

19CT16946AMB

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-19-114481				
Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type <input type="checkbox"/> 1. Yes <input checked="" type="checkbox"/> 2. No		Multiple Clearance Indicator <input type="checkbox"/> 1						
Location of Arrest (Including Name of Business) SEMINOLE DR AND OKEECHOBEE BV WEST PALM BEACH FL 33409				Location of Offense (Business Name, Address) SEMINOLE BV AND OKEECHOBEE BV ROYAL PALM BEACH FL 33411						
Date of Arrest 09/12/2019	Time of Arrest 2303	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle KELLE TOWING				
Name (Last, First, Middle) STIPEK JR JOHN PAUL		Alias (Name, DOB, Soc. Sec. #, Etc.)								
Race W - White I - American Indian B - Black O - Oriental/Asian W	Sex M	Date of Birth 06/15/1982	Height 510	Weight 180	Eye Color HAZ	Hair Color BRO	Complexion FAIR	Build SML		
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE				Marital Status Married	Religion CHRISTIAN	Indication of Alcohol Influence Drug Influence Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Unk. <input type="checkbox"/> 1. City <input type="checkbox"/> 2. County <input type="checkbox"/> 3. Florida <input checked="" type="checkbox"/> 4. Out of State <input type="checkbox"/>				
Local Address (Street, Apt. Number) 109 PIMLICO WAY		(City) (State) (Zip) ROYAL PALM BEACH FL 33411		Phone (561) 4022158		Residence Type 1. City <input type="checkbox"/> 2. County <input type="checkbox"/> 3. Florida <input checked="" type="checkbox"/> 4. Out of State <input type="checkbox"/>				
Permanent Address (Street, Apt. Number) /, /		(City) (State) (Zip)		Phone ()		Address Source DEFENDANT				
Business Address (Name, Street) 432 WEST BOYNTON BEACH BV		(City) (State) (Zip) BOYNTON BEACH FL 33436		Phone ()		Occupation MANAGER				
D/L Number, State (FL)S-312-475-82-215-0		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) BUFFALO NY	Citizenship US			
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 <input type="checkbox"/> Other		Address (Street, Apt. Number) (City) (State) (Zip)				Residence Phone ()				
Notified by (Name)		Date	Time	Juv. Disposition 1. Handled/processed within Dept. and Released 2. TOT HRS / DYS 3. Incarcerated						
Released To: (Name) Relationship				Date	Time					
The above address provided by <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 (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by (Name) <input type="checkbox"/> No (Reason)				School Attended		Grade				
Property Crime? <input type="checkbox"/> Yes <input 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	F. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine	B. Barbiturate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other
Charge Description DUI		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)		Violation of ORD #				
Drug Activity /	Drug Type /	Amount / Unit N/A	Offense # 19-114481	Warrant / Capias Number		Bond OR				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #				
Drug Activity /	Drug Type /	Amount / Unit /	Offense #	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #				
Drug Activity /	Drug Type /	Amount / Unit N/A	Offense #	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #				
Drug Activity N/A	Drug Type N/A	Amount / Unit N/A	Offense #	Warrant / Capias Number		Bond				
Location (Court, Room Number, Address) 3228 GUN CLUB RD WPB FL 33406										
Court Date and Time Month OCTOBER Day 10 Year 2019 Time 0830 AM PM										
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.										
Signature of Defendant (or Juvenile and Parent/Custodian)						Date Signed 09/12/2019				
HOLD for other Agency Name		Signature of Arresting Officer		Name Verification (Printed by Arrestee)						
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) INV E. K. WHITE		I.D.# 7209				
I take Deputy 0520/MS 7620		I.D.#		Pouch #		Name of Transporting Officer (Print) E. K. WHITE				
ID #		Pouch #		ID # 7209		Agency PBSO				
DISTRIBUTION: WHITE - COURT COPY				GREEN - STATE ATTORNEY		YELLOW - AGENCY				
PINK - AGENCY				GOLD - DEFENDANT (if applicable)						

SCANNED
SEP 13 2019

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PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

Agency ORI Number: FLO 500000 Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE Agency Report Number: 06-19-114481

Charge Type: 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other

Name (Last, First, Middle): STIPEK JR, JOHN, PAUL Alias: Race: W Sex: M Date of Birth: 06/15/1982

Charge Description: DUI 316.193(1)

Victim's Name (Last, First, Middle): Local Address (Street, Apt. Number) (City) (State) (zip) Phone Business Address (Name, Street) (City) (State) (zip) Phone Occupation

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. The Person taken into custody... On the 12 day of SEPTEMBER 20 19 at 2139 A.M.

On Thursday, September 12, 2019 at approximately 2200 hours, I responded to Okeechobee Boulevard (Bv) and Seminole Bv, West Palm Beach (Palm Beach County) Florida to assist Deputy P. Owers with a motorist who was passed out behind the steering wheel of a red vehicle stopped in the roadway.

While traveling northbound on Seminole Boulevard, I observed a red Chevrolet sedan bearing FL license plate A016T that was stopped at a stop sign at Seminole Boulevard and Okeechobee Boulevard.

I activated my overhead emergency lights and conducted a welfare check on the driver, a white male who was later identified by a Florida driver's license as being named John Stipek. As I approached the vehicle, I observed the driver to be unresponsive and slumped over.

West Palm Beach Fire Rescue was called to the scene and provided medical treatment to Mr. Stipek under run number 19-19177. Mr. Stipek declined transport to a medical facility: D/S Owers completes a sworn witness statement on a probable cause affidavit.

STATE OF FLORIDA COUNTY OF PALM BEACH INV E. K. WHITE (Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of SEPTEMBER 20 19 by INV E. K. WHITE 7209 (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced: KNOWN

Notary Public, Clerk of Court, Officer (F.S.S. 117.10) Notary Public State of Florida Paris Pound My Commission GG 200028 Expires 03/25/2022

SCANNED SEP 13 2019

PROBABLE CAUSE AFFIDAVIT

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

1 Juvenile

OBTS Number

Agency ORI Number
FLO 500000

Agency Name
PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number
06-19-114481

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

Special Notes

Name (Last, First, Middle)
STIPEK JR. JOHN, PAUL

Alias

Race
W

Sex
M

Date of Birth
06/15/1982

Charge Description
DUI 316.193(1)

Charge Description

Charge Description

Charge Description

Victim's Name (Last, First, Middle)

Race

Sex

Date of Birth

Local Address (Street, Apt. Number)

(City)

(State)

(zip)

Phone

Address Source

Business Address (Name, Street)

(City)

(State)

(zip)

Phone

Occupation

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.
The Person taken into custody

committed the below acts in my presence.

was observed by _____ who told _____

confessed to _____
admitting to the below facts.

that he/she saw the arrested person commit the below acts.

was found to have committed the below acts, resulting from my (described) investigation.

On the 12 day of SEPTEMBER 2019 at 2139

A.M. P.M. (Specifically include facts constituting cause for arrest.)

I made contact with the driver who was standing in front of the patrol car. He was later identified [redacted] (D.A.V.I.D.) He was swaying and unsteady on his feet while standing. His shirt and pants were soaked in body fluids. Small particles of food were meshed in the wetness. During my interview I noticed his eyes were red, watery and glossy. His cheeks were flushed, his mouth was dry and he slurred his speech while speaking. His movements were slow, calculated and lethargic. He was wearing black slacks, a blue shirt and black shoes. He later changed to a blue flannel shirt. I could smell putrid odor of vomit throughout my encounter with him. I told the driver I had a suspicion that he had been drinking an unspecified amount of alcoholic beverages. He told me he drank wine. I asked if he would consent to performing Standardized Field Sobriety Evaluations (SFSTs) for the purpose of determining if he was impaired while operating a motor vehicle. He consented to performing the SFSTs. Prior to his performance I asked if he had any physical problems with his body that would inhibit him from performing light physical movements. I also asked if he was on medication. The defendant told me he is Bipolar and is on medication for the condition. I escorted him to a smooth and level surface on the shoulder of the roadway that was free from obstructions and debris. It was well lit with ambient lighting along with the lights from my patrol car. I specified the white fog line for the purpose of administering the tasks. He successfully acknowledged the line by placing his foot on it when prompted to do so. The following SFSTs were explained, demonstrated and acknowledged by him prior to his performance: HGN, The Walk and Turn, The One Leg Stand and The Finger to Nose. His deficiencies were recorded on another form on this worksheet. At the conclusion of the SFSTs, coupled with the officer's observation of the defendant's vehicle stopped in the roadway and my observation of personal indicators of impairment exhibited by the defendant, probable cause was established for DUI. I told the defendant he were being placed under lawful arrest for DUI. The defendant was searched and handcuffed (double locked and checked for tightness) prior to being seated into the rear of my patrol car. Back up deputies arranged for the defendant's vehicle to be towed by a tow service from PBSO's rotation list.

PROBABLE CAUSE STATEMENT

STATE OF FLORIDA
COUNTY OF PALM BEACH

[Signature]

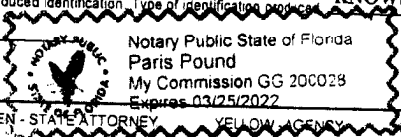
INV E. K. WHITE

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of SEPTEMBER 2019 by INV E. K. WHITE

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

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



PAGE

SCANNED
SEP 13 2019

PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

OBTS Number

Agency ORI Number

FLO 500000

Agency Name

PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number

06-19-114481

Charge Type. Check as many as apply.

- 1. Felony
- 2. Traffic Felony
- 3. Misdemeanor
- 4. Traffic Misdemeanor
- 5. Ordinance
- 6. Other

Special Notes:

Name (Last, First, Middle)

STIPEK JR, JOHN, PAUL

Alias

Race
W

Sex
M

Date of Birth
06/15/1982

Charge Description

DUI

316.193(1)

Charge Description

Charge Description

Charge Description

Victim's Name (Last, First, Middle)

Local Address (Street, Apt. Number)

(City)

(State)

(zip)

Phone

Race

Sex

Date of Birth

Address Source

Business Address (Name, Street)

(City)

(State)

(zip)

Phone

Occupation

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. The Person taken into custody

committed the below acts in my presence.

confessed to _____ admitting to the below facts.

was observed by _____ who told _____

that he/she saw the arrested person commit the below acts.

was found to have committed the below acts, resulting from my (described) investigation.

On the 12 day of SEPTEMBER 20 19 at 2139

A. M. P. M. (Specifically include facts constituting cause for arrest.)

Kelle Towing Company responded and impounded the defendant's vehicle to their lot. Meanwhile I began transport to the main jail breath analysis facility for further processing. Upon our arrival I escorted the defendant into the facility and began a 20 minute observation period. During this time the defendant did not ingest anything into his body orally or otherwise. Neither did he regurgitate. I escorted him into the testing room and asked him to provide breath samples for the purpose of determining his alcohol content. He asked the alternative for not cooperating. I read implied consent and asked if he understood it. He told me he did understand the consent and agreed to give breath samples. The defendant gave two adequate breath samples that rendered results of .000 consecutively. I asked if he would submit a test of his URINE for the purpose of detecting the presence of chemical or controlled substances. He agreed to give the sample. I advised him of his Constitutional Rights and asked if he understood them. He told me he understood his "rights" but refused to be interviewed. At 0007 hours, I watched the defendant give a urine sample. I packaged the sample and sealed it inside an evidence bag. The sample was later placed into refrigerated evidence. The defendant was booked into the main jail for DUI.

STATE OF FLORIDA
COUNTY OF PALM BEACH

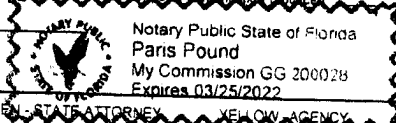
INV E. K. WHITE

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of SEPTEMBER 20 19 by INV E. K. WHITE

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

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



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SCANNED
SEP 13 2019

OBTS Number		PROBABLE CAUSE AFFIDAVIT			1. Arrest 2. N.T.A.	3. Request For Warrant 4. Request For Capias	1	Juvenile	N
Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERRIF'S OFFICE			Agency Report Number 06		19114481		
Charge Type: Check as many as apply		<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes			
Defendant Name (Last, First, Middle) STIPEK JOHN P				Race W	Sex M	Date of Birth 06/15/1982			
Charge DUI				Charge					
Charge				Charge					
Victim Name (Last, First, Middle) STATE OF FLORIDA				Race	Sex	Date of Birth			
Local Address (Street, Apt. Number)		City	State	Zip	Phone		Address Source		
Business Address (Street, Apt. Number)		City	State	Zip	Phone		Occupation		
The undersign 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. The person taken into custody...									
<input type="checkbox"/> committed the below acts in my presence.				<input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts					
<input type="checkbox"/> confessed to admitting to the below facts.				<input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.					
On the 12TH day of SEPTEMBER 20 19 at 2200 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM									

On 9/12/19 at approximately 2139 hours, I was conducting patrol in my marked PBO vehicle in the area of Okeechobee Boulevard east of Military Trail in unincorporated West Palm Beach, FL 33409.

While traveling northbound on Seminole Boulevard, I observed a red Chevrolet sedan bearing FL license plate A016T that was stopped at a stop sign at Seminole Boulevard and Okeechobee Boulevard. I was stopped behind the vehicle and waited approximately 30 seconds for the vehicle to proceed. The vehicle continued to remain stationary at the stop sign despite the fact that there was no eastbound traffic at the time and ample opportunities for the driver to safely turn onto Okeechobee Boulevard.

I activated my overhead emergency lights and conducted a welfare check on the driver, a white male who was later identified by a Florida driver's license as being named John Stipek. As I approached the vehicle, I observed the driver to be unresponsive and slumped over. I knocked on the front driver's side window and the driver woke up and rolled down his window. I observed the driver to have a large amount of vomit on his shirt and pants. The driver appeared disoriented and asked me if he was speeding. The driver then informed me that he wasn't feeling well. When asked if he had any alcohol this evening, the driver stated that he had one margarita drink.

West Palm Beach Fire Rescue was called to the scene and provided medical treatment to Mr. Stipek under run number 19-19177. Mr. Stipek declined transport to a medical facility.

Based on the above mentioned indications of impairment, Investigator White #7209 responded to the scene to conduct a sobriety investigation.

SCANNED
SEP 13 2019

The foregoing instrument was sworn to and affirmed before me this 12th day of September 20 19 , by:	
E. J. WHITE	D/S P. OWERS
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Name of Arresting/Investigating Officer
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Signature of Arresting/Investigating Officer
	Page 1 of 1

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 12 DAY OF SEPTEMBER 20 19, AT 2139 AM PM
SUBJECT: STIPEK JR JOHN PAUL CASE NUMBER: 19-114481
AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV E. K. WHITE
PERSONAL CONTACT

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

OBSERVATION OF DRIVER:
SEE PC AFFIDAVITS

DRIVER'S STATEMENTS:

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

GENERAL OBSERVATIONS

SPEECH: SLURRED AND INAUDIBLE
ATTITUDE: LETHARGIC AND INATTENTIVE
CLOTHING: LOOSE, DIRTY AND DISHEVELED
MEDICAL/OTHER: NONE

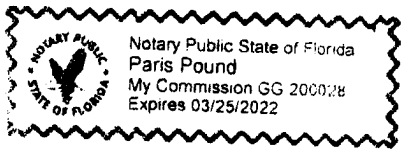
STATE OF FLORIDA
COUNTY OF PALM BEACH

INV E. K. WHITE
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of SEPTEMBER 20 19 by INV E. K. WHITE

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

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



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SEP 13 2019

CERTIFIED COPY

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
- RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Subject was asked to stand with their feet together and place their hands by their side. They were asked to focus on the stimulus and follow it with their eyes. Lastly they were told not to move their head to assist in following the stimulus with their eyes. Subject showed equal pupil size that tracked equally. Both eyes lacked a smooth pursuit. I saw no Nystagmus at maximum deviation, nor the onset of 45 degrees. The defendant often turned his head to track the stimulus. He swayed throughout this task.

WALK & TURN:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE WALK AND TURN. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject was unable to maintain his balance while placed in the instructional position. He swayed and lost his balance causing him to abandoned the position. During the task the subject stepped off the line, stopped to steady himself, raised his arms away from his side, turned improperly. Failed to follow instructions, causing me to repeat the instructions after saying he understood them.

ONE LEG STAND:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE ONE LEG STAND. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject could not maintain his balance while while his leg/foot was elevated. He dropped his foot on the roadway once. He failed to look at his foot as instructed.

FINGER TO NOSE:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE FINGER TO NOSE. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject was unsteady on his feet while performing this task. During the task he failed to touch the tip of his finger to the tip of his nose on all six attempts. Rather he touched underneath his eyes. Each repetition was rapid. He traveled the wrong hand on the "counter request" more than half way.

ROMBERG ALPHABET:

Subject swayed while performing this task. He failed to recite the 26 letter alphabet on his first attempt. He successfully recited it on his second

BREATH TEST RESULTS: 1) .000 2) .000 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

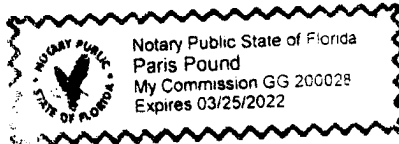
INV E. K. WHITE

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of SEPTEMBER 20 19 by INV E. K. WHITE

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

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



SCANNED
SEP 13 2019

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: 09/12/2019

Date of Last Agency Inspection: 08/16/2019

Observation Period Began: 23:15

Subject's Name: JOHN P STIPEK JR

DOB: 06/15/1982 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	23:41
	Air Blank	0.000	23:41
	Control Test	0.081	23:41
	Air Blank	0.000	23:42
	Subject Sample #1	0.000	23:43
	Air Blank	0.000	23:43
	Air Blank	0.000	23:45
	Subject Sample #2	0.000	23:45
	Air Blank	0.000	23:46
	Control Test	0.080	23:46
	Air Blank	0.000	23:47
	Diagnostics Check	OK	23:47

Cylinder Lot: 00919080A3
Exp: 03/05/2021

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 PARIS D POUND, 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: _____ Date: 09/12/19
Signature

Sworn to (or affirmed) before me this 12th day of September, 2019

Signature of Notary Public-State of Florida

INV. E.K. WHITE
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.

SCANNED
SEP 13 2019

WITNESS LIST

CASE NUMBER: 19-114481

ARRESTING OFFICER: INV E. K. WHITE

ADDRESS: HQ

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

CAN TESTIFY TO: FACTS

NAME: D/S P. Owers

ADDRESS: DIST 3

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

CAN TESTIFY TO: SEEING THE DEFENDANT'S CAR STOPPED IN THE ROADWAY

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 _____

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ADDRESS _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

SCANNED
SEP 13 2019

TESTING FACILITY TASK REPORT

AGENCY: PBSO
SUBJECT: STIPEK JOHN P JR CASE NUMBER: 19-114481
DATE: 09/12/19 VIDEO TAPE NUMBER: N/A
BEGINNING TIME: 23:36 ENDING TIME: 23:53
BREATH TESTS RESULTS: 1) .000 TIME 23:43 A.M./P.M. 2) .000 TIME 23:45 A.M./P.M.
3) N/A TIME — A.M./P.M. 4) N/A TIME — A.M./P.M.
BREATH OPERATOR: P. POUND # 24639
MAINTENANCE TECHNICIAN: J. KARLECKE #6461

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED
ATTITUDE: CALM, QUIET
CLOTHING: BLACK PANTS, BLUE/SILVER SHIRT, BLACK DRESS SHOES
MEDICAL CONDITIONS: BI-POLAR
MEDICATIONS: FORGOT
OTHER: EYES GLASSY + BLOODSHOT

COMMENTS: ARRIVED AT CENTER A/O BEGAN THE 20
MINUTE OBSERVATION PERIOD AT 23:15 HRS

A. ASKED DOES HE HAVE A CHOICE

A/O READ I/C

A UNDERSTOOD I/C AND STATED HE WOULD GIVE A BREATH
TRCH. READ TEST RESULTS A. STATED HE UNDERSTOOD TEST
A/O. ASKED FOR URINE @ 23:48
A. STATED HE WOULD PROVIDE A URINE SAMPLE @ 23:50
A/O READ I/C A. STATED HE UNDERSTOOD I/C AGAIN.
A/O. READ RIGHTS A. STATED HE UNDERSTOOD RIGHTS
A/O. ATTEMPTED Q+A
A. INVOKED HIS RIGHTS TO COUNSEL.
A. PROVIDED URINE @ 0007 NO DRE CONDUCTED.

SCANNED
SEP 13 2019

SUBJECT: STIPER, JOHN P^{JR} CASE NUMBER: 19-114481

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) _____

Read on camera

CONSTITUTIONAL WARNINGS

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

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X) _____

Read on camera

SCANNED
SEP 13 2019

SUBJECT: STIPEK, JOHN P JR CASE NUMBER: 19-114481

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? _____

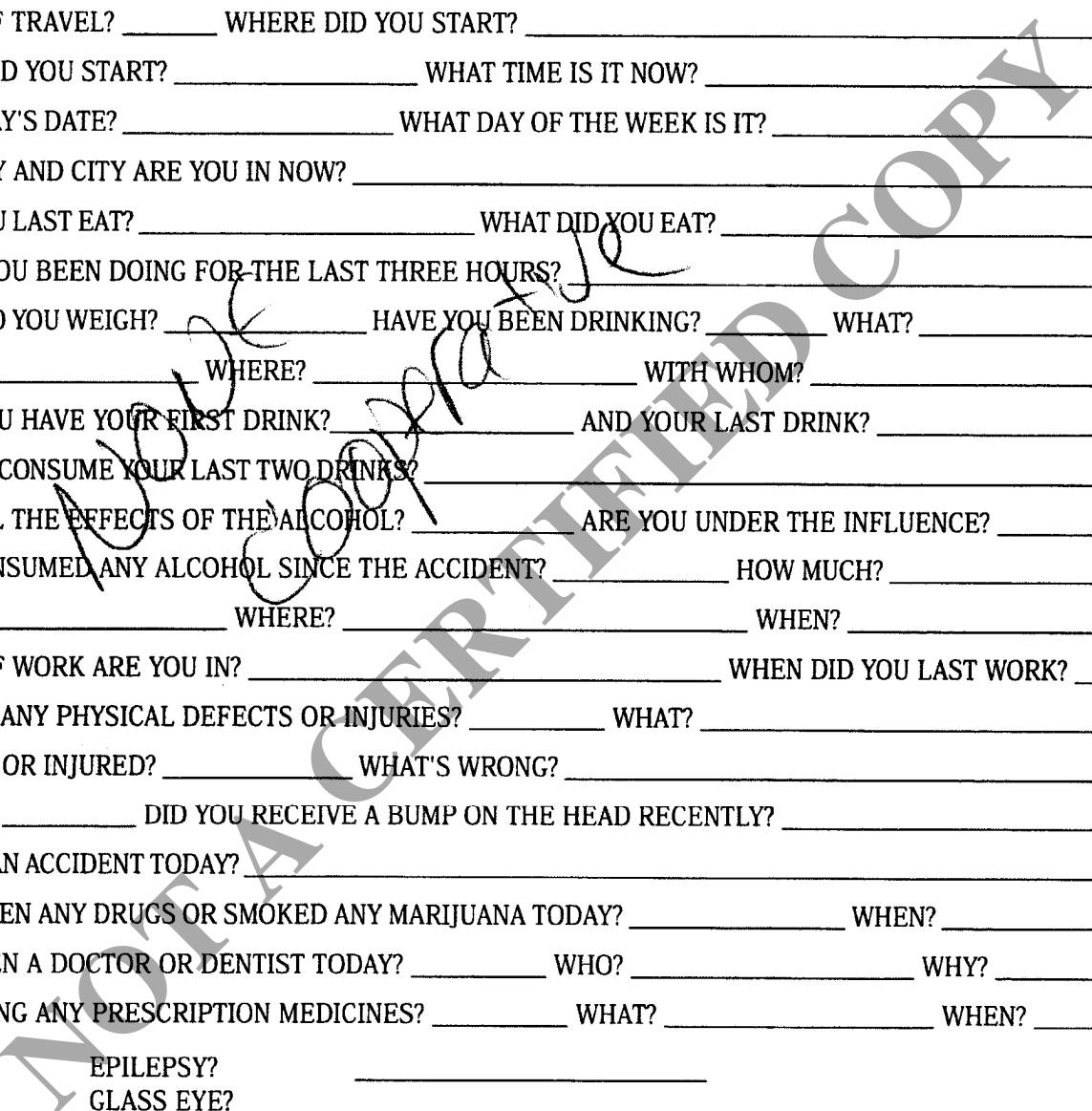
DO YOU HAVE: EPILEPSY? _____
GLASS EYE? _____
FALSE TEETH? _____
EAR INFECTION? _____
INNER EAR TROUBLE? _____
DIABETES? _____

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: INV. F.K. WHITE



SCANNED
SEP 13 2019



Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input checked="" type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	4
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2019029850	Date: 9/13/2019
	Specialist Name/ID: Gammage/5660

SCANNED
 SEP 13 2019