0 503132 BCT20518147

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number:

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

Juvenile: N

ADMINISTRATIVE

Agency ORI Number: FLO 500000

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number (N.T.A.'s only): 06- 18145973

Charge Type: Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Weapon Seized / Type: 2 | 1. Yes 2. No N/A

Multiple Clearance Indicator: 1

Location of Arrest (Including Name of Business): 11220 PERSIMMON BLVD, LOXAHATCHEE, FL, 33411

Location of Offense (Business Name, Address): 11220 PERSIMMON BLVD LOXAHATCHEE, FL, 33411

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
11/17/2018	22:00					

DEFENDANT

Name (Last, First, Middle): WEDEL JAEDRA D.

Alias (Name, DOB, Soc. Sec. #, Etc.):

Race (W - White I - American Indian B - Black O- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	11/19/1984	5'9	125	BRN	BRN	MED	THIN

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

Marital Status: Single

Religion:

Indication of: Alcohol Influence Y ☒ N ☐ Unk. ☐ / Drug Influence Y ☐ N ☐ Unk. ☒

Local Address (Street, Apt. Number): 611 MICHIGAN AVE #5 (City): MIAMI BEACH (State): FL (Zip): 33139

Phone: (815) 975-0198

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number): , (City): (State): (Zip):

Phone: ( )

Address Source: FL DL

Business Address (Name, Street): (City): (State): (Zip):

Phone: ( )

Occupation: MASSAGE THERAPIST

D/L Number, State: W340424849190

Soc. Sec. Number: [redacted]

INS Number:

Place of Birth (City, State): PARK HILLS, IL

Citizenship: YES

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 ☐ 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 355-2526) informed of any change of address. ☐ Yes, by: (Name) ☐ No: (Reason)

School Attended: Grade:

Property Crime? ☐ Yes ☐ No Description of Property: Value of Property:

CODE

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

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DUI	1	☐Y ☒N	316.193(3C1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	N/A	18145973		OR

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☒N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
/	/	/			

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

NOTICE TO APPEAR

Location (Court, Room Number, Address): 3228 GUN CLUB RD. WEST PALM BEACH FL 33406

Court Date and Time: Month 12 Day 13 Year 2018 Time 0830 AM X 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 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)

11/17/2018
Date Signed

ADMIN

HOLD for other Agency Name:

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Intake Deputy: ID #: Pouch #:

Signature of Arresting Officer: X

Name of Arresting Officer (Print): INV. G. LYNCH 8568 I.D. #: 8568

Transporting Officer: INV. G. LYNCH 8568 ID #: 8568 Agency: PBSO

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X"

PAGE 1 OF 1

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PBSO #148 REV. 8/97

0/5 OM26 8032 PJ JJ

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SCANNED NOV 18 2018

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 17 DAY OF NOV 20 18, AT 20:44 AM ✓ PM

SUBJECT: WEDEL JAEDRA D. CASE NUMBER: 18145973

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV. G. LYNCH 8568

PERSONAL CONTACT

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

On 11/17/18 I responded to 11220 Persimmon Blvd, in Palm Beach County, in reference to a vehicle crash with a possibly impaired driver. Upon arrival I met with D/S Liming id 28279, who was conducting the crash investigation.
D/S Liming advised me that the car, a red Lexus, bearing FL tag DDSN77, was traveling eastbound on Persimmon Blvd when it struck and drove over the median in the round-about. Both front tires were flattened and the front passenger tire was broken off the vehicle. I evaluated the crash scene and came to the same conclusion as D/S Liming.
I spoke with the witness to the crash, Thomas Smith. Smith advised that he heard the crash from his residence and immediately knew that a vehicle had struck the median in the round-about, because he has heard it several times before. Smith immediately went out to the roadway and found the Lexus on the side of the roadway. He made contact with the occupants to check for injuries. Smith smelled the odor of alcohol coming from the vehicle. Smith advised there were 2 females in the vehicle and positively identified the driver of the vehicle, Jaedra Wedel. Smith advised that he watched the vehicle until D/S Liming arrived and neither female exited the vehicle or switched seats.

OBSERVATION OF DRIVER:

I made contact with Jaedra, who was still sitting in the driver seat of the vehicle. I had Jaedra exit the car and stand in front of my patrol car. I immediately noticed that Jaedra's eyes were red and glassy and there was a strong odor of an unknown alcoholic beverage coming from her breath, which got stronger when she spoke. Jaedra had a slight orbital sway while standing still. Jaedra was constantly moving and appeared to have difficulty standing still. Jaedra appeared overly euphoric and had mood swings from calm, to laughing, and had difficulty listening to instructions. I advised Jaedra that the crash investigation was complete and I was going to conduct a criminal DUI investigation. I advised Jaedra of Miranda warnings, which she advised she understood. Post Miranda Jaedra advised that she had drank 2 beers approximately 4-5 hours prior to driving. Based on my observations and Jaedra's admission to drinking I asked her to perform standard field sobriety tasks.

DRIVER'S STATEMENTS:

Had 2 beers approximately 4-5 hours prior to driving.

ODORS:

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

GENERAL OBSERVATIONS

SPEECH:

ATTITUDE: **Moodswings**

CLOTHING:

MEDICAL/OTHER:

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STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. G. LYNCH 8568
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 17 day of NOV 20 18 by INV. G. LYNCH 8568

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

Shari O'Neal (#6212)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # FF 988554
My Comm. Expires Jun 25, 2020
Bonded through National Notary Assn

SCANNED
NOV 18 2018

SUBJECT: WEDEL JAEDRA CASE NUMBER 18145973

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- [x] RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Jaedra was asked to stand with her feet together and place her hands by her sides. Jaedra was asked to focus on the stimulus and follow it with her eyes. Jaedra was told not to move her head to assist in following the stimulus. Jaedra showed equal pupil size that tracked equally. Both eyes lacked a smooth pursuit. I saw distinct and sustained Nystagmus at maximum deviation and onset of Nystagmus prior to 45 degrees in both eyes. Jaedra swayed while performing this task and had to be reminded to follow the stimulus and not to move her head. Jaedra separated her feet during the task for balance.

WALK & TURN:

I performed the walk and turn task. I utilized yellow duct tape to make a straight level line, free of debris, that Jaedra advised she could see. Prior to giving instructions Jaedra began to walk the line. I explained and demonstrated the task to Jaedra. During the instructions Jaedra attempted to begin the task prior to being instructed to do so. Jaedra was unable to maintain the instructional position and stepped out of the position. Jaedra also began to stretch during the instructions. After completing the instructions Jaedra asked for the instructions to be repeated. I explained and demonstrated the task to Jaedra a second time. After completing the instructions Jaedra advised she understood and had no questions. During the task Jaedra did not walk heel-to-toe. Jaedra used her arms for balance and stepped off the line multiple times. Jaedra did not turn as instructed and paused to steady herself. Jaedra took the incorrect number of steps, taking 10 steps on the second set of steps.

ONE LEG STAND:

I performed the one leg stand task. I explained and demonstrated the task to Jaedra. During the instructions Jaedra attempted to begin the task prior to being instructed to do so. Jaedra boasted that she could perform the task for 12 minutes. After completing the instructions Jaedra advised she understood and had no questions. During the task Jaedra swayed and used her arms for balance. Jaedra put her foot down prior to 30 seconds elapsing. After completing the task Jaedra began to bend over, apparently doing some sort of yoga, and then almost fell over. I had to catch Jaedra to keep her from falling over.

FINGER TO NOSE:

I performed the finger to nose task. I explained and demonstrated the task to Jaedra. After completing the instructions Jaedra advised she understood and had no questions. During the task Jaedra failed to keep her eyes closed and had to be reminded several times. Jaedra missed touching the tip of her nose several times. On the first left command Jaedra made no attempt to touch her nose and had to be reminded that she was supposed to touch her nose. Jaedra failed to return her hand to her side several times. After the second right command Jaedra had to be reminded to keep her eyes closed and she then touched her nose with her left and right hand, without being instructed to do so. On the third right command Jaedra started to use her left hand first. Throughout the task Jaedra swayed and separated her feet for balance.

ROMBERG ALPHABET:

I performed the Romberg alphabet task. I explained and demonstrated the task to Jaedra. After completing the instructions Jaedra advised she understood and had no questions. During the task Jaedra touched her nose with her right hand, while performing the task. Jaedra swayed, more than 2 inches. Jaedra failed to keep her eyes closed and used her arms for balance. Jaedra incorrectly recited the alphabet, making multiple errors.

BREATH TEST RESULTS: | 1) REFUSED | 2) REFUSED | 3) | 4) |

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. G. LYNCH 8568
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 17 day of NOV 2018 by INV. G. LYNCH 8568

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

Shari O'Neal (#6212)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # FF 966554
My Comm. Expires Jun 23, 2020
Bonded through National Notary Assn.

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SCANNED
NOV 18 2018

WITNESS LIST

CASE NUMBER: 18145973

ARRESTING OFFICER: INV. G. LYNCH 8568

ADDRESS: HQ

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

CAN TESTIFY TO: FACTS OF CASE

NAME: D/S LIMING ID 28279

ADDRESS: DIST 15

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

CAN TESTIFY TO: CRASH INVESTIGATION

NAME: THOMAS SMITH

ADDRESS 11256 PERSIMMON BLVD, WEST PALM, FL, 33411

PHONE NUMBERS (HOME) 561-261-6986 (WORK) _____

CAN TESTIFY TO: IDENTIFY DRIVER

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) _____

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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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SCANNED
NOV 18 2018

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 #:	ZONE:	SUSPECT:	DATE & TIME OF ORIGINAL EVENT/OFFENSE:
18-145973	15-31	Jaedra Wedel	11/17/18 20:44

EVENT TYPE:	DEPUTY:	ID#:
DUI	DF Livingston	28274

COMPLETE EVERYTHING BELOW – PRINT LEGIBLY

LAST NAME:	FIRST NAME:	MIDDLE INITIAL:	RACE:	SEX:
Smith	Thomas	J	W	M

DATE OF BIRTH: (MM/DD/YYYY)	YOUR HEIGHT:	YOUR WEIGHT:	YOUR HAIR COLOR:	YOUR EYE COLOR:
02/26/1959	5'11"	210	BROWN	BLUE

YOUR HOME ADDRESS: ☐ CHECK IF HOMELESS	CITY:	STATE:	ZIP:
11256 Persimmon Blvd.	West Palm Bch	FL	33411

YOUR WORK NAME & ADDRESS: ☐ CHECK IF UNEMPLOYED OR RETIRED	CITY:	STATE:	ZIP:
Retired CFI+/-			

WORK PHONE: ☐ CHECK IF NONE	CELL PHONE: ☐ CHECK IF NONE	HOME PHONE: ☐ CHECK IF NONE	EMAIL: ☐ CHECK IF NONE
( )	(561) 261-6986	561 804-1295	ThPSmitty@aol.com

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

I YOUR NAME: Thomas Smith

DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...

On 11/17/18 at about 8:30pm I heard a loud noise outside. I thought it was a crash, I exited my house and smelled oil and rubber. I noticed a car stopped on the south shoulder of Persimmon Blvd. Two W/F's in car. Checked on injuries, NO injuries. I smelled an odor of alcohol in the vehicle. I called PBSO Dispatch. The driver was wearing a long shirt. The passenger could not exit the car. Both occupants were still in the car. I watched both occupants until PBSO arrived. I also noticed that the car traveled over the round-about. This occurred in Palm Bch. Co.

PAGE 1 OF 1

READ AND SIGN

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:

YOUR SIGNATURE: X

☐ DEPUTY SHERIFF ☐ NOTARY PUBLIC FSS: 117.10

SWORN TO AND SUBSCRIBED BEFORE ME TODAY:

DATE: 11/17/18 TIME: 2147

SIGNATURE: ID: 28274

*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 INITIALLING 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

PBSO #0134 REV. 12/11

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NOV 18 2018

TESTING FACILITY TASK REPORT

AGENCY: PBSO T.v. Lynch #8562

SUBJECT: Wedel, Jordan D. CASE NUMBER: 18-149972

DATE: 11-17-18 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 2245hrs ENDING TIME: 2255hrs

BREATH TESTS RESULTS: 1) R TIME 2255 A.M./(P.M.) 2) _____ TIME _____ A.M./P.M.

3) _____ TIME _____ A.M./P.M. 4) _____ TIME _____ A.M./P.M.

BREATH OPERATOR: S. O'Neil #6212

MAINTENANCE TECHNICIAN: Cpl. Pelletier #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Low at times, slurred, Stumbling

ATTITUDE: Cooperative, Courteous, Talkative

CLOTHING: Shirt Multi/print Pants Dark/Plaid No Shoes

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER: Eyes Red, Watery from Eyes

#8562

COMMENTS: 20 min observation done by A/O Lynch
A/O requested Breath test.
D refused the request.
A/O read the implied consent on camera.
D was going back and forth about the breath request.
D eventually refused the breath test.
CIU read on camera.
No Q+A used for attorney.

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SCANNED
NOV 18 2018

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

PBSO 80128A REV.11/02

SUBJECT: Wedel, Jacob D. CASE NUMBER: 18-145973

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 Dep. Lynch # 5683 of the PSO.

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 or Given

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 or Given

SCANNED
NOV 18 2018

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

PBSO #0129B REV. 06/11

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SUBJECT: Wedel, Joedro D. CASE NUMBER: 18-145472

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: _____

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SCANNED
NOV 18 2018

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

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REVIEW COMPLETED BY

Booking Number: 2018038473	**Date:** 11/18/2018
	Specialist Name/ID: howardt/7185

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