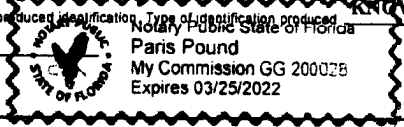


0509065

19011852

3734

ADMINISTRATIVE		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile	
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-19-087682							
Charge Type: Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Weapon Seized / Type 1. Yes 2. No		Multiple Clearance Indicator 1							
Location of Arrest (Including Name of Business) BELVEDERE RD (E) OF 5TH ST WEST PALM BEACH FL 33409				Location of Offense (Business Name, Address) BELVEDERE RD (E) OF 5TH ST WEST PALM BEACH FL 33409							
Date of Arrest 06/29/2019		Time of Arrest 0307		Booking Date		Booking Time		Jail Date		Jail Time	
Name (Last, First, Middle) BATEMAN DAVID		Alias (Name, DOB, Soc. Sec. #, Etc.) FRANK THOMAS		All Florida Towing							
Race W - White I - American Indian B - Black O - Oriental/Asian W		Sex M		Date of Birth 05/22/1985		Height 601		Weight 160		Eye Color BRO	
Complexion MED		Build MED		Mental Status S		Religion CHRISTIAN		Indication of Alcohol Influence Y ☐ N ☐ Unk. ☐		Indication of Drug Influence Y ☐ N ☐ Unk. ☐	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TAT RT SHOULDER				Residence Type: 1. City 2. County 3. Florida 4. Out of State 1		Address Source DEFENDANT		Occupation BOAT CAPTAIN			
Local Address (Street, Apt. Number) 714 SW GARDENS BLVD		(City) PALM CITY		(State) FL		(Zip) 34990		Phone (772) 9859046			
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone			
Business Address (Name, Street)		(City)		(State)		(Zip)		Phone			
D/L Number, State (FL)B355166851820		Soc. Sec. Number		INS Number		Place of Birth (City, State) STUART FL		Citizenship US			
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	
☐ Parent ☐ Legal Custodian ☐ Other:		Residence Phone ()		Address (Street, Apt. Number)		(City)		(State)		(Zip)	
Business Phone ()		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 ☐ defendant and / or ☐ defendant's parents. The child and / or parent was told to keep the Juvenile Court Clerk (Phone 365-2526) informed of any change of address. ☐ Yes, by: (Name) ☐ No: (Reason)		School Attended	
Grade		Property Crime? ☐ Yes ☐ No		Description of Property		Value of Property					
Drug Activity N. N/A P. Possess		S. Sell B. Buy 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 DUI		Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number 316.193(1)		Violation of ORD #			
Drug Activity /		Drug Type /		Amount / Unit N/A		Offense # 19-087682		Warrant / Capias Number		Bond OR	
Charge Description		Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number		Violation of ORD #			
Drug Activity /		Drug Type /		Amount / Unit /		Offense #		Warrant / Capias Number		Bond	
Charge Description		Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number		Violation of ORD #			
Drug Activity /		Drug Type /		Amount / Unit N/A		Offense #		Warrant / Capias Number		Bond	
Charge Description		Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number		Violation of ORD #			
Drug Activity N/A		Drug Type N/A		Amount / Unit N/A		Offense # 19-083207		Warrant / Capias Number		Bond	
Location (Court Room Number, Address) 3228 GUN CLUB RD WPB FL 33406		Court Date and Time Month JULY Day 25 Year 2019 Time 0830 AM ☒ 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 COURTS 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 / Guardian) 		Date Signed 06/29/2019									
HOLD for other Agency Name: ☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other:		Signature of Arresting Officer INV E. K. WHITE		Name of Arresting Officer (Print) INV E. K. WHITE		I.D. # 7209		Name Verification (Printed by Arrestee) (PRINT)		PAGE	
Transporting Officer E. K. WHITE		I.D. # 7209		Agency PBSO		Witness here if subject signed with		SCANNED			

OBT Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile
ADMIN	Agency ORI Number FLO 500000	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06- 19-087682				
	Charge Type: ☐ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☐ 4. Traffic Misdemeanor ☐ 6. Other		Special Notes:				
CHARGES	Name (Last, First, Middle) BATEMAN, DAVID, FRANK THOMAS		Alias		Race W	Sex M	Date of Birth 05/22/1985
	Charge Description DUI		Charge Description 316.193(1)				
VICTIM	Victim's Name (Last, First, Middle)		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			
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 _____ ☐ confessed to _____ that he/she saw the arrested person commit the below acts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the <u>29</u> day of <u>JUNE</u> 20 <u>19</u> at <u>0218</u> ☒ A.M. ☐ P.M. (Specifically include facts constituting cause for arrest.)							
I made contact with the driver as he sat on his tailgate. He was later identified as David Frank Thomas Bateman by his Florida driver license. During my interview I noticed the his eyes were red, watery and glossy. His cheeks were flushed, his mouth was dry and he slurred his speech while speaking. His movements were slow, calculated and lethargic. He was wearing a long sleeved white shirt, blue short pants and blue and white shoes. I could smell a strong odor of an unknown alcoholic beverage emanating from the inside of the vehicle. I told him about the complaint of his vehicle being stopped in roadway. Moreover paramedics responded to the scene and checked for any medical issues he may have been having. I advised him of them finding nothing wrong with him medically. Thus I explained that I had a suspicion that he had been drinking an unspecified amount of alcoholic beverages. He nodded his head. I asked if he would consent to performing Standardized Field Sobriety Evaluations (SFSTs) for the purpose of determining if he was impaired while operating a motor vehicle. He quizzically stared at me while and appeared confused. He later said he did not want to do anything. I explained Taylor Warnings that informed him performing the SFSTs were voluntary and he did not have to comply. However if he did not comply I would only be left with the evidence before me {previously mentioned indicators and the paramedic's observation of him sitting inside his vehicle with the engine on} which could be strong basis of him being placed under arrest for DUI. He refused to cooperate. Based on the complaint of his vehicle being stopped in the roadway with EMS responding to the scene to assess him medically, coupled with the lieutenant's suspicion of his alcoholic beverage consumption and my observation of personal indicators of impairment exhibited by him, probable cause was established for DUI. I asked him to step down from the tailgate. In doing so he lost his balance and was unsteady on his feet. I told him he was being placed under lawful arrest for DUI. The defendant was searched and handcuffed (double locked and checked for tightness) prior to being seated into the rear of my patrol car. Back up deputies arranged for the defendant's vehicle to be towed by a wrecker service on our rotation list. All Florida Towing Company responded and impounded the defendant's vehicle to their lot. Meanwhile I began transport to the main jail breath analysis facility for further processing. Upon our arrival I escorted the defendant into the facility and began a 20 minute observation period. During this time the defendant did not ingest anything into their body orally or otherwise. He did not regurgitate either.							
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH		INV E. K. WHITE				
	(Signature of Arresting/Investigative Officer)						
The foregoing instrument was sworn to or affirmed and subscribed before me this <u>29</u> day of <u>JUNE</u> 20 <u>19</u> by <u>INV E. K. WHITE</u> (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>KNOWN</u> Notary Public, Clerk of Court, Officer (F.S. 117.10)							
							

OBT Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	Juvenile
ADMIN	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06- 19-087682				
	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) BATEMAN, DAVID, FRANK THOMAS				Alias		Race W	Sex M	Date of Birth 05/22/1985
	Charge Description DUI		316.193(1)		Charge Description				
CHARGES	Charge Description		Charge Description						
	Charge Description		Charge Description						
VICTIM	Victim's Name (Last, First, Middle)						Race	Sex	Date of Birth
	Local Address (Street, Apt. Number)						(City)	(State)	(zip)
	Business Address (Name, Street)						(City)	(State)	(zip)
							Phone	Address Source	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. ☐ confessed to _____ admitting to the below facts. ☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the <u>29</u> day of <u>JUNE</u> 20 <u>19</u> at <u>0218</u> ☒ A.M. ☐ P.M. (Specifically include facts constituting cause for arrest.) I escorted him into the testing room and asked him to provide breath samples for the purpose of determining his alcohol content. He refused. I read hi implied consent and asked if he understood it. He acknowledged the consent. I asked if he would reconsider his refusal and give breath samples. He refused a second time. At this time he was deemed a "refusal". I read his Constitutional Rights and asked if he understood them. He told me he understood his rights. I asked if he would consent to an interview and he declined. The defendant was booked into the main jail on the charge of DUI.									
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH		INV E. K. WHITE						
	(Signature of Arresting/Investigative Officer)								
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>29</u> day of <u>JUNE</u> 20 <u>19</u> by <u>INV E. K. WHITE</u>								
	(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>KNOW</u>								
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)									
PAGE <u>2</u> OF <u>2</u>									

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 29 DAY OF JUNE 20 19 AT 0218 ✓ AM PM
SUBJECT: BATEMAN DAVID FRANK THOMAS CASE NUMBER: 19-087682
AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV E. K. WHITE

PERSONAL CONTACT

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

On Saturday, June 29, 2019 at approximately 0220 hours, I responded to Belvedere Road and Congress Avenue in reference to vehicle stopped in the roadway with the driver passed out behind the steering wheel. Palm Beach Fire Rescue responded and arrived on scene first. Deputy Andrew Soler also responded to the scene. The initial compliant was made by an anonymous motorist who observed a white pick up truck stopped in the roadway. Upon my arrival I noticed a white Toyota Tacoma pick up truck stopped in the west inside lane on Belvedere Road facing west. A white male subject was sitting on the tailgate of the vehicle. The engine was on and the hazard lights were activated. D/S Soler was standing on the rear driver side of the pick up truck. I looked inside the truck and saw an alcoholic beverage placed inside the center console cup holder. It was approximately half filled with a liquid content that I suspected to be an alcoholic beverage. Rescue 24 arrived on scene and Lieutenant Wendi Lanzi and her crew made contact with a white male subject who was the sole occupant inside the truck. Lt. Lanzi explained the truck was running. She said as she interviewed the subject his speech was slurred and smelled of alcohol. While escorting to their unit she noticed he was unable to walk steady. Once they cleared him medically she turned the subject over to PBSO. Lt. Lanzi wrote a sworn witness statement regarding her involvement with this incident.

OBSERVATION OF DRIVER:

SEE PC AFFIDAVITS

DRIVER'S STATEMENTS:

ODORS:

STRONG ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM SUBJECT'S BREATH.

GENERAL OBSERVATIONS

SPEECH: slurred

ATTITUDE: apologetic, reserved, inattentive

CLOTHING: loose

MEDICAL/OTHER: none

STATE OF FLORIDA
COUNTY OF PALM BEACH

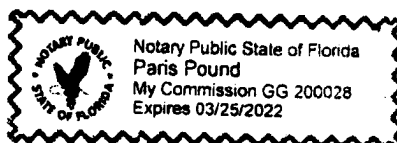
INV E. K. WHITE

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 29 day of JUNE 20 19 by INV E. K. WHITE

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

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



SCANNED
JUN 30 2019

SUBJECT **BATEMAN**

DAVID

CASE NUMBER **19-087682**

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:

REFUSED

WALK & TURN:

REFUSED

ONE LEG STAND:

REFUSED

FINGER TO NOSE:

REFUSED

ROMBERG ALPHABET:

REFUSED

BREATH TEST RESULTS:

1) **REFUSED**

2)

3)

4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

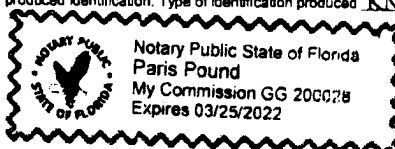
INV E. K. WHITE

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 29 day of JUNE, 20 19 by INV E. K. WHITE

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

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



SCANNED
JUN 30 2019

PALM BEACH COUNTY SHERIFF'S OFFICE – **SWORN STATEMENT**

Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.



☐ WITNESS ☐ VICTIM ☐ OTHER

CASE #	19-087682	ZONE:	3-22	SUSPECT:		DATE & TIME OF ORIGINAL EVENT/OFFENSE:	6/29/19 0218
EVENT TYPE:	DUI	DEPUTY:	WHITE	ID#:	7209		

COMPLETE EVERYTHING BELOW – PRINT LEGIBLY

LAST NAME:	Lanzi	FIRST NAME:	Wendi	MIDDLE INITIAL:	N	RACE:	W	SEX:	F
DATE OF BIRTH:	(MM/DD/YYYY)	YOUR HEIGHT:	5'7"	YOUR WEIGHT:	135	YOUR HAIR COLOR:	Blonde	YOUR EYE COLOR:	Green
YOUR HOME ADDRESS:	☐ CHECK IF HOMELESS			CITY:	WPB	STATE:	FL	ZIP:	
YOUR WORK NAME & ADDRESS:	☐ CHECK IF UNEMPLOYED OR RETIRED			CITY:	WPB	STATE:	FL	ZIP:	33411
WORK PHONE:	☐ CHECK IF NONE	CELL PHONE:	☐ CHECK IF NONE	HOME PHONE:	☐ CHECK IF NONE	EMAIL:	☐ CHECK IF NONE		
()	()	()	()	()	()	Wendi.Lanzi@gmail			

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL – PRINT LEGIBLY

YOUR NAME:	1 Wendi Lanzi	DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...
R24 was dispatched to scene for a unresponsive person. Arrived on scene to WPB lanes of Belvedere Rd to find a white Tacoma pick-up truck stopped in the left. Vehicle was running. As we approached vehicle we saw a white male in driver seat appearing confused. Male had slurred speech and smelled of alcohol. Crew shut vehicle off and had male walk to our rescue to be medically evaluated. Alcoholic beverages seen in front seat of male's vehicle. Male had difficulty walking and appeared intoxicated. Once it was determined male did not have a medical emergency, PBSO was called to scene for possible DUI		

PAGE ____ OF ____

READ AND SIGN

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:	☒ DEPUTY SHERIFF ☐ NOTARY PUBLIC FSS: 117.10
YOUR SIGNATURE: X Wendi Lanzi	SWORN TO AND SUBSCRIBED BEFORE ME TODAY:
	DATE: 6/29/19 TIME: 0830
	SIGNATURE: ID: 7209

IF YOU DO NOT WISH TO PROSECUTE, COMPLETE THE ABOVE STATEMENT, READ THIS DISCLAIMER AND INITIAL BELOW: I AM OF LEGAL AGE AND I AM THE REPORTED VICTIM OF A CRIME UNDER FLORIDA LAW. I HEREBY STATE THAT I WILL NOT COOPERATE ANY FURTHER WITH THE INVESTIGATION OF THE ALLEGED CRIME. I FURTHER RELEASE THE PALM BEACH COUNTY SHERIFF'S OFFICE OF ANY PRESENT OR FUTURE RESPONSIBILITY AS TO MY CASE. I ACKNOWLEDGE THAT I UNDERSTAND MY RIGHTS AS A CRIME VICTIM, PARTICULARLY REGARDING VICTIM COMPENSATION ELIGIBILITY, WHICH INCLUDES SUCH BENEFITS AS REIMBURSEMENT FOR: DISABILITY; LOST WAGES; LOSS OF SUPPORT; MEDICAL, DENTAL, MENTAL HEALTH COUNSELING AND FUNERAL EXPENSES. I AM AWARE I MAY BE GIVING UP THESE RIGHTS FOR MY FAMILY AND MYSELF BY INITIALING BELOW. I AM TAKING THIS POSITION OF MY OWN FREE WILL KNOWING THAT THE CASE CAN ONLY BE FURTHER INVESTIGATED AND PROSECUTED WITH MY COOPERATION.

☐ DO NOT WISH TO PROSECUTE (INITIAL)

(PROSECUTION WAIVER NOT TO BE USED FOR CASES INVOLVING DOMESTIC OR DATING VIOLENCE PER G.O. 508.00)

WHITE - RECORDS COPY

CANARY - STATE ATTORNEY COPY

PINK - OFFICER'S COPY

GOLD - WITNESS / VICTIM COPY

SCANNED
JUN 30 2019

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

I, INV E. K. WHITE, a duly certified Law Enforcement Officer or Correctional Officer,
 (Name of Officer reading Implied Consent Warning)

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

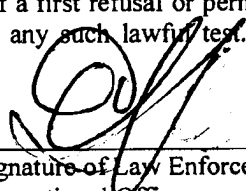
or affirm that on or about the 29 day of JUNE, 20 19, at 0307 ☐ P.M. ☒ A.M.

DRIVER DAVID FRANK THOMAS BATEMAN
 (Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

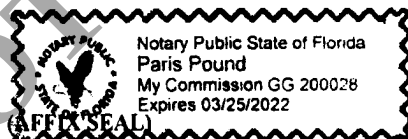
DL# (FL)B355166851820, state of FLORIDA, was placed under lawful arrest for
 the offense of DUI by INV E. K. WHITE and
 (Name of Arresting Officer)
 issued Citation # A2G3VWP

That on or about the 29 day of JUNE, 20 19, at 0355 ☐ P.M. ☒ A.M.
 in PALM BEACH County,

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


 Signature of Law Enforcement Officer or
 Correctional Officer

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

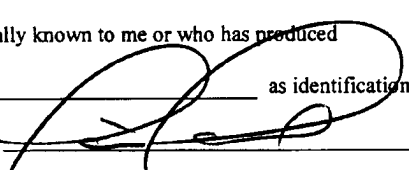


The foregoing instrument was sworn and subscribed before

me this 29 day of JUNE, 20 19,

by INV E. K. WHITE,

who is personally known to me or who has produced
KNOWN as identification

Notary Public 

HSMV-BAR1001 (REV. 10/2016)

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title _____

Date _____

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.

SCANNED
JUN 30 2019

WITNESS LIST

CASE NUMBER: 19-087682

ARRESTING OFFICER: INV E. K. WHITE

ADDRESS: HQ

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

CAN TESTIFY TO: FACTS

NAME: D/S ANDREW SOLER

ADDRESS: DIST 3

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

CAN TESTIFY TO: RESPONDED TO THE MEDICAL CALL

NAME: LT. WENDI LANZI

ADDRESS 405 PIKE RD WEST PALM BEACH FL 33411 (Wendi.Lanzi@gmail.com)

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: SEEING THE DEFENDANT SITTING IN THE DRIVER SEAT WITH THE ENGINE ON

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: _____

SCANNED
JUN 30 2019

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: BATEMAN, DAVID F CASE NUMBER: 19-087682

DATE: 06/29/19 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 03:53 ENDING TIME: 03:56

BREATH TESTS RESULTS: 1) R TIME 03:55 (A.M./P.M.) 2) N/A TIME — 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. KARLICK #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: CALM, QUIET

CLOTHING: BLEU SHORTS, WHITE T-SHIRT, BLUE/WHITE SNEAKERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER: EYES GLASSY AND BLOODSHOT

ODOR OF UNKNOWN ALCOHOLIC BEVERAGE ON BREATH.

COMMENTS: ARRIVED AT CENTER A/O REGAIN THE 20
MINUTE OBSERVATION PERIOD AT 03:31 HRS.

D. REFUSED TO TAKE TEST.

A/O. READ I/C

D. STATED HE UNDERSTOOD I/C AND WOULD REFUSE
TEST AGAIN.

A/O. READ RIGHTS

D. STATED HE UNDERSTOOD RIGHTS.

SCANNED
JUN 30 2019

A/O. ATTEMPTED Q1A

REFUSED

D. REFUSED QUESTIONS.

SUBJECT: BATEMAN, DAVID F

CASE NUMBER: 19-087682

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) _____

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 Camera

SCANNED
JUN 30

SUBJECT: BATEMAN, DAVID F CASE NUMBER: 19-087682

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

SCANNED
JUN 30 2010



**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: 2019021295	Date: 06/30/2019
	Specialist Name/ID: AM/31562

SCANNED
JUN 30 2019