



Arrest Report

FLORIDA HIGHWAY PATROL
P.O. BOX 540007, GREENACRES, FL 33454

FILED
FEB - 7 2019
SHARON R. BOCK
Clerk & Comptroller

Report Date / Time 2/7/2019 12:01:31AM	Report Number FHP99ARR784067	Case Number/CAD Number FHPL19005F009086	Reporting Officer Name M.W. MCDONOUGH
Originating Agency ORI FL0509000	Occurrence Date Time Range 2/6/2019 10:45:00 PM -	Jurisdiction	Clearance

Location of Occurrence

Location Type OTHER	Location Description SB INTERSTAE-95 ENT FROM WB SR 704		
Street Number	Street SB INTERSTATE-95	Apt/Lot/Bldg	
County PALM BEACH	City WEST PALM BEACH	State FL	Zip

Defendant

First Name BETH	Middle Name ILENE	Last Name COOPER	Suffix	Date Of Birth 9/8/1984	Age	Race WHITE	Sex FEMALE
SSN	MNI #	Place of Birth LAKE WORTH, FL, UNITED STATES	Height 503	Weight 128	Hair RED	Eyes BLU	
DL or ID Number C160069848280	ID State FL	ID Type E	Address Type OTHER				
Street Number 814	Street N F ST	Apt/Lot/Bldg		County PALM BEACH	City LAKE WORTH	State FL	Zip 33460
Phone Number	Extension	Location Description SB INTERSTATE-95 ENT FROM WB SR 704					

Arrest

Arrest Date/Time 2/6/2019 11:55:00PM	Arrest Location Type OTHER	Arrest Location Description SB INTERSTATE-95 ENT FROM SR 704					
Street Number	Street SB INTERSTATE-95	Apt/Lot/Bldg	County PALM BEACH	City WEST PALM BEACH	State FL	Zip	

Charge(s)

Counts 1	Charge 316.193.1	General Offense Code	Bond Amount \$ 0.00	<input type="checkbox"/> No Bond
Charge Degree N	Charge Level MISDEMEANOR	Arrest Offense Code Description DUI-UNLAW BLD ALCH		
Charge Description DUI ALCOHOL OR DRUGS				
Counts 1	Charge 316.193.3c1	General Offense Code	Bond Amount \$ 0.00	<input type="checkbox"/> No Bond
Charge Degree F	Charge Level MISDEMEANOR	Arrest Offense Code Description DUI-UNLAW BLD ALCH		
Charge Description DUI DAMAGE TO PROPERTY OR PERSON OF ANOTHER				

Probable Cause

While on Patrol Palm Beach County, dispatched to a report of a single vehicle crash located on southbound Interstate-95 (State Road 9) entrance ramp from westbound State Road 704 (Okeechobee Blvd).

Upon my arrival, I observed a orange Volkswagen Tiguan (FL license tag " KSAT22), blocking the left lane. The left front of the vehicle had damage consistent with colliding with a steel pole that was

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ripped from concrete side walk to the left that was between the entrance ramp, and the westbound lanes of State Road 704. Next to the vehicle was a piece of the steel metal hand rail from the concrete side walk. Just outside the vehicle, was the driver of the vehicle later identified as Beth I. Cooper (FL DL # C-160-069-84-828-0). While interviewing Ms. Cooper, I observed she had bloodshot watery eyes, red flushed face, spoke with slurred speech, and unsteady on her feet, and smelled a strong odor of alcohol emitting from her breath and person.

A passing motorist, Mr. Ahmad Saalim Bedran (FL DL # B-365-017-94-214-0), stated to me when stopped out with the vehicle, he witnessed Ms. Cooper still in the driver's seat, and behind the steering wheel of the 2018, orange Volkswagen with the engine still running. Mr. Bedran wrote out a written wheel witness statement.

Babbsco Towing acme on scene and loaded up the vehicle.

I then advised Ms. Cooper that I was finished with my crash investigation, and was now starting a criminal investigation of driving under the influence. I then, on camera, read her Miranda Warning from a department issued card. When asked if she had consumed any alcohol tonight, she stated that she had one wine at dinner. West Palm Beach Police Department Officer H. Nine # 2085, came on scene and assisted me. I asked Ms. Cooper if she would submit to roadside exercises, where she stated that she would submit to the exercises. I transported her in the rear of my vehicle to a BP gas station on State Road 704 just west of Interstate-95. West Palm Beach Police Officer H. Nine # 2085 traveled to the gas station also.

The first exercise was H.G.N. During the exercise, she swayed, exhibit lack of smooth pursuit on both eyes, exhibited nystagmus (rapid movement) on both eyes at maximum deviation, and exhibited onset of nystagmus prior to forty five degrees on both right and left eyes

The next exercise was the Walk And Turn. During the exercise, Ms. Cooper started the exercise before instructed, did not keep heel to toe on both the first nine steps, and on the returning nine steps. Ms. Cooper feel off the line on the third step of the return nine steps. Ms. Cooper swayed, and did not county out loud as instructed.

The third exercise was the One Leg Stand. Ms. Cooper was wearing woman's flats. Cooper attempted to raise her left foot. On the first attempt, she put her left foot down on the third (three one thousand) step. On the second attempt, she put her foot down on the second (two one thousand) step. On the third attempt, she decided to put her left foot down on the 10th (ten one thousand) step, and stopped the exercise before instructed to stop.

Based on my observations, and the right side exercises, I placed Ms. Cooper under arrest for driving under the influence at 11:55pm (2-6-19). I then transported her to the Palm Beach County Jail breath testing center. While on camera at the breath testing center, I requested Ms. Cooper if she would submit to breath sample. Ms. Cooper stated on camera that she would submit to the request. Ms. Cooper gave two breath samples that resulting as .170 and .154 g/210 L.

After finishing the report, I walked her over to the Palm Beach County's Mail Jail booking. All occurred in Palm Beach County.

Jail Booking Facility

Booking Date/Time 2/7/2019 12:00:00AM	Booking County PALM BEACH	Booking Facility PALM BEACH COUNTY CORRECTIONS	Booking Facility Phone Number (561) 688-4400
Booking Facility Location 3228 GUN CLUB ROAD WEST PALM BEACH, FLORIDA 33406		Booking Number	
Booking Comments			

Report Date / Time 2/7/2019 12:01:31AM	Report Number FHP99ARR784067	Case Number/CAD Number FHPL1901F009086	Reporting Officer Name M.W. MCDONOUGH
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Court

Court County PALM BEACH	Court Location 3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406		
Court CRIMINAL JUSTICE COMPLEX	Court Phone 561-355-2994	Court Appearance Date / Time 3- 5 -19 830AM	Court Fine
Comments			

The undersigned certifies and swears that he/she has just and reasonable grounds to believe that the above named Defendant, committed violation(s), of law, on the below date(s) and time(s), as listed in the probable cause associated with this report

Reporting Officer

Officer Name M.W. MCDONOUGH	Officer Rank TROOPER	Officer ID No 2772	Sworn and subscribed before me, the undersigned authority This the 07 day of February, 2019 DEPUTY OF THE COURT, NOTARY OR LAW ENFORCEMENT OFFICER
Officer Agency FLORIDA HIGHWAY PATROL	Officer Signature <i>M. MCD</i>		

Approving Supervisor

Officer Name	Officer Rank	Officer ID No	Officer Agency
Officer Signature			

NOT A CERTIFIED COPY

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006239 Software: 8100.27
Date of Test: 02/07/2019

Date of Last Agency Inspection: 01/18/2019

Observation Period Began: 00:15

Subject's Name: BETH I COOPER

DOB: 09/08/1984 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	00:39
	Air Blank	0.000	00:39
	Control Test	0.080	00:39
	Air Blank	0.000	00:40
	Subject Sample #1	0.170	00:41
	Air Blank	0.000	00:42
	Air Blank	0.000	00:43
	Subject Sample #2	0.154	00:44
	Air Blank	0.000	00:45
	Control Test	0.079	00:45
	Air Blank	0.000	00:45
	Diagnostics Check	OK	00:46

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

State of Florida, County of Palm Beach

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

I SUE OWEN, 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: 02/07/19
Signature

Sworn to (or affirmed) before me this 7th day of February, 2019

[Signature] 2772 Tpr M. McDonough
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.



PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 19-034355 PBSO ZONE 3-23

AGENCY CASE # FHPL190FF009086 CRASH CASE # _____

TIME OF STOP/CRASH 10:45pm DATE 2-6-19 DAY Wed

SUBJECT'S NAME Beth I Cooper RACE w SEX F

HGT 503 WGT _____ DOB 09-108-11984

LOCATION SB Interstate-95 Ent from WB SR 704

ARRESTING OFFICER'S NAME & ID Det. Mark McDonald 2772 AGENCY FHP

DIVISION: L - Palm Beach

NOTIFIED BY COMMO yes

ARRIVAL AT FACILITY 12:12am

ARREST TIME 11:55pm

BREATH RESULTS:

1. 170
2. 154
3. /
4. /

TESTING OFFICER'S ID 3184 PBSO VIDEOTAPE # N/A

NOT A CERTIFIED COPY

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 6 DAY OF Feb 20 19 AT _____ AM PM

SUBJECT: Beth F. Cooper CASE NUMBER: FHPL19OFF009086

AGENCY: Florida Highway Patrol ARRESTING OFFICER: Tpt. Mark

PERSONAL CONTACT

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

Came on scene, she was outside of vehicle, with wheel witness

OBSERVATION OF DRIVER:

Blood shot, watery eyes, flushed face, odor of alcohol emits from her, unsteady on her feet, slurred speech

DRIVER'S STATEMENTS:

ODORS:

Strong alcohol

GENERAL OBSERVATIONS

SPEECH: slurred

ATTITUDE: _____

CLOTHING: Blk jeans, Blk shirt

MEDICAL/OTHER: _____

STATE OF FLORIDA
COUNTY OF PALM BEACH

Tpt. Mark [Signature] 2772
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 7 day of Feb 20 19 by _____

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

SUBJECT: Beth Cooper

CASE NUMBER: FHPL190FF009086

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

LT EYE-LACK OF SMOOTH PURSUIT

RT EYE-LACK OF SMOOTH PURSUIT

LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

LT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

RT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Swayed

WALK & TURN:

started before instructed, no heel to toe on both forward and return nine steps. Feet off on step 3 on return, swayed, did not occur.

ONE LEG STAND:

left foot, wearing flats. Three attempts

FINGER TO NOSE:

ROMBERG/ALPHABET:

BREATH TEST RESULTS:

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was notarized or sworn before me this _____ day of _____, 20____, by _____

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)

WITNESS LIST

CASE NUMBER: FHPL1907F009086

ARRESTING OFFICER Tr Mark McDonough #2772

ADDRESS 1299 W. Lantana Rd Lantana, FL 33462

PHONE NUMBERS (HOME) _____ (WORK) 561-357-4040

CAN TESTIFY TO: Observe Indicators, and road side exercises

NAME: Ahmad Saalim Bedran

ADDRESS 10654 Versailles Blvd Wellington, FL 33449

PHONE NUMBERS (HOME) 561-234-7584 (WORK) _____

CAN TESTIFY TO: Wheel Witness

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 _____

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CAN TESTIFY TO: _____

NAME: _____

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: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

TESTING FACILITY TASK REPORT

AGENCY: FHP
SUBJECT: Cooper, Beth Ilene CASE NUMBER: 19-034355
DATE: 2/7/19 VIDEO TAPE NUMBER: N/A
BEGINNING TIME: 0036 ENDING TIME: 0055
BREATH TESTS RESULTS: 1) .170 TIME 0041 (A.M./P.M.) 2) .154 TIME 0044 (A.M./P.M.)
3) _____ TIME _____ A.M./P.M. 4) _____ TIME _____ A.M./P.M.
BREATH OPERATOR: S. Owen # 3184
MAINTENANCE TECHNICIAN: J. Karlecke # 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: _____
ATTITUDE: co-operative, said never been in trouble
CLOTHING: grey heels, black pants & top
MEDICAL CONDITIONS: spondulosis (arthritis of spine)
MEDICATIONS: none dalmone, florzepam 30mg 1x night
OTHER: DL NOT carried DL# C166-069-84-828-0

in accident says DAD is personal accident
said she had a 2 year old. Attorney

COMMENTS: A/O E A arrived at 0015 hrs
A/O observed 20 minutes
A/O requested breath test, A agreed
A gave longer breath 1st try
but both breaths were within .020.
blw read on scene.
A/O asked if A answered.
SA, D she had one glass of wine
2 hours ago

SUBJECT: Cooper, BETH E LENE CASE NUMBER: FNPL19 6FF009086

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) Read on Scene

SUBJECT: Cooper, Beth ILENE CASE NUMBER: FNPL190FF009086

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? yes

WHERE WERE YOU GOING? Home

WHAT STREET OR HIGHWAY WERE YOU ON? I-95 SB

DIRECTION OF TRAVEL? SB WHERE DID YOU START? Mark

WHAT TIME DID YOU START? 9:30pm WHAT TIME IS IT NOW? _____

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

WHAT COUNTY AND CITY ARE YOU IN NOW? Palm Beach County, Gurnee Club

WHEN DID YOU LAST EAT? This morning WHAT DID YOU EAT? half sandwich

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

HOW MUCH DO YOU WEIGH? 129 HAVE YOU BEEN DRINKING? yes WHAT? wine

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

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

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? 2hrs

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? no ARE YOU UNDER THE INFLUENCE? no

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

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? hair dresser WHEN DID YOU LAST WORK? Tonight

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

ARE YOU SICK OR INJURED? no WHAT'S WRONG? _____

DO YOU LIMP? no DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? no

WERE YOU IN AN ACCIDENT TODAY? yes

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

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? no WHO? _____ WHY? _____

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

DO YOU HAVE:

EPILEPSY?	<u>no</u>
GLASS EYE?	<u>no</u>
FALSE TEETH?	<u>no</u>
EAR INFECTION?	<u>at ear</u>
INNER EAR TROUBLE?	<u>yes</u>
DIABETES?	<u>no</u>

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

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

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

INTERVIEWER: Tpr. Mark McDonald #2772



PALM BEACH COUNTY SHERIFF'S OFFICE

Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<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"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>	119.0712(2)	Other: Personal Information contained in a motor vehicle record (s).	
	<input type="checkbox"/>	393202(5)	Other: Person reporting Child Abuse	

REVIEW COMPLETED BY

Booking Number: 2019004292	Date: 2/7/2019
	Specialist Name/ID: M. Tooks #8557