

657 Supplement is A

☒ Check if Supplement is Attached

1. Arrest	3. Request for Warrant	<input type="checkbox"/>
2. N.T.A.	4. Request for Capias	

Juvenile [

D/S J. BENNETT Touch #83

Name of Arresting Officer (Print) Officer Scott Gordon I.D. # 937

Transporting Officer Scott Gordon I.D. # 937

Name Verification (Printed by Arrestee)

(PRINT

Witness here if subject signed with an "X"

PAGE

OF

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 13 DAY OF February 2017 AT 2026 AM PM
SUBJECT: JANEL ANN COMONA CASE NUMBER: 17-000253
AGENCY: Palm Beach Police Department ARRESTING OFFICER: Scott Gordon

PERSONAL CONTACT

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

COMONA Drove the wrong way down a one way street, Worth Ave in the town of Palm Beach and struck a parked vehicle. COMONA fled the scene of the accident and continued driving south on South Ocean Blvd until she was stopped in the 700 BLC of South Ocean Blvd.

OBSERVATION OF DRIVER: COMONA HAD difficulty finding her Drivers License upon Request. COMONA HAD difficulty getting out of her vehicle and staggered into the roadway. COMONA HAD difficulty maintaining her balance while standing on the side of the road awaiting field sobriety test.

DRIVER'S STATEMENTS: COMONA continued ASK officers why they were Arresting her. COMONA told officers if they would not Arrest her she would get them Hotel Rooms.

ODORS: COMONA's BREATH smelled of odor of an unknown Alcoholic Beverage.

GENERAL OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Combative, Insulting, Uncooperative

CLOTHING: Blue Multi-colored dress

MEDICAL/OTHER: Unknown.

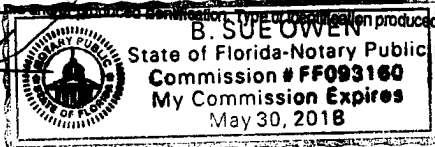
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 13th day of February 2017 by ofc Gordon

(Print name of Arresting/Investigative Officer, who is personally known to me and is duly qualified to perform the duties of a law enforcement officer)

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



SUBJECT: JANELL ANN COMORA CASE NUMBER: 17-000253

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

☒ LT EYE-LACK OF SMOOTH PURSUIT

☒ RT EYE-LACK OF SMOOTH PURSUIT

☒ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION

☒ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION

☒ LT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

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Other Observations:

WALK & TURN:

Stopped walking to steady self and would pause to regain balance.

Missed Heel-to-toe

stepped off the line multiple times

used arms for balance, raises arms over six inches

ONE LEG STAND:

swayed while balancing

used arms to balance, raised arms over six inches

put foot down before 30 seconds elapsed

Hopping

FINGER TO NOSE:

Failed to return arms to the side

Finger did not touch nose

ROMBERG/ALPHABET:

did not keep eyes closed

swayed more than 2 inches in any direction

BREATH TEST RESULTS:

Refused

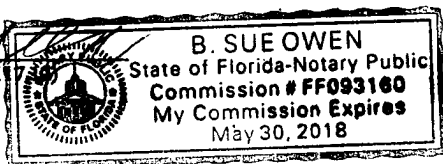
STATE OF FLORIDA
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Notary Public, Clerk of Court, Officer (F.S.S. 117.30)



D, U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 13 DAY OF February 20 17 AT 2026 AM (PM)

SUBJECT: JANEL ANN COMONA

CASE NUMBER: 17-000253

AGENCY: Palm Beach Police Department

ARRESTING OFFICER: Scott Gordon

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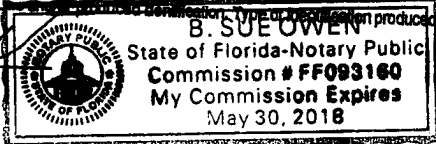
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ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

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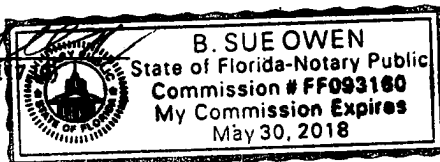
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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 13 DAY OF February 2017 AT 2026 AM PM

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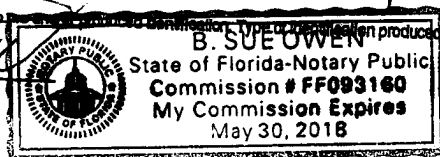
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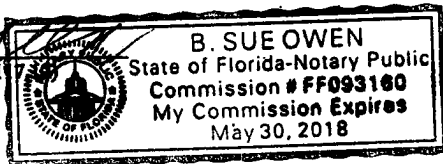
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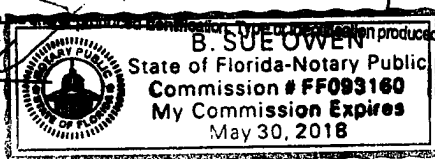
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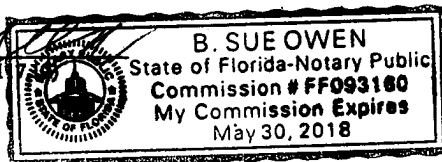
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Notary Public, Clerk of Court, Officer (F.S.S. 117.30)



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: _____

TESTING FACILITY TASK REPORT

AGENCY: _____

SUBJECT: _____ CASE NUMBER: _____

DATE: _____ VIDEO TAPE NUMBER: _____

BEGINNING TIME: _____ ENDING TIME: _____

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

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

BREATH OPERATOR: _____

MAINTENANCE TECHNICIAN: _____

TESTING OFFICER'S OBSERVATIONS

SPEECH: _____

ATTITUDE: _____

CLOTHING: _____

MEDICAL CONDITIONS: _____

MEDICATIONS: _____

OTHER: _____

COMMENTS: _____

SUBJECT: _____ CASE NUMBER: _____

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) _____

WITNESS LIST

CASE NUMBER: _____

ARRESTING OFFICER _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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