0478227 2019CJ027710AXB2850

ARREST / NOTICE TO APPEAR

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias 5. Juvenile Referral

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500200

Agency Name: Boca Raton Police Department

Agency Report Number (N.T.A.'s only): 3 2 2019-016747

Charge Type: Check as many as apply. ☒ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

If Weapon Seized: Enter Type: None/not Applicable

Multiple Clearance Indicator

Location of Arrest (Including Name of Business): 2499 W GLADES RD, BOCA RATON FL 33431

Location of Offense (Business Name, Address): 2499 W GLADES RD, BOCA RATON, FL 33431

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
12/08/2019	11:01	12/08/2019	11:11			EMERALD

DEFENDANT

Name (Last, First, Middle): LEVITT, DANA L

Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	06/29/1977	5'07	116	BROWN	BROWN	LIGHT	Small

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description): TATT LO BACK / TRIBAL; TATT R HIP / BUTTERY FLY

Marital Status: S Religion: NONE

Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. Drug Influence ☐ Yes ☐ No ☒ Unk.

Local Address (Street, Apt. Number) (City) (State) (Zip): 12781 HYLAND CIR, BOCA RATON, FL 33428

Phone: (561) 945-3241

Residence Type: 1. City 3. Florida 2. County 4. Out of State

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 12781 HYLAND CIR, BOCA RATON, FL 33428

Phone: (561) 945-3241

Address Source: SUBJECT

Business Address (Name, Street) (City) (State) (Zip): UNEMPLOYED,

Phone: (561) -

Occupation

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
L130172777290 / FL	[redacted]		SUFFERN, NY, United	US

CO-DEF

Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other: Name (Last, First, Middle)

Residence Phone

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 ☐ defendant and/or ☐ 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.

School Attended Grade

☐ Yes, by: ☐ No:

Property Crime? ☐ Yes ☒ No Description of Property Value of Property

CODE

Drug Activity: N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Disperses/ 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	Statute Violation Number	Violation of ORD #
DUI- PROPERTY DAMAGE/ INJURY TO PROPERTY OR PERSON ENHANCED	316.193(3C1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
VOP/STREET VIOLATION/A70374/PALM BEACH	948.06	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain: NONE

Check which applies: ☐ Released O.R. ☐ Posted Bond ☐ Released to Parent/Guardian ☐ South County Mental Health ☒ T.O.T. County Jail

PROPERTY - Received By | Released By | Released To

Transported By | Date Transported / / : : | Time Transported | Other

NOTICE TO APPEAR

☐ INSTRUCTION NO. 1 - Mandatory appearance in court
☒ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): South County 200 W Atlantic Ave Delray Beach, FL 33444

Court Date and Time: to be set by court

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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian) Date Signed

No Photo Available

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Intake Deputy I.D.# Pouch #

Signature of Arresting Officer

Name of Arresting Officer (Print): MURPHY, B. J. I.D.: 751

Transporting Officer: MURPHY I.D.: 751 Agency: BRPD

Name Verification (Printed by Arrestee) (PRINT)

DEC 5 PM 2:49

Witness here if subject signed with an "X".

PAGE 1 OF 1

PROBABLE CAUSE AFFIDAVIT

ADMIN

OBTS Number:

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

JUVENILE:

Agency ORI Number	Agency Name	Agency Report Number
FL 0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2019-016747

Charge Type: Check as many as apply.
☐ 1. Felony ☒ 3. Misdemeanor ☐ 5. Ordinance
☐ 2. Traffic Felony ☐ 4. Traffic Misdemeanor ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
LEVITT, DANA L		W	F	06/29/1977

CHARGES

Charge Description	Charge Description
316.193(3C1) DUI- PROPERTY DAMAGE/ INJURY TO PROPERTY	948.06 VOP/STREET VIOL/A70374/PALM BEACH
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
STATE OF FLORIDA,	U	U	

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
100 NW 2ND AVE, BOCA RATON, FL 33432	(561) -	DEFENDANT
Business Address (Name, Street) (City) (State) (Zip)	**Phone**	**Occupation**
	(56) -	

PROBABLE CAUSE STATEMENT

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

The Person taken into custody . . .

☐ committed the below acts in my presence.
☐ confessed to _____ admitting to the below facts.
☐ was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.
☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 8 day of December, 2019 at 11:01 (Specifically include facts constituting cause for arrest.)

On 12/8/2019 at approximately 0959 hours, I was dispatched to the area of St Andrews Blvd and W Glades Rd in reference to an accident.

Upon arrival, I observed a W/F, later identified as Dana Levitt, sitting in the driver`s seat of her vehicle. There was moderate damage to both the front and rear of her vehicle. I assisted Officer Wright conduct the accident investigation. It should be noted that Levitt backed her silver Nissan bearing FL Tag#JINP32 into the victim`s, W/M Robert Stansifer, white Chevy bearing FL Tag#TEXAGS. It should be noted that Levitt showed many signs of being impaired to include slurred speech, slow fine motor skills, unsteady on her feet, and a dry mouth.

Once the accident investigation was completed, Officer Wright did the changing of the hats and I then took over the investigation. I explained to Levitt that I was now going to begin a new investigation and I read her her Constitutional Warnings from a pre-printed BRPD issues card and she stated that she understood. I requested Levitt to conduct some field sobriety exercises to dispel my alarm that she was driving under the influence and she stated she would. Levitt stated that she did not drink; however, she is on multiple different prescription medications. I then asked her to step in front of my marked unit, which she did and I began the explaining the exercises to Levitt.

The first exercise was the horizontal gaze nystagmus. I explained the instructions and she stated she understood. She then began to complete the exercise. While observing her eyes I noticed a lack of smooth pursuit that was present in both eyes, each eye had a constant jerking while at maximum deviation and onset prior to 45 degrees was present in both eyes. She was swaying throughout the exercise.

The second exercise was the walk and turn. I explained the instructions, demonstrated it, and she stated she understood. It should be noted that she did not maintain the

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

KWATKIN, RYAN S
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

12/08/2019
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

MURPHY, BRITTANIE JEAN (751)
NAME OF OFFICER (PLEASE PRINT)

12/08/2019
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

Agency ORI Number	Agency Name	Agency Report Number
FL 0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2019-016747

Charge Type: Check as many as apply.
☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
LEVITT, DANA L		W	F	06/29/1977

PROBABLE CAUSE STATEMENT

starting position during the instructions. She missed heel to toe on multiple steps. Levitt stepped off the line and was unsteady on her feet throughout the exercise. Levitt did not watch her feet many times during the exercise and looked beyond them.

The third exercise the one leg stand. I explained the instructions, demonstrated it, and she stated she understood. She then began the task. She lifted her left foot and held it out. She did not count out loud and then said "six" and stopped the exercise. Levitt was swaying back and forth during the exercise. Due to her not completing the exercise per the instructions I provided, I let Levitt begin the exercise again. Levitt quickly dropped her foot to the ground and lost her balance. Levitt then began the exercise a third time, counted to 10 and stopped the exercise. Levitt did not keep her hands completely down at her sides throughout the exercise. She did not wish to continue this exercise and we moved onto the next one.

The fourth exercise was the finger to nose. I explained the instructions and she stated she understood. She then began the task (L-R-L-R-R-L). Levitt was slightly swaying throughout the exercise. She had to be reminded to tilt her head back multiple times during. It should be noted that her eyes were fluttering and she was extremely slow with touching the tip of her nose and stopped her finger multiple times prior to touching her nose.

The fifth exercise was the Romberg alphabet. I explained the instructions and she stated she understood. She then began saying the alphabet. Her eyes fluttered throughout the exercise and her speech was slurred.

The sixth exercise I instructed her to put her feet together and arms at her side. I explained to place her head back and eyes shut and count to 30 seconds in her head. When she shut her eyes, I would begin my timer and when she opened her eyes, I would end the timer. She opened her eyes and stated 20 in about 25 seconds. She then stated 30.

Levitt was then placed under arrest for DUI involving property damage under FSS 316.193(3C1). Levitt was transported to BRPD booking for processing. Once inside booking, Ofc Pare and I conducted the observation period. Officer Pare conducted the intoxilyzer 8000. Levitt provided two breath samples of .000. I then requested her to provide and urine sample and she consented. The urine sample will be placed into BRPD Evidence and sent for testing. It should be noted that during the booking process, she stated that she is on a "plethora" of drugs.

While running Levitt through FCIC/NCIC, it was learned that Levitt is on felony probation (DC#A70374) for the original charge of grand theft. The supervisions begin date was 4/9/2019 and had a termination date of 10/8/2020. She is additionally being charged with violation of probation under FSS 948.06(1A).

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

KWITKIN, RYAN S
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

12/08/2019
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

MURPHY, BRITTANIE JEAN (751)
NAME OF OFFICER (PLEASE PRINT)

12/08/2019
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

ADMIN

OBTS Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL 0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2019-016747

Charge Type: Check as many as apply.
☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
LEVITT, DANA L		W	F	06/29/1977

PROBABLE CAUSE STATEMENT

She was taken to BRRH for medical clearance and then TOT CJ.

The vehicle was towed by Emerald.

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

KWITKIN, RYAN S
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

12/08/2019
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

MURPHY, BRITTANIE JEAN (751)
NAME OF OFFICER (PLEASE PRINT)

12/08/2019
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

MURPHY
(751)

2019016747

FLORIDA UNIFORM TRAFFIC CITATION

A8EV6NE CHECK DIGIT

COUNTY OF: PALM BEACH
CITY (IF APPLICABLE): BOCA RATON 06/32

☐ (1) F.H.P. ☒ (2) P.D. ☐ (3) S.O. ☐ (4) OTHER
AGENCY NAME: BOCA RATON POLICE
AGENCY #: 32

IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON

COMPLAINT
(RETAINED BY COURT)

DAY OF WEEK	MONTH	DAY	YEAR	
SUNDAY	12	08	2019	11:01 ☒ A.M. ☐ P.M.

NAME (PRINT) FIRST: DANA | MIDDLE: L | LAST: LEVITT

STREET: 12781 HYLAND CIRCLE — IF DIFFERENT THAN ONE ON DRIVER LICENSE "X" HERE ▶

CITY: BOCA RATON | STATE: FL | ZIP CODE: 33428

TELEPHONE NUMBER | DATE OF BIRTH: MO 06 DAY 29 YR 1977 | RACE: W | SEX: F | HGT: 507

DRIVER LICENSE NUMBER: L130172777290 | STATE: FL | CLASS: E | CDL LICENSE: ☐ YES ☒ NO | YR LICENSE EXP.: 2026 | COMMERCIAL VEHICLE: ☐ YES ☒ NO

YR. VEHICLE	MAKE	STYLE	COLOR	PLACARDED HAZARDOUS MATERIAL
2018	NISS	4D	SIL	☐ YES ☒ NO

VEHICLE LICENSE NO.	TRAILER TAG NO.	STATE	YEAR TAG EXPIRES	≥ 10 PASSENGERS
JINP32		FL	2019	☐ YES ☒ NO

UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY: 2499 W GLADES RD, BOCA RATON — MOTORCYCLE: ☐ YES ☒ NO

COMPANION CITATION NUMBER(S):

FT. _____ MILES _____ ☐ N ☐ S ☐ E ☐ W OF NODE _____

DID UNLAWFULLY COMMIT THE FOLLOWING OFFENSE. CHECK ONLY ONE OFFENSE EACH CITATION.

☐ UNLAWFUL SPEED _____ MPH SPEED APPLICABLE _____ MPH
(☐ INTERSTATE ☐ 4-LANE HWY WITH 26 FT. MEDIAN OUTSIDE BUS. OR RES. DIST.)
SPEED MEASUREMENT DEVICE _____

☐ CARELESS DRIVING
☐ VIOLATION OF TRAFFIC CONTROL DEVICE
☐ FAILURE TO STOP AT A TRAFFIC SIGNAL
☐ IMPROPER LANE CHANGE OR COURSE
☐ NO PROOF OF INSURANCE
☐ VIOLATION OF RIGHT-OF-WAY
☐ IMPROPER PASSING
☐ CHILD RESTRAINT
☐ SAFETY BELT VIOLATION
☐ IMPROPER OR UNSAFE EQUIPMENT
☐ EXPIRED TAG ≤ SIX (6) MONTHS
☐ EXPIRED TAG > SIX (6) MONTHS
☐ DRIVING UNDER THE INFLUENCE
BAL _____
☐ EXPIRED DRIVER LICENSE
☐ > SIX (6) MONTHS
☐ NO VALID DRIVER LICENSE
☐ DRIVING WHILE LICENSE SUSPENDED OR REVOKED

OTHER VIOLATION'S OR COMMENTS PERTAINING TO OFFENSE:
DUI- PROPERTY DAMAGE/ INJURY TO PROPERTY OR PERSON ENHANCED

☐ AGGRESSIVE DRIVING | IN VIOLATION OF STATE STATUTE | SECTION 316.193 | SUB-SECTION (3C1)

CRASH	PROPERTY DAMAGE	INJURY TO ANOTHER	SERIOUS BODILY INJURY TO ANOTHER	FATAL
☐ YES ☒ NO	☐ YES $ _____ ☒ NO	☐ YES ☒ NO	☐ YES ☒ NO	☐ YES ☒ NO

☐ CRIMINAL VIOLATION. COURT APPEARANCE REQUIRED. AS INDICATED BELOW.
☐ INFRACTION. COURT APPEARANCE REQUIRED. AS INDICATED BELOW.
☒ INFRACTION WHICH DOES NOT REQUIRE APPEARANCE IN COURT.

A8EV6NE CHECK DIGIT

CIVIL PENALTY IS $ _____

COURT INFORMATION
DATE _____ TIME _____
COURT: SOUTH COUNTY COURTHOUSE
LOCATION: 200 W ATLANTIC AVE, DELRAY BCH, FL 33444

ARREST DELIVERED TO _____ DATE _____

I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION. WILLFUL REFUSAL TO ACCEPT AND SIGN THE CITATION MAY RESULT IN ARREST. I UNDERSTAND BY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF COURT.

X SIGNATURE OF VIOLATOR (SIGNATURE IS REQUIRED IF INFRACTION REQUIRES APPEARANCE IN COURT)

RANK - SIGNATURE OF OFFICER | BADGE NO. | I.D. NO. | TROOP UNIT

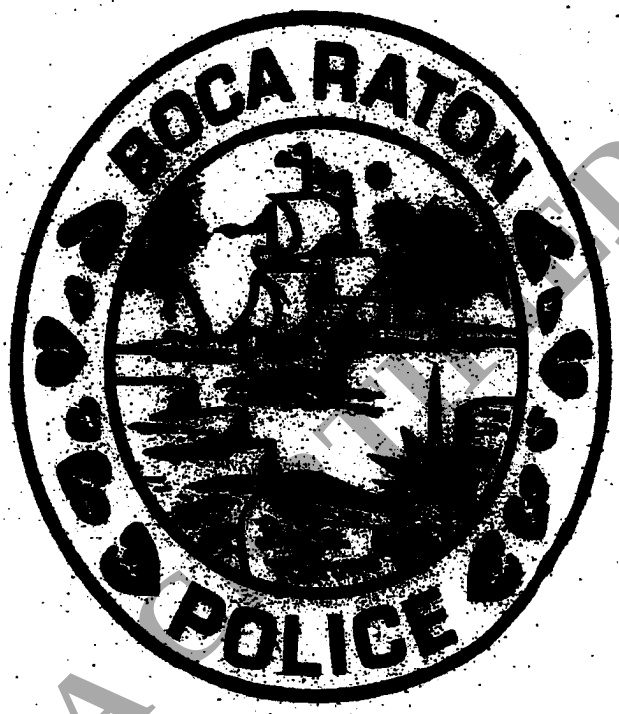
☒ I CERTIFY THIS CITATION WAS DELIVERED TO THE PERSON CITED ABOVE

HSMV 73991 (Rev. 9/19)

VIOLATOR'S FINGERPRINT WHEN APPLICABLE ⟶

Case#:19-16747
10-15: 1101 hours
OBV: 1115 hours

DUI INFLUENCE REPORT



BOCA RATON POLICE SERVICES DEPARTMENT
100 NW 2nd Avenue
Boca Raton, FL 33432

Revised: July 9, 2018

ARRESTING OFFICER: ofc. B. Murphy ID 751

Name: ofc. Baker Phone # _____ Work # 561-338-1234

Address: 100 NW 2nd Ave, Boca Raton, FL 33432

Can testify to: Case Details

Name: ofc. Fong Phone # _____ Work # 561-338-1234

Address: 100 NW 2nd Ave, Boca Raton, FL 33432

Can testify to: Case Details

Name: ofc. Wright Phone # _____ Work # 561-338-1234

Address: 100 NW 2nd Ave, Boca Raton, FL 33432

Can testify to: Case Details

Name: Robert Stansifer Phone # 602-705-5456 Work # _____

Address: 4662 Hammock Cir, Delray Bch, FL 33445

Can testify to: Victim / Case Details

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

-END OF PART ONE-

[redacted]

DUI INFLUENCE REPORT – PART II

To be filled out at testing facility

Agency Case # 2019-16747

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is Sunday (day), December (month), 8 (date), 2019 (year)

B. The time is now approximately 1143 (AM)/PM

C. The following is in reference to case number 2019-16747.

D. Present at this time is ofc Murphy/ofc. Wright of the Boca Raton Police Department. (Officer's Name)

E. Officer ofc. Murphy, have you arrested Dana Levitt (Defendant's name) in violation of Florida State Statute 316.193?

F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida? _____

G. Mr/(Mrs.)/Ms. Levitt, I am required to inform you these proceedings are being video recorded.

Operator Note: *Video record breath request, breath sample, and interview.*

II. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.

Note: Read only the paragraph applicable to the type of test you are requesting.

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

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

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

IMPLIED CONSENT WARNINGS

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 Signature: _____

Note: Also read for CDL holders:

IN ADDITION, your refusal to submit will result in the loss of your commercial privileges for one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from operating a commercial motor vehicle.

Note: After reading the implied consent warning, the arresting officer must request a breath sample again.

(IF REFUSAL THEN)

At this time Mr./Mrs./Ms. _____ has refused to submit to a breath test.

The date is _____ (month), _____ (day), _____ (year), and the time is _____ AM/PM.

A refusal form will be completed by the arresting officer.

[redacted]

BOCA RATON POLICE SERVICES DEPARTMENT

TESTING FACILITY TASK REPORT

SUBJECT: W/F Dana Lavitt

CASE #: 2019-16747 DATE: 12/8/19

BREATH TEST RESULTS .000 / .000

1) TIME 1147 Hrs AM/PM 2) TIME 1151 Hrs AM/PM

3) TIME / AM/PM 4) TIME / AM/PM

BREATH OPERATOR: PARÉ ID 671

MAINTENANCE TECHNICIAN: Van Camp ID 747

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slow / Thick, Slurred

ATTITUDE: Crying

CLOTHING: Brown Dress

MEDICAL CONDITION: Depression, Migraines

OTHER: Elavil - for Depression

COMMENTS: 1127hrs - OBS taken over by 671
- Subject stated she takes medication for conditions such as depression & Migraines.
- Subject stated she took all of her meds this morning as prescribed. She further stated that she has taken these meds for years and is familiar with them.

Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

(1) You have the right to remain silent and not answer any questions.
(2) Any statement you make must be freely and voluntarily given.
(3) You have a right to the presence and representation 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 and representation of a court appointed lawyer before you make any statement 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 be and will be used against you in a court of law.
(8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: ON Video Date: _____ Time: _____

QUESTIONS AND ANSWERS

Were you operating a motor vehicle at the time of the accident/stop? Yes

Where were you going? back to the party

What street or highway were you on? Federal and Glades

Direction of travel? South

Where did you start driving from? North

What city (county) were you stopped in? Boca

What time did you start? 9 (AM/PM) What time is it now? 12

What is today's date? 12/30 What day of the week is it? Sunday

When did you last eat? yesterday What did you eat? Pizza

What have you been doing the past three hours prior to this stop/accident? chores

How much do you weigh? 117 Have you been drinking? NO What were you drinking? _____

How much? _____ Where? _____ With whom were you drinking? _____

When did you have your first drink? _____ AM/PM When did you stop drinking? _____ AM/PM

How did you consume your last two drinks? ______

Are you under the influence of alcohol now? ☐ Yes ☒ No

Can you feel the effects of alcohol? ☐ Yes ☐ No

Have you consumed alcohol since the accident? ☐ Yes ☐ No

Can you feel the effects of alcohol? ☐ Yes ☐ No

Have you consumed alcohol since the accident? ☐ Yes ☐ No How much? ______

What? ______ Where? ______

What line of work are you in? dog walker, house watcher

When did you last work? two weeks ago

Do you have any physical defects or injuries? ☒ Yes ☐ No If yes, explain:

migraines, spasms, left hand was broken

Are you sick or injured? ☒ Yes ☐ No If yes, explain:

cold and tummy hurts

Do you limp? ☒ Yes ☐ No Did you get a bump on the head? ☐ Yes ☒ No

Were you in an accident today? yes

Have you taken any drugs or smoked marijuana today? no

What? ______ When? ______

Have you seen a doctor or dentist today? ☐ Yes ☒ No Who? ______

Are you taking any prescription medications? ☒ Yes ☐ No What? eletavil ranitinidine topamax birth control When? last night

Do you have: Epilepsy? ☐ Yes ☒ No Inner ear trouble? ☐ Yes ☒ No

Glass eye? ☐ Yes ☒ No Ear infection? ☐ Yes ☒ No

False teeth? ☐ Yes ☒ No Diabetes? ☐ Yes ☒ No

Any problems not correctable by glasses or contact lenses? no

Do you take insulin? ☐ Yes ☒ No If yes, when was your last injection? ______

Have you ever had a driver's license in any other state? ny

I am now ending this video recording. The time is now approximately 1705 AM/PM (PM circled)

The date is December, 8, 2019
(month) (day) (year)

PALM BEACH COUNTY
SHERIFF'S OFFICE
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

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

REVIEW COMPLETED BY

Booking Number: 2019039210	**Date:** 12/09/2019
	Specialist Name/ID: AM/31562