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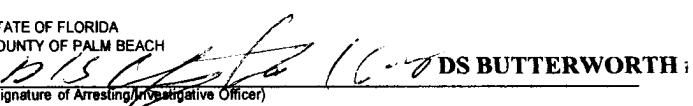
ARREST / NOTICE TO APPEAR

Juvenile Referral Report

2017CT1694

1089

OBTS Number			ARREST / NOTICE TO APPEAR			1. Arrest		3. Request for Warrant		1								
Agency ORI Number			Agency Name			2. N.T.A.		4. Request for Capias		Juvenile N								
FLO 500000			PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number (N.T.A.'s only) 06- 17-120952												
ADMINISTRATIVE	Charge Type: Check as many as apply: 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other						Weapon Seized / Type 2 1. Yes 2. No		Multiple Clearance Indicator 01									
	Location of Arrest (Including Name of Business) 22000 SW 66th Ave, Boca Raton, FL			Location of Offense (Business Name, Address) 22000 SW 66th Ave, Boca Raton, FL														
Date of Arrest 08/30/2017		Time of Arrest 02:28		Booking Date 08/30/2017		Booking Time		Jail Date		Jail Time								
										Location of Vehicle 22000 SW 66th Ave, Boca Raton, FL								
Name (Last, First, Middle) Turner, Joshua, Adam																		
Alias (Name, DOB, Soc. Sec. #, Etc.)																		
DEFENDANT	Race W - White 1 - American Indian B - Black 0 - Oriental/Asian		Sex W M		Date of Birth 07/09/1986		Height 5'11		Weight 200		Eye Color brown							
											Hair Color brown							
Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description)																		
Marital Status Single																		
Religion NONE																		
Indication of: Y N Unk. Alcohol Influence Drug Influence																		
Local Address (Street, Apt. Number) (City) (State) (Zip) Phone (561) 870 2999																		
Residence Type: 1. City 3. Florida 2. County 4. Out of State 2																		
Permanent Address (Street, Apt. Number) (City) (State) (Zip) Phone ()																		
Address Source DL																		
Business Address (Name, Street) (City) (State) (Zip) Phone ()																		
Occupation insurance broker																		
D/L Number, State T656421862490, FL			Soc. Sec. Number [REDACTED]			INS Number			Place of Birth (City, State) Margate, FL			Citizenship US						
CO-DEF	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			
JUVENILE	<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 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)																		
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property						Value of Property										
CHARGE CODE	Drug Activity S. Sell N. N/A P. Possess			R. Smuggle B. Buy T. Traffic			K. Dispense/ D. Deliver E. Use			M. Manufacture/ Produce/ Cultivate			Z. Other					
CHARGE	Drug Type N N						Counts 1						Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 316.193(1)		Violation of ORD #	
	Offense # 17-120952																	
CHARGE	Drug Description Driving Under the Influence						Counts 1						Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number		Violation of ORD #	
CHARGE	Drug Activity Drug Type N N						Amount / Unit						Offense #		Warrant / Capias Number		Bond	
CHARGE	Drug Description Charge Description						Counts						Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number		Violation of ORD #	
CHARGE	Drug Activity Drug Type N N						Amount / Unit						Offense #		Warrant / Capias Number		Bond	
CHARGE	Charge Description						Counts						Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number		Violation of ORD #	
CHARGE	Drug Activity Drug Type N N						Amount / Unit						Offense #		Warrant / Capias Number		Bond	
NOTICE TO APPEAR	Location (Court, Room Number, Address) South County Courthouse, Courtroom #1, 200 W. Atlantic Ave., Delray Beach, FL 33444 - Ph: (561) 355-2996																	
	Court Date and Time Month September Day 25th Year 2017 Time 08:30 AM X 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																		
08/30/2017																		
Signature of Defendant (or Juvenile and Parent /Custodian)																		
Date Signed																		
ADMIN	HOLD for other Agency Name: X			Signature of Arresting Officer X			Name Verification (Printed by Arrestee) (PRINT) <i>Joshua Turner</i> SCANNED											
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal			<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:			Name of Arresting Officer (Print) D/S POINTU P.			I.D. # 16032								
Intake Deputy <i>SAVN 8/01</i>			I.D. # Pouch #			Transporting Officer D/S POINTU P.			ID # 16032			Agency PBSO			Witness here if subject signed with an -X- 1 OF			

ADMIN	OBTS Number		PROBABLE CAUSE AFFIDAVIT				1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	Juvenile
	Agency ORI Number	Agency Name	PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number			
FLO 500000							06- 17120952		
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"/> Special Notes:					
	<input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other						
DEF	Name (Last, First, Middle) Turner, Joshua, Adam				Alias		Race W	Sex M	Date of Birth 07/09/1986
CHARGES	Charge Description		Charge Description						
	Charge Description		Charge Description						
VICTIM	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									
<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 _____ <input type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation. admitting to the below facts.									
On the <u>AUGUST</u> day of <u>30TH</u> 20 <u>17</u> at <u>0230</u> <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)									
<p>On 08/30/2017 at approximately 0140 hours, I was on patrol in the 1400 block of SW 66th Ave unincorporated Boca Raton, FL. I was traveling northbound on SW 66th Ave and stopped at the intersection of SW 66th Ave and Sandalfoot Blvd. when I observed a vehicle exit the Sandalfoot shopping plaza failing to stop and almost striking the curb on Sandalfoot Blvd. the vehicle approached the intersection of SW 66th and Sandalfoot Blvd at the stop sign the vehicle rolled past the stop bar before coming to a stop. The vehicle then made a wide left turn onto SW 66th Ave and proceed Northbound. As the vehicle was traveling it failed to maintain a single lane of travel and drifted into the bike lane. The vehicle then almost struck several parked cars along the East side of SW 66th Ave.</p> <p>I conducted a traffic stop on the vehicle (bearing Florida tag HRBT19) in the 22000 block of SW 66th ave. Upon making contact with the driver, later identified by Florida DL as, JOSHUA,ADAM,TURNER. I could smell the odor of an alcoholic beverage coming from Joshua. I asked Joshua for his driver license, he was slow to retrieve it and fumbled though his wallet to find it. Upon finding his driver license Joshua had trouble removing it from his wallet. I asked Joshua for the vehicle registration and Joshua produced two of them. One expired in 20017 and one expired on 2018 I asked Joshua for the current one. Joshua gave me the expired even tough the dates were right in front of him. As I spoke with Joshua his speech was slow and slurred. Joshua's eyes were watery and he had a hard time keeping them open. I asked Joshua if he had been any alcohol tonight or been drinking. Joshua advised he had been drinking and stated he had "a drink and some beers" at Coroners. Joshua also advised he had been drink at a bar off Glades Rd earlier in the evening but could not remember the name.</p> <p>Based upon my training and experience I believed to be under the influence of alcohol. I contacted DS Pointu #16032. Upon his arrival the he began is investigation.</p>									
PROBABLE CAUSE STATEMENT									
ADMINISTRATIVE	<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p> DS BUTTERWORTH (Signature of Arresting/Investigative Officer)</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>30th</u> day of <u>august</u> 20<u>17</u> by <u>DS BUTTERWORTH 16040</u></p> <p>(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>DS 16032</u></p> <p>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p> <p>AUG 30 2017 SCANNED PAGE OF</p>								

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 30th DAY OF August 20 17, AT 01:43 AM PM
SUBJECT: Turner, Joshua, Adam CASE NUMBER: 17-120952
AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S POINTU P.

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)
D/S Butterworth (#16040) observed a vehicle failing to stop at a stop sign exiting the plaza at Sandalfoot blvd, in unincorporated Boca Raton, Palm Beach County, Florida. The vehicle then approached the stop sign at SW 66th St and rolled passed the stop bar before making a stop. It then made a wide left turn, failed to maintain a single lane of travel and drifted into the bike lane. The vehicle almost struck several parked cars along the East side of SW 66th Ave. The driver was the only occupant of the vehicle

OBSERVATION OF DRIVER:

Slow to retrieve his driver license and fumble through his wallet to find it.
Driver vomited on his shoes.

DRIVER'S STATEMENTS:

Spontaneous utterance that he had a drink and some beers at local bar, and that he had been drinking also at another bar earlier off Glades road.

ODORS:

strong odor of an unknown alcohol

GENERAL OBSERVATIONS

SPEECH: **slurred**

ATTITUDE: **cooperative until the arrest, then verbally abusive, agitated**

CLOTHING: **black suit pant, black boots, gray tank top**

MEDICAL/OTHER: **none**

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S POINTU P.

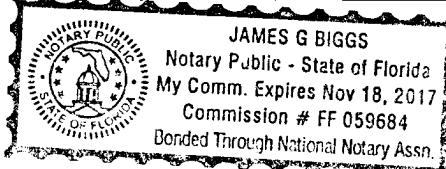
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 30th day of August 20 17 by **D/S POINTU P.**

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

James Biggs (#7607)

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



SCANNED
AUG 30 2017

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH AND/OR URINE TEST

17-120952

I, D/S POINTU P., a duly certified Law Enforcement Officer or Correctional Officer,

(Name of Officer reading Implied Consent Warning)

am a member of Palm Beach County Sheriff's Office, and I do swear

(Name of law enforcement agency)

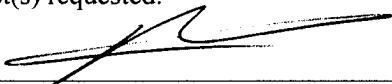
or affirm that on or about the 30 day of August, 20 17, at 02:28 P.M. A.M.

DRIVER Joshua Adam Turner,

(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME
DL# T656421862490, FL, state of Florida, appeared for treatment at a hospital, clinic, or other medical facility pursuant to s. 316.1932(I)(c), Florida Statutes, and a breath or urine test was impossible or impractical.

That on or about the 30th day of August, 20 17, at 03:51 P.M. A.M.
in Palm Beach County.

I requested that the driver submit to a **breath and/or** **urine** test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended for refusing to submit to a breath, urine or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.


Signature of Law Enforcement Officer or
Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)

The foregoing instrument was sworn and subscribed before me:

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before
me this 30th day of August, 20 17,
by D/S POINTU P.,

who is personally known to me or who has produced
known _____ as identification
Notary Public James Biggs (#7607)

Signature of Attesting Officer

Title _____

Date _____

Note: Mail or hand deliver to the designated
Bureau of Administrative Reviews office,
Department of Highway Safety and Motor
Vehicles, with the driver's license, the
appropriate copy of the UTC, and the
probable cause affidavit.



NOT A CERTIFICATE

SCANNED
AUG 30 2017

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

Other Observations:

Has trouble to follow stimulus. was anticipating the movement. Did not go to maximum deviation despite multiple prompt to do so. Widened his stance and did not kept his arm on his side despite multiple prompt to do so. Exhibited a slight sway.

WALK & TURN:

Did not maintain the instructional stance. Used his arms to balance. Stepped off the line. Did not touched heel to toe on all steps. Stopped while walking.

ONE LEG STAND:

Lowered his leg to the ground. Used his arms to balance. Slight sway

FINGER TO NOSE:

Touched the bottom or side of his nose on 3 steps

ROMBERG ALPHABET:

Opened his eyes. Swayed.

Modified romberg: was counting up to 60 s instead of 30.

BREATH TEST RESULTS: refusal

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S POINTU P.

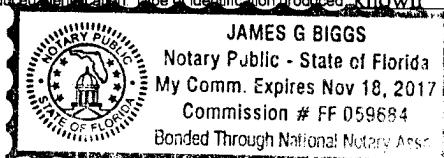
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 30th day of August 2017 by D/S POINTU P.

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

James Biggs (#7607)

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



SCANNED
AUG 30 2017

TESTING FACILITY TASK REPORT

AGENCY: PBSO-POINTU

SUBJECT: TURNER, JOSHUA A

CASE NUMBER: 17-120952

DATE: Aug 30, 2017

VIDEO DVD NUMBER: 63277

BEGINNING TIME: 0345

ENDING TIME: 0353

BREATH TESTS RESULTS: 1) REF TIME 0351 A.M. P.M. 2) XX TIME XX A.M. P.M.
3) XX TIME XX A.M. P.M. 4) XX TIME XX A.M. P.M.

BREATH OPERATOR: J Biggs# 7607

MAINTENANCE TECHNICIAN: D/S J Karklecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED SOMEWHAT, TALKATIVE

ATTITUDE: COOPERATIVE

CLOTHING: GRAY TANK TOP, BLACK JEANS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES GLASSY, RED

STRONG ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE ON SUBJECT

COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0325
SUBJECT REFUSED THE TEST INITIALLY
IMPLIED CONSENT WAS READ TO SUBJECT, SUBJECT ASKED SEVERAL QUESTIONS
SUBJECT SAID HE WOULD TAKE THE TEST
SUBJECT REFUSED THE TEST ONCE AGAIN
MIRANDA WAS READ
SUBJECT ANSWERED A COUPLE QUESTIONS THEN STOPPED

SCANNED
AUG 30 2017

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 D15 Party of the PBSO.

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.

SCANNED

AUG 30

SUSPECT'S SIGNATURE: (X) Read on Camera

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? no, I was driving

WHERE WERE YOU GOING? driving home

WHAT STREET OR HIGHWAY WERE YOU ON? SW 66th

DIRECTION OF TRAVEL? N int'l blvd WHERE DID YOU START? Southland Blvd.

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? _____ SCANNED

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: 01/21/14 11:02

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

WITNESS LIST

CASE NUMBER: 17-120952

ARRESTING OFFICER: **D/S POINTU P.**

ADDRESS: Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

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

CAN TESTIFY TO: see report

NAME: **D/S Butterworth (#16040)**

ADDRESS: Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

PHONE NUMBERS (HOME) 0 (WORK) (561) 688 3000

CAN TESTIFY TO: wheel witness, driving pattern

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) 0 (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

SCANNED

AUG 30 2017