



FLORIDA HIGHWAY PATROL

17 CF 4186
J# 0487439
NHREPORT NUMBER
FHP99ARR130569

ARREST REPORT

Report Date / Time 04/27/2017 02:13 AM	Agency Case/Offense Number FHPL17OFF032488	OCA Number	Originating Agency Case Number	OBTS Number	Offender Based Transaction System	Jail Booking Number	Other Number LWRC17CAD071919
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LOCATION OF OCCURRENCE

County PALM BEACH	Address NB I-95 (SR-9) N OF INDIANTOWN RD, JUPITER, FL 33458
Range of Occurrence Date/Time 04/27/2017 12:58 AM to 04/27/2017 12:58 AM	Latitude N 26 56.7829
	Longitude W 80 9.4509

PERSON: SUSPECT

First Name JAIME	Middle Name ALEXANDRA	Last Name DOERR	Suffix	Date of Birth 03/06/1985	Age 32	Race W	Sex F	Height 511	Weight 180	Hair BRO	Eyes BRO	
Master Name Index Number	Place of Birth MORGANTOWN WV	Nation US	SSN	Driver's License or Other ID D600421855860	State FL	Class or Type E						
Address 116 S RIVERSIDE DR APT 402		City POMPANO BEACH	County PALM BEACH	State FL	Zip Code 33062	Phone						

CHARGES

Counts 1	Charge Number 316.193.1	Charge DUI-UNLAW BLD ALCH	Charge Degree MISDEMEANOR	Charge Level PRINCIPAL	General Offense Code	<input type="checkbox"/> Hate Crime	<input type="checkbox"/> Domestic Violence	Bond Amount \$0.00
DUI ALCOHOL OR DRUGS								

Counts 1	Charge Number 316.1935.3	Charge FLEE/ELUDE POLICE	Charge Degree SECOND DEGREE	Charge Level FELONY	General Offense Code PRINCIPAL	<input type="checkbox"/> Hate Crime	<input type="checkbox"/> Domestic Violence	Bond Amount \$0.00
FLEE ELUDE LEO AT HIGH SPEED								

PROBABLE CAUSE

On the referenced date and approximate time while on routine patrol I was dispatched to a vehicle driving southbound in the northbound lanes of I-95 (State Road 9) just north of Indiantown Road (State Road 706). I was informed that Road Ranger was stopped with the vehicle. Upon arrival on scene I observed a blue vehicle in the center median on the southbound side of I-95 with Road Ranger Mark Torrijos and James Anderson. I then observed a light colored Hyundai make a turn from the southbound side of I-95 thought the grass median to the northbound side of I-95 (State Road 9). I activated my emergency lights and equipment to conduct a traffic stop on the vehicle for the illegal turn. The vehicle put on it's left turn signal and began to increase its speed. As speeds exceeded 100mph and the vehicle was actively fleeing and making evasive movements around other vehicles, I turned off my emergency equipment and informed dispatch that I was cancelling my attempt to stop the vehicle at approximately the 89-90mm. I asked dispatch to inform units ahead in Martin County of the situation and also Martin County Sheriff's Office.

Martin County Sheriff's office had a Tactical Flight officer (D/S Edward Stagmiller) in the air with a visual of the light colored vehicle The vehicle was noted as being all over the road at a high rate of speed. The air unit was able to direct its Deputies to the vehicle where it failed to stop for them until the 110mm.

After the vehicle was stopped by Cpl David Yun and D/S Charles Ruby with the Martin County Sheriffs Office the driver was identified by her Florida Photo Drivers License as Jaime Alexandra Doerr. Road Ranger Mark Torrijos and James Anderson arrived on scene and identified Jaime Doerr and the Hyundai as the same person and vehicle that had fled from the original scene by Indiantown Road.

After I arrived on scene I spoke with Doerr and asked why she fled from me. Doerr appeared confused and disoriented and stated she had her lawyer on the phone. Doerr's face was flushed, her eyes bloodshot and watery, her speech was slurred and mumbled, and she had a strong odor of an alcoholic beverage coming from her breath. Doerr stumbled as she walked and she lacked coordination and swayed while standing. I explained to Doerr why I was originally trying to stop her then asked her to perform Field Sobriety Exercises.

Due to the fact we were on top of the overpass which was on the decline and for the subjects safety we relocated to a flat surface under the overpass on Martin Highway (CR-714). Doerr had mood changes and began crying. I helped Doerr out of the vehicle and she became hysterical dropping to the ground and crying. I tried to reason with her with the assistance of a deputy but after several minutes we helped her stand up to move her out of the grass where she was laying. I asked Doerr to perform Field Sobriety Exercises again but Doerr refused and continued to lay on the ground and cry. When we stood Doerr up again she was unable to stand on her own due to her impairment. Based on Doerr not being cooperative and her inability to perform Field Sobriety exercises safely, Doerr was placed under arrest, placed in handcuffs and double locked checking for tightness. Once placed in my patrol vehicle Doerr started screaming and became uncooperative again and then she fell asleep. As I began traveling southbound on I-95 towards Palm Beach County I tried talking with Doerr who was now laying down in the back seat of my Patrol Vehicle. Doerr was unresponsive, not answering my questions so I stopped the vehicle to check on her. After stopping I sat Doerr back up and tried to talk with her. Doerr was breathing but not responding to me. To make sure Doerr was not having medical issues I called Martin County Fire Rescue to respond at the 105mm. Martin County Fire Rescue arrived on scene and check Doerr's Vitals and Blood sugar and found them to be within normal ranges. I was advised by Fire Rescue her actions were those of someone faking being unconscious. Doerr would wake up and say she wanted Amy her fiance then she would pass out again. After being medically cleared with Fire Rescue I continued south to the Palm Beach County Jail. Prior to arrival at the Jail, Doerr woke up and was talking again. Doerr's speech was still slurred and mumbled and her statements were not making sense.

After arrival at the Palm Beach County Jail BAT Doerr remained awake. A 20minute observation was made and Doerr was requested to provide a sample of her breath. Doerr refused to provide a sample of her breath and implied consent was read. Again Doerr refused to provide a sample of her breath. Miranda was read and Doerr said she would answer questions. I asked Doerr if she was driving a vehicle at the time of the stop and Doerr stated she was forced to stop. I asked what she meant by she was forced to stop and then Doerr refused to answer any other questions.

In car video is available for the attempt to stop, attempt of road side exercises.
Martin County Sheriff Tactical Flight Officer D/S Edward Stagmiller has video from the air.
Refusal Video available Though Palm Beach County BAT.

ARREST REPORT

FHP99ARR130569

SCANNED

APR 28 2017

Page 1 of 2

Report Date / Time 04/27/2017 02:13 AM	Agency Case/Offense Number FHPL17OFF032488	OCA Number	Original Agency Case Number	OBTS Number	Offender Based Transaction System	Jail Booking Number	Other Number LWRC17CAD071919
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LEO BOND

Bond Amount \$ TO BE SET	None <input type="checkbox"/> Pro	<input type="checkbox"/> ROR	<input type="checkbox"/> Cash	<input type="checkbox"/> Any	<input type="checkbox"/> Pre Trial If Quality <input type="checkbox"/>
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COURT APPEARANCE INFORMATION

Court (CIRCUIT) CRIMINAL JUSTICE COMPLEX	Court Phone 561-355-2994	Court Date & Time TO BE SET
Court Address 3228 GUN CLUB ROAD, WEST PALM BEACH, FL 33406		
Instructions		

ARREST INFORMATION

Arrest Date / Time 04/27/2017 02:13 AM	Residency Within jurisdiction	Injured None	Extent of Injury N/A	Resist Arrest Yes
Prior Arrests Unknown	Arrest Jurisdiction Within jurisdiction	Alcohol Yes	Drugs No	

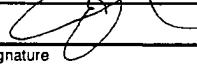
ARREST LOCATION

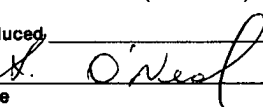
County MARTIN	Address NB I-95 (SR-9) N OF MM110 , , FL PALM CITY
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ARREST DELIVERED TO

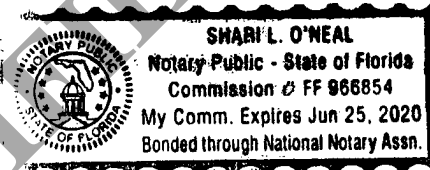
Jail / Booking Facility PALM BEACH COUNTY CORRECTIONS	Location 3228 GUN CLUB ROAD, WEST PALM BEACH, FLORIDA 33406	Phone (561) 688-4400
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ARRESTING OFFICER

Officer Call Number 1138	Officer Name R.E. WEBER	Officer Signature 
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Subscribed and sworn to (or affirmed) before me this 27TH day of APRIL A.D., 2017 by RONALD WEBER who is personally known to me or has produced  as identification.

Signature _____ Notary Public LEO CO Commission No: _____ My Commission Expires: _____



Florida Department of Highway Safety
and Motor Vehicles

FLORIDA HIGHWAY PATROL



DUI INVESTIGATION
CASE REPORT

Offense Date: 4/27/2017 Report Date: 4/27/2017

FHP Case #: FHPL17OFF032488 THL Case #: _____

Defendant Name: JAIME ALEXANDRA DOERR

Incident Type / Charges: S1 / DUI

Arresting Trooper: RONALD WEBER TROOPER 3011 
Print Name, Rank, and ID # Signature

Reviewing Supervisor: _____
Print Name, Rank, and ID # Signature

Test Type: ☐ Blood ☐ Breath ☐ Urine ☒ Refusal ☐ None

Video: ☒ Yes ☐ No Drug Recognition Evaluation: ☐ Yes ☐ No

☐ State Attorney Copy ☐ DL Administrative Packet ☐ E/P Copy ☐ Station Copy

☐ Trooper Copy ☐ Other (Specify): _____

**Bureau of Administrative Reviews (BAR)
Waiver Review
First Time DUI Offenders**

Effective 07/01/2013 – First time DUI offenders can apply for a waiver review and may obtain a restricted driver license within 10 days of the suspension if otherwise eligible. To request the waiver review, a non-refundable filing fee of \$25.00 and proof of DUI school enrollment must be submitted with your application for a waiver review hearing within 10 days of the driver license suspension. You may submit your request by appearing at the local BAR office indicated on the DUI citation.

NOT A CERTIFIED COPY



FLORIDA HIGHWAY PATROL
DUI CASE REPORT CHECKLIST

Defendant Name: JAIME ALEXANDRA DOERR

FHP Case#: _____ FHPL17OFF032488

THI Case#: _____

Offense Date: _____ 4/27/2017

Report Date: _____ 4/27/2017

- ☒ Cover Sheet (HSMV 61295)
- ☐ Table of Contents (HSMV 61305)
- ☒ DUI Case Report Checklist (HSMV 61306)
- ☒ Copy of DUI Citation (Hard Copy - Specific DUI UTC for DL Packet)
- ☒ BAR Waiver Review Notice – Copy Issued with DUI UTC for 1st Time DUI Offenders
- ☒ Copy of All Other Traffic Citations, Written Warnings, & Faulty Equipment Notices
- ☒ Completed UTC Transmittal Form (HSMV 75954)
- ☒ Original DL, If Surrendered (Submit with DL Packet); Copy for Others
- ☐ Copy of Identification Card, If No DL
- ☒ Arrest Report / Probable Cause Affidavit
- ☒ Offense Report
- ☒ Alcohol and Drug Influence Report (HSMV 61160)
- ☒ Standardized Field Sobriety Exercises Instruction Sheet ☐ Copy of SFSEs Pocket Cards
- ☒ Implied Consent (HSMV 61299 / 61301) ☐ Copy of Implied Consent Pocket Card (HSMV 61304)
- ☐ Breath Alcohol Test Affidavit (FDLE / ATP Form 38)
- ☐ Consent to Voluntary Blood Withdrawal (HSMV 61296)
- ☐ Search / Arrest Warrant (Missouri v. McNeely)
- ☐ Certificate of Blood Withdrawal (FDLE / ATP Form 11)
- ☐ Toxicology Services - DUI Lab Work Request (FDLE / T Form 01) or Other Lab's Request Form
- ☐ FDLE or Other Laboratory Results
- ☒ Refusal to Submit Affidavit (HSMV 78054) (Submit Original with DL Packet)
- ☒ Miranda Warning (HSMV 61297 / 61298) ☐ Copy of Miranda Warning Pocket Card (HSMV 61300)
- ☐ DAVID / FCIC-NCIC Printout (DL & Vehicle)
- ☐ Criminal History
- ☐ Evidence/Property Receipt (HSMV 61802 / IEvidence)
- ☒ Tow Report / Inventory and Vehicle Storage Receipt (HSMV 61801)
- ☐ Florida Traffic Crash Report (HSMV 90003/4/5)
- ☒ Witness List (HSMV 62704) / Witness Interview (HSMV 62705)
- ☐ Notification of DL Hearing (HSMV 61170)
- ☐ Affidavit of Investigative Costs (HSMV 61303)
- ☐ Copy of Audio/Video Recoding (DVD) Attached ☐ Audio/Video Recording On File
- ☐ Copy of Photographs Attached ☐ Photographs On File
- ☐ Consent to Search (HSMV 61061)
- ☐ Drug Interdiction Reporting Form (HSMV 60105)
- ☐ Notice of Seizure / Right to Adversarial Hearing (HSMV 61023)
- ☐ FHP CAD Call History
- ☐ Other (specify): _____
- ☐ Any Items Required By Local Jurisdiction (see below): _____

FLORIDA CITATION TRANSMITTAL FORM

Transmitted to: CLERK OF COURT - TVB

PALM BEACH COUNTY

- ☐ By Mail
☐ In Person
☐ Other
 (Explain Under Remarks)

Transmitted By: **R.E. WEBER** TROOPEF 3011 L
 Enforcement Agency: **FLORIDA HIGHWAY PATROL**
 Address: **P.O. BOX 540007, GREENACRES, FL 33454**
 Date: **4/27/2017**

The below listed complaint and abstract copies of citations issued by the above are transmitted herewith for court action as required by 316.650 (3) F.S.

CITATION NUMBER	DATE ISSUED	COURT COPIES ATTACHED		BLUE COPY PREVIOUSLY SENT		REMARKS
		YES	NO	YES	NO	

A7MBUIE	04/27/2017					UTC
A7MBUJE	04/27/2017					UTC
A7MBUKE	04/27/2017					UTC

A75ZD6E	04/27/2017					DUI
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CITATION NUMBER	DATE ISSUED	COURT COPIES ATTACHED		BLUE COPY PREVIOUSLY SENT		REMARKS
		YES	NO	YES	NO	

Total Number of Citations Attached: 4

Received By: _____

Date: _____

THE ABOVE LISTED CITATION COPIES ARE SUBMITTED HERewith ON
 AS PROVIDED IN 316.650 FLORIDA STATUTE.

4/27/2017

(DATE)

Prepared By: BUREAU OF UNIFORM TRAFFIC CITATIONS / Division of Driver Licenses
 DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

ARREST AFFIDAVIT CONTINUATION

Agency Case Number

FHP470FFD032488

Arrest Date

04/27/2017

Defendant Name (Last, First, Middle)

Doerr, Jaime Alexandra

On 04/27/17 at approximately 0125 hours, I Cpl. David Yun with the Martin County Sheriff's Office (MCSO), responded to the area of Interstate 95 regarding a reckless vehicle. Florida Highway Patrol (FHP) relayed a Be On the Lookout (BOLO) regarding a vehicle that fled from a traffic stop. The vehicle was described as a light in color Hyundai Sonata last seen northbound on Interstate 95 at the south county line. We also received information that the vehicle was originally called in as a wrong way driver on Interstate 95.

Due to the time delay, I responded directly to the area of Interstate 95 and S Kanner Highway when Tactical Flight Officer, D/S Edward Stagmiller stated he had visual on a light colored vehicle, northbound on the interstate just north of my location at a high rate of speed. I then attempted to catch up with the vehicle as D/S Stagmiller provided location updates.

I was able to catch up with the vehicle gain visual as it approached Mile Marker 108. At this point, the vehicle was straddling the right fog line, traveling on both the right lane and the right shoulder. The vehicle then abruptly changed lanes from the far right side of the highway, traveling over 3 lanes of travel into the far left lane. While doing so, it appeared the driver was attempting to signal the "lane change" but was having a difficult time. The turn signal switched from left to right several times.

I was able to get directly behind the vehicle as it approached Mile Marker 109. The vehicle matched the description provided by FHP. The vehicle was a light blue, Hyundai Sonata bearing Florida license plate: DAVH96. While behind the vehicle, in the left lane, it traveled in a serpentine manner, drifting from side to side. Based on the driving pattern observed up to this point and the information relayed by FHP, I feared the driver was either sick, injured or impaired.

I activated my emergency lights to conduct a traffic stop as we were approaching Mile Marker 110 where I received no response from the driver. The vehicle continued to travel northbound, passing the 110. I notified our dispatch center of my attempt at a traffic stop. Due to the driver not responding or pulling over, D/S Charles Ruby positioned his patrol vehicle to the front-right of the Hyundai in an attempt to gain the attention of the driver. The driver finally pulled over, on top of the 110 overpass.

I made contact with the driver who was later identified as, Jaime Alexandra Doerr out of Pompano Beach, Florida. When asked why she was driving the way she was, Jaime appeared extremely confused. Jaime then started rambling about how she was driving "north" to drop "Kim" off then was going to head back "south." When asked who and where Kim was, Jaime looked back into her empty backseat. It should be noted that Jaime was the sole occupant of the vehicle. When asked if she knew where she was, Jaime said "Yes, in North Boca..."

During conversation, I noticed that Jaime had bloodshot-glassy eyes, slurred her speech and had a moderate to strong odor of an alcoholic beverage coming from her breath. Based on the observations I made of Jaime and her driving pattern, I believed she was impaired beyond her normal faculties to operate a vehicle safely. Trooper Ronald Weber arrived on scene and took over the investigation.

This ends my involvement in this case.

The preceding is true to the best of my present knowledge or belief.

Signature

Ca [Signature] YUN MCSO 315/1789

Sworn & Subscribed before me this ____ day of _____, _____

NOTARY / ASA _____

My commission expires _____

Agency _____

CLERK COURT COPY

STATE ATTORNEY COPY

JAIL COPY

ARRESTING AGENCY COPY

DEFENDANT

Florida Highway Patrol
ALCOHOL AND DRUG INFLUENCE REPORT

Case Number: FHPL17OFF032488
Offense Location: NB I-95 STATE ROAD N OF INDIANTOWN RD
Arresting Trooper / ID#: RONALD WEBER TROOPER 3011
Defendant: JAIME ALEXANDRA DOERR 03/06/1985
(Name) DOB

Offense Date: 4/27/2017 Time: 12:58 ☒ AM ☐ PM
Arrest Date: 4/27/17 Time: 2:13 ☒ AM ☐ PM
Crash: ☐ Yes ☒ No
In Car Video Used: ☒ YES ☐ NO
DUI Citation Number: A75ZD6E

PHASES OF DETECTION

Phase 1 - Vehicle in Motion: (If more than 12 total lines of type in Phases of Detection Section use Narrative Continuation page of this form)

SEE ARREST REPORT

Phase 2 - Physical Contact:

SEE ARREST REPORT

Phase 3 - Pre-Arrest Screening:

SEE ARREST REPORT

Traffic Crash Details:

NA

DUI DETECTION DRIVING CUES

☐ Not Applicable - Traffic Crash Investigation

Problems In Maintaining Proper Lane Position:

- ☒ Weaving ☒ Weaving Across Lane Lines ☒ Drifting ☐ Straddling a Lane Line ☐ Swerving ☒ Almost Striking Object or Vehicle
☐ Turning With Wide Radius

Speeding and Braking Problems:

- ☐ Braking Erratically (too far/short/jerky) ☒ Unnecessary Acceleration/Deceleration ☐ Varying Speed
☐ Driving 10mph or More Below Speed Limit

Vigilance Problems:

- ☐ Driving Without Headlights ☒ Failure to Signal/Signal Inconsistent With Actions ☒ Driving in Opposing Lanes or the Wrong Way on a One-Way
☐ Slow Response to Traffic Signals ☒ Slow or Failure to Respond to Officer's Signals ☐ Stopping in Lane for No Apparent Reason

Judgment Problems:

- ☐ Following Too Closely (Tailgating) ☒ Improper/Unsafe Lane Change ☒ Turning Abruptly or Illegally
☒ Driving on Other Than Designated Roadway ☐ Stopping Inappropriately in Response to Officer ☒ Inappropriate/Unusual Behavior
☒ Appearing to be Impaired

POST-STOP CUES

- ☐ Difficulty With Motor Vehicle Controls ☐ Fumbling With DL/Registration ☐ Difficulty Exiting the Vehicle
☐ Repeating Questions/Comments ☒ Swaying, Unsteady, or Balance Problems ☐ Leaning on the Vehicle or Other Object
☒ Slurred Speech ☐ Slow to Respond to Officer/Officer Must Repeat ☒ Provides Incorrect Information or Changes Answers
☒ Odor of Alcoholic Beverage From the Driver

Trooper RONALD WEBER ID Number TROOPER 3011 Case Number FHPL17OFF032488 Page of
HSMV 61160 (Rev.03/14)

STANDARDIZED FIELD SOBRIETY EXERCISES (SFSEs)

Performed: ☐ Yes No - Why: ☒ Unable ☐ Too Impaired ☐ Refused Date: 4/27/17 Time: ☐ AM ☐ PM

Given By (Name / ID#): TROOPER RONALD WEBER

Location: ☒ Roadside/On-Scene ☐ Parking Lot ☐ Sidewalk/Driveway ☐ BAT/Testing Facility ☐ Medical Facility ☐ Jail ☐ Other: _____

Lighting: ☐ Day ☒ Night ☐ Dusk ☐ Dawn ☒ Street Light ☒ Vehicle Lights ☐ Other: _____

Surface: ☒ Dry ☐ Wet ☒ Paved ☐ Dirt ☒ Hard ☒ Level ☐ Upgrade/Downgrade ☒ Marked Line ☐ Other: _____

Weather Conditions: ☐ Rain ☐ Fog ☐ Smoke ☐ Wind ☐ Ice ☐ Other: _____

Video: ☒ Yes ☐ Intoxilyzer Room ☒ BAT ☒ In Car ☐ Other: _____

☐ No Why? _____
If refused, was refusal captured on video? ☒ Yes ☐ No

Subject's Education Level: ☐ None ☐ Elementary ☐ Middle/Junior High ☐ High School ☐ College ☐ Other: _____

Subject's Ability To Understand Instructions: ☐ Good ☐ Fair ☐ Poor ☐ Unable

Wearing Glasses ☒ Yes ☐ No

Wearing Contacts ☐ Yes ☐ No

Eye Problems ☐ Yes ☐ No

Artificial Eye ☐ Yes ☐ No

Equal Pupil Size ☐ Yes ☐ No

Resting Nystagmus ☐ Yes ☐ No

Able to Follow Stimulus ☐ Yes ☐ No

Equal Tracking ☐ Yes ☐ No

HORIZONTAL GAZE NYSTAGMUS

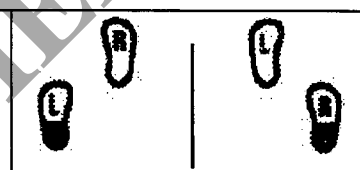
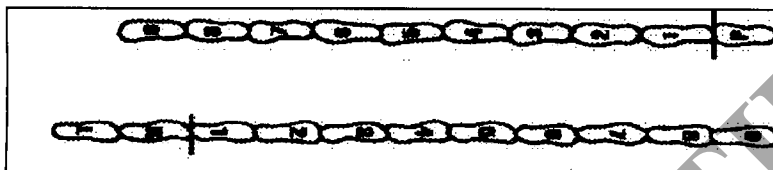
- _____ Lack Smooth pursuit: Left eye
- _____ Lack Smooth pursuit: Right eye
- _____ Distinct & Sustained Nystagmus at Max deviation: Left Eye
- _____ Distinct & Sustained Nystagmus at Max deviation: Right Eye
- _____ Onset of Nystagmus prior to 45 degrees: Left Eye
- _____ Onset of Nystagmus prior to 45 degrees: Right Eye
- _____ TOTAL CLUES OBSERVED (Decision point 4)
- Exercise was: Refused

VERTICAL GAZE NYSTAGMUS

LACK OF CONVERGENCE Select One



Draw arrows in the direction that eyes move.



Wearing Footwear During WAT
☒ Yes ☐ No

Wearing Footwear During OLS
☒ Yes ☐ No

WALK AND TURN

- _____ Cannot keep balance while listening to instructions
- _____ Starts before instructions are finished
- _____ Stops walking to steady self
- _____ Does not touch heel-to-toe
- _____ Loses balance while walking (steps off the line)
- _____ Uses arm(s) for balance (raising arm(s) over six inches)
- _____ Incorrect number of steps
- _____ Incorrect turn or loses balance during turn
- _____ Cannot perform, subject is in danger of falling
- _____ TOTAL CLUES OBSERVED (Decision point 2)
- Exercise was: Refused

FINGER TO NOSE (OPTIONAL EXERCISE)

- _____ Uses arm(s) for balance (raising arm(s) over six inches)
- _____ Sways forward-backward / side-to-side
- _____ Eyes do not remain closed
- _____ Brings head forward to finger
- _____ Misses tip of nose with tip of finger
- _____ Uses wrong hand
- _____ Forgets to remove finger
- _____ Cannot perform, subject is in danger of falling
- Exercise was: Refused

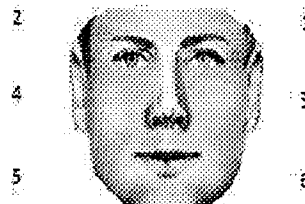
RHOMBERG BALANCE (OPTIONAL EXERCISE) / 30 seconds

- _____ Uses arm(s) for balance (raising arm(s) over six inches)
- _____ Sways forward-backward / side-to-side
- _____ Eyes do not remain closed
- _____ Eye lid tremors
- _____ Body tremors
- _____ Cannot perform, subject is in danger of falling
- Exercise was: Refused

ONE-LEG STAND / 30 seconds

- _____ Sways while balancing
- _____ Uses arm(s) to balance (raises arm(s) over six inches)
- _____ Hops
- _____ Puts foot down
- _____ Cannot perform, subject is in danger of falling
- _____ TOTAL CLUES OBSERVED (Decision point 2)
- Exercise was: Refused

Right Finger Left



Draw a line from the number to the area touched

ORDER:

- | | | |
|----------|----------|---------|
| 1. Left | 2. Right | 3. Left |
| 4. Right | 5. Right | 6. Left |

RONALD WEBER

TROOPER 3011

FHPL17OFF032488

Page _____ of _____

Trooper

HSMV 61160 (Rev.03/14)

ID Number

Case Number

OBSERVATIONS

CLOTHING DESCRIPTION AND COLOR	Hat / Cap	
	Jacket / Coat	
	Shirt / Dress	GRAY SHIRT
	Footwear	WHITE/GRY SNEAKERS
	Pants / Skirt	BLACK PANTS
CLOTHING CONDITION	<input checked="" type="checkbox"/> Orderly <input type="checkbox"/> Disorderly <input type="checkbox"/> Clean <input type="checkbox"/> Mussed <input type="checkbox"/> Unzipped <input type="checkbox"/> Inside Out <input type="checkbox"/> Torn <input type="checkbox"/> Naked <input type="checkbox"/> Urine <input type="checkbox"/> Feces <input type="checkbox"/> Vomit <input type="checkbox"/> Blood <input type="checkbox"/> Other: _____	
BREATH	Odor of Alcoholic Beverage <input checked="" type="checkbox"/> Strong <input type="checkbox"/> Moderate <input type="checkbox"/> Faint <input type="checkbox"/> None	
ATTITUDE	<input type="checkbox"/> Excited <input type="checkbox"/> Hilarious <input type="checkbox"/> Polite <input type="checkbox"/> Cooperative <input type="checkbox"/> Silent <input checked="" type="checkbox"/> Sleepy <input checked="" type="checkbox"/> Lethargic <input checked="" type="checkbox"/> Confused <input type="checkbox"/> Talkative <input type="checkbox"/> Carefree <input type="checkbox"/> Indifferent <input type="checkbox"/> Profanity <input checked="" type="checkbox"/> Mood Swings <input type="checkbox"/> Cocky <input type="checkbox"/> Insulting <input checked="" type="checkbox"/> Remorseful <input type="checkbox"/> Combative <input type="checkbox"/> Sarcastic <input checked="" type="checkbox"/> Angry <input type="checkbox"/> Argumentative <input type="checkbox"/> Threatening <input type="checkbox"/> Sullen <input type="checkbox"/> Other: _____	
COLOR OF FACE	<input type="checkbox"/> Pale <input checked="" type="checkbox"/> Flushed <input type="checkbox"/> Normal <input type="checkbox"/> Other: _____	
EYES	<input checked="" type="checkbox"/> Bloodshot <input checked="" type="checkbox"/> Watery <input type="checkbox"/> Normal <input type="checkbox"/> Other: _____ Color: _____ Reaction to Light: <input checked="" type="checkbox"/> Normal <input type="checkbox"/> Slow <input type="checkbox"/> No Reaction	
PUPILS	<input type="checkbox"/> Not Equal Size <input type="checkbox"/> Constricted <input type="checkbox"/> Dilated <input checked="" type="checkbox"/> Normal	
UNUSUAL ACTIONS	<input type="checkbox"/> Hiccoughing <input type="checkbox"/> Belching <input type="checkbox"/> Vomiting <input checked="" type="checkbox"/> Sleeping <input checked="" type="checkbox"/> Crying <input type="checkbox"/> Laughing <input type="checkbox"/> None <input type="checkbox"/> Other: _____	
SPEECH	<input checked="" type="checkbox"/> Incoherent <input checked="" type="checkbox"/> Mumbling <input checked="" type="checkbox"/> Slurred <input type="checkbox"/> Thick Tongued <input type="checkbox"/> Stuttering <input type="checkbox"/> Accent <input type="checkbox"/> Apparently Normal	

MEDICAL QUESTIONS

Do you have any physical defects? ☐ Yes ☐ No If yes, please explain. REFUSED

Are you sick or injured? ☐ Yes ☐ No If yes, please explain. REFUSED

When did you last sleep? REFUSED How much sleep did you have? _____

Have you ever had a head injury? ☐ Yes ☐ No If yes, did you lose consciousness? ☐ Yes ☐ No

Are you under the care of a Doctor or Dentist? _____ If so, who? _____ When? _____

What for? REFUSED Are you taking tranquilizers, pills or medicines of any kind? ☐ Yes ☐ No

If yes, what kind? REFUSED Last dose? ☐ AM ☐ PM Do you have epilepsy? ☐ Yes ☐ No

Diabetes? ☐ Yes ☐ No Do you take insulin? ☐ Yes ☐ No If yes, last dose? _____

Are you wearing an artificial limb? REFUSED Do you have any medical alert ID? _____

Do you have any foreign objects in your mouth? REFUSED

Subject advised of Miranda Rights Date: 4/27/17 Time 4:00 ☒ AM ☐ PM Invoked ☒ Yes ☐ No

INTERVIEW QUESTIONS (Quote Answers)

When did you last eat? REFUSED What did you eat? REFUSED Where? _____
Have you been drinking? _____ What? REFUSED How much? _____
Where? _____ With whom? REFUSED Time started? _____ Time stopped? _____
Have you used any type of illegal drugs recently? REFUSED If so, what kind of drug? _____
Last dose? ☐ AM ☐ PM Do you feel the effects of the alcohol or drugs? _____
Do you feel impaired? REFUSED

Were you operating a vehicle at the time of the stop/crash? _____ Was anyone in the vehicle with you? _____

What street or highway were you on? REFUSED Direction of travel? _____

Where did you start from? REFUSED What time did you start? _____

Were you involved in a crash today? REFUSED Have you had any alcoholic beverages or drugs since the crash? _____

If so, what? REFUSED

Where? REFUSED How Much? _____ When? _____

Is it day or night? REFUSED What time is it now? _____

What is the date? _____ Day of week? _____ What city (county) are we in? _____

Interviewer's Name: _____ Actual Date/Day/Time: _____ ☐ AM ☐ PM

Date Day of Week Time

BREATH / URINE / BLOOD TEST DATA

☐ Voluntary Consent **OR** ☒ Implied Consent Warning Given: Date: 4/27/17 Time: 3:59 ☒ AM ☐ PM
☐ Involuntary Consent – Warrant Obtained ☐ Yes ☐ No If no, why? _____

Specimen: ☐ Breath ☐ Urine ☐ Blood ☐ None
☒ Refused ☐ Unable

If refused, why? _____

Analysis result: _____

Breath Test Operator: J BIGGS 7607

If breath, Intoxilyzer 8000 serial # : _____

Department: PBSO

Did the subject request an independent blood test, as outlined in FSS 316.1932? ☐ Yes ☒ No

If yes, what arrangements were made for the subject to obtain the independent test? _____

Conclusion: Is the subject's ability to safely operate a vehicle impaired? ☒ Yes, is impaired. ☐ No, is not impaired.

I swear and affirm that the information and / or statements contained in this report are true and accurate to the best of my knowledge.

Trooper's Actual Signature

TROOPER RONALD WEBER

Trooper's Printed Name

In and for the State of Florida, County of BALM BEACH sworn to and subscribed before me this 27TH day of APRIL, 2017.

Actual Signature of Person Authorized to Administer Oath

Printed Name of Authorized Person

☐ LEO ☐ CO ☒ Notary Public

Commission No. _____

My Commission Expires: _____

RONALD WEBER

TROOPER 3011

FHPL17OFF032488

Page _____ of _____

Trooper

ID Number

Case Number

HSMV 61160 (Rev.03/14)

Place Drivers License Here

STANDARDIZED FIELD SOBRIETY EXERCISES INSTRUCTION SHEET

Horizontal Gaze Nystagmus Instructions

1. I am going to check your eyes. (Please remove your glasses.)
2. Stand with your feet together and your hands down at your side. (Subject may also be seated.)
3. Keep your head still and follow the stimulus (i.e., tip of the pen) with your eyes only.
4. Do not move your head.
5. Do you understand the instructions?

Walk and Turn Instructions

1. Put your left foot on the line and put your right foot in front of it with your right heel touching your left toe. Keep your hands at your side. (*Demonstrate*)
2. Do not start to perform the exercise until I tell you to do so.
3. Do you understand the instructions so far?
4. When I tell you to begin, take nine heel-to-toe steps on the line, turn around keeping one foot on the line, and return nine heel-to-toe steps. (*Demonstrate heel-to-toe; three steps is sufficient.*)
5. On the ninth step, keep the front foot on the line and turn by taking several small steps with the other foot. (*Demonstrate turn*)
6. While walking, watch your feet at all times, keep arms at your side, and count steps out loud. Once you begin, do not stop until the exercise is completed.
7. Do you understand the instructions?
8. You may begin the exercise.

One-Leg Stand Instructions

1. Stand with your heels together and your arms at your side. (*Demonstrate*)
2. Do not start to perform the exercise until I tell you to do so.
3. Do you understand the instructions so far?
4. When I tell you to, I want you to raise one leg, either leg, approximately six inches off the ground, foot pointed out forward. Keep both legs straight, and keep your eyes on the elevated foot.
5. While holding that position, count out loud; one thousand and one, one thousand and two, one thousand and three, and so forth until you are told to stop. (*Demonstrate raised leg and count*)
6. Do you understand the instructions?
7. You may begin the exercise.

Vertical Gaze Nystagmus Instructions (if checked)

1. I am going to check your eyes. (Please remove your glasses.)
2. Stand with your feet together and your hands down at your sides. (Subject may also be seated.)
3. Keep your head still and follow the stimulus (i.e., tip of the pen) with your eyes only.
4. Do not move your head.
5. Do you understand the instructions?

Finger-to-Nose Instructions (optional exercise)

1. Stand with your feet together, your arms at your side, and your index fingers pointed down. (*Demonstrate*)
2. Do not start to perform the exercise until I tell you to do so.
3. Do you understand the instructions so far?
4. When I tell you to start, close both eyes and tilt your head back.
5. When I tell you to do so, bring the hand I direct, upward, touching the tip of the finger to the tip of your nose.
6. After touching your nose, immediately bring hand down at your side.
7. Do you understand all instructions so far?

NOTE: Test will be conducted in the following sequence: **left, right, left, right, right, left**

Rhomberg Balance Instructions (optional exercise)

1. Stand with your feet together and your arms at your side. (*Demonstrate*)
2. Do not start to perform the exercise until I tell you to do so.
3. When I tell you to begin, close your eyes, tilt your head back, and keep your arms at your side.
4. Do you understand the instructions?
5. You may begin the exercise and continue until you are told to stop.

FLORIDA HIGHWAY PATROL

RECIPIENT COPY

Vehicle Tow

Page 1 of 1

CASE NUMBER
FHPL17OFF032488

DATE / TIME 4/27/2017 2:17:36 AM	COUNTY MARTIN	CITY	OTHER NUMBER	CITATION / REPORT
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NO HOLD - MAY BE RELEASED

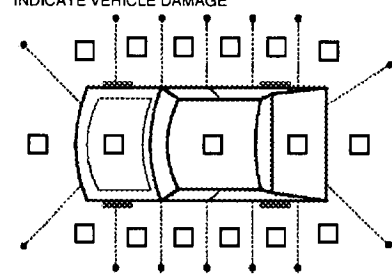
OWNER	FIRST NAME JAMIE	MIDDLE NAME A	LAST NAME DOERR	SUFFIX NAME	TELEPHONE
	ADDRESS 116 S RIVERSIDE DR #105		CITY POMPANO BCH	STATE FL	ZIP CODE 33062
	<input type="checkbox"/> OWNER PRESENT OR <input type="checkbox"/> OWNER NOTIFICATION ATTEMPTED		OWNER NOTIFICATION ATTEMPTS: <input type="checkbox"/> OWNER NOTIFICATION SUCCESSFUL		

DRIVER	NAME FIRST	NAME MIDDLE	LAST NAME	SUFFIX NAME	TELEPHONE
	ADDRESS		CITY	STATE	ZIP CODE

VEHICLE / TRAILERS	YEAR 2012	MAKE HYUN	MODEL SONATA	VEHICLE STYLE 4D	VEHICLE COLOR LBL	TAG STATE / NUMBER FL DAVH96	VIN 5NPEC4AB6CH440140	ODOMETER	
	CIC ENTRY NOT APPLICABLE		RED TAG DATE / TIME		ID NUMBER	NAME			
	REASON VEHICLE TOWED ARREST								
	POWER UNIT	MAKE	YEAR	COLOR	UNIT NO.	VEHICLE IDENTIFICATION NO.	TAG NO.	STATE	EXP. DATE
	TRAILER 1	MAKE	YEAR	COLOR	UNIT NO.	VEHICLE IDENTIFICATION NO.	TAG NO.	STATE	EXP. DATE
TRAILER 2	MAKE	YEAR	COLOR	UNIT NO.	VEHICLE IDENTIFICATION NO.	TAG NO.	STATE	EXP. DATE	

TOW	TOW SELECTION TYPE ROTATION WRECKER	LOCATION VEHICLE INVENTORIED / TOWED FROM I-95 (SR-9) NB @ 110 MM	
	TOWING SERVICE KAUFF'S	DAY TELEPHONE (772)283-8997	NIGHT TELEPHONE
	ADDRESS 2201 S.E. INDIAN ST STUART, FL 34990	CITY / STATE / ZIP	

STORAGE	VEHICLE STORAGE LOCATION KAUFF'S	DAY TELEPHONE (772)283-8997	NIGHT TELEPHONE
	ADDRESS 2201 S.E. INDIAN ST STUART, FL 34990	CITY / STATE / ZIP	

VEHICLE INVENTORY & DAMAGE	<input checked="" type="checkbox"/> CELLULAR PHONE (MAKE/MODEL) SAMSUNG	<input type="checkbox"/> WHEEL COVERS QTY	INDICATE VEHICLE DAMAGE 	MARK AREA OF DAMAGE <input type="checkbox"/> UNDERCARRIAGE <input type="checkbox"/> OVERTURN <input type="checkbox"/> WINDSHIELD <input type="checkbox"/> FIRE <input type="checkbox"/> TRAILER
	<input type="checkbox"/> RADAR DETECTOR (MAKE/MODEL)	<input type="checkbox"/> CUSTOM RIMS QTY		
	<input checked="" type="checkbox"/> STEREO SYSTEM (RADIO / CD / TAPE, ETC.)	NUMBER OF TIRES (INCLUDE SPARE) 4		
	<input type="checkbox"/> CB RADIO / 2 WAY RADIO	<input type="checkbox"/> TRUNK ACCESSIBLE		
	<input type="checkbox"/> TRAILER HITCH	<input type="checkbox"/> REAR SPOILER		
PROPERTY IN VEHICLE 3 PHONE CHARGERS, \$5 BILL, 3 GLASSES, GRAY BAG W/ MISC MEDS/MAKEUP/PAPERS, MISC CD'S, FRONTMAN AMP, MISC CLOTHING, GRN BAG W/ MISC BOOK, MISC PERSONAL PROPERTY/PAPERS				

OFFICER COMMENTS

NO HOLD - MAY BE RELEASED

WE THE UNDERSIGNED OFFICER(S) AND TOW DRIVER, HEREBY CERTIFY THAT THE ABOVE LISTED JOINT PROPERTY INVENTORY IS CORRECT TO THE BEST OF OUR KNOWLEDGE.

J Bullock

SIGNATURE OF TOW TRUCK DRIVER

DATE

SIGNATURE OF OFFICER

RANK AND NAME OF OFFICER

TROOPER J.J. BULLOCK

ORG / UNIT

L

I.D. NUMBER

2050

PRINTED NAME OF TOW TRUCK DRIVER

WITNESS LIST

Name CPL DAVID YUN On Scene ☒ Yes ☐ No Statement ☒ Yes ☐ No

Home Address _____

Place of Employment MARTIN COUNTY SHERIFF OFFICE

Employment Address 800 SE Monterey Road, Stuart, Florida 34994

Phone Numbers: Primary (772) 220-7170 Secondary _____

Can Testify To: ACTUAL PHYSICAL CONTROL OF VEHICLE AT TIME OF STOP, SUSPECT ACTIONS, SMELL OF ALCOHOLIC BEVERAGE DRIVING PATTERN

Name MARK TORRIJOS On Scene ☒ Yes ☐ No Statement ☒ Yes ☐ No

Home Address 2841 SE PACE DR. PORT ST LUCIE, FL 34984

Place of Employment ROAD RANGER

Employment Address _____

Phone Numbers: Primary (772) 919-2716 Secondary _____

Can Testify To: ORIGINALLY STOPPED TO HELP SUSPECT, SMELL OF ALCOHOLIC BEVERAGE, ALCOHOLIC BEVERAGE IN VEHICLE, SLURRED SPEECH, ILLEGAL TURN. DRIVER PASSED OUT BEHIND WHEEL

Name JAMES ANDERSON On Scene ☒ Yes ☐ No Statement ☒ Yes ☐ No

Home Address 4645 SW OSBORNE ST PORT ST LUCIE, FL 34953

Place of Employment ROAD RANGER

Employment Address _____

Phone Numbers: Primary (305) 725-6071 Secondary _____

Can Testify To: ORIGINALLY STOPPED TO HELP SUSPECT, DRIVER PASSED OUT BEHIND WHEEL

Name DEPUTY EDWARD STAGMILLER On Scene ☐ Yes ☒ No Statement ☐ Yes ☒ No

Home Address _____

Place of Employment TACTICAL FLIGHT OFFICER MARTIN COUNTY SHERIFF OFFICE

Employment Address 800 SE Monterey Road, Stuart, Florida 34994

Phone Numbers: Primary (772) 220-7170 Secondary _____

Can Testify To: IN FLIGHT OFFICER FOLLOWING VEHICLE AT HIGH RATE OF SPEED, DRIVING PATTERN, IN FLIGHT VIDEO


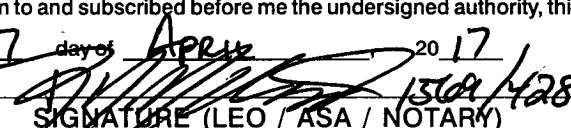
Case Number: FHPL17OFF032488 THI Case Number: _____ Page _____

☐ NARRATIVE CONTINUATION
☐ SUPPLEMENT
☒ WITNESS STATEMENT

MARTIN COUNTY SHERIFF'S OFFICE

800 S.E. MONTEREY ROAD, STUART, FL 34994

(772) 220-7000

Date 4-27-17	Case Reference	Agency Case Number																					
<p>ON 4/27/17 AT 1¹⁵ AM My SUPERVISOR, JAMES ANDERSON, WARNED ME OF A DRIVER TRAVELING SOUTH BOUND IN THE NORTH BOUND LANES AROUND MILE MARKER 89 ON I95. I ARRIVED AROUND 5 MIN LATER AND SAW A BLUE HUNDAI SONATA PARKED ON THE LEFT SIDE OF GUARDRAIL ON LEFT SIDE OF 95SB. DRIVER WAS SLUMPED OVER CENTER CONSOLE WHILE SEATED IN DRIVER SEAT. I TAPPED ON HER WINDOW AND SHE SAT UP AND LOOKED TOWARDS ME BUT DID NOT MAKE EYE CONTACT. I ASKED IF SHE WAS OK, SHE SAID "I'M GOOD". I TOLD HER SHE WAS TRAVELING IN THE WRONG DIRECTION AND DRIVING IN THE MEDIAN. SHE SAID "I KNOW, IT'S ALL GOOD". SHE ASKED WHO I WAS AND I TOLD HER I'M A ROAD RANGER. FHP HAD BEEN NOTIFIED SO I WAS STALLING HER WITH CONVERSATION. THERE WAS A BLUE BEER BOTTLE IN HER CENTER CUP HOLDER. HER SPEECH WAS SLURED AND JUMBLED. WHEN FHP ARRIVED SHE TOOK OFF JUMPING THE MEDIAN AND GOING NORTH</p>																							
THIS SECTION FOR WITNESS USE ONLY																							
WITNESSES	<table border="1"><tr><td>CODE W</td><td>Name (print) MARK TORRIJOS</td><td>Residence Phone</td></tr><tr><td>W</td><td>Address (Street, Apt. Number) 2842 SE PACE DR, PSL 34984</td><td></td></tr><tr><td>Race</td><td>Sex</td><td>Date of Birth / Age</td></tr><tr><td></td><td></td><td>7/25/69</td></tr><tr><td>Height</td><td>Weight</td><td>Hair</td></tr><tr><td></td><td></td><td>Eyes</td></tr><tr><td>S.S.N.</td><td colspan="2">Work Phone 772-919-2716</td></tr></table>	CODE W	Name (print) MARK TORRIJOS	Residence Phone	W	Address (Street, Apt. Number) 2842 SE PACE DR, PSL 34984		Race	Sex	Date of Birth / Age			7/25/69	Height	Weight	Hair			Eyes	S.S.N.	Work Phone 772-919-2716		WITNESSES
CODE W	Name (print) MARK TORRIJOS	Residence Phone																					
W	Address (Street, Apt. Number) 2842 SE PACE DR, PSL 34984																						
Race	Sex	Date of Birth / Age																					
		7/25/69																					
Height	Weight	Hair																					
		Eyes																					
S.S.N.	Work Phone 772-919-2716																						
<p>I swear the above statement is true and correct to the best of my knowledge and belief.</p> <p> Witness Signature</p>		<p>Sworn to and subscribed before me the undersigned authority, this 27 day of APRIL 20 17</p> <p> SIGNATURE (LEO / ASA / NOTARY)</p>																					
Officer Reporting	ID Number	OSN	Division	Date	Page	OF	Pages																
Officer Reviewing					1		2																

☐ NARRATIVE CONTINUATION
☐ SUPPLEMENT
☒ WITNESS STATEMENT

MARTIN COUNTY SHERIFF'S OFFICE

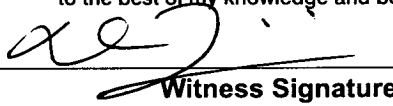
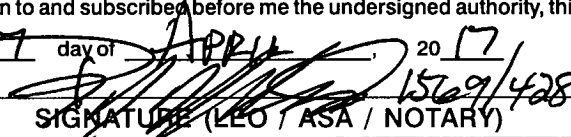
800 S.E. MONTEREY ROAD, STUART, FL 34994

(772) 220-7000

Date 4-27-17	Case Reference	Agency Case Number
-----------------	----------------	--------------------

WE CALLED OUR DISPATCHER AND TOLD THEM SHE WAS FLEEING. WE ARRIVED AT THE MILE MARKER 110 NB AND MARTIN COUNTY SO HAD HER STOPPED. WE SET UP MOT AND ID'd HER AS THE DRIVER.

NOT A CERTIFIED COPY

THIS SECTION FOR WITNESS USE ONLY													
W I T N E S S	CODE WW	Name (print) MARIC TORRIJOS								Residence Phone			
	W	Address (Street, Apt. Number) 2841 SE PACE DR											
	Race	Sex	Date of Birth of Age	Height	Weight	Hair	Eyes	S.S.N.	Work Phone 772-919-2716				
	I swear the above statement is true and correct to the best of my knowledge and belief.								Sworn to and subscribed before me the undersigned authority, this				
	 Witness Signature								27 day of APRIL 20 17  SIGNATURE (LEO / ASA / NOTARY)				
Officer Reporting						ID Number		OSN		Division			
Officer Reviewing										Date			
										Page 2		OF 2	

☐ NARRATIVE CONTINUATION
☐ SUPPLEMENT
☒ WITNESS STATEMENT

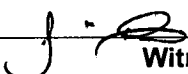
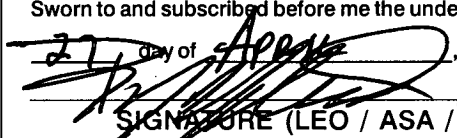
MARTIN COUNTY SHERIFF'S OFFICE

800 S.E. MONTEREY ROAD, STUART, FL 34994

(772) 220-7000

Date 4-27-17	Case Reference	Agency Case Number
-----------------	----------------	--------------------

On the 27th of April around 12:49 I was traveling ⁷⁹⁵North bound at mile marker 87 ~~in~~ when I notice a blue car driving South bound on the north bound side in the grass I made a u-turn at mile marker 99 headed ~~to~~ Southbound ~~to~~ I notice brake lights I stopped got ~~out~~ driver was passed out behind the wheel ~~top~~ on the window she woke up asked her if she knew where she was headed she told me just driving as a Road Ranger I contact FHP while waiting on FHP she asked can ~~to~~ she turn her car around I told her no she ask why not I advised her she is facing the wrong way she then waited for a few mins started the car and drove off at a high speed ~~with~~ northbound I got in my truck began heading northbound notice police lights at ~~the~~ mile marker 110 stopped and advised that the car that was driving the wrong way.

THIS SECTION FOR WITNESS USE ONLY											
W I T N E S S	CODE V/W	Name (print) James Anderson							Residence Phone 305-725-6071		W I T N E S S
		Address (Street, Apt. Number) 4645 SW Osborne St Port St Lucie FL 34953									
	Race B	Sex M	Date of Birth of Age 10-31-87	Height	Weight	Hair	Eyes	S.S.N.	Work Phone		
	I swear the above statement is true and correct to the best of my knowledge and belief.								Sworn to and subscribed before me the undersigned authority, this		
	Witness Signature 								27 day of April 2017  SIGNATURE (LEO / ASA / NOTARY) 1569/428		
Officer Reporting				ID Number		OSN		Divison		Date	
Officer Reviewing										Page 1 OF 1	

TESTING FACILITY TASK REPORT

AGENCY: FHP-WEBER

SUBJECT: DOERR, JAMIE A

CASE NUMBER: 17-069719

DATE: Apr 27, 2017

VIDEO DVD NUMBER: 62528

BEGINNING TIME: 0356

ENDING TIME: 0400

BREATH TESTS RESULTS: 1) REF TIME 0359 A.M. ☒ P.M. ☐ 2) XX TIME XX 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 TECHNICIAN: D/S J Karkleck #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED, MUSHED MOUTH

ATTITUDE: COOPERATIVE, CONFUSED AT TIMES

CLOTHING: GRAY SHIRT, BLACK PANTS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES GLASSY, RED

STRONG ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE ON SUBJECT

COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0335

SUBJECT REFUSED THE TEST INITIALLY

SUBJECT WAS READ IMPLIED CONSENT AND ADVISED SHE UNDERSTOOD

SUBJECT REFUSED THE TEST ONCE AGAIN

MIRANDA WAS READ

SUBJECT ANSWERED THE FIRST QUESTION THEN REFUSED

NOTE, SUBJECT ASKED WHICH YELLOW "X" SHE SHOULD STAND ON, THERE IS ONLY 1 IN THE ROOM

SUSPECT'S SIGNATURE: (X) _____

On Camera

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.

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

CONSTITUTIONAL WARNINGS

SUBJECT'S SIGNATURE: (X) _____

On Camera

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.

I am _____ of the _____

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

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.

-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 BREATH for the purpose of determining its alcohol content.

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

SUBJECT: _____

CASE NUMBER: _____

SUBJECT: _____ CASE NUMBER: _____

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



The Sunshine State

OPERATOR

Operation of a motor vehicle

NOT A CERTIFICATE



PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 17-069719 PBSO ZONE 3-11
AGENCY CASE # FHPL17OFF032488 CRASH CASE # _____
TIME OF STOP/CRASH 1:33am DATE 4/27/17 DAY Thursday
SUBJECT'S NAME Jaime Alexandra Doerr RACE W SEX F
HGT 511 WGT 180 DOB 3 / 6 / 1985
LOCATION Original offense: NB I-95 (SR-9) N of Indiantown RD (vehicle Fled)
Arrest location: NB I-95 (SR-9) mm110
ARRESTING OFFICER'S NAME & ID Trooper Ronald Weber 3011 AGENCY FHP
DIVISION: _____
NOTIFIED BY COMMO _____
ARRIVAL AT FACILITY 0335
ARREST TIME 2:13am
BREATH RESULTS:
1. **REFUSED**
2. _____
3. _____
4. _____
TESTING OFFICER'S ID 7607 PBSO VIDEOTAPE # 62528