ARREST / NOTICE TO APPEAR

0435223 3761

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

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500800

Agency Name: West Palm Beach Police Department

Agency Report Number (N.T.A.'s only): 9 4 2018-0014076

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

If Weapon Seized — Enter Type

Multiple Charges Indicator

Location of Arrest (Including Name of Business): 7000 BLK N HAVERHILL RD

Location of Offense (Business Name, Address): 5500 N HAVERHILL RD, WEST PALM BEACH, FL 33407

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
08/25/2018	08:56	08/25/2018	09:06			KAUFFS TRANSPORTATIO

DEFENDANT

Name (Last, First, Middle): LASTER, JEFFREY MICHAEL

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

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	06/08/1971	6'00	215	BLUE	BROWN	MEDIUM	Medium

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)

Marital Status: S

Religion

Influence of: Alcohol Influence Yes ☐ No ☒ Unk. ☐; Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 6100 NE 7TH AVE, BOCA RATON, FL 33487

Phone: (201) 295-2105

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

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 6100 NE 7TH AVE, BOCA RATON, FL 33487

Phone: (201) 295-2105

Address Source: FL DL

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

Phone

Occupation: Owner

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
L236433712081 / FL	[redacted]		, NJ, United States	US

CO-DEFENDANT

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 ☐ Other ☐ Legal Guardian — Name (Last, First, Middle) — Residence Phone

Address (Street, Apt. Number) (City) (State) (Zip) — Business Phone

Notified by: (Name) — Date — Time — JUVENILE DISPOSITION 1. Released 2. TOT JAC 3. Detained

Released To: (Name) — Relationship — Date — Time

The above address was provided by ☐ defendant and/or ☒ 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.

☐ Yes, by: ☐ No

School Attended

Property Crime? ☐ Yes ☒ No — Description of Property — Value of Property

AUG 26 2018 SHARON R. BOCK Clerk & Comptroller

CODE

Drug Activity: N N/A, P Possess, S Sell, B Buy, T Traffic, 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, S Synthetic, Z Other

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
DUI-DAMAGE TO PERSON/PROPERTY	316.193(3)(C)(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
CRASH - LEAVING SCENE W/O GIVING INFO	316.061(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain.

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By — Released By — Released To

Transported By — Date Transported — Time Transported — Other

NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court
☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): Criminal Justice CRIMINAL JUSTICE COMPLEX

Court Date and Time: 09/27/2018 08:30:00 3228 GUN CLUB ROAD

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) — Date Signed: 8/25/18

No Photo Available

ADMIN

HOLD FOR Other Agency — Signature of Arresting Officer

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Name Verification (Printed by Arrestee) (PRINT)

Intake Deputy — I.D. # — Pouch # — Transporting Officer: D. DILLARD — I.D. #: 1843 — Agency: WPBPD

Arresting Officer (Print): DILLARD, DANIEL — I.D. #: 01843

Witness Initials if subject signed with an "X"

PAGE 1 OF 1

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2018CT15530AXXMB

Received WB AUG 28 2018

DUI PROBABLE CAUSE AFFIDAVIT

On the 25th Day of August, 2018 at 0707 HRS A.M. P.M.

Subject: Laster, Jeffrey Case Number: 2018-0014076

Agency: West Palm Beach Police Department Arresting Officer: Inv. D. Dillard #1843

Personal Contact

Driving Pattern Actual physical control (physical evidence putting the driver behind the wheel)

I responded to a traffic crash on the 5500 Blk. of N. Haverhill Rd. where a vehicle left the scene. Upon arrival I made contact with the victim William Freisinger. Freisinger stated he was traveling North on N. Haverhill Rd. approaching 45th St. in the outside lane. Friesinger stated a silver Mercedes drove up on his left side hitting his trailer and continued North on N. Haverhill Road. I was told that the Palm Beach County Sheriffs Office had the vehicle stopped in the 7000 Blk. of N. Haverhill Road. Freisinger and I relocated to the 7000 Blk. of N. Haverhill Road. Upon arrival Freisinger positively identified the 2002 Silver Mercedes Benz S500 (FL Y77KNJ) as the vehicle that struck his truck. I made contact with D/S O'Leary #28713 who stated he observed a large cloud of smoke North of the original collision location. D/S O'Leary drove North and observed the Mercedes traveling West on Dyer Rd. and turn North onto N. Haverhill Rd. in front of him. D/S O'Leary stated the Mercedes immediately pulled over and he made contact with the driver. The driver who was the sole occupant of the vehicle identified himself as Jeffrey Laster by FL DL.

Observation of Driver

Upon making contact with the driver I could smell the strong and distinct odor of an unknown alcoholic beverage emitting from his person. The odor became stronger off of his breath as he spoke to me. The drivers eyes were glassy and his speech was slurred. While talking the driver would consistently mispronounce words.

Drivers Statements:

Post Miranda the driver stated he left his moms house in North Palm Beach and was heading home to Boca Raton. When asked why he was driving North when he was heading South he stated he was too involved in his phone conversation and took a wrong turn. When asked why he did not stop after the collision he stated he thought the truck was behind him and was waving his left hand out of the window to signal the driver to pull over as he continued North on N. Haverhill Road. When asked how much he had to drink the driver stated it was basically nothing. When asked what nothing was he stated he had a glass of wine. When asked how long ago he drank the wine he stated 4 hours ago. The driver consented to roadside tasks.

Odors:

Strong and distinct odor of an unknown alcoholic beverage.

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General Observations

Speech: slurred, mispronounced words

Attitude: calm and passive

Clothing: Blue Shirt/Blue Jeans/Blue Sandals

Medical Problems/Medications: None

Other: The driver stated he had no physical defects or injuries, did not wear prescription lenses, did not take any prescription medications, did not take any illicit narcotics, and was not diabetic or epileptic.

DUI PROBABLE CAUSE AFFIDAVIT

Subject: Laster, Jeffrey **Case Number:** 2018-0014076

Roadside Tasks

Horizontal Gaze Nystagmus

- [x] Left Eye Does Not Follow Smoothly
- [x] Left Eye Jerks at 45 Degree Angle or Less
- [x] Distinct Jerking Left Eye at Maximum Deviation
- [x] Right Eye Does Not Follow Smoothly
- [x] Right Eye Jerks at 45 Degree Angle or Less
- [x] Distinct Jerking Right Eye at Maximum Deviation

While conducting this exercise lack of smooth pursuit was present. Sustained and distinct nystagmus at maximum deviation was present. Onset of Nystagmus was at approx. 35 degrees. Vertical nystagmus was present. While performing this exercise the driver stated he had Vertigo and was going to fall. I had the driver sit on my push bar and completed the exercise.

Walk and Turn Task

I instructed the driver to stand with his right foot in front of his left foot and remain in this position until told to begin. I explained and demonstrated the exercise and the driver stated he understood the instructions. The driver began walking before I told him to begin. The driver took 11 heel to toe steps instead of the 9 as instructed. The driver did not complete the turn as instructed stepping completely off of the line and turning around. The driver took 15 steps back instead of the 9 as instructed. The driver missed heel to toe on steps 7, 13, and 15. The driver did not count his steps out loud as instructed.

One Leg Stand

I had the driver stand with his feet together and hands down at his side. I explained and demonstrated the exercise and the driver stated he understood the instructions. The driver stated 3 times he had vertigo. I advised the driver if he could not do the exercises we would move on. The driver insisted he would try to perform the exercise. Once told to begin the driver lifted his left foot off of the ground. The driver was observed swaying and set his foot down twice during the exercise. The driver did not count out loud as instructed. I ended the exercise when my stop watch reached 30 seconds.

Finger To Nose

I had the driver stand with his feet together and index fingers pointed straight out. I explained and demonstrated the exercise to the driver and he stated he understood. I instructed the driver to tilt his head back and close his eyes. On the first left the driver brought the tip of his left finger to the tip of his nose, brought it back down then back up to his nose and stated I'm supposed to leave it. had to remind the driver to bring his arm back down. On the first right the driver brought the tip of his right finger to his right nostril then to the tip of his nose. On the second left the driver brought the tip of his finger to the bridge of his nose.

Romberg Balance

The driver stated his highest level of education was obtaining a B.A. from Montclair State. The driver attempted several times to spell the name of the school and could not. He stated he did know the alphabet and could recite the alphabet in completion. I had the driver stand with his eyes closed and head tilted back. When told to begin the driver recited the alphabet correctly from A to S then stopped. The driver recited from A to D then stopped again. The driver recited the alphabet from A to S and stopped again and asked me to recite the alphabet which I did in completion.

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Breath Results from Instrument

1st Result	2nd Result	3rd Result (If Applicable)
0.159	0.158	

State of Florida

County of Palm Beach

The Following Instrument was notorized or sworn before me this 09-25-18 (DATE)

- [x] Personaly Known
- [ ] Produced Identification
- [x] Notary Public

S. O'Neal

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # FF 96[illegible]
My Comm. Expires Jun 23, [illegible]
Bonded through National Notary

Notary / Clerk of Courts / Officer No. 117.10

Signature of Arresting Officer

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: 80-006478 Software: 8100.27
Date of Test: 08/25/2018

Date of Last Agency Inspection: 08/10/2018
Observation Period Began: 09:17
Subject's Name: JEFFREY MICHAEL LASTER DOB: 06/08/1971 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	09:52
Air Blank	0.000	09:52
Control Test	0.079	09:53
Air Blank	0.000	09:53
Subject Sample #1	0.159	09:54
Air Blank	0.000	09:55
Air Blank	0.000	09:57
Subject Sample #2	0.158	09:57
Air Blank	0.000	09:58
Control Test	0.079	09:58
Air Blank	0.000	09:59
Diagnostics Check	OK	09:59

Cylinder Lot: 05218080A3
Exp: 05/05/2020

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 SHARI L O'NEAL, 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: S. O'Neal Date: 08-25-18
Signature

Sworn to (or affirmed) before me this 25 day of August, 2018

Signature of Notary Public-State of Florida

Ofc. Dillard #1843
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.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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TESTING FACILITY TASK REPORT

AGENCY: [illegible]

SUBJECT: [illegible] CASE NUMBER: [illegible]

DATE: [illegible] VIDEO TAPE NUMBER: [illegible]

BEGINNING TIME: [illegible] ENDING TIME: [illegible]

BREATH TESTS RESULTS: 1) [illegible] TIME [illegible] A.M./P.M. 2) [illegible] TIME [illegible] A.M./P.M.

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

BREATH OPERATOR: [illegible]

MAINTENANCE TECHNICIAN: [illegible]

TESTING OFFICER'S OBSERVATIONS

SPEECH: [illegible]

ATTITUDE: [illegible]

CLOTHING: [illegible]

MEDICAL CONDITIONS: N.

MEDICATIONS: N.

OTHER: [illegible]

[illegible]

COMMENTS: [illegible]

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SUBJECT: [illegible] CASE NUMBER: 2015-CF-14676

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) [illegible]

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SUBJECT: Jimmy Lasiz CASE NUMBER: 2015-CC 14076

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: Dr. Davis Bailey #143

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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	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2018028491	**Date:** 08/26/2018
	Specialist Name/ID: AM/31562