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ADMINISTRATION	OBTS Number			ARREST / NOTICE TO APPEAR						Juvenile Referral Report			1 Juvenile													
	Agency ORI Number			Agency Name						Agency Report Number			1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias													
FL 0 5 0 0 3 0 0			BOYNTON BEACH POLICE DEPT.						34-17-021228			If Weapon Seized Enter Type N/A		Multiple Clearance Indicator												
Charge Type: Check as many as Apply.			<input type="checkbox"/> 1. Felony			<input type="checkbox"/> 3. Misdemeanor			<input type="checkbox"/> 5. Ordinance																	
			<input type="checkbox"/> 2. Traffic Felony			<input checked="" type="checkbox"/> 4. Traffic Misdemeanor			<input type="checkbox"/> 6. Other																	
Location of Arrest (Including Name of Business)			Location of Offense (Business Name, Address)																							
Ocean Drive @ N. Congress Avenue Boynton Bch FL 33436			Ocean Drive @ N. Congress Avenue Boynton Bch FL																							
Date of Arrest		Time of Arrest		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle														
04/15/2017		0219										Beck's														
Name (Last, First, Middle)			Alias (Name, DOB, Soc. Sec. #, Etc)																							
Persan, Jon Paul			N/A																							
W - White		I - American Indian		Race		Sex		Date of Birth		Height		Weight		Eye Color		Hair Color		Complexion		Build						
B - Black		O - Oriental / Asian		W		M		04/17/1972		5'07"		235		Brown		Brown		Light		Heavy						
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)													Marital Status		Religion		Indication of:									
None													Single		Unknown		Y N unk Alcohol Influence <input checked="" type="checkbox"/> <input type="checkbox"/> Drug Influence <input type="checkbox"/> <input checked="" type="checkbox"/>									
Local Address (Street, Apt. Number)													(City)		(State)		(Zip)		Phone		Residence Type					
810 SW 6th Avenue Boynton Beach FL 33436																			(954)801-4996		1 1. City 3. Florida 2. County 4. Out of State					
Permanent Address (Street, Apt. Number)													(City)		(State)		(Zip)		Phone		Address Source					
810 SW 6th Avenue Boynton Beach FL 33436																			(954)801-4996							
Business Address (Street, Apt. Number)													(City)		(State)		(Zip)		Phone		Occupation					
None																			()		Vendor					
DL Number, State				Soc. Sec. Number				INS Number				Place of Birth				Citizenship										
P625-420-72-137-0 FL				[REDACTED]				N/A				Ft Lauderdale FL US				USA										
Co-Defendant Name (Last, First, Middle)													Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor							
Co-Defendant Name (Last, First, Middle)													Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor							
<input type="checkbox"/> Parent Name (Last) (First) (Middle) <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other													Residence Phone													
Address (Street, Apt. Number)													(City)		(State)		(Zip)		Business Phone							
Notified by: (Name)													Date		Time		Juvenile Disposition				2. TOT HRS/DYS					
																	1. Handled/Processed within Dept. and Released				3. 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 561-355-2526) informed of any change of address: <input type="checkbox"/> Yes, By: (Name) <input type="checkbox"/> No: (Reason)													School Attended								Grade					
Property Crime?		Description of Property											Value of Property													
Yes <input type="checkbox"/> No <input type="checkbox"/>																										
CODE		S. Sell	R. Smuggle	K. Dispense/	M. Manufacture	Z. Other	Drug Type	B. Barbituate	H. Hallucinogen	P. Paraphernalia/	U. Unknown															
N/A		B. Buy	D. Deliver	Distribute	Produce/	Cultivate	N. N/A	C. Cocaine	M. Marijuana	Equipment	Z. Other															
P. Possess		T. Traffic	E. Use				A. Amphetamine	E. Heroin	O. Opium/Deriv.	S. Synthetic																
CHARGE		Charge Description					Counts	Domestic Violence		Statute Violation Number		Violation of ORD#														
DUI							1(M)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		316.193																
CHARGE		Drug Activity	Drug Type	Amount/Unit	Offense #				Warrant/Capias Number		Bond															
N		N	0.00 grams	17-021228																						
CHARGE		Charge Description					Counts	Domestic Violence		Statute Violation Number		Violation of ORD#														
Drug Activity		Drug Type	Amount/Unit	Offense #				Warrant/Capias Number		Bond																
N		N	0.00 grams	17-021228																						
CHARGE		Charge Description					Counts	Domestic Violence		Statute Violation Number		Violation of ORD#														
Drug Activity		Drug Type	Amount/Unit	Offense #				Warrant/Capias Number		Bond																
N		N	0.00 grams	17-021228																						
CHARGE		Charge Description					Counts	Domestic Violence		Statute Violation Number		Violation of ORD#														
Drug Activity		Drug Type	Amount/Unit	Offense #				Warrant/Capias Number		Bond																
N		N	0.00 grams	17-021228																						
NOTICE TO APPEAR		Location (Court, Room Number, Address)					Violation of ORD#																			
South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444																										
Court Date and Time		Month		May		Day		15th		Year		2017		Time		8:30		9								
A.M. <input type="checkbox"/> P.M. <input type="checkbox"/>																										
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													
HOLD for other Agency Name:					Signature of Arresting Officer					Name Verification (Printed by Arrestee) (PRINT)																
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest					Name of Arresting Officer (Print)					I.D. #																
<input type="checkbox"/> Suicidal <input type="checkbox"/> Other:					Officer Malley #949					BBPD																
Intake Deputy					I.D. #		Pouch #			Transporting Officer		I.D. #		Agency		Witness here is subject										
8101					8101					Malley 949				BBPD		Signed with an "X" APR 17 2017										
													Page 1 OF 1													

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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 15th DAY OF April 2017 AT 2:19 A.M P.M.

CASE #: 17-021228

DEFENDANT: Jon-Paul Persan

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATION OF DRIVER:

in the state of Florida, County of Palm Beach, City of Boynton Beach, the defendant was found to have committed the following acts.

I, Officer Malley of the Boynton Beach Police Department, responded to the area of Ocean Drive and Congress Avenue in reference to a suspicious incident. Upon arrival, I observed a two vehicle crash in the intersection. The occupants of the gray Lincoln, Florida tag Y82KSY had already exited their vehicle. The occupant of the gray pickup truck, Florida tag 395WZG, later identified as Jon Paul Persan, W/M DOB 04/17/1972, was still in the driver's seat as I approached the vehicle. Officer Winland, who had also arrived on scene, attended to the occupants of the Lincoln. As I made contact with Persan in order to interview him about the crash, I detected the moderate to strong odor of an unknown alcoholic beverage emanating from his person. I also observed his eyes were watery and bloodshot, his face was flushed, and his speech was slurred. I had Persan exit the vehicle for his safety as it was in the roadway. As Persan exited the vehicle, he appeared unsteady on his feet and used the vehicle for balance. I had Persan move to the roadside pending the completion of my crash investigation. As Persan moved to the roadside, he struggled to maintain his balance.

Upon completion of my crash investigation, I made contact with Persan and I advised him I had concluded my crash investigation. I further advised him I was now initiating a DUI investigation based upon my observations. I asked Persan if he was diabetic or if he had suffered any recent head injuries and he advised no to both questions. I asked Persan if he had been consuming any alcoholic beverages this evening, and he stated, "Yeah I had a bunch". I asked Persan if he would agree to perform Standardized Field Sobriety Tasks in order to relieve my concerns about his ability to safely operate a motor vehicle. Persan declined. Based upon my investigation, I determined sufficient probable cause existed to charge Persan pursuant to F.S.S. 316.193 DUI. Because Persan had been involved in a crash, I took him to Bethesda Memorial Hospital where he was medically cleared. Upon arrival at the Palm Beach County Jail BAT facility, I conducted a 20 minute observation period during which Persan did not consume nor regurgitate any substances. Upon completion of the 20 minute observation period, Persan was provided the opportunity to provide a sample of his breath to determine the alcohol content. Persan refused. After being read Florida Implied Consent, Persan was given a second opportunity to provide a breath sample and he again declined. Upon completion of processing, Persan was turned over to the Palm Beach County Jail.

HORIZONTAL GAZE NYSTAGMUS:

- Left eye does not follow smoothly
- Left eye prior to 45 degrees
- Distinct jerking in left eye at

- Right eye does not follow smoothly
- Right eye prior to 45 degrees
- Distinct jerking in right eye at

SUBJECT: PERSAN, Jon PaulCASE NUMBER: 17021228

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? Yes

WHERE WERE YOU GOING? Home

WHAT STREET OR HIGHWAY WERE YOU ON? Congress

DIRECTION OF TRAVEL? S WHERE DID YOU START? Reynolds

WHAT TIME DID YOU START? 11:00 AM WHAT TIME IS IT NOW? No I don't

WHAT IS TODAY'S DATE? 14-10 WHAT DAY OF THE WEEK IS IT? Thursday

WHAT COUNTY AND CITY ARE YOU IN NOW? Peterson City

WHEN DID YOU LAST EAT? 12:00 WHAT DID YOU EAT? nothing

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? Working

HOW MUCH DO YOU WEIGH? 235 HAVE YOU BEEN DRINKING? No WHAT? 1/4

HOW MUCH? 1/4 WHERE? At home WITH WHOM? Myself

WHEN DID YOU HAVE YOUR FIRST DRINK? 11:00 AM AND YOUR LAST DRINK? 11:00 AM

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? 1/4

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? 1/4 ARE YOU UNDER THE INFLUENCE? 1/4

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? 1/4 HOW MUCH? 1/4

WHAT? 1/4 WHERE? At home WHEN? 11:00 AM

WHAT LINE OF WORK ARE YOU IN? Virginia WHEN DID YOU LAST WORK? 9:30 AM

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? 1/4 WHAT? Right shoulder

ARE YOU SICK OR INJURED? No WHAT'S WRONG? 1/4

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? 11:00 AM

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? No WHO? 1/4 WHY? 1/4

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? No WHAT? 1/4 WHEN? 1/4

DO YOU HAVE: 1/4

EPILEPSY? No

GLASS EYE? No

FALSE TEETH? No

EAR INFECTION? No

INNER EAR TROUBLE? No

DIABETES? No

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? No

DO YOU TAKE INSULIN? No IF SO, WHEN WAS YOUR LAST INJECTION? No

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? No WHERE? 1/4

INTERVIEWER: Mallory 949

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL

SUBJECT: Leslie, Jennifer

CASE NUMBER: 17021228

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) Leslie, Jennifer

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) Leslie, Jennifer

TESTING FACILITY TASK REPORT

AGENCY: Florida Department of Law Enforcement

SUBJECT: Florida Department of Law Enforcement CASE NUMBER: 17-069827

DATE: 06/18/02 VIDEO TAPE NUMBER: 62470

BEGINNING TIME: 0410 ENDING TIME: 0424

BREATH TESTS RESULTS: 1) A TIME 0410 A.M./P.M. 2) not TIME — A.M./P.M.
3) A TIME — A.M./P.M. 4) not TIME — A.M./P.M.

BREATH OPERATOR: C. Johnson

MAINTENANCE TECHNICIAN: Mark C. Johnson

TESTING OFFICER'S OBSERVATIONS

SPEECH: Normal

ATTITUDE: Cooperative, willing to cooperate, but somewhat

CLOTHING: Normal

MEDICAL CONDITIONS: Normal

MEDICATIONS: None

OTHER: EYES: Good. Ears: Good. Vision: Good. Hearing: Good.

REFUSED

COMMENTS: Access to the subject's vehicle denied for 20 minutes
of observation and testing.

A subject who has been denied access to his vehicle for 20 minutes

is refused testing.

A subject who has been denied access to his vehicle for 20 minutes

is refused testing.

REFUSED

A subject who has been denied access to his vehicle for 20 minutes

is refused testing.

A subject who has been denied access to his vehicle for 20 minutes

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

CASE #: 17-021228

DEFENDANT: Jon Paul Persan

Arresting Officer: Officer C. Malley #949

Address: 100 E. Boynton Beach Boulevard Boynton Beach, Fl. 33435

Phone Numbers: Home:

Work: (561) 742-6100

Name: Officer N. Winland #839

Address: 100 E. Boynton Beach Boulevard Boynton Beach FL 33435

Phone Numbers: Home:

Work: 561-742-6100

Can testify to: Initial observations

Name: Breath Tech Parent #7909

Address: 3228 Gun Club Road West Palm Beach, FL 33406

Phone Numbers: Home:

Work: 561-688-3000

Can testify to: BAT

Name: Yoleisi Cantillo Napoles

Address: 2013 N East Coast St Lake Worth FL 33460

Phone Numbers: Home: 561-260-6561

Work:

Can testify to: behind the wheel

Name: Zaidee Acosta Padrone

Address: 1710 18th Avenue North Lake Worth FL 33460

Phone Numbers: Home: 561-260-6561

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: