

0484832		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile N		
ADMINISTRATIVE	Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>			Agency Report Number (N.T.A.'s only) <b>06-17-031957</b>						
	Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type <b>2</b> 1. Yes 2. No N/A		Multiple Clearance Indicator <b>01</b>							
	Location of Arrest (Including Name of Business) <b>4704 FOREST HILL BLVD : @EL BODEGON GROCERY, LAKE WORTH, FL</b>			Location of Offense (Business Name, Address) <b>4704 FOREST HILL BLVD : @EL BODEGON GROCERY, LAKE WORTH, FL</b>								
	Date of Arrest <b>01/27/2017</b>	Time of Arrest <b>0306</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle <b>DUVALS TOWING</b>					
DEFENDANT	Name (Last, First, Middle) <b>RIVIERA - GARCIA, CACIMAR, ANAM</b>										Alias (Name, DOB, Soc. Sec. #, Etc.)	
	Race W - White I - American Indian B - Black O - Oriental/Asian		Sex <b>M</b>	Date of Birth <b>10/11/1985</b>		Height <b>5'07"</b>	Weight <b>200</b>	Eye Color <b>BRN</b>	Hair Color <b>BRN</b>	Complexion <b>MED</b>	Build <b>MED</b>	
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>NONE</b>					Marital Status <b>SINGLE</b>	Religion <b>7TH DAY AVENTIST</b>	Indication of: Alcohol Influence <input type="checkbox"/> Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>				
	Local Address (Street, Apt. Number) <b>615 NE 2ND AVE, DELRAY BEACH, FL 33444</b>			(City)	(State)	(Zip)	Phone <b>( ) UNK</b>		Residence Type: 1. City 2. County 3. Florida 4. Out of State <b>2</b>			
	Permanent Address (Street, Apt. Number)			(City)	(State)	(Zip)	Phone <b>( )</b>		Address Source <b>FL DL / VERBAL</b>			
	Business Address (Name, Street)			(City)	(State)	(Zip)	Phone <b>( )</b>		Occupation <b>PHYSICAL THERAPIST</b>			
	D/L Number, State <b>FL DL R162101853710</b>		Soc. Sec. Number <b>[REDACTED]</b>		INS Number		Place of Birth (City, State) <b>MANAGUA, NICARGUA</b>		Citizenship <b>USA</b>			
	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		
	JUVENILE	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other: Address (Street, Apt. Number) <b>( )</b> (City) (State) (Zip) Residence Phone <b>( )</b> Business Phone <b>( )</b>										
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 <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 355-2526) 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 N. N/A S. Sell B. Buy P. Possess 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 Description <b>DUI - DRIVING UNDER THE INFLUENCE - REFUSAL</b>		Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number <b>316.193(1)</b>		Violation of ORD #					
Drug Activity <b>N</b>		Drug Type <b>N</b>	Amount / Unit <b>N/A</b>		Offense # <b>17-031957</b>		Warrant / Capias Number		Bond			
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number		Violation of ORD #					
Drug Activity		Drug Type	Amount / Unit		Offense #		Warrant / Capias Number		Bond			
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number		Violation of ORD #					
Drug Activity	Drug Type	Amount / Unit		Offense #		Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number		Violation of ORD #					
Drug Activity	Drug Type	Amount / Unit		Offense #		Warrant / Capias Number		Bond				
Location (Court, Room Number, Address) <b>NORTH COUNTY COURTHOUSE / 3188 PGA BLVD, PALM BEACH GARDENS, FL 33410</b>												
Court Date and Time Month <b>FEB</b> Day <b>22TH</b> Year <b>2017</b> Time <b>08:30</b> 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. <b>01/27/2017</b> Signature of Defendant (or Juvenile and Parent / Custodian) _____ Date Signed _____												
ADMIN	HOLD for other Agency Name:		Signature of Arresting Officer <b>X</b>		Name Verification (Printed by Arrestee) <b>2817 JAN 27 4 8:32</b>							
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) <b>Inv. S. Levey #9415</b>		I.D. # <b>9415</b>		PAGE <b>1</b> OF <b>1</b>			
	Intake Deputy <b>Goldman 4746</b>		I.D. #		Pouch #		Transporting Officer <b>INV. S. LEVEY</b>		ID # <b>9415</b> Agency <b>PBSO</b>			

OBTS Number		<b>PROBABLE CAUSE AFFIDAVIT</b>		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	N
ADMIN	Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number <b>06-17-031957</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		Special Notes:		
DEF	Name (Last, First, Middle) <b>RIVERA-GARCIA, CACIMAR, A</b>					Alias	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>10/11/1985</b>
	Charge Description <b>DUI</b>					Charge Description			
CHARGES	Charge Description					Charge Description			
	Charge Description					Charge Description			
VICTIM	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>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</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence.      <input type="checkbox"/> was observed by _____ who told _____  <input type="checkbox"/> confessed to _____ that he/she saw the arrested person commit the below acts.  <input type="checkbox"/> admitting to the below facts.      <input type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>27</u> day of <u>JANUARY</u> 20<u>17</u> at <u>02:25</u> <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p>									
<p><b>On Friday morning 1/27/17 at 0225 hours I was patrolling the area in my assigned green and white patrol vehicle about to conduct a business check to the El Bodegon parking lot area located at 4704 Forest Hill Blvd in unincorporated West Palm Beach within Palm Beach County Florida.</b></p> <p><b>As I entered into the plaza in which El Bodegon is located I observed a red vehicle stopped in the middle of the travel lanes. The vehicle was running, the lights of the vehicle were on and I observed a white male in the driver seat which appeared to be sleeping.</b></p> <p><b>I got behind the vehicle a red Hyundai Sonata bearing FL Tag # GXUL87, notified communications of my location and advised I had a male who appeared to be passed out behind the wheel of a vehicle. I activated my over head lights and approached the vehicle to make contact with the driver later identified by his FL DL as Cacimar Rivera-Garcia and check if he needed medical attention.</b></p> <p><b>As I got to the driver side window I observed Cacimar to be sleeping. The vehicle was still in drive at the time of contact and the Cacimar had his foot on the break. I called out to Cacimar who did not respond to my voice. I called out to him several more times and patted him on the shoulder at which time the Cacimar woke up, looked at me and appeared very disorientated. I gave Cacimar a verbal command to put the vehicle in park. After multiple commands Cacimar was finally able to get the vehicle in park.</b></p> <p><b>As I was speaking with Cacimar I observed that he was having a hard time understanding me. Cacimar had blood shot watery eyes and he had a hard time speaking and a slurred speech. When I asked him if he knew where he was Cacimar's only response was "everything was well." Based on Cacimar's inability to communicate, slurred speech and my observations of Cacimar sleeping while behind the wheel of the vehicle while it was running, I summoned a DUI Unit to my location to conduct an investigation to determine whether Cacimar was driving while intoxicated or under the influence. This concludes my involvement in this case.</b></p>									
<p style="text-align: center;">9706</p> <p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p style="text-align: right;"><b>DS R. MINISSALI 97</b></p> <p>(Signature of Arresting/Investigative Officer)</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>27</u> day of <u>January</u> 20<u>17</u> by <u>DS R. MINISSALI 9706</u></p> <p>(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>LEO</u></p> <p><u>Inv. S. Leray #9415</u></p> <p>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>									
PAGE 1 OF 1									

# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 27TH DAY OF JANURARY 20 17, AT 0225 ☒ AM ☐ PM

SUBJECT: RIVIERA - GARCIA, CACIMAR, ANAM CASE NUMBER: 17-031957

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. S. Levey #9415

## PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)  
ON 01/27/17 AT APPROXIMATELY 0226 HOURS, I RESPONDED TO 4704 FOREST HILL BLVD IN THE UNINCORPORATED AREA OF WEST PALM BEACH. UPON MY ARRIVAL I MADE CONTACT WITH D/S MINISSALI # 9706. HE INFORMED ME OF THE FOLLOWING IN HIS SUPPLEMENTAL PC. "ON FRIDAY MORNING 1/27/17 AT 0225 HOURS I WAS PATROLLING THE AREA IN MY ASSIGNED GREEN AND WHITE PATROL VEHICLE ABOUT TO CONDUCT A BUSINESS CHECK TO THE EL BODEGON PARKING LOT AREA LOCATED AT 4704 FOREST HILL BLVD IN UNINCORPORATED WEST PALM BEACH WITHIN PALM BEACH COUNTY FLORIDA. AS I ENTERED INTO THE PLAZA IN WHICH EL BODEGON IS LOCATED I OBSERVED A RED VEHICLE STOPPED IN THE MIDDLE OF THE TRAVEL LANES. THE VEHICLE WAS RUNNING, THE LIGHTS OF THE VEHICLE WERE ON AND I OBSERVED A WHITE MALE IN THE DRIVER SEAT WHICH APPEARED TO BE SLEEPING. I GOT BEHIND THE VEHICLE A RED HYUNDA SONATA BEARING FL TAG # GXUL87, NOTIFIED COMMUNICATIONS OF MY LOCATION AND ADVISED I HAD A MALE WHO APPEARED TO BE PASSED OUT BEHIND THE WHEEL OF A VEHICLE. I ACTIVATED MY OVER HEAD LIGHTS AND APPROACHED THE VEHICLE TO MAKE CONTACT WITH THE DRIVER LATER IDENTIFIED BY HIS FL DL AS CACIMAR RIVERA-GARCIA AND CHECK IF HE NEEDED MEDICAL ATTENTION. AS I GOT TO THE DRIVER SIDE WINDOW I OBSERVED CACIMAR TO BE SLEEPING. THE VEHICLE WAS STILL IN DRIVE AT THE TIME OF CONTACT AND THE CACIMAR HAD HIS FOOT ON THE BREAK. I CALLED OUT TO CACIMAR WHO DID NOT RESPOND TO MY VOICE. I CALLED OUT TO HIM SEVERAL MORE TIMES AND PATTED HIM ON THE SHOULDER AT WHICH TIME THE CACIMAR WOKE UP, LOOKED AT ME AND APPEARED VERY DISORIENTATED. I GAVE CACIMAR A VERBAL COMMAND TO PUT THE VEHICLE IN PARK. AFTER MULTIPLE COMMANDS CACIMAR WAS FINALLY ABLE TO GET THE VEHICLE IN PARK. AS I WAS SPEAKING WITH CACIMAR I OBSERVED THAT HE WAS HAVING A HARD TIME UNDERSTANDING ME. CACIMAR HAD BLOOD SHOT WATERY EYES AND HE HAD A HARD TIME SPEAKING AND A SLURRED SPEECH. WHEN I ASKED HIM IF HE KNEW WHERE HE WAS CACIMAR'S ONLY RESPONSE WAS "EVERYTHING WAS WELL." BASED ON CACIMAR'S INABILITY TO COMMUNICATE, SLURRED SPEECH AND MY OBSERVATIONS OF CACIMAR SLEEPING WHILE BEHIND THE WHEEL OF THE VEHICLE WHILE WAS IT WAS RUNNING, I SUMMONED A DUI UNIT TO MY LOCATION TO CONDUCT AN INVESTIGATION TO DETERMINE WHETHER CACIMAR WAS DRIVING WHILE INTOXICATED OR UNDER THE INFLUENCE. THIS CONCLUDES MY INVOLVEMENT IN THIS CASE."

## OBSERVATION OF DRIVER:

AS I EXITED MY PATROL VEHICLE, I OBSERVED D/S MINISSALI STANDING NEXT TO THE OPEN CAR DOOR. THE VEHICLE, A 2013 HYUNDAI SONATA, RED IN COLOR, HAD AN ATTACHED TAG OF GXUL87. THE DRIVER WAS STILL SEATED IN THE DRIVER'S SEAT, AND WAS ITS ONLY OCCUPANT. I IMMEDIATELY NOTICED THE OBVIOUS ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM THE VEHICLE, AND AS THE DRIVER SPOKE, IT BECAME STRONGER. I OBSERVED THAT HIS EYES WERE RED, BLOODSHOT, GLASSY, AND WATERY. I NOTICED THAT HE HAD SLOW, SLURRED, AND REPEATITIVE SPEECH. IN THE VEHICLE, I OBSERVED THAT HE HAD A STETHOSCOPE HANGING FROM THE MIRROR, AND ANOTHER ON THE BACK SEAT. I OBSERVED THAT HE HAD A WHITE COAT HANGING FROM HIS DRIVER REAR HANDLE AREA.

AS THE DRIVER WAS EXITING THE VEHICLE, I OBSERVED THAT HE SLIPPED ALMOST FELL TO THE GROUND AS HE STEPPED OUT. I OBSERVED THAT HE WAS UNEASY ON HIS FEET, AND WAS SWAYING WHILE BOTH WALKING AND STANDING.

## DRIVER'S STATEMENTS:

WHEN I ASKED THE DRIVER FOR HIS ADDRESS, HE KEPT SAYING "185" REPEADLY. WHEN I ASKED HIM WHERE HE WAS COMING FROM, HE CONTINUED TO SAY "185" AGAIN MULTIPLE TIMES, ALONG WITH OTHER NUMBERS. HE STATED THAT HE WOULD, HE WAS ABLE TO SAY THAT HE WAS COMING FROM HIS GIRLFRIENDS HOUSE, HE SAID HE HAD NOT MUCH TO DRINK. WHEN I ASKED HOW MANY THAT WAS, HE SAID THAT HE WAS IN A FIGHT WITH HIS GIRLFRIEND, AND AGAIN KEPT SAYING "185", AND LIVES IN LAKE WORTH. WHEN ASKED WHERE HE WORKS, HE SAID "I WOULD SAY, I AM UHH, IF YOU DO NOT MIND." HE THEN HANDED ME HIS CELL PHONE AND WALLET. HE STATED THAT HE IS A PHYSICAL THERAPIST, IN THE CITY OF DELRAY BEACH, I HELP PEOPLE SIR. WHEN I ASKED IF HE HAD ANY MEDICAL ISSUES, HE STATED THAT HE DID NOT. WHEN I INFORMED HIM OF HOW HIS CAR WAS STOPPED, AND ASKED HIM IF IT WAS KIND OF ODD, HE AGREED. WHEN I ASKED HIM TO DO SOME ROADSIDE TASKS, HE STATED THAT HE DOES NOT FEEL LIKE HIMSELF TO DRIVE. HE STATED THAT HE WOULD DO TASKS.  
WHEN I ASKED IF HE HAD ANY PROBLEMS WITH HIS FEET, HE STATED THAT HE FEELS A LITTLE BIT OF HIS FEET, OF HIS HEEL. WHEN I ASKED IF HE HAD PROBLEMS WALKING HE SAID NOT YET. HE SAID THAT HE HAD A LITTLE BIT OF PAIN, HE STATED THAT HE WAS NOT TAKING ANY MEDICATIONS. HE SAID THE PAIN HAS BEEN FOR A WHILE, WAS JUST PAIN. HE SAID HE HAD PAIN WITH HIS KNEES, PAIN WITH HIS HIPS. WHEN ASKED WHAT IS ALL THE PAIN FROM, HE SAID "A LITTLE BIT OF PAIN." WHEN ASKED WHAT THE PAIN WAS FROM, HE SAID THAT THE PAIN WAS WEIGHT BEARING PAIN. WHEN ASKED AGAIN WHAT THE PAIN WAS FROM, HE AGAIN SAID, AND WAS CONTINUALLY ANSWERING THAT IT WAS WEIGHT BEARING PAIN. I CONFIRMED THAT THERE WAS NOT A LANGUAGE BARRIER AND HE WAS UNDERSTANDING WHAT I WAS SAYING. HE SAID HE HAD WEIGHT BEARING PROBLEMS WITH HIS BACK, AND WAS NOT TAKING MEDICATION. WHEN ASKED WHAT MEDICATION, HE SAID OVERTHECOUNTER. HE WAS UNABLE TO INFORM ME THE NAME OR TYPE OF MEDICATION, ONLY THAT IT WAS OVERTHECOUNTER. "LAST TIME I TOOK IT, IT WAS PERKOCET." HE LAST TOOK IT THREE TIMES A MONTH. STATED THAT HE HAD ISSUES WITH HIS SHOULDERS, WHEN I ASKED IF HE HAD PROBLEMS WITH HIS HANDS, HE SAID A LITTLE BIT, BUT WHEN ASKED WHAT, HE SAID NOT MY HANDS THEMSELVES, BUT WITH HIS SHOULDERS. AND HAS NECK PROBLEMS, AND HURTS, BUT AGAIN SAID THAT IT WAS FROM HIS SHOULDERS.

## ODORS:

OBVIOUS ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM HIS PERSON, AND AS HE SPOKE IT BECAME STRONGER.

## GENERAL OBSERVATIONS

SPEECH: SLOW, SLURRED, REPEATITIVE

ATTITUDE: CALM, CONFUSED, CHANGING MIND,

CLOTHING: PINK BUTTON DOWNSHIRT, BLUE JEANS, BLACK SHOES.

MEDICAL/OTHER: \*\*All roadside tasks were conducted on in car video\*\* ORIGINALLY ON SCENE, STATED THAT HE DID NOT HAVE ANY MEDICAL ISSUES. ONCE HE EXITED FROM THE VEHICLE, STATED THAT HE HAD PAIN AND PROBLEMS WITH HIS ENTIRE BODY. HE WAS UNABLE TO PROVIDE A REASON FOR THE PAIN OR ISSUES THAT CAUSED THEM.

STATE OF FLORIDA  
COUNTY OF PALM BEACH

Inv. S. Levey #9415

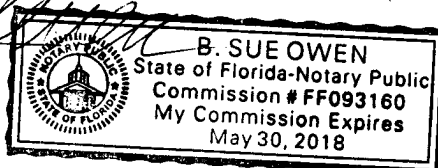
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 27TH day of JAN 20 17 by Inv. S. Levey #9415

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

Sue Owen (#3184)

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



SUBJECT: RIVIERA - GARCIA, CACIMAR, A CASE NUMBER 17-031957

## 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:

I ALLOWED CACIMAR THE OPPORTUNITY TO CHOOSE BETWEEN WALKING TASKS OR A SEATED BATTERY OF TASKS. HE CHOSE TO DO THE SEATED BATTERY OF TASKS. I THEN ATTEMPTED TO CONDUCT THE SEATED BATTERY OF TASKS. THE OVERHEAD FORWARD FACING BLUE POLICE LIGHTS WERE TURNED OFF PRIOR TO BEGINNING THE TASK. I USED INV. CHIQUITO-RODRIGUEZ'S VEHICLE, AND HE PUSH BUMPER FOR CACIMAR TO SIT ON.

### WALK & TURN:

\*CONTINUED FROM ABOVE\*

ONCE I BEGAN TO GO THROUGH THE PRE TASK QUESTIONS, HE STATED THAT HE WAS UNDER THE CARE OF A DENTIST, AS HE HAS DENTURES, HAD AN EXAM LAST WEEK, AND HAS ANOTHER APPOINTMENT NEXT WEEK. HE STATED THAT HE IS TAKING MEDICATION, FOR CHOLESTEROL, TRIGLYCERIDES, AND BLOOD SUGAR. WHEN QUESTIONED ABOUT THE BLOOD SUGAR MEDICATION, HE STATED THAT HE HAS TYPE 1 DIABETES. HE STATED THAT HE DOES NOT WEAR CONTACTS OR GLASSES. I THEN REQUESTED THAT PALM BEACH COUNTY FIRE RESCUE RESPOND TO SEE IF CACIMAR WAS HAVING A DIABETIC ISSUE. IT SHOULD AGAIN BE NOTED THAT THIS IS CONTARARY TO WHAT WAS TOLD TO ME ONCE HE WAS REMOVED FROM THE VEHICLE, AND WAS TALKING TO ME. WHILE WAITING FOR PBCFR TO RESPOND, HE ASKED ME "MAY I MAKE MEDICATION OR CALL TO A LAWYER." I REPLIED NOT AT THIS TIME.

PBCFR RESPONDED REF RUN#17-10411, AND I WAS INFORMED THAT HIS BLOOD SUGAR WAS 103. FIRE RESCUE STAFF INFORMED ME THAT THEY WERE PUTTING ON THE REPORT THAT HE WAS INTOXICATED, AND NOT A DIABETIC ISSUE.

### ONE LEG STAND:

\*CONTINUED FROM ABOVE\*

ONCE HE WAS CLEARED FROM FIRE RESCUE, I BEGAN THE INSTRUCTIONS TO CONTINUE THE SEATED BATTERY OF TASKS. CACIMAR HAD DIFFICULTY FOLLOWING INSTRUCTIONS, WHEN ASKED TO SIT AT THE FRONT EDGE OF HIS SEAT, HE STOOD UP. HE WAS ASKED TO SIT, JUST AS HE WAS, AND TO HAVE HIS ARMS DOWN BY HIS SIDE, AND HAVE HIS FEET SHOULDER WIDTH APART. CACIMAR THEN LOOKED AT HIS RIGHT ARM. HE WAS CONTINUALLY ASKED TO SEPERATE HIS FEET, AND STATED THAT HE CAN'T. IT SHOULD BE NOTED THAT THEY WERE SEPERATED WHILE HE WAS BEING TREATED BY EMS.

I THEN INFORMED HIM THAT IF HE REFUSES TO DO THE TASKS THAT ARE ASKED OF HIM, HE IS GOING TO FORCE ME TO MAKE A DECISION ON HIS BEHALF, BASED ON THE INFORMATION THAT I HAD IN FRONT OF ME, AND THAT WHAT WAS STATED CAN BE USED AS EVIDENCE. HE STATED THAT HE UNDERSTOOD. HE WAS AGAIN GIVEN INSTRUCTIONS TO SIT IN THE PRESCRIBED MANNER. HE WAS UNABLE TO DO SO. I THEN NOTATED THIS, AND CONTINUED ON WITH THE TASKS.

### FINGER TO NOSE:

\*CONTINUED FROM ABOVE\*

I THEN BEGAN TO CONDUCT THE HORIZONTAL GAZE NYSTAGMUS TASK. I INFORMED HIM TO FOLLOW THE STIMULUS, A RED LIGHT, WITH HIS EYES AND HIS EYES ONLY. HE THEN LOOKED AT THE LIGHT. I THEN BEGAN TO MOVE THE LIGHT, HE DID NOT FOLLOW IT. I THEN INFORMED HIM AGAIN TO FOLLOW THE LIGHT. HE THEN AGAIN LOOKED AT THE LIGHT, THEN LOOKED BACK AT MY CHEST. I INFORMED HIM THAT I CAN SEE WHEN HE IS LOOKING AT THE LIGHT, AND WHEN HE IS LOOKING AT MY CHEST. HE AGAIN LOOKED AT THE LIGHT, AND AS I STARTED TO MOVE IT, HE SAID THAT HE CAN NOT SEE THE LIGHT. IT SHOULD BE NOTED THAT AS THE LIGHT STARTED TO MOVE, HE WOULD SHORTLY FOLLOW IT, THEN LOOK BACK AT ME. THIS INDICATED THAT HE CAN SEE THE LIGHT, BUT WAS CHOOSING NOT TO FOLLOW IT, AS INSTRUCTED.

### ROMBERG ALPHABET:

BASED ON THE ABOVE INFORMATION, I TOOK THIS THAT CACIMAR WAS GOING TO REFUSE TO CONTINUE TO DO ROADSIDE TASKS, AND WHAT WAS ASKED OF HIM. HE WAS THEN PLACED INTO HANDCUFFS THAT WERE DOUBLE LOCKED AND CHECKED FOR PROPER FITTING. HE WAS THEN PLACED INTO THE BACK SEAT OF MY PATROL VEHICLE.

ROADSIDE TASKS WERE UNABLE TO BE CONDUCTED.

### BREATH TEST RESULTS:

1) REFUSED

2) REFUSED

3)

4)

STATE OF FLORIDA  
COUNTY OF PALM BEACH

Inv. S. Levey #9415

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 27TH day of JAN

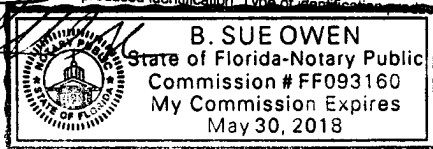
20 17

by Inv. S. Levey #9415

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

Sue Owen (#3184)

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



# WITNESS LIST

CASE NUMBER: 17-031957

ARRESTING OFFICER: Inv. S. Levey #9415

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

PHONE NUMBERS (HOME): N/A (WORK) 561-688-3000

CAN TESTIFY TO: The elements of the crime of DUI - Arresting officer

NAME: Inv. L. Chiquito-Rodriguez #18334

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

PHONE NUMBERS (HOME) N/A (WORK) 561-688-3000

CAN TESTIFY TO: Backup Officer on scene

NAME: D/S R. Minissali #9706

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

PHONE NUMBERS (HOME) n/a (WORK) 561-688-3000

CAN TESTIFY TO: Originally stopping D/S. Observed initial observations and driver asleep behind the wheel ☒

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

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) 0 (WORK) 0

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: \_\_\_\_\_

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

ADDRESS \_\_\_\_\_

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

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

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

ADDRESS \_\_\_\_\_

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

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

# TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: Rivera-Garcia, Cacimar Anam CASE NUMBER: 17-031957

DATE: 01/27/17 VIDEO TAPE NUMBER: DVD# 62036

BEGINNING TIME: 0344 ENDING TIME: 0347

BREATH TESTS RESULTS: **REFUSED** 1) TIME 0346 A.M./P.M. 2) TIME A.M./P.M.  
3) TIME A.M./P.M. 4) TIME A.M./P.M.

BREATH OPERATOR: S. Owen #3184

MAINTENANCE TECHNICIAN: J. Karlisle #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Spoke English, accent

ATTITUDE: Very polite, co-operative

CLOTHING: black shoes, jeans, pink shirt

MEDICAL CONDITIONS: none

MEDICATIONS: none

OTHER: 31 yoa

COMMENTS: A/O arrived at 0322 hrs  
A/O observed 20 minutes  
A/O requested breath test, A refused  
A/O read ILC, A understood, still refused  
A/O read CIW, A understood rights, refused QSA

SUBJECT: Rivera-Garcia, Cacimar Anam CASE NUMBER: 17-031957

## 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 Inv. Levey of the PBSO

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 Video

SUBJECT: Rivera-Garcia, Cacimar ANAM CASE NUMBER: 17-031957

## 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? \_\_\_\_\_

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: \_\_\_\_\_



**STATE OF FLORIDA**  
**DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES**  
**AFFIDAVIT OF**  
**REFUSAL TO SUBMIT TO BREATH, URINE, OR BLOOD TEST**

I, Inv. S. Levey #9415, a duly certified Law Enforcement Officer or Correctional Officer,  
(Person reading Implied Consent Warning)

am a member of PBSO, and I do swear  
(Name of enforcement agency)

or affirm that on or about the 27 day of January, 20 17, at 0306 ☐ P.M. ☒ A.M.

NAME CACIMAR ANAM RIVIERA - GARCIA  
(Type or Print) FIRST MIDDLE OR MAIDEN LAST  
DL# FL DL R162101853710 state of FLORIDA was placed under lawful arrest for  
the offense of DUI - DRIVING UNDER THE INFLUENCE by Inv. S. Levey #9415 and  
issued Citation # A0ZZZLP (Name of Arresting Officer)

That on or about the 27TH day of JANUARY, 20 17, at 03:46 ☐ P.M. ☒ A.M.  
in Palm Beach County. [PLEASE CHECK THE BOX OR BOXES THAT APPLY] I did request said person

to submit to a ☒ breath, ☐ urine, or ☐ blood test to determine the content of alcohol in his or her blood or breath or the presence of chemical or controlled substances therein. I did inform said person that any refusal to submit to such test or tests would result in the suspension of his or her privilege to operate a motor vehicle for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if the driving privilege of such person had been suspended previously for refusing to submit to such test or tests. I did inform said person that he or she commits a misdemeanor, if said person refuses to submit to a lawful test as requested above, and his or her driving privilege has been previously suspended for a prior refusal to submit to a lawful test of his or her breath, urine, or blood. If driver holds a CDL or is operating a CMV, I did inform the driver that this refusal will result in the disqualification of the driver's Commercial Driver's License/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 such test.

Said person did at that time and place refuse to submit to such test or tests.

\_\_\_\_\_  
Signature of Law Enforcement Officer or  
Correctional Officer

**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

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before

me this 27TH day of JAN, 20 17,

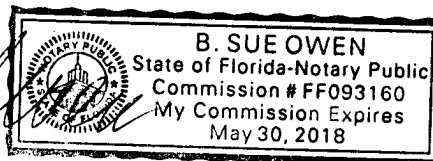
by Inv. S. Levey #9415

who is personally known to me or who has produced

PERSONALLY KNOWN LEO

as identification

Notary Public Sue Owen (#3184)



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.