

0502114

18CT18352

3041

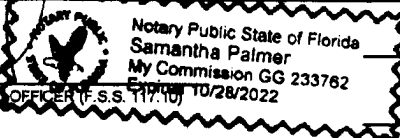
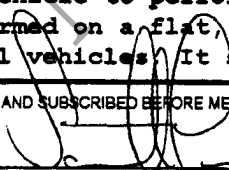
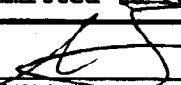
ARREST / NOTICE TO APPEAR

ADVISORY	OBTS Number	Agency ORI Number 0502300		Agency Name North Palm Beach Police Department		Agency Report Number (N.T.A.'s only) 7 0 18-000697		1 Arrest 2 N.T.A. 3 Request for Warrant 4 Request for Capias	1	JUVENILE		
DEFENSE	Charge Type: Check as many as apply		3. Misdemeanor 4. Traffic Misdemeanor		5. Ordinance 6. Other		If Weapon Seized Enter Type NONE		Multiple Clearance Indicator			
	Location of Arrest (Including Name of Business) 2805 RICHARD RD/ALT A1A NPB, FL 33408						Location of Offense (Business Name, Address) 2805 RICHARD RD/ALT A1A, NORTH PALM BEACH, FL 33403					
	Date of Arrest 10/09/2018	Time of Arrest 23:25	Booking Date 10/10/2018	Booking Time 00:28	Jail Date	Jail Time	Location of Vehicle					
Name (Last, First, Middle) DAVIS, CHELSEA LAUREL												
Alias: _____ Alias (Name, DOB, Soc. Sec. #, Etc.) _____												
DEFENSE	Race	Sex	Date of Birth 02/20/1988	Height 5'07	Weight 160	Eye Color GREEN	Hair Color BLONDE /	Complexion LIGHT	Build Thin	Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>		
	Local Address (Street, Apt. Number) 11027 LEGACY BLVD 103, PALM BEACH GARDENS, FL 33410		(City)	(State)	(Zip)	Phone		Residence Type: 1. City 3. Florida 2. County 4. Out of State		Address Source FL/DL		
	Permanent Address (Street, Apt. Number) 11027 LEGACY BLVD 103, PALM BEACH GARDENS, FL 33410		(City)	(State)	(Zip)	Phone		Occupation				
	Business Address (Name, Street)		(City)	(State)	(Zip)	Phone						
DL Number, State D120112885600 / FL		Sur. Sec. Number		INS Number		Place of Birth (City, State) SUMMIT, NJ, United		Citizenship U.S.				
CO-DEFENDANT	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 <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor				
	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 <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor				
JUVENILE	Parent <input type="checkbox"/> Other: _____ Name (Last, First, Middle)		Address (Street, Apt. Number)		(City)	(State)	(Zip)	Residence Phone				
	Legal Guardian		Address (Street, Apt. Number)		(City)	(State)	(Zip)	Business Phone				
	Notified by: (Name)		Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated							
	Released To: (Name)		Relationship	Date	Time							
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.												
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property								
CODE	Drug Activity		S. Sell N. N.A. P. Possess		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. Synthetic		U. Unknown Z. Other	
CHARGE	Charge Description DUI - DRIVING WHILE UNDER INFLUENCE						Statute Violation Number 316.193(1)		Violation of ORD #			
	Drug Activity	Drug Type	Amount / Unit	Offense #	Courts	Domestic Violence	Warrant / Capias Number		Bond			
CHARGE	Charge Description						Statute Violation Number		Violation of ORD #			
	Drug Activity	Drug Type	Amount / Unit	Offense #	Courts	Domestic Violence	Warrant / Capias Number		Bond			
CHARGE	Charge Description						Statute Violation Number		Violation of ORD #			
	Drug Activity	Drug Type	Amount / Unit	Offense #	Courts	Domestic Violence	Warrant / Capias Number		Bond			
INTEAKE	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: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent Guardian <input type="checkbox"/> T.O.T. County Jail						PROPERTY - Received By		Released By OCT 10 AM 2:14			
	Transported By						Date Transported	Time Transported	Other			
NOTICE TO APPEAR	<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court						Location (Court, Room) North County PALM BEACH GARD		No Photo Available			
	<input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.						Court Date and Time 11/07/2018 10:30:00					
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>Chelsea Davis</i>						Date Signed 10/10/18						
ADVISORY	HOLD for Other Agency		Signature of Arresting Officer <i>[Signature]</i>		Name Verification (Printed by Arrestee)							
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Name of Arresting Officer (Print) ZUCCARELLI, M.		LD. # 9857		(PRINT)					
	Intake Deputy <i>S. Mann 8101</i>		ID. #	Pouch #	Transporting Officer ZUCCARELLI		LD. # 9857	Agency NPBPD		Witness here if subject signed with an "X"		

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

A D M I N I S T R A T I V E	OETS Number		Agency ORI Number FL 0502300		Agency Name NORTH PALM BEACH POLICE		Agency Report Number 7 0 18-000697	
	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		Special Notes:		Name (Last, First, Middle) DAVIS, CHELSEA LAUREL		Race W	Sex F
C H A R G E S	Charge Description 316.193(1) DUI - DRIVING WHILE UNDER INFLUENCE		Charge Description		Charge Description		Charge Description	
	Victim's Name (Last, First, Middle) STATE OF FLORIDA,		Race	Sex	Date of Birth			
V I C T I M	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.</p> <p>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 _____ that he/she saw the arrested person commit the below acts.</p> <p><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.</p> <p>On the <u>9</u> day of <u>October</u>, <u>2018</u> at <u>23:25</u> (Specifically include facts constituting cause for arrest.)</p> <p>On 10/09/2018 at approximately 2254 hours, North Comm (North Communications) advised me that a "careless driver" was en route to my location which was Northlake Blvd and Alternate A1A North Palm Beach, Florida 33408. The vehicle was a blue Nissan SUV swerving that nearly crashed according to the witness who was following. As I was preparing to turn east bound on Northlake Blvd, I observed the vehicle turn right onto Alternate A1A where I was stationary at the traffic light. I was clearly able to identify the vehicle matching the description and the witness following.</p> <p>I then performed a U-turn at the intersection and proceed to get behind the Nissan northbound on Alternate A1A at the 9000-block. Once behind it, I observed it fail to maintain a lane twice before hitting the median barrier (in front of U-Haul rent center), subsequently leaving the roadway popping both driver side tires. Based on the observed driving pattern, I conducted a traffic stop using my emergency equipment at Richard Rd/Alternate A1A. I then made contact with the driver who was identified a Chelsea L. Davis (w/f 02/20/88) by her Florida drivers license (D-120-112-88-560-0). While speaking with Chelsea, her eyes were glassy and blood shot. Chelsea was stuttering her words and appeared nervous, i.e. hand shaking, stuttering her words, and sweating. I also could smell the odor of an unknown alcoholic beverage emanating from her breath as she spoke. Photos of where Chelsea hit the curb were taken and submitted to the records unit at the North Palm Beach Police Department.</p> <p>I then asked Chelsea where she was coming from and she replied "Frigates". Frigate's is a local restaurant and bar located at 400 US Highway One North Palm Beach, Florida 33408. I then asked Chelsea if she had anything to drink and she replied "two glasses of wine". Based on Chelsea's admission to consuming alcohol, I asked her to step out of her vehicle to perform the Standardized Field Sobriety Task's (SFST's). The SFST's were performed on a flat, dry surface which was well lit by street lights and Police Officers patrol vehicles. It should be noted that Chelsea later admitted to Police Sergeant</p>								
SWORN AND SUBSCRIBED BEFORE ME					SIGNATURE OF ARRESTING/INVESTIGATING OFFICER			
 NOTARY PUBLIC / CLERK OF COURT, OFFICER (F.S.S. 117.10) DATE <u>10/10/18</u>					 ZUCCARELLI, MICHAEL (9857) NAME OF OFFICER (PLEASE PRINT) DATE <u>10/10/2018</u>		PAGE 1 OF 2	

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1 JUVENILE

OBTS Number	Agency ORI Number FL 0502300		Agency Name NORTH PALM BEACH POLICE	Agency Report Number 7 0 18-000697
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other				Special Notes:

Name (Last, First, Middle) DAVIS, CHELSEA LAUREL	Age	Race W	Sex F	Date of Birth 02/20/1988
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Council that she consumed two more drinks prior to going to Frigates restaurant. At the conclusion of the SFST's, I determined that Davis was Driving under the influence (D.U.I) and placed her under arrest.

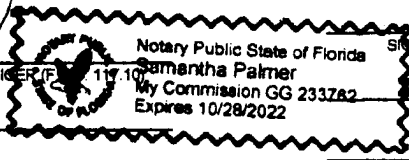
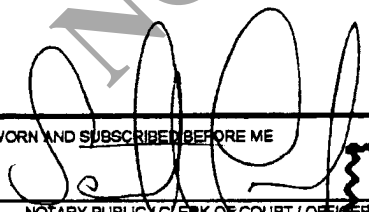
Based on my lawful traffic stop and subsequent investigation, probable cause exists to arrest Chelsea L. Davis with Driving under the influence (D.U.I) contrary to F.S.S. 316.193(1). Chelsea was searched prior to entering my marked patrol vehicle wearing a gray shirt, white pants, and tan shoes. Chelsea was placed into handcuffs which were checked for tightness and double locked. Chelsea was subsequently transported to the Palm Beach County Sheriff's Office Breath Alcohol Testing Center (B.A.T.) for further evaluation. While at the B.A.T., I conducted a 20 minute observation of Chelsea; she did not regurgitate or take anything by mouth. Chelsea was then brought into the breath testing room where she was asked to submit two samples of her breath to determine the blood alcohol concentration (BAC). Chelsea agreed and submitted the first breath, result .181 at 0038 hours and the second breath, .175 at 0042 hours. The legal limit for driving in the state of Florida is .08 BAC.

Chelsea was also issued a citation for Driving under the influence (D.U.I) contrary to F.S.S. 316.193(1) and Failure to maintain a lane (violation of lane of travel) contrary to F.S.S. 316.089(1), citation numbers A87S4UE and A87S4VE. Chelsea had in her possession three loaded firearms, Smith and Wesson M&P serial number NCB6185, two Kimber's serial numbers P0056927 and KDU1537. Chelsea did have a permit for the firearms. The firearms were taken for safe keeping and Chelsea was issued a property receipt for them. I inventoried the vehicle prior to it being towed by All Florida towing.

Chelsea was then booked into the Palm Beach County jail without incident.

End of report.

NOT A CERTIFIED COPY

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
	 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) DATE: 10/10/18		SUCCARELLI, MICHAEL (9857) NAME OF OFFICER (PLEASE PRINT) DATE: 10/10/2018

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 9th DAY OF October 20 18, AT 2325 AM PM

SUBJECT: Chelsea L. Davis CASE NUMBER: 18-000697

AGENCY: North Palm Beach PD ARRESTING OFFICER: Zuccarelli #9857

PERSONAL CONTACT

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

On 10/09/2018 at approximately 2254 hours, North Communications advised me that a careless driver was approaching my location on my "AVL" (automatic vehicle locator) and was being followed by the reporting party. I was at the traffic light preparing to go eastbound at Northlake Blvd/Alt A1A North Palm Beach, Florida 33408 when I observed the vehicle described by North Communications pass me going northbound on ALT A1A. The vehicle was described as a blue Nissan SUV bearing Florida tag EVX-X63. I then got behind the vehicle and observed exit the lane of travel two times, hit the median barrier, then drive off the road on top of the median where it popped the two driver side tires. I then conducted a traffic stop using my emergency equipment and made contact with the driver, Chelsea L. Davis who was identified by her FL/DL.

OBSERVATION OF DRIVER:

Chelsea was in the driver seat of the vehicle while the vehicle was operation but parked subsequent to my lawful traffic stop. Chelsea's eyes were bloodshot and glassy. Chelsea appeared to be nervous, i.e. handshaking, stuttering her words. Chelsea was wearing a gray shirt, white pants, and tan sandals.

DRIVER'S STATEMENTS:

Chelsea told me that she was coming from Frigates Restaurant (400 US HWY 1 NPB, FL 33408) after consuming two glasses of wine.

ODORS:

unknown alcoholic beverage.

GENERAL OBSERVATIONS

SPEECH: Slurred and stuttering.

ATTITUDE: Non-cooperative, and resistant to instructions.

CLOTHING: gray shirt, white pants, and tan sandals.

MEDICAL/OTHER: Anxiety, Depression, spine condition.

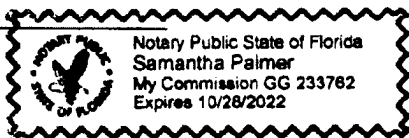
STATE OF FLORIDA
COUNTY OF PALM BEACH

Zuccarelli #9857
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 10 day of Oct 20 18 by _____

(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)



SUBJECT: Chelsea L. Davis

CASE NUMBER 18-000697

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:

WALK & TURN:

During the task, Chelsea failed to follow instructions and began the task without being instructed to. Chelsea was asked to keep her hands down to her side and did not follow my instructions instead used her hands for balance as she completed the task. Chelsea then took 10 steps instead of 9 on both segments. Chelsea then lost her balance on the 4th step during the last 9 steps. Chelsea did not remain the ready position prior to the test being completed.

ONE LEG STAND:

During the task, Chelsea started before instructed to do so and was using her hands for balance. Chelsea lost her balance on 1002, then put her foot down to start the task over. During her second attempt Chelsea put her foot down at 1006, and proceeded to stop the task put her foot down to restart. During the third attempt Chelsea lost balance at 1002. Chelsea could not complete the task.

FINGER TO NOSE:

During the task, Chelsea missed the first left, and touched the top of her nose with the middle of her index finger. Chelsea's second left touch the tip of her nose with the tip of her left index finger however her head was not tilted back. Her second right was done correctly. Chelsea then began to act hysterical and start crying and did not tilt her head back on the third right but did touch her nose, on the third left she missed her nose touching the left nostril before correcting to the tip of her nose.

ROMBERG ALPHABET:

During the task, Chelsea performed the ROMBERG in a non-rhythmic manner however did not finish correctly stating W-R-X-Y-Z.

BREATH TEST RESULTS: 1) .181 2) .175 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

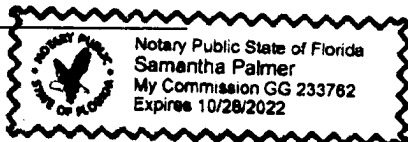
Zuccarelli #9857

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to and affirmed and subscribed before me this 10 day of Oct 2018 by _____

(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)



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: 80-006476 Software: 8100.27
Date of Test: 10/10/2018

Date of Last Agency Inspection: 09/07/2018
Observation Period Began: 00:13
Subject's Name: CHELSEA L DAVIS

DOB: 02/20/1988 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	00:37
	Air Blank	0.000	00:38
	Control Test	0.081	00:38
	Air Blank	0.000	00:39
	Subject Sample #1	0.181	00:39
	Air Blank	0.000	00:40
	Air Blank	0.000	00:42
	Subject Sample #2	0.175	00:42
	Air Blank	0.000	00:43
	Control Test	0.079	00:44
	Air Blank	0.000	00:44
	Diagnostics Check	OK	00:44

Cylinder Lot: 05218080A3
Exp: 05/05/2020

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 PARTIS D POUND, 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: 10/10/18

Sworn to (or affirmed) before me this 10th day of October, 2018

Signature of Notary Public-State of Florida

9887 SFC. M. LUCCARELLI
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.

SUBJECT: DAVIS CHELSEA L CASE NUMBER: _____

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 CAMERA

SUBJECT: DAVO, CHELSEA L CASE NUMBER: _____

QUESTIONS AND ANSWERS

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

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

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

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

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

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

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

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

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

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

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

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

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

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

WHAT? _____ WHERE? _____ WHEN? _____

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

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

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

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

WERE YOU IN AN ACCIDENT TODAY? _____

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

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

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

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

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

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

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

INTERVIEWER: _____

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

TESTING FACILITY TASK REPORT

AGENCY: NPBPD

SUBJECT: DAVIS, CHELSEA L CASE NUMBER: 18-131350

DATE: 10/10/18 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 00:34 ENDING TIME: 00:47

BREATH TESTS RESULTS: 1) .181 TIME 00:37 A.M./P.M. 2) .175 TIME 00:42 A.M./P.M.

3) N/A TIME --- A.M./P.M. 4) N/A TIME --- A.M./P.M.

BREATH OPERATOR: P. Pound # 24639

MAINTENANCE TECHNICIAN: J. KARLECLE # 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SCURRED

ATTITUDE: CARRYING UPSET, TALKATIVE

CLOTHING: WHITE SLANK, RIDE SHIRT, WHITE SANDALS

MEDICAL CONDITIONS: None

MEDICATIONS: XANAX

OTHER: EYES GLASSY AND BLOODSHOT

ODOR OF UNKNOWN ALCOHOLIC BEVERAGE BY BREATH.

COMMENTS: ARRIVED AT CENTER A/O BEGAN THE

20 MINUTE OBSERVATION PERIOD AT 00:13 HRS.

A. AGREED TO TAKE TEST.

TECH. READ RESULTS

A. STATED HE UNDERSTOOD RESULTS

A/O READ RIGHTS

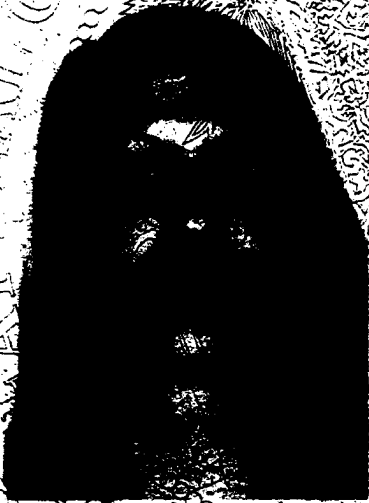
A. STATED HE UNDERSTOOD RIGHTS

A/O ASKED Q19

A. REFUSED QUESTIONS.

Florida

DRIVER LICENSE



DLID# **D120-112-88-560-0**

CLASS **E**

NAME **DAVIS
CHRISEA LAUREL**
RES **11077 LEGACY BLVD APT 103
PALM BEACH GARDENS, FL 33410**

DOB **02/20/1988** SEX **F** CLASS **SAFE DRIVER**

EXP **02/20/2027** HGT **5-07"**

REST **NONE** END **NONE**

ISS **03/11/2018**

SDD **P731803140000**

Chrisea Davis

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



DONOR

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: 80-006476 Software: 8100.27
Date of Test: 10/10/2018

Date of Last Agency Inspection: 09/07/2018

Observation Period Began: 00:13

Subject's Name: CHELSEA L DAVIS

DOB: 02/20/1988 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	00:37
Air Blank	0.000	00:38
Control Test	0.081	00:38
Air Blank	0.000	00:39
Subject Sample #1	0.181	00:39
Air Blank	0.000	00:40
Air Blank	0.000	00:42
Subject Sample #2	0.175	00:42
Air Blank	0.000	00:43
Control Test	0.079	00:44
Air Blank	0.000	00:44
Diagnostics Check	OK	00:44

Cylinder Lot: 05218080A3
Exp: 05/05/2020

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 PARIS D POUND, 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: 10/10/18

Sworn to (or affirmed) before me this 10th day of October, 2018

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 – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
I/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: 2018033840	Date: 10/10/2018
	Specialist Name/ID: howardt/7185