

0496972
 18CT5627 Axxy
 ARREST / NOTICE TO APPEAR
 Juvenile Referral Report
 1. Arrest
 2. N.T.A.
 3. Request for Warrant
 4. Request for Capias
 2
 Juvenile
 3209

OBTS Number	18CT5627 Axxy		Agency ORI Number	FLO 500000	Agency Name	PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number (N.T.A.'s only)	06-18-055774					
Charge Type:	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other			Weapon Seized / Type	<input type="checkbox"/> 1. Yes <input checked="" type="checkbox"/> 2. No		Multiple Clearance Indicator	1					
Location of Arrest (Including Name of Business)	SAME AS OFFENSE			New England Blvd / 587 Boca Raton									
Location of Offense (Business Name, Address)	NEW ENGLAND BLVD / SR#7 BOCA RATON FL. 33498												
Date of Arrest	03/28/18	Time of Arrest	2152 HRS	Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle	NA

Name (Last, First, Middle)	YETMAN DANIEL KNAPP								Alias (Name, DOB, Soc. Sec. #, Etc.)									
Race	W - White I - American Indian B - Black 0 - Oriental/Asian	W	Sex	M	Date of Birth	11/12/1982	Height	5'09	Weight	176	Eye Color	BLUE	Hair Color	BRN	Complexion	MED	Build	MED
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)	RIGHT SHOULDER "CROSS"				Marital Status	SINGLE		Religion	CATHOLIC		Indication of:	Y	N	Unk.				
Local Address (Street, Apt. Number)	9568 LAKE SERENA DRIVE			(City)	BOCA RATON FLORIDA		(Zip)	33496		Phone	(516) 319-3680		Residence Type:	<input type="checkbox"/> 1. City <input type="checkbox"/> 2. County <input type="checkbox"/> 3. Florida <input checked="" type="checkbox"/> 4. Out of State				2
Permanent Address (Street, Apt. Number)	SAME AS ABOVE			(City)			(Zip)			Phone	() SAME		Address Source	FLORIDA D/L				
Business Address (Name, Street)				(City)			(Zip)			Phone	()		Occupation	UNEMPLOYED				
D/L Number, State	Y355-171-82-412-0			Soc. Sec. Number			INS Number			Place of Birth (City, State)	NEW YORK NY		Citizenship	US				

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		
Parent Legal Custodian	Name (Last)		(First)	(Middle)	Residence Phone						
Other:	Address (Street, Apt. Number)		(City)	(State)	(Zip)	Business Phone					

Notified by: (Name)		Date		Time		Juvenile Disposition	<input type="checkbox"/> 1. Handled/ processed within Dept. and Released. <input type="checkbox"/> 2. TOT HRS / DYS <input type="checkbox"/> 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.						School Attended		
<input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)						Grade		
Property Crime?	Description of Property		Value of Property			MAR 29 2:05		
<input type="checkbox"/> Yes <input type="checkbox"/> No								

Drug Activity	S. Sell N. N/A P. Possess	R. Smuggle B. Buy T. Traffic	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	DUI		Counts	1		Domestic Violence	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	316.193(1)		Violation of ORD #	NA
Drug Activity	NA	Drug Type	NA	Amount / Unit	0	Offense #	18-055774		Warrant / Capias Number			Bond	ROR OR

Location (Court, Room Number, Address)	200 W. ATLANTIC BLVD DELRAY BEACH FLORIDA 33444									
Court Date and Time	Month	APRIL	Day	30TH	Year	2018	Time	0830 HRS	AM	<input checked="" type="checkbox"/>
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)										

HOLD for other Agency Name:	Signature of Arresting Officer		Name Verification (Printed by Arrested)		
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:	Name of Arresting Officer (Print) G.W. FLOWERS ID # 6988		MAR 29 2018 # 38		
Intake Deputy	#	Pouch #	Transporting Officer	ID #	Agency
G.FLOWERS			G.FLOWERS	6988	PBSO
Witness here if subject signed with an "X"					1 OF 1

PROBABLE CAUSE AFFIDAVIT

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

Juvenile

OBTS Number	Agency ORI Number FL 0 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 0 6 1 8 1 0 5 5 7 7 4 1 1 1
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 checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	Special Notes:

Name (Last, First, Middle) YETMAN DANIEL KNAPP	Alias	Race W	Sex M	Date of Birth 11.12.82
Charge Description DUI	Charge Description	Charge Description	Charge Description	Charge Description

Victim's Name (Last, First, Middle) STATE OF FLORIDA	Race N/A	Sex N/A	Date of Birth N/A
Local Address (Street, Apt. Number) 228 GUN CLUB RD WPB FL 33406	(City) WPB	(State) FL	(Zip) 33406
Business Address (Name, Street) 228 GUN CLUB RD WPB FL 33406	(City) WPB	(State) FL	(Zip) 33406
Phone (61) 688-320	Address Source UNKNOWN	Occupation	

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 ...

committed the below acts in my presence. was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.

confessed to _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.

On the _____ day of _____ 20____ at _____ A.M. P.M. (Specifically include facts constituting cause for arrest.)

While patrolling on the ARCA OF STATE ROAD SEVEN AND GLADES ROAD I OBSERVED A GOLD LEXUS FLORIDA TAG 353 TXS TRAVELING AT A HIGH RATED SPEED.

I POSITIONED MY MAZDA PATROL VEHICLE ASSET# 45297 BEHIND THE LEXUS. I PULLED THE VEHICLE DRIVING AT 80 MILES PER HOUR BETWEEN GLADES ROAD AND NEW ENGLAND BLVD. IN A 45 MILES PER HOUR ZONE.

I PULLED THE VEHICLE OVER AND MADE WITH SAW OCCUPANT DANIEL YETMAN 11-12-82. WHILE SPEAKING WITH HIM I NOTICED HIS SPEECH WAS SLURRED AND HIS EYES WERE RED AND BLOOD SHOT.

FEELING THAT HIS ABILITY TO DRIVE A MOTOR VEHICLE WAS IMPAIRED BY NARCOTICS OR AN ALCOHOLIC BEVERAGE I CONTACTED DEPUTY G. FLORES ID# 6988 TO CONDUCT A DUI INVESTIGATION.

STATE OF FLORIDA COUNTY OF PALM BEACH	SCANNED MAR 29 2018
(Signature of Arresting/Investigative Officer) <i>[Signature]</i>	
The foregoing instrument was sworn to or affirmed and subscribed before me this 28 TH day of MARCH 20 18 by D/S CARLOS GARCIA	
(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced	
D/S [Signature] 6988	
Notary Public, Clerk of Court, Officer (F.S. 117.10)	PAGE _____ OF _____

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 28 TH DAY OF MARCH 20 18, AT 2135 HRS AM PM

SUBJECT: DANIEL KNAPP YETMAN CASE NUMBER: 18-055774

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: G.W. FLOWERS #6988

PERSONAL CONTACT

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

OBSERVATION OF DRIVER:

WHEN I MADE CONTACT DANIEL YETMAN (11/12/1982) HE WAS SITTING IN HIS 2013 LEXUS (FL TAG # 353-TXS). WHEN I SPOKE WITH HIM AND ASKED FOR HIS DRIVERS LICENSE AND INSURANCE HE HAD IT IN HIS HAND WITH OTHER PAPERS LOOKING AT IT TWICE. I NOTICIED WHEN HE EXITED THE VEHICLE HE WAS UNSTEADY ON HIS FEET WHEN HE WALKED AND STOOD SWAYING BACK AND FORTH AND SIDE TO SIDE MORE THAN FOUR INCHES. I ALSO NOTED THAT HIS EYES WERE GLAZED WITH A BLOOD SHOT EFFECT.

DRIVER'S STATEMENTS:

HE TOLD ME THAT HE HAD ONE DRINK OF AN ALCOHOLIC BEVERAGE.

ODORS:

STRONG SMELL OF AN ALCOHOLIC BEVERAGE COMING FROM PERSON AND BREATH.

GENERAL OBSERVATIONS

SPEECH: SLURRED AND THICK TONGUED

ATTITUDE: COOPERATIVE

CLOTHING: PLAID SHORTS/ GREY SHIRT / GREY SHOES

MEDICAL/OTHER: NONE STATED/ NONE NOTED

STATE OF FLORIDA
COUNTY OF PALM BEACH

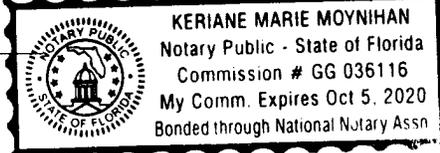
G.W. FLOWERS #6988

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 28 TH day of MARCH 20 2018 by D/S GARY FLOWERS

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

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



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MAR 29 2018

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|---|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT |
| <input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input checked="" type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input checked="" type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

WALK & TURN

**INSTRUCTIONAL PHASE: COULD NOT STAND HEEL TO TOE AS INSTRUCTED MOVING HIS FEET SEVERAL TIMES TO REGAIN BALANCE.
TASK: TOOK A TOTAL OF FIVE STEPS. DID NOT WALK HEEL TO TOE ON ALL FIVE STEPS. TASK WAS STOPPED DUE TO INTOXICATION LEVEL AND SAFETY.**

ONE LEG STAND:

DID NOT PREFORM DUE TO INTOXICATION LEVEL AND SAFETY.

FINGER TO NOSE:

SWAYED FROM SIDE TO SIDE BACK AND FORTH MORE THAN FOUR INCHES. 1ST LEFT TOUCHED BRIDGE OF NOSE. 1ST RIGHT ATTEMPT DID CORRECTLY. 2ND LEFT ATTEMPT TOUCHED BRIDGE OF NOSE. 2ND RIGHT ATTEMPT TOUCHED BRIDGE OF NOSE. 3RD LEFT ATTEMPT STARTED WITH RIGHT CORRECTING WITH LEFT TOUCHED BRIDGE OF NOSE. 2ND LEFT DID CORRECTLY.

ROMBERG ALPHABET:

SAID THE ALPHABET CORRECTLY "A" THROUGH "S" THEN SAID UGGH THEN "Q,R,S,T" THEN SAID I DONT KNOW THE REST. SWAYED BACK AND FORTH MORE THEN FOUR INCHES.

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BREATH TEST RESULTS: .197/.199

STATE OF FLORIDA
COUNTY OF PALM BEACH

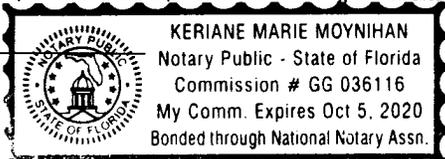
G.W. FLOWERS #6988

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 21ST day of MARCH 202018 by D/S GARY FLOWERS

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

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



WITNESS LIST

CASE NUMBER: 18-055774

ARRESTING OFFICER: G.W. FLOWERS #6988

ADDRESS: 3228 GUN CLUB RD WPB FL 33406

PHONE NUMBERS (HOME): _____ (WORK) 561-688-3000

CAN TESTIFY TO: ALL OF INCIDENT

NAME: D/S C. GARCIA ID# 21280

ADDRESS: 3228 GUN CLUB ROAD WPB FL 33406

PHONE NUMBERS (HOME) _____ (WORK) 561-688-3000

CAN TESTIFY TO: PHYSICAL CONTROL OF VEHICLE

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) _____

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ADDRESS _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: PBSO
SUBJECT: Yelman, Daniel K CASE NUMBER: 18-055774
DATE: 03/28/18 VIDEO TAPE NUMBER: N/A
BEGINNING TIME: 23:34 ENDING TIME: 23:51
BREATH TESTS RESULTS: 1) .197 TIME 23:37 A.M. (P.M.) 2) .197 TIME 23:40 A.M. (P.M.)
3) N/A TIME — A.M./P.M. 4) N/A TIME — A.M./P.M.

BREATH OPERATOR: K. Moynihan #93071
MAINTENANCE TECHNICIAN: J. Karlocke #64167

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred
ATTITUDE: Calm, Quiet, Cooperative
CLOTHING: Gray plaid shorts, Gray short sleeve t-shirt, Gray loafers
MEDICAL CONDITIONS: None
MEDICATIONS: None

OTHER: Eyes glassy and bloodshot. Odor of unknown alcoholic beverage on breath. (Admitted to drinking 2 glass of Cranberry and Vodka (Q+A))

COMMENTS: Arrived at Testing Center, ALO began 90 minute Observation Period at 23:09 hrs.

Δ agreed to take test.

Tech read Breath Test results, Δ stated he understood the results.

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ALO read Rights.

Δ stated he understood his Rights.

ALO conducted Q+A

Δ answered Questions.

SUBJECT: Yelaman, Daniel K. CASE NUMBER: 18-055774

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.

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SUSPECT'S SIGNATURE: (X) Head on Camera

SUBJECT: Yellow, Daniel K CASE NUMBER: 18-055774

QUESTIONS AND ANSWERS

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

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

WHERE WERE YOU GOING? To get food

WHAT STREET OR HIGHWAY WERE YOU ON? 441

DIRECTION OF TRAVEL? North WHERE DID YOU START? Lake Susan Drive

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? Yes WHAT? Beer

HOW MUCH? 1 beer WHERE? Home 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? Yes ARE YOU UNDER THE INFLUENCE? Yes

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? 5/1/18

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? No WHAT? _____

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

DO YOU LIMP? No 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? No WHEN? _____

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

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? Yes WHAT? Hydrocodone WHEN? 1/18

DO YOU HAVE:

EPILEPSY?	_____
GLASS EYE?	_____
FALSE TEETH?	_____
EAR INFECTION?	_____
INNER EAR TROUBLE?	_____
DIABETES?	_____

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DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? No

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

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? No WHERE? _____

INTERVIEWER: _____

Sunshine State

DRIVER LICENSE CLASS E

Y355-171-82-412-0

DANIEL KNAPP

VETMAN

1988 LAKE SERENA DR

ORCA BAYON, FL 32066-6517

DOB: 11-02-1962 SEX: M

ISS: 03-11-2011 EXP: 03-11-2015



Handwritten signature

SAFE DRIVER

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

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MAR 29 2018

PALM BEACH COUNTY SHERIFF'S OFFICE

3228 GUN CLUB ROAD

WEST PALM BEACH, FL 33406-3001

- WRITTEN WARNING
- NOTICE OF ILLEGAL OR FAULTY EQUIPMENT

Date/Time: **WEDNESDAY 03/28/2018 10:19 PM**

VIOLATOR

First Name: **DANIEL** Middle: **KNAPP**
 Last: **YETMAN** DOB: **11/12/1982**
 Address: **9568 LAKE SERENA DR.**
 City: **BOCA RATON** State: **FL** Zip: **33496**
 Telephone: Race: **W** Sex: **M** Hgt: **509**
 DL #: **Y355171824120** DL State: **FL** Lic. Expires: **2019**
 Type: **E** Diff. Addr. on DL: **N**

REGISTRATION

Yr. Veh: **2013** Veh. Tag: **353TXS**
 Color: **SIL** Yr. Tag Expires: **18** State: **FL**
 Make: **LEXS** Style: **4D**

LOCATION

Upon a Public Street or Highway or Other Location Namely:
STATE ROAD SEVEN AND GLADES ROAD, BOCA RATON, FLORIDA

VIOLATION

Did unlawfully commit the following Offense
UNLAWFUL SPEED 80 ON A 45. PACED BY VEHICLE ASSET NUMBER#45297

NOTE: FOR EQUIPMENT VIOLATIONS PLEASE FOLLOW INSTRUCTIONS ON THE FOOTER

THIS IS A WARNING ONLY
THIS IS NOT A CITATION AND NO FINE IS ASSESSED

I HEREBY ACKNOWLEDGE RECEIPT OF THIS WARNING AND UNDERSTAND THAT THIS WARNING IS ISSUED IN LIEU OF A UNIFORM TRAFFIC CITATION.

SIGNATURE OF DRIVER X: *[Signature]*

D/S: **GARCIA** I.D.#: **21280**

CERTIFICATION OF CORRECTION

I CERTIFY THAT THE EQUIPMENT ON THE VEHICLE DESCRIBED HEREIN AS INDICATED HAS BEEN TESTED AND, OR CORRECTED, AND UPON THIS DATE COMPLIES WITH THE REQUIREMENTS OF THE TRAFFIC LAWS OF FLORIDA.

DATE _____ 20 _____ HOURS _____ A.M. P.M.

SIGNED _____
 Party Making Correction

Address: _____

SCANNED
MAR 29 2018

IMPORTANT. This Notification With Proper Certification Above is To Be Mailed Or Delivered To The Officer Indicated Within 48 Hours.

PALM BEACH COUNTY SHERIFF'S OFFICE
 P.O. BOX 24681
 WEST PALM BEACH, FL 33416-4681

FAILURE TO COMPLY WITH THIS NOTICE COULD RESULT IN A NON-CRIMINAL INFRACTION BEING ISSUED.