
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATTOOS - RIGHT HAND AND LEFT ARM				Mental Status MARRIED	Religion CHRISTIAN	Indication of Alcohol Influence Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Unk <input type="checkbox"/> Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk <input type="checkbox"/>	
Local Address (Street, Apt. Number) 4317 OAK TERRACE DRIVE, GREENACRES, FL 33463		(City)	(State)	(Zip)	Phone (561) 563-5511		Residence Type: 1. City 3. Florida 2. County 4. Out of State 1
Permanent Address (Street, Apt. Number) 4317 OAK TERRACE DRIVE, GREENACRES, FL 33463		(City)	(State)	(Zip)	Phone (561) 563-5511		Address Source DEFENDANT - FL D/L
Business Address (Name, Street) N/A		(City)	(State)	(Zip)	Phone () N/A		Occupation CONSTRUCTION
DL Number, State L340078822520, FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) WPB, FL	
Citizenship U.S.		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		
Parent Name (Last, First, Middle)		Name (Last, First, Middle)		Residence Phone		Business 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		Grade	
Released To (Name)		Relationship		Date	Time	Grade	
The above address 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 (Phone 355-2528) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)				School Attended		Grade	
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property		Value of Property			
Drug Activity S. Sell N. N/A P. Possess		R. Smuggle D. Deliver E. Use		K. Dispense/ Distribute		M. Manufacture/ Products/ Cultivate	
Z. Other		Drug Type N. N/A A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Opv.	
P. Paraphernalia/ Equipment S. Synthetics		U. Unknown Z. Other		Statute Violation Number 316.193(1)			
Charge Description D.U.I.		Counts 01	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number		Violation of ORD #	
Drug Activity N	Drug Type N	Amount / Unit N/A	Offense # 18132920	Warrant / Capias Number		Bond OR	
Charge Description REFUSAL TO SIGN CRIMINAL CITATION		Counts 01	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 318.14(3)		Violation of ORD #	
Drug Activity N	Drug Type N	Amount / Unit N/A	Offense # 18132920	Warrant / Capias Number		Bond OR	
Charge Description CORRUPTION BY THREAT		Counts 01	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 838.021(3)(B)		Violation of ORD #	
Drug Activity N	Drug Type N	Amount / Unit N/A	Offense # 18132920	Warrant / Capias Number		Bond 3000.00	
Charge Description RESISTING WITHOUT VIOLENCE		Counts 01	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 843.02		Violation of ORD #	
Drug Activity N	Drug Type N	Amount / Unit N/A	Offense # 18132920	Warrant / Capias Number		Bond OR	
Location (Court, Room Number, Address) CRIMINAL JUSTICE COMPLEX 3228 GUN CLUB ROAD, WEST PALM BEACH, FL 33406							
Court Date and Time Month NOVEMBER Day 8TH Year 2018 Time 8:30 AM <input checked="" type="checkbox"/> 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) <i>Refused to sign</i>				Date Signed			
HOLD for other Agency Name		Signature of Arresting Officer <i>D.S. Sentmanat</i>		Name Verification (Printed by Arrestee)			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) D/S A. SENTMANAT		I.D. # 24968	
Master Deputy <i>157016 7600</i>		I.D. # 7600		Pouch #		Agency PBSO	
Transporting Officer A. SENTMANAT				ID # 24968		Agency PBSO	
Witness here if subject signed with an "X"							

PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

OBS Number Agency ORI Number Agency Name Agency Report Number

FLO 5 0 0 0 0 0 PALM BEACH COUNTY SHERIFF'S OFFICE 18132920

Charge Type: 1 Felony, 2 Traffic Felony, 3 Misdemeanor, 4 Traffic Misdemeanor, 5 Ordinance, 6 Other

Name (Last, First, Middle): JR, LITTLE, BARRY Race: W Sex: M Date of Birth: 07/12/1982

Charge Description: DUI

Victim's Name (Last, First, Middle): State of Florida

Local Address (Street, Apt Number), (City), (State), (Zip), Phone

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

The undersigned certifies and swears that he/she has just and reasonable grounds to believe and does believe that the above named Defendant committed the following violation of law... On the 14th day of October 20 18 at 0220 A.M

On 10/14/2018 at approximately 0220 hours while on patrol at 5800 Melaleuca Ln., Palm Beach County, Greenacres, FL 33463, I observed a silver Toyota bearing FL tag Y39EMV traveling west on Melaleuca Lane at a high rate of speed. I pulled out onto Melaleuca Ln., proceed west after the Toyota. I followed the Toyota as it turned into Oak Terrace. The Toyota proceeded north through the development which is posted 20mph. I paced the vehicle at 40mph. I initiated my lights in an attempt to stop the vehicle for the traffic violation just south of Cypress Ct.

The vehicle failed to stop and made a left turn into Cypress Ct., stopping at 4713 Cypress Ct. As I approached the vehicle the driver later identified as W/M Barry Little Jr. 07/12/1982, attempted to exit the vehicle as I approached. I advised him to stay in the vehicle. As I spoke to Little Jr., he had blood shot watery eyes and a strong smell of an unknown alcoholic beverage coming from his person. I asked for his drivers license and registration, and advised the reason for the stop.

I contacted D/S Sentmanat #24968 who assumed the DUI investigation.

This ended my involvement in the case.

NOT A CERTIFIED COPY

STATE OF FLORIDA COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 14th day of October 20 18 by D/S NORRIS 24996

(Print name of Arresting/Investigative Officer), who is personally known to me as James G. Norris identification Type of identification produced known

Notary Public, Clerk of Court, Officer (F.S.S.) 117 101 James G. Norris Commission # GG 165618 Expires December 5, 2021 Bonded Thru Troy Fain Insurance 800-385-7019

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile
ADMIN	Agency ORI Number FLO 500000	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06-	18132920			
	Charge Type: Check as many as apply.	<input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	Special Notes:		
DEF	Name (Last, First, Middle) LITTLE JR., BARRY, THEODORE			Alias	Race W	Sex M	Date of Birth 07/12/1982
	Charge Description	D.U.I. 316.193(1)	Charge Description	REFUSAL TO SIGN CRIMINAL CITATION 318.14(3)			
CHARGES	Charge Description	CORRUPTION BY THREAT 838.021(3)(B)	Charge Description	RESISTING WITHOUT VIOLENCE 843.02			
	Victim's Name (Last, First, Middle) STATE OF FLORIDA			Race	Sex	Date of Birth	
VICTIM	Local Address (Street, Apt. Number)	(City)	(State)	(zip)	Phone	Address Source	
	Business Address (Name, Street)	(City)	(State)	(zip)	Phone	Occupation	

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

committed the below acts in my presence. was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.

confessed to _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.

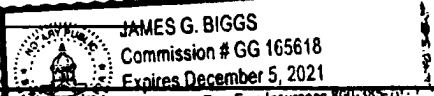
On the 14TH day of OCTOBER 20 18 at 0220 A.M. P.M. (Specifically include facts constituting cause for arrest.)

SUPPLEMENTAL PROBABLE CAUSE AFFIDAVIT

On Sunday October 14, 2018 at approximately 0239hrs I had arrested W/M Barry Theodore Little Jr. (07/12/82) for D.U.I. pursuant to F.S. 316.193(1). While on the way to the B.A.T. Little stated to me that I should have given him a break since he had pulled up to his house and was just a few feet away. He stated to me that once he got out he was going to come look for me. While at the B.A.T. Little advised that since I did not give him a break (because he was a tax payer and paid my salary) Law Enforcement has a new enemy.

The "threats" that were being made to me were based on me not going him a break and if I did not arrest him I would not be in danger. Due to those threats I am charging Little with Corruption by Threat pursuant to F.S. 838.021(3)(b).

While driving to the B.A.T. I heard Little moving his handcuffs around. I explained to him that if he attempted to get out of them or move them to the front he would be charged with Resisting without Violence. When he got to the jail/BAT Little had his handcuffs behind his knees and again I explained to him that if he tried to move his handcuffs to the front he would be charged with Resisting without Violence. After refusing to submit to a "breath test" he was placed in a holding cell with his handcuffs on. Little had been cursing and was sounding aggressive and the BAT operator asked his handcuffs be kept on. I had added an additional handcuff because Little had been complaining of shoulder pain. Once in the holding cell he again placed the handcuffs to the front. I am charging Little with Resisting without Violence pursuant to F.S. 843.02.

STATE OF FLORIDA COUNTY OF PALM BEACH A. SENTMANAT (Signature of Arresting/Investigative Officer)	14th day of OCTOBER 20 18 by A. SENTMANAT
The foregoing instrument was sworn to or affirmed and subscribed before me this _____ day of _____ 20 _____ by _____	KNOWN
(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced.	
Notary Public, Clerk of Court, Officer (F.S.S. 117 10)	
	PAGE _____ OF _____

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 14TH DAY OF OCTOBER 20 18, AT 0220 AM PM
SUBJECT: LITTLE JR., BARRY, THEODORE CASE NUMBER: 18132920
AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: A. SENTMANAT

PERSONAL CONTACT

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

On Sunday October 14, 2018 at approximately 0234hrs I responded to 4317 Oak Terrace Drive, Greenacres, FL 33463 to conduct a D.U.I. investigation. D/S Norris #24996 had conducted the traffic stop and had observed the driving pattern. See D/S Norris' Supplemental Probable Cause Affidavit.

OBSERVATION OF DRIVER:

Upon arrival I observed the driver, W/M Barry Theodore Little Jr. (07/12/82) standing outside of the vehicle and leaning against the car. I saw that his eyes were red, watery, and his cheeks were flushed red. As I spoke with Little I immediately smelled a strong odor of an unknown alcoholic beverage coming from Little's breath.

DRIVER'S STATEMENTS:

Little advised that he had not drank any alcohol and later he stated that he had drank something. Little while being transported to the B.A.T. he advised me that "when he gets out he was going to look for me" and later he stated that Law Enforcement now had "another" enemy.

ODORS:

Little had a strong odor of an unknown alcoholic beverage coming from his breath/person.

GENERAL OBSERVATIONS

SPEECH: Fair

ATTITUDE: Uncooperative, threatening, profantiy

CLOTHING: Gray shirt, blue shorts, and black shoes

MEDICAL/OTHER: None

STATE OF FLORIDA
COUNTY OF PALM BEACH

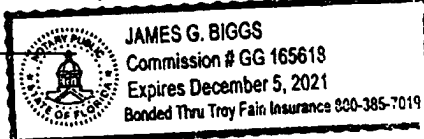
A. SENTMANAT

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 14th day of OCTOBER 20 18 by A. Sentmanat

(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)



ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|---|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT |
| <input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input checked="" type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input checked="" type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

WALK & TURN:

While in the starting position Little stumbled out of it twice and to the right. Little attempted to walk and he took a few steps. On step three his left front crossed over his right and he stumbled to the right. At which time Little refused to continue to do the Roadside Tasks. Prior to starting this task he had refused to do the roadside task and I explained to him that if he did not do what I was asking him I would have to make the determination (based on the totality of the observations) if he was driving under the influence or not. After Little refused to continue the roadside tasks I explained to him that he was under arrest for D.U.I. pursuant to F.S. 316.193(1).

ONE LEG STAND:

Refused to continue the Roadside Tasks. See above.

FINGER TO NOSE:

Refused to continue the Roadside Tasks. See above.

ROMBERG ALPHABET:

Refused to continue the Roadside Tasks. See above.

BREATH TEST RESULTS: **Refused** **Refused**

STATE OF FLORIDA
COUNTY OF PALM BEACH

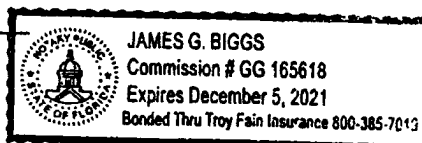
A. Sentmanat
A. SENTMANAT

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 14th day of OCTOBER, 2018 by A. Sentmanat

(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)



WITNESS LIST

CASE NUMBER: 18132920

ARRESTING OFFICER: A. SENTMANAT

ADDRESS: 3228 GUN CLUB ROAD, WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) 561-688-3000

CAN TESTIFY TO: ROADSIDE TASKS, THE RIDE TO THE BAT, THE BAT

NAME: D/S NORRIS

ADDRESS: 3228 GUN CLUB ROAD, WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME) _____ (WORK) 561-688-3000

CAN TESTIFY TO: DRIVING PATTERN AND TRAFFIC STOP, ROADSIDE TASKS

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: _____

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ADDRESS _____

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ADDRESS _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: PBSO-SENTMANAT

SUBJECT: LITTLE JR, BARRY T

CASE NUMBER: 18-132920

DATE: Oct 14, 2018

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0333

ENDING TIME: 0338

BREATH TESTS RESULTS: 1) REF TIME 0335 A.M. P.M. 2) XX TIME XX A.M. P.M.
3) XX TIME XX A.M. P.M. 4) XX TIME XX A.M. P.M.

BREATH OPERATOR: J Biggs# 7607

MAINTENANCE TECHNICIAN: D/S J Karklecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED, MUSHED MOUTH, LOUD

ATTITUDE: UNCOOPERATIVE, RUDE, THREATENING, INSULTING

CLOTHING: GRAY SHIRT, BLUE JEAN SHORTS

MEDICAL CONDITIONS: DID NOT ASK

MEDICATIONS: DID NOT ASK

OTHER:

EYES GLASSY, RED, FACE FLUSHED
ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE ON SUBJECT

COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0300
SUBJECT REFUSED THE TEST INITIALLY
IMPLIED CONSENT WAS READ, SUBJECT KEPT YELLING OVER THE A/O WHILE HE WAS TRYING TO READ
IMPLIED CONSENT
SUBJECT REFUSED THE TEST ONCE MORE
MIRANDA WAS READ TO THE SUBJECT
SUBJECT REFUSED THE QUESTIONS

SUBJECT: Little, Barry T

CASE NUMBER: 18-13292d

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

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

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

-OR-

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances.

-OR-

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

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

I am D/S Sentmanat of the PBSD

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X) Read on Camera

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) Read on Camera

SUBJECT: Little, Barry T CASE NUMBER: 18-132920

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 – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2018034352	Date: 10/15/2018
	Specialist Name/ID: AM/31562