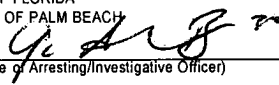
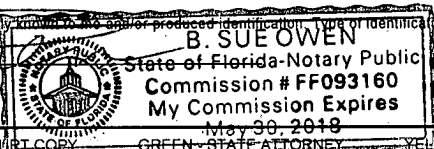


OBT Number		N/A		17 CF 00304		2867		ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		JUVENILE		N					
Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 5, 4 17-000100																			
Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type NONE		Multiple Clearance Indicator 01																			
Location of Arrest (Including Name of Business) WENDY'S 626 W INDIANTOWN RD, JUPITER										Location of Offense (Business Name, Address) 626 W INDIANTOWN RD, JUPITER, FL 33458													
Date of Arrest 01/07/2017		Time of Arrest 01:49		Booking Date 01/07/2017		Booking Time 01:59		Jail Date		Jail Time		Location of Vehicle											
Name (Last, First, Middle) TATLOW, JAMES M JR										Alias: Alias (Name, DOB, Soc. Sec. #, Etc.)													
Race W - White B - Black I - American Indian O - Oriental/Asian W		Sex M		Date of Birth 08/26/1988		Height 6'00		Weight 250		Eye Color BLUE		Hair Color BROWN		Complexion MEDIUM		Build Large							
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)										Marital Status S		Religion		Indication of: Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Drug Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Residence Type: 1. City 2. County 3. Florida 4. Out of State 1		Address Source DEF					
Local Address (Street, Apt. Number) 251 SUWANEE AVE, JUPITER, FL 33458		(City) JUPITER		(State) FL		(Zip) 33458		Phone		Permanent Address (Street, Apt. Number) 251 SUWANEE AVE, JUPITER, FL 33458		(City) JUPITER		(State) FL		(Zip) 33458		Phone					
Business Address (Name, Street) 28295907 / PA		(City) PA		(State) PA		(Zip) 15001		Phone		D/L Number, State 28295907 / PA		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) MALVERN, PA		Citizenship					
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor		<input type="checkbox"/> 5. Juvenile											
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor		<input type="checkbox"/> 5. Juvenile											
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian		Name (Last, First, Middle)		Residence Phone																			
Address (Street, Apt. Number)		(City)		(State)		(Zip)		Business Phone															
Notified by: (Name)		Date		Time		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. Incarcerated																	
Released To: (Name)		Relationship		Date		Time																	
The above address was provided by <input type="checkbox"/> defendant and/or <input type="checkbox"/> 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. <input type="checkbox"/> Yes, by: <input type="checkbox"/> No										School Attended		Grade											
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property																			
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Disperses/ 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. Pharmaceutical/ Equipment S. Synthetic		U. Unknown Z. Other			
Charge Description DRUGS - CONTROLLED SUBST W/O PRESCRIPTION (POSSESSION OF SCHEDULE II)										Statute Violation Number 893.13(6)(A)		Violation of ORD #											
Drug Activity N		Drug Type N		Amount / Unit /		Offense # 17-000100		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond									
Charge Description DUI - DRIVING WHILE UNDER INFLUENCE										Statute Violation Number 316.193(1)		Violation of ORD #											
Drug Activity N		Drug Type N		Amount / Unit /		Offense # 17-000100		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond									
Charge Description										Statute Violation Number		Violation of ORD #											
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond									
Health / Apparent Physical Condition of Defendant										Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries Explain:													
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> PROPERTY - Received By <input type="checkbox"/> Released By <input type="checkbox"/> Released To																							
<input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health																							
Transported By										Date Transported // : :		Time Transported		Other									
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.										Location (Court, Room) North County PALM BEACH GARD		Court Date and Time 01/08/2017 09:00 AM											
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.										No Photo Available													
Signature of Defendant (or Juvenile and Parent/Custodian)										Date Signed													
HOLD for Other Agency										Signature of Arresting Officer Gc AR 380/1138		Name Verification (Printed by Arrestee)											
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Sex Offender <input type="checkbox"/> Other										Name of Arresting Officer (Print) BORROWS, ANDREW		I.D. # 1138											
Intake Deputy [Signature]										Pouch #		Transporting Officer PFC A BORROWS		I.D. # 380		Agency JPD							
														Witness here if subject signed with an "X".									

COURT STATE ATTORNEY AGENCY CENTRAL RECORDS JAIL CRIME ANALYSIS P.T.O. DEFENDANT

SCANNED

JAN 10 2017

		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile		N	
ADMIN	OBTS Number		Agency ORI Number FL0501700		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 54- 17-000100						
	Charge Type: Check as many as apply.		<input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes:				
DEF	Name (Last, First, Middle) James Tatlow				Alias		Race W		Sex M		Date of Birth 8/26/88		
CHARGES	Charge Description Possession of Schedule II Substance 893.13(6)(A)				Charge Description								
	Charge Description				Charge Description								
VICTIM	Victim's Name (Last, First, Middle) Florida				Race		Sex		Date of Birth				
	Local Address (Street, Apt. Number)				(City)		(State)		(zip)		Phone		
	Business Address (Name, Street)				(City)		(State)		(zip)		Phone		
<p>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.</p> <p><input checked="" type="checkbox"/> The Person taken into custody committed the below acts in my presence.</p> <p><input type="checkbox"/> I confessed to _____ admitting to the below facts.</p> <p><input type="checkbox"/> _____ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> _____ was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the 7th day of January 20 17 at 0056 <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p>On the above date at approximately 0129 hours, I arrested James Tatlow for DUI after he was found passed out in the driver's seat of his vehicle at the Wendy's Restaurant located at 626 West Indiantown Road, in the Town of Jupiter, Palm Beach County, Florida.</p> <p>Officer Kitchens was on scene and conducted a search incident to arrest of the vehicle. In a small compartment in the center control panel, Officer Kitchens located 8 small blue pills marked with "224" on one side with a score mark on the other. A check of the pills using drugs.com revealed that they are Oxycodone Hydrochloride 30 mg, a Schedule II Controlled Substance.</p> <p>During the course of my investigation, I observed several signs and symptoms in Tatlow consistent in my training (including as a certified drug recognition expert) and experience with the use of Narcotic Analgesics like Oxycodone, including: constricted pupils, dry mouth, and facial itching. Tatlow also appeared to be "on the nod" during our two 20 minute observation periods, where he would appear to fall asleep but immediately respond to questions or attempts to see if he was awake.</p> <p>Post Miranda, I asked Tatlow if he was prescribed any pills, including Oxycodone or Oxycontin. He stated he was not and denied taking them. I asked Tatlow about the pills in the vehicle, and he denied all knowledge.</p> <p>Based on my above described investigation, I find probable cause to charge Tatlow with Possession of a Schedule II Controlled Substance per FSS 893.13(6)(A).</p>													
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH  (Signature of Arresting/Investigative Officer)												
	The foregoing instrument was sworn to or affirmed and subscribed before me this 7th day of January 20 17 by PFC Andrew Borrows 380 (Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced Personally known												
	Notary Public, Clerk of Court, Officer (F.S.S. 117.10)  B. SUE OWEN State of Florida-Notary Public Commission # FF093160 My Commission Expires May 30, 2018												

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 7th DAY OF January 20 17, AT 0056 ☒ AM ☐ PM

SUBJECT: James Tatlow CASE NUMBER: 17-000100

AGENCY: JUPITER POLICE DEPARTMENT ARRESTING OFFICER: PFC Andrew Borrows 380

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)
I responded to a call of a male passed out behind the wheel of his vehicle in the parking lot of Wendy's located at 626 West Indiantown Road. Upon my arrival I located a 2012 Honda bearing Pennsylvania License Plate JCF5228 stopped in the drive-thru lane about one car length behind the menu board and speaker. A white male later identified to me as James Tatlow was in the front driver's seat. The engine was running and the vehicle was in drive. Tatlow appeared to be unconscious. The vehicle's radio was on with loud music playing.

OBSERVATION OF DRIVER:

Tatlow's mouth was open and I could see that he was breathing. I could smell the odor of an unknown alcoholic beverage coming from within the vehicle. Before attempting to wake up Tatlow, I made the vehicle safe by reaching in the open passenger side window and putting the car in park. I then removed the keys from the ignition (the vehicle was running) by reaching in the driver's side vehicle and removing them. I then attempted to wake Tatlow by administering a sternum rub. Tatlow did not initially respond. I did so again and Tatlow came to. I immediately noticed that Tatlow had constricted pupils. He looked around and appeared confused. I identified myself as a Jupiter Police Officer. Tatlow continued to look confused and disoriented. Tatlow was able to speak to me a short time later and stated he was not having a medical emergency. Tatlow had bloodshot, glassy eyes and noticeably constricted pupils.

DRIVER'S STATEMENTS:

Tatlow stated that he had consumed a few beers with friends earlier in the night. Tatlow was almost immediately extremely and uncontrollably emotional, crying, talking to himself.

ODORS:

Odor of unknown alcoholic beverage on breath.

GENERAL OBSERVATIONS

SPEECH: Raspy speech

ATTITUDE: Very emotional, generally cooperative

CLOTHING: Blue shirt, khaki shorts, flip flops

MEDICAL/OTHER: None

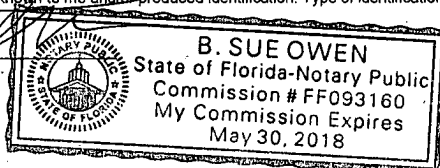
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 7th day of January, 20 17, by PFC Andrew Borrows 380

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

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



SUBJECT: James Tatlow

CASE NUMBER 17-000100

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|---|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT |
| <input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input checked="" type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input checked="" type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

Tatlow was swaying visibly during the exercise.

WALK & TURN

Tatlow complained that the initial spot was not even. I moved my vehicle and selected a different parking lot line. Tatlow was extremely agitated and upset, talking to himself, pacing, and slapping himself in the face, while sobbing uncontrollably. Tatlow was unable to maintain the starting position. Tatlow started the task, missed the line and heel to toe, before stopping and complaining that he was too emotional to continue. I gave Tatlow time to regroup and gain control of himself. About two minutes later, Tatlow attempted the task again. Tatlow stated he did not need me to give him the instructions again. Tatlow used his arms for balance through most of the first leg of the task. He missed heel to toe on every step. Tatlow took 14 steps and only turned around upon reaching the end of the painted line. Tatlow did not count out loud. Tatlow turned improperly and stopped. Tatlow again missed heel to toe and stepped off the line on the 5th, 11th, and 13th steps. Tatlow took 16 steps on the return leg.

ONE LEG STAND:

Tatlow started the task, performed poorly, and requested that he put his shoes (flip flops) back on. I allowed him to do so. Tatlow did not count out loud as instructed. Tatlow put his foot down at approximately 4, 7, 8, 18, and 20 seconds. He swayed noticeably at approximately 26 seconds and used his arms for balance.

FINGER TO NOSE:

L1: Tatlow touched his nose with the pad of his finger. Tatlow touched the bridge of his nose above the tip on the left side. I had to remind Tatlow to put his finger back down to his side. R2: Tatlow touched the tip of his nose with the pad of his finger. L3: Tatlow touched the tip of his nose with the pad of his finger. R4: Tatlow touched the tip of his nose with the pad of his finger. R5: Tatlow used the wrong hand before correcting himself and touching the tip of his nose with the pad of his finger. L6: Tatlow touched the tip of his nose with the pad of his finger.

ROMBERG ALPHABET:

Tatlow stated the alphabet correctly. Tatlow was swaying in an orbital manner during the task.

BREATH TEST RESULTS: .179 .185

STATE OF FLORIDA
COUNTY OF PALM BEACH

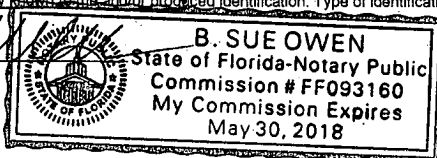
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 7th day of January 2017 by PFC Andrew Borrows 380

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

PERSONALLY KNOWN

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



WITNESS LIST

CASE NUMBER: 17-000100

ARRESTING OFFICER: PFC Andrew Borrows 380

ADDRESS: 210 Military Trail, Jupiter Fl 33458

PHONE NUMBERS (HOME): _____ (WORK) 561 746-6201

CAN TESTIFY TO: PC

NAME: Officer Luke Baynham 349

ADDRESS: 210 Military Trail, Jupiter Fl 33458

PHONE NUMBERS (HOME) _____ (WORK) 561 746-6201

CAN TESTIFY TO: Trainee Officer observed investigation and arrest for training purposes

NAME: Officer Guy Kitchens 381

ADDRESS 210 Military Trail, Jupiter Fl 33458

PHONE NUMBERS (HOME) _____ (WORK) 561 746-6201

CAN TESTIFY TO: Scene, search and tow of vehicle

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

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) _____

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) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006240 Software: 8100.27
Date of Test: 01/07/2017

Date of Last Agency Inspection: 12/20/2016
Observation Period Began: 02:07
Subject's Name: JR J TATLOW

DOB: 08/26/1988 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	02:56
	Air Blank	0.000	02:57
	Control Test	0.081	02:57
	Air Blank	0.000	02:57
	Subject Sample #1	0.179	02:58
	Air Blank	0.000	02:59
	Air Blank	0.000	03:01
	Subject Sample #2	0.185	03:01
	Air Blank	0.000	03:02
	Control Test	0.080	03:02
	Air Blank	0.000	03:03
	Diagnostics Check	OK	03:03

Cylinder Lot: 20016080A1
Exp: 09/05/2018

State of Florida, County of Palm 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 SUE OWEN, 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: 01/07/17
Signature

Sworn to (or affirmed) before me this 7th day of January, 2017

[Signature] Signature of Notary Public-State of Florida
CPA. Borrowes 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.

TESTING FACILITY TASK REPORT

AGENCY: Jupiter P.D.
SUBJECT: TATLOW Jr., James M. CASE NUMBER: 17-023498
DATE: 01/07/2017 DVD# 61951
VIDEO TAPE NUMBER: 61951
BEGINNING TIME: 0228 ENDING TIME: 0309
BREATH TESTS RESULTS: 1) Slope Not Met TIME 0233 AM/P.M. 2) .179 TIME 0258 AM/P.M.
3) .185 TIME 0301 AM/P.M. 4) TIME AM/P.M.
BREATH OPERATOR: S. Owen #3184
MAINTENANCE TECHNICIAN: J. Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH:
ATTITUDE: Co-operative, Fidgety SAID he had some money stolen
CLOTHING: Flip Flops, tan shorts, Blue shirt (NAVY LA Crosse)
MEDICAL CONDITIONS: none
MEDICATIONS: none
OTHER: very sunburned face cried very upset when
he learned he'd be in jail 8 hrs. Feared he'd
lose his job. Had to be at work at 9 am
COMMENTS: Alo arrived at 0207 hrs
Alo observed 20 minutes
Alo requested breath test, A agreed
A asked consequences Alo read I/C
A understood, A green to test
Read Slope NOT Met Another
20 min observation began at 0234
Tech explained procedure A again
No problem with test Tech explained results
sloped c/w A understood rights
Answered Q & A

SUBJECT: TATLOW Jr, James M CASE NUMBER: 17-000110

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.

SUSPECT'S SIGNATURE: (X) _____

SUBJECT: TATLOW, Tony, JAMES M. CASE NUMBER: 17-000199

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? Home / friends

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? 6-7 hours WHERE? Bugs house 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? No 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? No WHAT? _____

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

DO YOU LIMP? No 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? _____

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

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? No WHAT? _____ WHEN? _____

DO YOU HAVE: EPILEPSY? No

GLASS EYE? No

FALSE TEETH? 2 from tooth pain

EAR INFECTION? No

INNER EAR TROUBLE? No

DIABETES? No

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: PFC A. Berrows 380 / 1138

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

FLORIDA DEPARTMENT OF LAW ENFORCEMENT

ALCOHOL TESTING PROGRAM

BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000

Instrument Registered To: PALM BEACH CO SO

Instrument Serial Number: 80-006240 Software: 8100.27

Date of Test: 01/07/2017

Date of Last Agency Inspection: 12/20/2016

Observation Period Began: 02:07

Subject's Name: JAMES M TATLOW JR

DOB: 08/26/1988 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	02:31
Air Blank	0.000	02:31
Control Test	0.081	02:32
Air Blank	0.000	02:32
Subject Sample #1	SNM*	02:33
Air Blank	0.000	02:33
Control Test	0.081	02:34
Air Blank	0.000	02:34
Diagnostics Check	OK	02:34

*Slope Not Met

Cylinder Lot: 20016080A1

Exp: 09/05/2018

State of Florida, County of Palm Beach.

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

I SUE OWEN, 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: William Wren Date: 01/07/17
Signature

Sworn to (or affirmed) before me this 7th day of January, 2017

Signature of Notary Public-State of Florida 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.