

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 17 DAY OF January 20 17, AT 01:35 AM PM

SUBJECT: Feeny, Gerard CASE NUMBER: 17027597

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. J. Schneider

PERSONAL CONTACT

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

Was observed traveling south on State Road 7 at 62 miles per hour in a posted 45 mile per hour zone. I stopped the vehicle just north of the intersection of Bella Terra Way and State Road 7.

OBSERVATION OF DRIVER:

Apologetic, unstable, and talkative. Eyes were red, bloodshot, and glossy.

DRIVER'S STATEMENTS:

I'm sorry I screwed up. I had too much to drink. You caught me. I have a buzz.

ODORS:

Odor of unknown alcoholic beverages emanating from his facial area intensifying as he spoke.

GENERAL OBSERVATIONS

SPEECH: Slightly slurred

ATTITUDE: Cooperative

CLOTHING: Blue shirt, Blue Shorts, White shoes

MEDICAL/OTHER: Previously sprained left ankle.

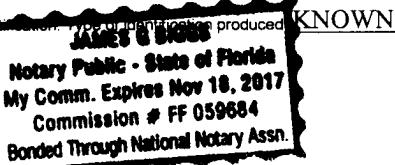
STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. J. Schneider

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 17 day of January 20 17 by J. SCHNEIDER

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced a valid form of identification or produced



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

SCANNED
JAN 18 2017

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 DEGREESOther Observations:

Moved head while following stimulus contrary to instruction.

HAND COORDINATION:

Task explained and demonstrated twice. Feeny began to do task during instruction. While moving hands he moved three times but counted four. Failed to clap. Moving back he once again moved three time but counted four. Moved hands against chest, then to his lap and finished by clapping.

ONE LEG STAND:

Feeny displayed a sway during instruction and had to be repositioned to the proper resting stance. Feeny was unable to keep his foot elevated for any period of time. He attempted to use both his left and right foot however was unable to keep it elevated.

FINGER TO NOSE:

Feeny displayed a sway during instruction and had to be repositioned to the proper resting stance.

ROMBERG ALPHABET:

Feeny displayed a sway during instruction and recited the alphabet in a rhythmic manner contrary to instruction but without error.

BREATH TEST RESULTS: 1) .138

2) .137

3)

4)

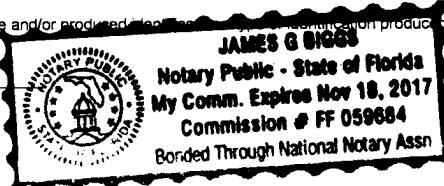
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Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

SCANNED
JAN 18 2017

NOT A CERTIFICATE

**SCANNED
JAN 18 2017**

WITNESS LIST

17027597

CASE NUMBER:

Inv. J. Schneider

ARRESTING OFFICER: _____

ADDRESS: **2300 N JOG RD WEST PALM BEACH FL 33411**

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

CAN TESTIFY TO: **STOP AND INVESTIGATION**

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

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NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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JAN 18 2017

TESTING FACILITY TASK REPORT

AGENCY: PBSO-SCHNEIDER

SUBJECT: FEENY JR, GERARD P

CASE NUMBER: 17-027597

DATE: Jan 17, 2017

VIDEO DVD NUMBER: 62000

BEGINNING TIME: 0300

ENDING TIME: 0316

BREATH TESTS RESULTS: 1) .138 TIME 0304 A.M. P.M. 2) .137 TIME 0306 A.M. P.M.
3) XX TIME XX A.M. P.M. 4) XX TIME XX A.M. P.M.

BREATH OPERATOR: J Biggs# 7607

MAINTENANCE TECHNICAN: D/S J Karklecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SOMEWHAT SLURRED

ATTITUDE: COOPERATIVE, JOVIAL

CLOTHING: BLUE SHIRT, BLACK SHORTS

MEDICAL CONDITIONS: HBP, HEART ISSUES

MEDICATIONS: LISINIPRIL

OTHER:

EYES GLASSY, RED
ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE ON SUBJECT

COMMENTS:

THE ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0240
SUBJECT ADVISED HE WOULD SUBMIT TO THE TEST
SUBJECT WAS GIVEN THE INSTRUCTIONS FOR THE TEST
SUBJECT COMPLETED BOTH SAMPLES SUCCESSFULLY
RESULTS WERE GIVEN
MIRANDA WAS READ TO THE SUBJECT
SUBJECT SUBMITTED TO THE QUESTIONS

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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) Read on Camera

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? I was

WHERE WERE YOU GOING? Home

WHAT STREET OR HIGHWAY WERE YOU ON? 441

DIRECTION OF TRAVEL? S WHERE DID YOU START? Cheecchabe Blvd

WHAT TIME DID YOU START? 1:30am WHAT TIME IS IT NOW? 3:30am

WHAT IS TODAY'S DATE? 17th Jan WHAT DAY OF THE WEEK IS IT? Tue

WHAT COUNTY AND CITY ARE YOU IN NOW? Palm Beach

WHEN DID YOU LAST EAT? 6pm WHAT DID YOU EAT? Steak, green beans, rice/bacon

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? Home, night club for work 1hr

HOW MUCH DO YOU WEIGH? 240 HAVE YOU BEEN DRINKING? Yes WHAT? Beer

HOW MUCH? Unknown WHERE? DJ's WITH WHOM? No

WHEN DID YOU HAVE YOUR FIRST DRINK? 10:00pm AND YOUR LAST DRINK? 11:30am

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? Bottle, regularly

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? Yes ARE YOU UNDER THE INFLUENCE? N/A

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? Shop NO HOW MUCH? No

WHAT? Shop WHERE? Shop WHEN? Shop

WHAT LINE OF WORK ARE YOU IN? I between jobs WHEN DID YOU LAST WORK? No

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? Yes WHAT? Left ankle sprain

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

DO YOU LIMP? Yes DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? No

WERE YOU IN AN ACCIDENT TODAY? No

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN? No

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? No WHO? No WHY? No

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? Yes WHAT? Lucidiprop, Citalopram, Reboxetine, Asprin WHEN? Evening

DO YOU HAVE: EPILEPSY? No

GLASS EYE? No

FALSE TEETH? No

EAR INFECTION? Left ear bothering

INNER EAR TROUBLE? Sometimes - Since

DIABETES? No

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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? No

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

INTERVIEWER: Inv. J. Schneider 851