JH 0508071 PH 1411 19CT9530SB

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 2019-007145

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: N

Location of Arrest (Including Name of Business): 6600 PARK OF COMMERCE BLVD BOCA RATON FL

Location of Offense (Business Name, Address): 6600 PARK OF COMMERCE BLVD, BOCA RATON, FL 33487

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
05/22/2019	01:16	05/22/2019	01:26			EMERALD TOWING

DEFENDANT

Name (Last, First, Middle): MARTIN, DAVID MATTHEW | 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	M	10/24/1967	6'03	210	BLUE	GRAY	LIGHT	Medium

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description):

Marital Status: M | Religion: NONE | Indication of Alcohol Influence: Yes ☒ No ☐ Unk. ☐ | Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 16774 COURTURE CT, DELRAY BEACH, FL 33446 | Phone: (201) 344-7171 | Residence Type: 1. City 3. Florida 2. County 4. Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 16774 COURTURE CT, DELRAY BEACH, FL 33446 | Phone: (201) 344-7171 | Address Source: DEFENDANT

Business Address (Name, Street) (City) (State) (Zip): | Phone: | Occupation:

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
M635173673840 / FL	[redacted]		EVERGREEN, IL,	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 ☐ Other: ☐ Legal Custodian | 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.
☐ Yes, by: ☐ No:

School Attended | Grade

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. Disperse/ 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	316.193(1)	

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		

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: GOOD | Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries | Explain:

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
SAAVEDRA	SAAVEDRA	PBCJ

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: 06/24/2019 08:30:00

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 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. # 645 | Pouch #

Signature of Arresting Officer

Name of Arresting Officer (Print): SAAVEDRA, A. | I.D. # 777

Transporting Officer: MCQUISTON | I.D. # 785 | Agency: BRPD

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X".

PAGE 1 OF 1

MCQUISTON 785

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

ADMIN

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number
	FL 0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2019-007145

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
MARTIN, DAVID MATTHEW		W	M	10/24/1967

CHARGES

Charge Description	Charge Description
316.193(1) DUI	
Charge Description	Charge Description

VICTIM

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

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 22 day of May, 2019 at 01:16 (Specifically include facts constituting cause for arrest.)

On 05/22/2019, at 0028 hours, while conducting routine patrol in the area of 800 Clint Moore. I observed a white 2017 BMW X5 bearing FL tag G6BVR traveling eastbound in the middle lane at a high rate of speed on Clint Moore Rd. I estimated the speed of the vehicle at 66MPH in a 40MPH zone. I then used my DragonEye laser Serial #13854, and it provided me a speed of 70MPH. I got a high audible tone consistent with the speed of the vehicle. I then attempted to catch up to the vehicle and I observed it turn onto Park of Commerce Blvd, where I initiated my stop at the 6600 block.

As I stepped out of my car, the driver began reaching into the center console. At that time, I drew my service weapon and gave lawful commands to the driver, who was later identified by his FL DL as David Martin. After multiple commands Martin placed both of his hands outside of the driver side window as I approached the car. I then asked Martin what he was reaching for and he just continue saying he was sorry. Martin then stated that he lives here. I then asked Martin where he lives, and he stated 7 bridges in Delray Beach. I then asked Martin if he knew what city he was in and he stated Delray Beach. I then asked Martin where he was coming from and he stated 7 bridges, which is a restaurant according to him. I then asked Martin, how much did he have to drink, and he initially stated a couple of drinks. As I was speaking with Martin, I was able to detect a strong odor of an alcoholic beverage emitting from his breath. His eyes were red and glassy, and his speech was slurred. I then asked Martin to step out of the vehicle which he did.

I then asked Martin again, how much he had to drink, and Martin changed his statement and advised that he did not have any drinks tonight. I then asked Martin if he had any injuries and he initially stated no. I then asked Martin if he is taking any medications and he stated yes but he did not know the name for them. I then asked him what his medication was for and he stated that he did not know. As I continued talking to Martin, the odor of an alcoholic beverage emitting from his breath became stronger.

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

BURKE, ZACHARY D
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)

05/22/2019
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

SAAVEDRA, ALONSO (777)
NAME OF OFFICER (PLEASE PRINT)

05/22/2019
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: FL 0500200
Agency Name: BOCA RATON POLICE DEPARTMENT
Agency Report Number: 3 | 2 | 2019-007145

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
MARTIN, DAVID MATTHEW		W	M	10/24/1967

PROBABLE CAUSE STATEMENT

I then informed Martin of my observations up to this point and asked him if he would consent to perform some standardized field sobriety tasks to dispel my alarm he was driving impaired. Martin stated no. I then informed Martin of his Taylor Warnings. Martin requested that I explained the Taylor Warnings, multiple times which I did. After several explanations, Martin consented to perform the field sobriety task.

I explained and demonstrated each task to Martin before he performed them. It should be noted that throughout the task, Martin had a hard time following instruction and the instructions had to be repeated multiple times.

The first task was the Horizontal Gaze Nystagmus. While performing the task, Martin showed equal pupil size and no resting nystagmus. Martin had lack of smooth pursuit and distinct and sustained nystagmus at maximum deviation for both eyes. Martin displayed onset of nystagmus prior to forty-five degrees in both eyes. Martin was swaying side to side while performing the task. Martin had a hard time following my stylus and continued to move his head side to side even after being told multiple times not to do it.

The second task was the Walk and Turn. He was not able to maintain the starting position. He started the task prior to being told to start. When I asked him to maintain the starting position, Martin advised that he has a bad disk. While walking forward, he did not touch heel to toe from steps 2 through 10. While counting steps 4 to 10, he raised his arms up and used them for balance. When he reached the 10 steps, he did not turn at all and face his body east. I then asked him if he was done with the task and he stated now I need to turn. He did not perform the turn as instructed. While walking back, he did not touch heel to toe with any of the steps back. He used his arms for balance on the way back.

The third task was the One Leg Stand. Started the task prior to being told to start. Martin was unable to maintain the starting position and he was unable to follow instructions. While explaining him the task, Martin continued stating he was sorry. When I asked Martin to begin the task, Martin crossed both of his feet and counted 1 and stopped. Martin then stated that he has a knee injury. I then asked Martin, why he failed to notify me of his injury earlier and he stated that he has always had a knee injury. I then asked him again, if he had any other injuries and he stated just his back. I then asked him again if he had a knee injury and Martin change his statement to no.

The fourth task was the Finger to Nose. The sequence was as follow (L-R-L-R-R-L). When I asked Martin to point his index fingers to the floor, Martin placed his hands down with his palms facing me. L-Martin turned his body left. R-Martin turned his body to the right. L-Martin turned his body to the left. R-Martin turned his body to the right. R-Martin turned his body to the left. L-Martin turned his body to the right.

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

BURKE, ZACHARY D
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)

05/22/2019
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

SAAVEDRA, ALONSO (777)
NAME OF OFFICER (PLEASE PRINT)

05/22/2019
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 | 2019-007145

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
MARTIN, DAVID MATTHEW		W	M	10/24/1967

PROBABLE CAUSE STATEMENT

The fifth task was the Rhomberg Alphabet. Martin started the task before being told to start. During his first attempt Martin stated ABCDEFGHFCQQRSQUYG. The second attempt, he began singing the alphabet and he reached the letter TUS, he began saying I`m sorry.

At 0116 hours, I placed David Martin under arrest for DUI per F.S.S. 316.193(1). He was transported to the Boca Raton Police Department for processing. Officer Deen conducted the Intoxilyzer Testing. I then asked Martin to provide us with a breath sample, which he consented. His breath results were .207, .224, .208. Martin was transported to Palm Beach County jail for final disposition.

The vehicle was towed to Emerald Towing.

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

BURKE, ZACHARY D
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

05/22/2019
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

SAAVEDRA, ALONSO (777)
NAME OF OFFICER (PLEASE PRINT)

05/22/2019
DATE

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

1015 = 0116
Observation Began = 0135
Observation End = 0155

DUI INFLUENCE REPORT

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

Revised: July 9, 2018

ARRESTING OFFICER: Alonso Saavedra #777

Name: A. Saavedra Phone # 561 368 6201 Work # _____

Address: 100 NW 2nd Ave / 6658 Park of Commerce Blvd

Can testify to: DUI Investigation / Traffic Stop

Name: B. Bachar Phone # 561 368 6201 Work # _____

Address: ~~A. Bohan~~ 100 NW 2nd Ave / 6658 Park of Commerce Blvd

Can testify to: Support Officer

Name: A. Bohan Phone # 561 368 6201 Work # _____

Address: 100 NW 2nd Ave / 6658 Park of Commerce Blvd

Can testify to: Support Officer

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

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]

To be filled out at testing facility

Agency Case # 2019007145

I. **INTRODUCTION** (Instrument Operator faces video camera)

A. The day is Wednesday (day), May (month), 22 (date), 2019 (year).

B. The time is now approximately 0157 (AM)/PM.

C. The following is in reference to case number 2019007145.

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

E. Officer Saavedra, have you arrested David Martin (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? Yes

G. Mr./Mrs./Ms. Martin, 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.

BOCA RATON POLICE SERVICES DEPARTMENT

JUVENILE CONSTITUTIONAL WARNINGS

Rights of suspects prior to custodial questioning.
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. *Tell me in your own words what you think this means.*
(You do not have to talk to me or answer any questions about this offense. You can be quiet if you want.)

(2) Any statement you make must be freely and voluntarily given. *Tell me in your own words what you think this means.*
(If you do talk to me it has to be because you want to and not because anyone is forcing you to speak.)

(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. *Tell me in your own words what you think this means.*
(You can talk to a lawyer before we ask you any questions and you can have him/her with you now, during our 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. *Tell me in your own words what you think this means*
(If you do not have money for a lawyer and you want one, a lawyer will be given to you for free.).

(5) If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent. *Tell me in your own words what you think this means.*
(If you decide to talk to me then change your mind, you can stop answering my questions at any time.)

(6) I can make no threats or promises to induce you to make a statement. This must be of your own free will. *Tell me in your own words what you think this means*
(I am not allowed to threaten you or make you any promises to get you to talk to me. If you decide to talk, it must be because you want to.)

(7) Any statement can be and will be used against you in a court of law. *Tell me in your own words what you think this means*
(Anything you say to me can and will be told to the judge or a jury in court. A judge is a person who decides if you have done something wrong. Sometimes a group of people called a jury decide this, but the Judge is the person who decides what punishment you get.)

(8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: _____ Date: _____ Time: _____

[redacted]

BOCA RATON POLICE SERVICES DEPARTMENT

TESTING FACILITY TASK REPORT

SUBJECT: David Martin

CASE #: 19-7145 DATE: 5/22/19

BREATH TEST RESULTS

1) TIME 0.207 AM/PM 2) TIME 0.224 AM/PM

3) TIME 0.208 AM/PM 4) TIME _____ AM/PM

BREATH OPERATOR: Deen 768

MAINTENANCE TECHNICIAN: J. Vancamp

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Calm

CLOTHING: Gray Shirt, White Shorts, Brown Shoes

MEDICAL CONDITION: N/A

OTHER: _____

COMMENTS: appeared red and flushed in [redacted] face
Stumbling and uneasy on feet
Strong odor of alcohol on person
Continued to say "sorry" after each question

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: refused Date: _____ Time: _____

QUESTIONS AND ANSWERS

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

Where were you going? _____

What street or highway were you on? _____

Direction of travel? _____

Where did you start driving from? _____

What city (county) were you stopped in? _____

What time did you start? _____ AM/PM What time is it now? _____

What is today's date? _____ What day of the week is it? _____

When did you last eat? _____ What did you eat? _____

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

How much do you weigh? _____ Have you been drinking? ____ 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? _____

When did you last work? _____

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

_____

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

_____

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

Were you in an accident today? _____

Have you taken any drugs or smoked marijuana today? _____

What? _____ When? _____

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

Are you taking any prescription medications? ☐ Yes ☐ No What? _____ When? _____

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? _____

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? _____

I am now ending this video recording. The time is now approximately 0227 (AM)/PM.

The date is May (month), 20 (day), 2019 (year).

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	☐	539.001 FS	Other: All records relating to pawnbroker transactions.	
	☐	119.0712(2)	Other: Personal information contained within a motor vehicle record	

REVIEW COMPLETED BY

Booking Number: 2019016957	**Date:** 05/22/2019
	Specialist Name/ID: howardt/7185