

ARREST / NOTICE TO APPEAR

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

1

JUVENILE

OBTS Number	Agency ORI Number <b>0501700</b>		Agency Name <b>Jupiter Police Department</b>		Agency Report Number (N.T.A.'s only) <b>514 19-000352</b>	
Charge Type: Check as many as apply	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	If Weapon Seized Enter Type <b>NONE</b>		Multiple Clearance Indicator <b>1</b>
Location of Arrest (Including Name of Business) <b>2999 S US HIGHWAY 1 JUPITER, FL 33477</b>			Location of Offense (Business Name, Address) <b>2999 S US HIGHWAY 1/BLUFFS BLVD, JUPITER, FL 33477</b>			
Date of Arrest <b>01/23/2019</b>	Time of Arrest <b>00:58</b>	Booking Date <b>01/23/2019</b>	Booking Time <b>01:08</b>	Jail Date	Jail Time	Location of Vehicle
Name (Last, First, Middle) <b>COX, BETTY LYNN</b>			Alias:		Alias (Name, DOB, Soc. Sec. #, Etc.)	
Race <b>W - White</b>	I - American Indian <b>W</b>	Sex <b>F</b>	Date of Birth <b>10/30/1983</b>	Height <b>5'00</b>	Weight <b>140</b>	Eye Color <b>BROWN</b>
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)			Marital Status <b>M</b>	Religion <b>CHRISTIAN</b>	Complexion <b>MEDIUM</b>	Build <b>Thin</b>
Local Address (Street, Apt. Number) <b>1705 17TH CT, JUPITER, FL 33477</b>			(City)	(State)	(Zip)	Phone <b>(865) 291-7485</b>
Permanent Address (Street, Apt. Number) <b>1705 17TH CT, JUPITER, FL 33477</b>			(City)	(State)	(Zip)	Phone <b>(865) 291-7485</b>
Business Address (Name, Street)			(City)	(State)	(Zip)	Phone
DL Number, State <b>C200092838900 / FL</b>		Res. Soc. Number	ID# Number		Place of Birth (City, State) <b>MIAMI, FL, United</b>	Citizenship <b>US</b>
Co-Defendant Name (Last, First, Middle)			Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile
Co-Defendant Name (Last, First, Middle)			Race	Sex	Date of Birth	<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ Name (Last, First, Middle) _____ <input type="checkbox"/> Legal Custodian _____ Address (Street, Apt. Number) _____ (City) _____ (State) _____ (Zip) _____ Notified by: (Name) _____ Date _____ Time _____ Relationship _____ Date _____ Time _____						Residence Phone
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.						Business Phone
Drug Activity			Drug Type		Drug Description	
S. Sell N. N/A F. Possess R. Struggle D. Deliver E. Use K. Dispose/Distribute M. Manufacture/Produce/Cultivate Z. Other			N. N/A A. Amphetamine B. Barbiturate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opioid/Opium P. Paraphernalia/Equipment S. Synthetic U. Unknown Z. Other		Date of Birth _____ State Violation Number <b>316.193(3)(C)(1)</b>	
Charge Description <b>DUI-DAMAGE TO PERSON/PROPERTY</b>			Amount / Unit		Violation of ORD #	
Drug Activity			Drug Type		Violation of ORD #	
Charge Description			Amount / Unit		Violation of ORD #	
Drug Activity			Drug Type		Violation of ORD #	
Charge Description			Amount / Unit		Violation of ORD #	
Drug Activity			Drug Type		Violation of ORD #	
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			
Check which applies:			PROPERTY - Received By		Released To	
Transported By			Date Transported		Time Transported	
<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) <b>North County PALM BEACH GARD</b>		Court Date and Time <b>02/27/2019 08:30:00</b>	
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) <b>Refused to sign</b>		Date Signed <b>01/23/2019</b>	
HOLD for Other Agency			Signature of Arresting Officer <b>[Signature]</b>		Name Verification (Printed by Arrestee)	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Restricted Arrest <input type="checkbox"/> Substantial <input type="checkbox"/> Other			Number of Arrests (within 12 months) <b>YOCHUM, CRAIG</b>		I.D. # <b>1185</b>	
Intake Deputy <b>Spinn 8101</b>			Transporting Officer <b>OFC. C. YOCHUM</b>		I.D. # <b>383</b> Agency <b>JPD</b>	
Witness here if subject signed with an			Witness here if subject signed with an		Witness here if subject signed with an	

0504771

JAN 24 2019

2019CT1560

BY: WB

2019 JAN 24 8:39  
 HANDED TO  
 GUM FLOOR  
 2019 JAN 24 8:39

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

A D M I N I S T R A T I V E	OBTS Number		Agency ORI Member <b>FL 0501700</b>		Agency Name <b>JUPITER POLICE DEPARTMENT</b>		Agency Report Number <b>5   4   19-000352</b>		
	Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other						Special Notes:		
	Name (Last, First, Middle) <b>COX, BETTY LYNN</b>						Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>10/30/1983</b>
C H A R G E S	Charge Description <b>316.193(3)(C)(1) DUI-DAMAGE TO PERSON/PROPERTY</b>				Charge Description				
	Charge Description				Charge Description				
V I C T I M	Victim's Name (Last, First, Middle) <b>State Of Florida</b>						Race	Sex	Date of Birth
	Local Address (Street, Apt. Number) (City) (State) (Zip)				Phone		Address Source		
	Business Address (Name, Street) (City) (State) (Zip)				Phone		Occupation		
P R O B A B L E	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 ... <input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.								
	On the <u>23</u> day of <u>January</u> , <u>2019</u> at <u>00:58</u> (Specifically include facts constituting cause for arrest.)								
	<p>On 01/23/2019 at approximately 0002 hours, I responded to the intersection of S US Highway 1 (S.R. 5) and Bluffs Blvd. in the Town of Jupiter, Palm Beach County, FL in reference to a single-vehicle motor vehicle crash. At the time, I was driving a fully marked Jupiter Police Department patrol vehicle (vehicle 1413), I was wearing a JPD uniform clearly identifying myself as a Jupiter Police Officer, and I was wearing my department-issued Axon body camera.</p> <p>Upon arrival, I observed a black 2017 Volvo XC-60 SUV bearing FL tag # HMIM78 stopped, facing southwest, on the positive median barrier on Bluffs Blvd. The vehicle was stopped in the bushes in the median and the front passenger bumper was up against a palm tree in the median. I observed damage to the front bumper, hood, and passenger side fender of the vehicle. I also observed both side curtain airbags and the front driver airbag had deployed in the crash.</p> <p>I also observed a white female, later identified as Betty Cox (10/30/1983) sitting on the curb on the north side of the vehicle. I also observed another white female, later identified as a witness: Ashley Devonish (11/09/1981), standing in the inside left turn lane of Bluffs Blvd., just west of the intersection at S US Highway 1.</p> <p>I made contact with Devonish who advised she was traveling south on S US Highway 1, behind the crashed vehicle prior to the crash. Devonish stated the vehicle was in the southbound right turn lane of S US Highway 1 to turn west onto Bluffs Blvd. She advised the vehicle failed to negotiate the right turn and traveled up onto the median. Devonish advised she did not lose eye contact with the vehicle from the time of the crash until the time she stopped to help the driver. Devonish stated she observed Cox exit the front passenger door of the vehicle but stated no other occupants of the vehicle exited after the crash. See BWC witness statement from Devonish.</p>								
A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME				SIGNATURE OF ARRESTING / INVESTIGATING OFFICER				
	NOTARY PUBLIC / CLERK OF COURT OFFICER (F.S.S. 117.10) <b>JAMES C. BIGGS</b> Commission # GG 165618 Expires December 5, 2021 Bonded thru Troy Fahn Insurance 800-385-7019 DATE <b>01/23/2019</b>				<b>Yochum, Craig (1185)</b> NAME OF OFFICER (PLEASE PRINT) DATE <b>01/23/2019</b>				

PROBABLE CAUSE AFFIDAVIT  
SUPPLEMENT

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

1

JUVENILE

OBTS Number	Agency ORI Number <b>FL 0501700</b>		Agency Name <b>JUPITER POLICE DEPARTMENT</b>	Agency Report Number <b>5   4   19-000352</b>
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	Special Notes:
	<input type="checkbox"/> 2. Traffic Felony	<input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other	
Name (Last, First, Middle) <b>COX, BETTY LYNN</b>	Alias	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>10/30/1983</b>

During my crash investigation, I observed Cox stand up and it appeared as though she was having trouble standing, as she was unsteady on her feet and fell forward into her open rear passenger door while searching for her driver license inside the vehicle. I observed Cox had bloodshot, glassy eyes, slurred speech, and I could smell the strong odor of an unknown alcoholic beverage on her breath which intensified as she spoke. I also noted Cox had mood swings several times throughout my brief contact with her during the crash investigation, as she went from being cooperative to uncooperative to crying multiple times. I also noted that Cox was holding the keys to her crashed vehicle in her right hand while walking around her vehicle.

After gathering the necessary information for the crash report, I returned to my patrol vehicle and determined Cox was the registered owner of the crashed vehicle.

I repositioned my vehicle on Bluffs Blvd. (closer to Cox), to conduct a DUI investigation. I placed traffic cones between the open lane and where I planned on conducting Standardized Field Sobriety Tasks (inside left turn lane on Bluffs Blvd.) to protect the area from passing traffic.

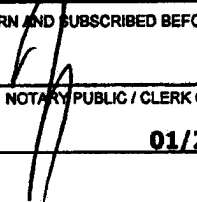

I spoke with Cox in front of my patrol vehicle, advised her the crash investigation was over, and that I was beginning a criminal DUI investigation. I began reading Cox her Miranda Warnings from a prepared text and confirmed her understanding of each warning as I read them to her. In the middle of the Miranda Warnings, Cox interrupted me but later advised she understood her Miranda Warnings.

I requested Cox complete SFSTs and she agreed.

I observed multiple indicators of impairment during SFSTs such as Lack of Smooth Pursuit (HGN), Distinct and Sustained Nystagmus at Maximum Deviation (HGN), Vertical Gaze Nystagmus (HGN), Swaying (HGN), Missed heel-to-toe (WAT), Stepped off line (WAT), Incorrect number of steps (WAT), Improper turn (WAT), Used Arms for Balance (WAT), Missed finger to nose (FTN), Used wrong hand (FTN), Did not keep eyes closed (RA), and Swaying (RA). For complete list of all indicators of impairment, see DUI Probable Cause Affidavit. During SFSTs, I was continually interrupted while giving instructions to Cox and had to advise her of her Taylor Warnings. Cox advised she understood her Taylor Warnings and wished to continue roadside tasks.

It should be noted that the One Leg Stand task was not performed due to high wind gusts at the time of SFSTs and the fact that Cox stated she allegedly had balance issues due to Thyroid problems.

At the conclusion of SFSTs, I placed Cox under arrest for DUI. As I was securing her in handcuffs, she tensed the muscles in her arms and attempted several times (unsuccessfully) to pull away from me. I secured Cox in handcuffs behind her back which

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME	 JAMES G. BIGGS Commission # GG 165618 Expires December 31, 2021 Bonded Thru Troy Fain Insurance 800-385-7019	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <b>YOCHUM, CRAIG (1185)</b> NAME OF OFFICER (PLEASE PRINT)		
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)			<b>01/23/2019</b>	<b>01/23/2019</b>
	DATE			DATE	PAGE 2 of 3

OBT# Number Agency ORI Number <b>FL 0501700</b>	<b>PROBABLE CAUSE AFFIDAVIT SUPPLEMENT</b>	1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	<b>1</b>	JUVENILE
Agency Name <b>JUPITER POLICE DEPARTMENT</b>	Agency Report Number <b>5   4   19-000352</b>				
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other					Special Notes:
Name (Last, First, Middle) <b>COX, BETTY LYNN</b>			Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>10/30/1983</b>
<p>were checked for proper spacing and double-locked to prevent tightening. I sat Cox in the rear passenger seat of my patrol vehicle.</p> <p>After placing Cox under arrest, a prescription bottle was located inside her vehicle for Phentermine (37.5 MG) with a warning label stating "May Make You Dizzy. Check With Doctor Before Drinking Alcohol. Use Care When Operating A Vehicle, Vessel, Or Other Machines." I took pictures of the prescription bottle and uploaded the pictures to evidence.com for evidence retention.</p> <p>I transported Cox to the Jupiter Medical Center for medical clearance where she was searched by a female Palm Beach Gardens Police Officer. I stayed with Cox until I obtained the medical clearance paperwork shortly after arriving at the hospital.</p> <p>I transported Cox to the Palm Beach County Breath Alcohol Testing Facility where I conducted a 20 minute observation period to ensure she did not ingest or regurgitate anything orally. Cox continued to have mood swings and became extremely emotional and breathing rapidly, something she had not been doing throughout my entire contact with her up to this point.</p> <p>When the observation period was over, I requested Cox provide a sample of her breath for the purpose of determining the alcohol content. Cox stated she was not going to make a decision without a lawyer present and I determined she was refusing the test. I read Cox Implied Consent and had to explain it to her in layman's terms. Even after both explanations of Implied Consent, Cox began rambling and stated she did not understand. Due to her increasingly uncooperative behavior, I determined she was not willing to provide a breath sample and called a refusal at 0333 hours.</p> <p>Based on my above described investigation, I find Probable Cause to charge Betty Cox with DUI - Damage to Property pursuant to FSS 316.193(3)(c)(1).</p>					
<p style="font-size: 2em; opacity: 0.5; transform: rotate(-30deg);">NOT A CERTIFIED COPY</p>					
SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT OFFICER (F.S. 117.10) <b>01/23/2019</b> DATE		 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <b>YOCHUM, CRAIG (1185)</b> NAME OF OFFICER (PLEASE PRINT) <b>01/23/2019</b> DATE			
					PAGE <b>3 OF 3</b>

STATE OF FLORIDA  
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES  
AFFIDAVIT OF REFUSAL TO SUBMIT TO  
BREATH AND/OR URINE TEST

I, Officer Craig Yochum, a duly certified Law Enforcement Officer or Correctional Officer,  
(Name of Officer reading Implied Consent Warning)

am a member of Jupiter Police Department, and I do swear  
(Name of law enforcement agency)

or affirm that on or about the 23rd day of January, 20 19, at 12:58  P.M.  A.M.

DRIVER Betty Lynn Cox,  
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# C200-092-83-890-0, state of Florida, was placed under lawful arrest for

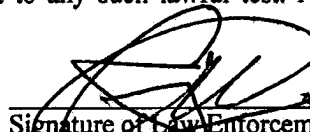
the offense of DUI - Damage to Property by Officer Craig Yochum and  
(Name of Arresting Officer)

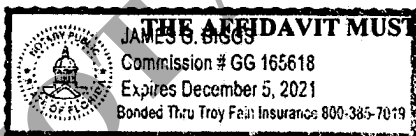
issued Citation # AATBISE.

That on or about the 23rd day of January, 20 19, at 3:33  P.M.  A.M.

in Palm Beach County,

I requested that the driver submit to a  breath and/or  urine test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended for refusing to submit to a breath, urine or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.

  
Signature of Law Enforcement Officer or Correctional Officer



(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before

me this 23rd day of January, 20 19,

by Officer Craig Yochum # 383,

who is personally known to me or who has produced

Personally Known as identification

Notary Public James Biggs (#7607)

HSMV-BAR1001 (REV. 10/2016)

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title

Date 01/23/2019

Note: Mail or hand deliver to the designated Bureau of Administrative Reviews office, Department of Highway Safety and Motor Vehicles, with the driver's license, the appropriate copy of the UTC, and the probable cause affidavit.



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

PBSO CASE # 19-028846      PBSO ZONE 3-11

AGENCY CASE # 19-000352      CRASH CASE # 19-000352

TIME OF STOP/CRASH 0002      DATE 01/23/2019      DAY Wednesday

SUBJECT'S NAME      Cox      Betty      Lynn      RACE      W      SEX      F  
LAST      FIRST      MID

HGT      5'00"      WGT      140 lbs      DOB      10/30/1983

LOCATION S US Highway 1/Bluffs Blvd Jupiter, FL 33477

ARRESTING OFFICER'S NAME & ID Craig Yochum # 383      AGENCY Jupiter PD

DIVISION: Road Patrol

NOTIFIED BY COMMO      Yes

ARRIVAL AT FACILITY      0305

ARREST TIME      0058

**BREATH RESULTS:**

1)

2)

3)

4)

**REFUSED**

TESTING OFFICER'S ID 7607      PBSO VIDEOTAPE # N/A

NOT A CERTIFIED COPY

# WITNESS LIST

CASE NUMBER: 19-000352

ARRESTING OFFICER: Craig Yochum

ADDRESS: 210 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME): \_\_\_\_\_ (WORK) (561) 746-6201

CAN TESTIFY TO: PC

NAME: Ashley Devonish

ADDRESS: 322 Natchez Ct. Jupiter, FL 33477

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) (281) 740-4154

CAN TESTIFY TO: Crash Witness - Witness Statement

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 \_\_\_\_\_

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NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

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NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NOT A CERTIFIED COPY

SUBJECT: Extry Cox CASE NUMBER: 19-000352

## 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 Off C Yorkum of the Jupiter PD

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) Not Read - Uncooperative RAABLING

SUBJECT: Betty Cox CASE NUMBER: 17-000352

# 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: Ora C. Yocum

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS ~~OLD~~ - JAIL

# TESTING FACILITY TASK REPORT

AGENCY: JPD-YOCHUM

SUBJECT: COX, BETTY L

DATE: Jan 23, 2019

BEGINNING TIME: 0330

CASE NUMBER: 19-028846

VIDEO DVD NUMBER: N/A

ENDING TIME: 0334

BREATH TESTS RESULTS: 1) REF TIME 0333 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 TECHNICAN: D/S J Karklecke #6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH: SOMEWHAT SLURRED

ATTITUDE: COOPERATIVE, THEN CONFUSED, THEN CRYING (EMOTIONS UNSTABLE)

CLOTHING: BLACK JACKET OVER GREEN SHIRT, BLUE JEANS

MEDICAL CONDITIONS: THYROID ISSUE

MEDICATIONS: THYROID MED, PHENTERMINE, AMOXICILYN

## OTHER:

EYES GLASSY, RED, WATERY  
ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE ON SUBJECT  
SHORT TERM MEMORY LOSS

## COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0305  
SUBJECT WAS UNSURE IF SHE WOULD SUBMIT TO THE BREATH TEST  
IMPLIED CONSENT WAS READ AND EXPLAINED TO SUBJECT  
SUBJECT COULD NOT ANSWER THE REQUEST  
REFUSAL WAS CALLED  
INTERVIEW ENDED



**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"/>	539.001 FS	Other: All records relating to pawnbroker transactions.	
	<input type="checkbox"/>	119.0712(2)	Other: Personal information contained within a motor vehicle record	

**REVIEW COMPLETED BY**

Booking Number: 2019002599	Date: 01/23/2019
	Specialist Name/ID: howardt/7185