

ARREST / NOTICE TO APPEAR

1. Adult
2. N.T.A.
3. Request for Warrant
4. Request for Citation
5. Juvenile Referral

1

JUVENILE

OBTS Number	Agency ORI Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N.T.A.'s only) 3 2 2018-013286	
Charge Type Check as many ☐ 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) 1200 W PALMETTO PARK RD, BOCA RATON, FL			Location of Offense (Business Name, Address) 1200 W PALMETTO PARK RD, BOCA RATON, FL 33486			
Date of Arrest 10/05/2018	Time of Arrest 05:06	Booking Date 10/05/2018	Booking Time 05:25	Jail Date 10/05/2018	Jail Time 05:06	Location of Vehicle WESTWAY
Aliases (Name, DOB, Soc. Sec. #, Etc.)						
Name (Last, First, Middle) RANDO, DYLAN JAMES			Alias: TATT L STOMACH / ANGEL FACE; TATT UR LEG / GEMINI			
Race W - White B - Black O - Oriental/Asian W	Sex M M	Date of Birth 06/06/2000	Height 5'08	Weight 125	Eye Color BROWN	Hair Color BROWN
Complexion LIGHT			Build Thin			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT L STOMACH / ANGEL FACE; TATT UR LEG / GEMINI			Marital Status S		Religion	
Local Address (Street, Apt. Number) 11211 SOUTH MILITARY TRL 5611, BOYNTON BEACH, FL 33436			Phone		Indication of Alcohol Influence Yes ☒ No ☐ Unk ☐	
Permanent Address (Street, Apt. Number) 11211 SOUTH MILITARY TRL 5611, BOYNTON BEACH, FL 33436			Phone		Residence Type: 1. City 2. County 3. Florida 4. Out of State 12	
Business Address (Name, Street) FAU,			Phone		Address Source VERBAL	
Citizenship US			Occupation Student			
D/L Number, State 789925298 / NY			Soc. Sec. Number		INS Number	
Place of Birth (City, State) WEST PALM						
Co-Defendant Name (Last, First, Middle)			Race		Sex	
Co-Defendant Name (Last, First, Middle)			Race		Sex	
Name (Last, First, Middle)			Residence Phone		Business Phone	
Address (Street, Apt. Number)			(City)		(State) (Zip)	
Notified by: (Name)			Date		Time	
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.			Property Crises ☐ Yes ☒ No		Description 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. Other/Devi.	
P. Paraphernalia/ Equipment S. Synthetic			U. Unknown Z. Other			
Charge Description DUI			Statute Violation Number 316.193(1)		Violation of ORD #	
Drug Activity N			Amount / Unit /		Offense #	
Counts 1			Domestic Violence ☐ Y ☒ N		Warrant / Citation Number	
Charge Description			Statute Violation Number		Violation of ORD #	
Drug Activity			Amount / Unit		Offense #	
Counts			Domestic Violence ☐ Y ☒ N		Warrant / Citation Number	
Charge Description			Statute Violation Number		Violation of ORD #	
Drug Activity			Amount / Unit		Offense #	
Counts			Domestic Violence ☐ Y ☒ N		Warrant / Citation Number	
Health / Apparent Physical Condition of Defendant DAMAGED			Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Dehydration ☐ Injuries		Explain:	
Check which applies: ☐ Released O.R. ☐ Posted Bond			Released to S.CASAS		Released By PBCJ	
Transported By			Date Transported		Time Transported	
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 11/05/2018 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 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) [Signature]		Date Signed 11/05/2018 08:30:00	
HOLD for Other Agency			Name of Arresting Officer BISSON, S. R.		ID # 664	
Transporting Officer P. FORGET			ID # 522		Agency BOCA	
Name Verification (Printed by Arrestee) [Signature]			Page 1 OF 1			

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

OSTS Number	Agency ORI Number FL 0500200		Agency Name BOCA RATON POLICE DEPARTMENT		Agency Report Number 3 2 2018-013286	
Charge Type: Check as many as apply.	☐ 1. Felony ☐ 2. Traffic Felony		☒ 3. Misdemeanor ☒ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other	
Name (Last, First, Middle) RANDO, DYLAN JAMES					Race W	Sex M
Date of Birth 06/06/2000						
Charge Description 316.193(1) DUI			Charge Description			
Charge Description			Charge Description			
Victim's Name (Last, First, Middle) STATE OF FLORIDA,					Race	Sex
Local Address (Street, Apt. Number) 100 NW 2ND AVE, BOCA RATON, FL 33432					Phone (561) -	Address Source
Business Address (Name, Street) 100 NW 2ND AVE, BOCA RATON, FL 33432					Phone (56) -	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 _____
☒ was found to have committed the below acts, resulting from my (described) investigation.
 admitting to the below facts.
 On the 5 day of October, 2018 at 05:06 (Specifically include facts constituting cause for arrest.)

On 10/05/2018 Ofc Casas S and I arrived at 100 NW 12th Ave in reference to back up Ofc Gannon on a traffic stop. Ofc Gannon stopped a blue 2010 Mitsubishi bearing NY tag#HUA9375 for violation of a traffic control device. He met with driver Dylan Rando and believed that Rando was possibly impaired. I then met with Rando and spoke with him; his eyes were pinpoint he was slurring his speech and his statements made no sense. He was all over the place with his answers to my questions. I then asked him to exit the vehicle and as he exited the vehicle he stumbled back into the side of his car. I asked him where he was going, and he stated that he was headed to FAU campus which is 5 to 10 minutes away. He was headed south and FAU is north of where he was headed. I also asked him if he had been drinking tonight and he stated that he had nothing to drink. I asked him if he knew about the damage to the front of his vehicle and he stated that he is a delivery guy and he bumps into stuff all the time. Rando claimed that the damages were old. I then asked if he was taking any drugs or medication and he stated no. Rando kept on saying that he was tired and hadn't slept since 1430hrs. Based on my observations I asked him if he was willing to do some roadside sobriety tasks to dispel my alarm that he was under the influence. Rando advised that he would submit to the tasks.

I then walked him over to a well-lit area and asked him if he had any medical problems or medical issues that would prevent him from completing the tasks. Rando advised that he had no physical and no medical issues that would prevent him from doing the tasks. The tasks that were conducted were the Walk and Turn, One Leg Stand, Finger to Nose, and the Rhomberg Alphabet.

The first SFST was the Walk and Turn. Rando couldn't maintain the starting position and started before being told to begin. He failed to keep his feet heel to toe. He walked 24 steps forward and then 19 steps back. He made an improper turn by just turning around instead of the way I instructed him. He stepped off the line several

SWORN AND SUBSCRIBED BEFORE ME

MORAN, JOHN TODD

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

10/05/2018

DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

BISSEON, STEPHEN R. (664)

NAME OF OFFICER (PLEASE PRINT)

10/05/2018

DATE

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COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

OBT Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Copies		1	JUVENILE
Agency ORI Number	Agency Name	Agency Report Number							
FL 0500200	BOCA RATON POLICE DEPARTMENT	3 2 2018-013286							
Charge Type: ☐ 1. Felony ☒ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other		Special Notes:							
Name (Last, First, Middle)				Alias		Race	Sex	Date of Birth	
RANDO, DYLAN JAMES						W	M	06/06/2000	
times including when he made the turn. He failed to count as instructed. The second SFST was the One Leg Stand. Rando failed to maintain the starting position and he began the task before being told to begin. He failed to raise his foot six inches off the ground and put his foot down before being told to do so. He started with his left foot and then switched his foot throughout the task. He swayed during the task and failed to count as instructed. The third SFST was the Finger to Nose. (L-R-L-R-R-L). On the first left he touched his right nostril. On the first right he touched the top of his nose. On the second left he touched his right nostril. On the second and third right he touched his left nostril. On the third right he touched the right side of his nose. The fourth SFST was the Rhomberg Alphabet. Rando was able to recite the alphabet properly. I then asked Rando if he had taken any drugs or taken any medication today and he stated that he took some Adderall earlier in the day. Rando stated he didn't have a prescription for the Adderall and he took it to help with school. Based on the above information I placed Rando under arrest for DUI. I then transported him to BRPD. Ofc. Krigger responded as my Breath Test Operator. Ofc Krigger and I conducted the 20-minute observation and then he was taken into the BAT room. Rando agreed to provide a breath sample. Rando provided two breath samples of .000 and .000. Ofc Krigger advised him of his Constitutional Warnings which he advised he understood and he said he would answer my questions without an attorney present. See DUI influence report. Dylan Rando is being charged under F.S.S. 316.193(1) for DUI. Rando vehicle was towed by Westway and he was transported to Palm Beach County Jail.									
SWORN AND SUBSCRIBED BEFORE ME MORAN, JOHN TODD NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 10/05/2018 DATE  SIGNATURE OF ARRESTING / INVESTIGATING OFFICER BISSOON, STEPHEN R (664) NAME OF OFFICER (PLEASE PRINT) 10/05/2018 DATE									
								PAGE 2 OF 2	

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

**FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT**

Instrument Type: Intoxilyzer 8000
Instrument Registered To: BOCA RATON PD
Instrument Serial Number: 80-006622 Software: 8100.27
Date of Test: 10/05/2018

Date of Last Agency Inspection: 09/25/2018
Observation Period Began: 05:25
Subject's Name: DYLAN J RANDO

DOB: 06/06/2000 Sex: M

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:	Test	g/210L	Time
	Diagnostics Check	OK	05:55
	Air Blank	0.000	05:55
	Control Test	0.079	05:55
	Air Blank	0.000	05:56
	Subject Sample #1	0.000	05:57
	Air Blank	0.000	05:58
	Air Blank	0.000	06:00
	Subject Sample #2	0.000	06:00
	Air Blank	0.000	06:01
	Control Test	0.079	06:01
	Air Blank	0.000	06:01
	Diagnostics Check	OK	06:02

Cylinder Lot: 13518080A5
Exp: 08/05/2020

State of Florida, County of Palmer Beach

Personally appeared before me the undersigned authority, who (☒) is personally known to me or (☐) produced _____ as identification, and who after being placed under oath, states:

I RONALD E KRIGGER, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____

Signature

Date: 10/5/18

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

SA leary
Signature of Notary Public-State of Florida

Bisson, Stephen
Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

DUI INFLUENCE REPORT



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



BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT - PART I

On the _____ day of _____, at _____ AM/PM:

Subject: _____ Case Number: _____

PERSONAL CONTACT

Driving Pattern: _____

Observation of Driver: _____

Driver's Statement: _____

Odors: _____

GENERAL OBSERVATIONS

Speech: _____

Attitude: _____

Clothing: _____

Medical Problems: _____

Medications: _____

Other: _____

Horizontal Gaze Nystagmus:

- ☐ Left eye does not follow smoothly
☐ Left eye jerks at 45 degrees angle or less
☐ Distinct jerking left eye maximum deviation

- ☐ Right eye does not follow smoothly
☐ Right eye jerks at 45 degrees angle or less
☐ Distinct jerking right eye maximum deviation

Can not do, Why? _____

Walk and turn: _____

Can not do, Why? _____

One leg stand: _____

Can not do, Why? _____

Finger to nose: _____

Can not do, Why? _____

Alphabet (speech pattern): _____

Can not do, Why? _____

Breath/Blood test results: _____

State of Florida, County of Palm Beach,
Sworn and subscribed before me this _____ (date) by _____.

Notary/Clerk of Court/ Officer (FSS 117.10)

Date

Signature of Arresting Officer

Name of Officer (print)

ARRESTING 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: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____



BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT - PART II

To be filled out at testing facility

Agency Case # 18-13286

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is Friday, October, 5, 2018.
(day) (month) (date) (year)

B. The time is now approximately 552 PM.
(AM/PM)

C. The following is in reference to case number 18-13286.

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

E. Officer Bissoun, have you arrested Dylan Rando in violation of
Florida State Statute 316.193? (Defendant's name)

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

G. Mr Mrs./Ms. Rando, 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 _____, _____, _____, and the time is _____ AM/PM.
(month) (day) (year)

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: _____



BOCA RATON POLICE SERVICES DEPARTMENT
TESTING FACILITY TASK REPORT

SUBJECT: Dylan Rissom

CASE #: 18-13286 DATE: 10/05/18

BREATH TEST RESULTS

1) TIME _____ AM/PM 2) TIME _____ AM/PM

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

BREATH OPERATOR: Krigger

MAINTENANCE TECHNICIAN: _____

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slow

ATTITUDE: Good

CLOTHING: T-shirt & shorts

MEDICAL CONDITION: _____

OTHER: Words out of order in some sentences. Complete loss of time.

COMMENTS: Subject not aware of his black eye to left eye also cuts and abrasions to hands and legs.
problem following instructions

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: Michael Rendo Date: Oct 5 Time: _____

QUESTIONS AND ANSWERS

Were you operating a motor vehicle at the time of the accident? yes

Where were you going? coming back to campus

What street or highway were you on? 290

Direction of travel? North

Where did you start driving from? FAU Parking lot Glades

What city (county) were you stopped in? Don't know

What time did you start? 7-8 AM/PM PM What time is it now? NO

What is today's date? Thur 10/5 What day of the week is it? Th

When did you last eat? 2:44 pm What did you eat? chicken sandwich

What have you been doing the past three hours prior to this stop/accident? hang out with Rich

How much do you weigh? 123 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? not working

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? no

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? _____ 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? 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? no

I am now ending this video recording. The time is now approximately 8:16 AM/PM.

The date is October 8 2018
(month) (day) (year)