

015170

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

| | | | | | | | | | | | | |
|---|---|---|--|---|--|---|---|---|---|--|---|------------------------|
| ADMINISTRATIVE | OBTS Number | | Agency ORI Number FLO 500000 | | Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE | | Agency Report Number (N.T.A.'s only) 06- FWSA18OFF6503 | | | | | |
| | Charge Type: Check as many as apply. | | 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> | | 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> | | 5. Ordinance <input type="checkbox"/> 6. Other <input type="checkbox"/> | | | | | |
| | Location of Arrest (Including Name of Business) 706 Ocean Inlet Dr. Boynton Beach FL, 33435 | | Location of Offense (Business Name, Address) 706 Ocean Inlet Dr. Boynton Beach FL, 33435 | | Weapon Seized / Type 2 | | Multiple Clearance Indicator | | | | | |
| | Date of Arrest 7/14/2018 | Time of Arrest 9:03 | Booking Date | Booking Time | Jail Date | Jail Time | Location of Vehicle | | | | | |
| Name (Last, First, Middle) Bueno, Juan, Marcos | | | | | | | | Alias (Name, DOB, Soc. Sec. #, Etc.) | | | | |
| Race W - White I - American Indian B - Black O - Oriental/Asian | | Sex M | Date of Birth 12/24/1972 | Height 5'10 | Weight 190 | Eye Color Brw | Hair Color Blek | Complexion dark | Build medium | | | |
| Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) | | | | Marital Status Married | | Religion NONE | | Indication of Alcohol Influence Drug Influence <input checked="" type="checkbox"/> <input type="checkbox"/> | | | | |
| Local Address (Street, Apt. Number) 706 Ocean Inlet Dr. Boynton Beach FL, 33435 | | | | Phone (561) 248-4465 | | Residence Type: 1. City 2. County 3. Florida 4. Out of State | | Address Source DL | | | | |
| Permanent Address (Street, Apt. Number) 706 Ocean Inlet Dr. Boynton Beach FL, 33435 | | | | Phone | | Occupation | | Business Address (Name, Street) | | | | |
| D/L Number, State B500433724640 | | Sec. Sec. Number | | INS Number | | Place of Birth (City, State) Washington D.C. | | Citizenship US | | | | |
| Co-Defendant Name (Last, First, Middle) | | Race | Sex | Date of Birth | | 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"/> | | | | |
| Co-Defendant Name (Last, First, Middle) | | Race | Sex | Date of Birth | | 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 Legal Custodian Other: | | Name (Last) | | (First) | | (Middle) | | 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) | | | | 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 | K. 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 Boating Under the Influence | | Counts 01 | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | Statute Violation Number 327.35 (i) | | Violation of ORD # | | | | | | |
| Drug Activity N | | Drug Type N | Amount / Unit | Offense # FWSA18OFF6503 | Warrant / Capias Number | | Bond OK | | | | | |
| Charge Description BUI WITH PROPERTY DAMAGE OR INJURY | | Counts | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | Statute Violation Number 327.35(3)(c)1. | | Violation of ORD # | | | | | | |
| Drug Activity N | | Drug Type N | Amount / Unit | Offense # FWSA18OFF6503 | Warrant / Capias Number | | Bond OK | | | | | |
| 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 | Offense # | Warrant / Capias Number | | Bond | | | | | |
| Location (Court, Room Number, Address) | | | | | | | | | | | | |
| Court Date and Time Month August Day 20th Year 2018 Time 1:00 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 | | | | |
| HOLD for other Agency Name: | | Signature of Arresting Officer Dillon Hudson P108 | | | | Name Verification (Printed by Arrestee) JUL 15 AM 12:37 | | | | | | |
| <input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other: | | Name of Arresting Officer (Print) Dillon Hudson | | | | I.D. # P108 | | PAGE 1 OF 1 | | | | |
| Inmate Copy 1 NOMAS 708 | | I.D. # | | Pouch # | | Transporting Officer Dillon Hudson P108 | | Agency FWC | | Witness here if subject signed with an "X" | | |

PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

| | | | | | | |
|--|---|--|--|--|--|------------------------------------|
| ADMIN | Agency ORI Number FLO 500000 | | Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE | | Agency Report Number 06- FWSA18OFF6503 | |
| | Charge Type: Check as many as apply. 1. Felony 2. Traffic Felony | | 3. Misdemeanor 4. Traffic Misdemeanor | | 5. Ordinance 6. Other | |
| DEF | Name (Last, First, Middle) Bueno, Juan, Marcos | | | | Alles | Date of Birth 12/24/1972 |
| | Race H | | Sex M | | | |
| CHARGES | Charge Description Boating Under the Influence 327.35 | | Charge Description BUI WITH PROPERTY DAMAGE OR INJURY 327.35(3)(c)1. | | | |
| | Charge Description | | Charge Description | | | |
| VICTIM | Victim's Name (Last, First, Middle) | | | | Race | Sex |
| | Local Address (Street, Apt. Number) (City) (State) (zip) | | | | Phone | Address Source |
| | Business Address (Name, Street) (City) (State) (zip) | | | | Phone | Occupation |
| <p>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</p> <p><input checked="" 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.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>14th</u> day of <u>July</u> 20<u>18</u> at <u>2043</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p>On 14th July 2018, I conducted a Boating under the influence (bui) investigation on Mr. Juan Marcos Bueno, and found him to be Boating Under the Influence of alcohol. Mr. Bueno caused property damage while BUI to another vessel.</p> | | | | | | |
| <p>STATE OF FLORIDA COUNTY OF PALM BEACH Dylan Hudson P108 (Signature of Arresting/Investigative Officer)</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>15</u> day of <u>July</u> 20<u>18</u> by <u>Dylan Hudson P108</u> Known Person</p> <p>(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced</p> <p><u>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</u></p> | | | | | | |

NOT A CERTIFIED COPY

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- FWSA18OFF6503 | |
| Charge Type: Check as many as apply. | | 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> | | 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> | | 5. Ordinance <input type="checkbox"/> 6. Other <input type="checkbox"/> | |
| Name (Last, First, Middle) Bueno, Juan, Marcos | | Alias | | Race H | Sex M | Date of Birth 12/24/1972 | |
| Charge Description Boating Under the Influence 327.35 | | Charge Description BUI WITH PROPERTY DAMAGE OR INJURY 327.35(3)(c)1. | | | | | |
| Victim's Name (Last, First, Middle) | | Race | | Sex | | Date of Birth | |
| Local Address (Street, Apt. Number) | | (City) | | (State) (zip) | | Phone | |
| Business Address (Name, Street) | | (City) | | (State) (zip) | | Phone | |

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

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

On the 14th day of July 2018 at 2043 A.M. P.M. (Specifically include facts constituting cause for arrest.)

NOT A CERTIFIED COPY

| | |
|--|--|
| STATE OF FLORIDA COUNTY OF PALM BEACH | |
| Dylan Hudson P108 (Signature of Arresting/Investigative Officer) | |
| The foregoing instrument was sworn to or affirmed and subscribed before me this <u>15</u> day of <u>July</u> 20 <u>18</u> by _____ | |
| (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>Known Person</u> | |
| <u>[Signature]</u> Notary Public, Clerk of Court, Officer (F.S.S. 117.10) | |

ADMINISTRATIVE PROBABLE CAUSE STATEMENT

B.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 14th DAY OF July 2018, AT 2043 AM PM
SUBJECT: Bueno, Juan, Marcos CASE NUMBER: FWSA18OFF6503
AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Dillan Hudson P108

PERSONAL CONTACT

BOATING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS THAT THE DEFENDANT WAS OPERATING A VESSEL)
Accelerating carelessly, creating large wake, while heading from Banana Boat. Causing damage to other vessels and leaving the scene of accident.

OBSERVATION OF DRIVER:

Driver skin appeared red, eyes watery, speech slightly slurred, a strong odor of an unknown alcoholic beverage emitting from his persons at a conversational distance while outside. Subject swayed and braced himself multiple times on his vessel. Subject had to be grabbed once in order for him not to fall over.

DRIVER'S STATEMENTS:

Driver first stated that he did not have any drinks and later changed his story and stated that he had one drink while fishing.

ODORS:

A strong odor of an unknown alcoholic beverage emitting from his persons at a conversational distance while outside

GENERAL OBSERVATIONS

SPEECH: Slurred and slow

ATTITUDE: Complaint agreeable

CLOTHING: No shirt no shoes just shorts

MEDICAL/OTHER: No

STATE OF FLORIDA
COUNTY OF PALM BEACH

Dillan Hudson P108

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 15 day of July 2018 by _____

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

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

SUBJECT: Bueno, Juan, Marcos

CASE NUMBER FWSA18OFF6503

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

Other Observations:

Moved head during

FINGER TO NOSE:

Unable to follow instructions
 Did not close eyes
 Did not tilt head
 Moved head greater than 1 inch
 1st Left Not fingertip
 1st right hesitated, not fingertip
 2nd left not fingertip
 2nd right searched, not fingertip, missed tip of nose, had to be told to close eyes again
 3rd right not fingertip
 3rd left not fingertip, searched

PALM PAT:

Unable to follow instructions
 Started at wrong time
 Rolled hands
 Double pat
 Chopped Pat
 Other improper pat, flipped hands over and clapped
 Did not increase speed
 Rotated Hands

HAND COORDINATION:

Unable to follow instructions
 Started at wrong time
 TASK 1- improper touch
 TASK 2- Did not perform
 TASK 3- Improper count, improper touch
 TASK 4- Did not perform, Pat hands out to side and then repeated tasks one through four, three times until I told to him stop.

ROMBERG ALPHABET:

N/A

BREATH TEST RESULTS:

| | | | |
|------------|---------|---------|----|
| 1) .101VNM | 2) .124 | 3) .126 | 4) |
|------------|---------|---------|----|

STATE OF FLORIDA
COUNTY OF PALM BEACH

Dillan Hudson P108

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 15 day of JULY 20 18 by _____

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

T. [Signature] 24.15

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

WITNESS LIST

CASE NUMBER: FWSA18OFF6503

ARRESTING OFFICER: Dillan Hudson P108

ADDRESS: 1300 Marcinaki Rd. Jupiter FL 33477

PHONE NUMBERS (HOME): 5612328273 (WORK) _____

CAN TESTIFY TO: _____

NAME: M. Trawinski

ADDRESS: 1300 Marcinaki Rd. Jupiter FL 33477

PHONE NUMBERS (HOME) 5612467156 (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: _____

NAME: _____

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: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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TESTING FACILITY TASK REPORT

AGENCY: FWC

SUBJECT: Bueno, Juan M. CASE NUMBER: 18-097174

DATE: 07/14/18 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 2236 ENDING TIME: 2253

BREATH TESTS RESULTS: 1) .101 UNM TIME 2243 A.M./P.M. 2) .124 TIME 2247 A.M./P.M.
3) .126 TIME 2250 A.M./P.M. 4) N/A TIME — A.M./P.M.

BREATH OPERATOR: G. PARENT #7909

MAINTENANCE TECHNICIAN: KARLUCKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: THICK, RAPID

ATTITUDE: CALM, QUIET, FEOGATY / UPSET, ARGUMENTATIVE

CLOTHING: BLACK SHORTS, NO SHIRT, BLACK + GREY SNEAKERS

MEDICAL CONDITIONS: DIABETES

MEDICATIONS: METFORMAN, LOXENAPREN

OTHER: EYES GLASSY AND BLOODSHOT, ODOR OF AN UNKNOWN
ALCOHOLIC BEVERAGE ON BREATH

COMMENTS: ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE
OBSERVATION PERIOD AT 2212 HRS.

A AGREED TO TAKE TEST, A WOULD NOT BLOW PROPERLY
AFTER REPEATED ATTEMPTS

A/O READ I/C

A ACKNOWLEDGED HE UNDERSTOOD I/C AND TEST WAS
CONTINUED

A/O READ RIGHTS

A STATED HE UNDERSTOOD RIGHTS

TECH READ BREATH TEST RESULTS A STATED HE
UNDERSTOOD TEST RESULTS

A/O ATTEMPTED Q+A

A DECLINED TO ANSWER ANY QUESTIONS

SUBJECT: RUEVO, JUAN M. CASE NUMBER: _____

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.

-OR-

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances.

-OR-

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am _____ of the _____

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X) _____

CONSTITUTIONAL WARNINGS

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

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

SUSPECT'S SIGNATURE: (X) REIO ON CAMERA

SUBJECT: BUENO, Juan M. CASE NUMBER: _____

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A ~~VEHICLE~~ ^{VESSEL} AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT ~~STREET OR HIGHWAY~~ ^{WATERWAY} 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: _____



FILING PACKAGE RECEIPT FORM

Check One:

- Other - _____
- State Attorney's Office D.U.I. / B.U.I. Intake
- Felony/Misdemeanor Filing Documentation

Case Number: **FWSA18OFF6503**

Defendant: **Bueno, Juan, Marcos**

Deputy Sheriff & ID: **Dillan Hudson P108**

District: **LE**

Date Submitted: _____

Sent By: **Dillan Hudson**

Supervisor Approval: _____

Received By Court Liaison: _____

Date/Time Received: _____

**FILING PACKAGE LOGGED BY LIAISON
ON DATE AND TIME LISTED ABOVE**

RETURN THIS ORIGINAL RECEIPT TO DEPUTY



Palm Beach County Sheriff's Office



BUI IMPLIED CONSENT WARNING

DEFENDANT'S NAME: Bueno, Juan, Marcos CASE NO: FWSA18OFF6503

READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING

You are under arrest for operating a vessel while under the influence of alcoholic beverages or chemical or controlled substance.

- I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content. Will you submit to a **BREATH** test?
- 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. Will you submit to a **URINE** test?
- I am now requesting that you submit to a lawful test of your **BLOOD** for the purpose of determining its alcohol content and the presence of chemical or controlled substances. Will you submit to a **BLOOD** test?

IF THE SUBJECT REFUSES TO SUBMIT TO TESTING, READ THE FOLLOWING:

I am Dillan Hudson P108 of the FWC
(Officer's Name & ID) (Agency)

If you fail to submit to the test I have requested of you, it will result in a civil penalty of \$500.00. Additionally, if you refuse to submit to the test I have requested of you and have previously been fined for 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.

Will you submit to the test? YES NO

7/14/18
DATE

11:33pm
TIME

[Signature]
DEFENDANT'S SIGNATURE

Dillan Hudson P108
OFFICER'S NAME & ID (PRINT)

[Signature] P108
OFFICER'S SIGNATURE



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 | <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 type="checkbox"/> | 943.053, 943.0525 | NCIC/FCIC/FBI and in-state FDLE/DOC. | |
| | <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"/> | (vii) 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"/> | | | |
| Other | <input type="checkbox"/> | 119.014(3A)(13)(1-3C) | Other: Keep Separate - Court Documents/Official Records | |
| | <input type="checkbox"/> | | Other: | |

REVIEW COMPLETED BY

| | |
|----------------------------|---------------------------------|
| Booking Number: 2018023522 | Date: 07/15/2018 |
| | Specialist Name/ID: WATSON/6665 |



Incident Summary Report

2018MM008290AxxMB

FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION
8535 NORTHLAKE BLVD
WEST PALM BEACH, FL.

| | | | | |
|--|---|---|--|--|
| Report Date / Time 7/15/2018 3:39:41 PM | Report Number ISR047670 (01) | Report Case/Cad Number FWSA18OFF006503 / F WLR18CAD011154 | Reporting Officer Rank / ID OFFICER / WP108 | Reporting Officer Name HUDSON, DILLAN |
| Originating Agency ORI FL0508000 | Reported to Agency Date 7/14/2018 8:49:20 PM | Occur Date Range 07/14/2018 20:49:20 - | Jurisdiction State Waters | Status: Clearance: |
| Offense Description S1B BUI - BOAT | | | | |

LOCATION(S)

| | | | | | | | | |
|----------------------|------------------------------------|----------------------|--------------------------|-------|----------|--------------|------|--|
| County PALM BEACH | Location Type INCIDENT LOCATION | Location Description | | | | | | |
| Street Number | Street ICW/ W OF BOYNTON INLET | Apt/Lot/Bldg | City BOYNTON BEACH | State | Zip Code | Phone Number | Ext. | |

Person: DEFENDANT

| | | | | | | | | | |
|---|-----------------------|-----------------------------|-----------|----------------|--|-----------------|---------------|---------------|---------------|
| First Name JUAN | Middle Name MARCOS | Last Name BUENO | Suffix | Race H | Sex MALE | Height 5'10" | Weight 190 | Hair BROWN | Eyes BROWN |
| MNI # | SSN | Date of Birth 12/24/1972 | Age 45 | Place of Birth | Drivers License or other ID B500433724640 | State FL | ID Type E | | |
| Addresses • RESIDENCE / 706 OCEAN INLET DR, FL 33435 / | | | | | | | | | |

Charge: STATE STATUTE

| | | |
|--|-----------------------------|---|
| Counts 1 | Charge 327.35(2)(b)1. | Arrest Offense Code Description DUI-UNLAW BLD ALCH |
| Charge Degree FIRST DEGREE | Charge Level MISDEMEANOR | General Offense Code |
| Charge Description OPERATING A VESSEL WITH AN UNLAWFUL BREATH ALCOHOL LEVEL OF .08 OR HIGHER (1ST OR 2ND VIOLATION) | | |
| UCR Code / UCR Description | | |

Charge: STATE STATUTE

| | | |
|--|-----------------------------|---|
| Counts 1 | Charge 327.35(3)(c)1. | Arrest Offense Code Description DUI-UNLAW BLD ALCH |
| Charge Degree FIRST DEGREE | Charge Level MISDEMEANOR | General Offense Code |
| Charge Description BUI WITH PROPERTY DAMAGE OR INJURY | | |
| UCR Code / UCR Description | | |

ALY BEACH COUNTY, FLORIDA
CRIMINAL
2018 JUL 25 PM 2:00
SHARON R BOCK, CLERK

| | | | | |
|--|---|---|--|--|
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Vessel: USED IN CRIME

| | | | | |
|---------------------|-------------------|---------------------------|-------------------------------|-----------------------------|
| Year 2006 | Make LUHRS | Type CABIN MOTORBOAT | Color OFFWHITE | Hull Material FIBERGLASS |
| Vessel Name | State | Registration Number | Tag Expiration | Vessel HIN LHRPC155L506 |
| Owner Type OTHER | Vessel Value (\$) | Length 41 | Fuel Type | Propulsion Propeller |
| Vessel Owner | | Vessel Released To Person | Vessel Released By Officer | |
| | | | Number of Engines / Type / | |
| | | | Total HP | |

Narrative: INITIAL

| | | | |
|---|--|------------------------|---|
| Narrative Date/Time 7/15/2018 3:57:11 PM | Narrative Synopsis BUI/ BUI WITH PROPERTY DAMAGE | | |
| Reporting Officer HUDSON, DILLAN | Officer Rank OFFICER | Officer ID No WP108 | Officer Org/Unit FWSAISO REGION AIMARTIN |
| Officer Signature  | Officer Agency FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION | | |

- I. **WHAT:** BUI with property damage or injury/operating a vessel with an unlawful breath alcohol level of .08 or higher (1st or 2nd violation)
- II. **WHEN:** 07/14/2018 at approximately 8:40pm
- III. **WHERE:** 706 Ocean Inlet Dr, Palm Beach, FL 33435, ICW
- IV. **WHO:** Juan Marcos Bueno, 12/24/72, 706 Ocean Inlet Dr, Palm Beach, FL 33435
- V. **Other information Relating to BUI**
DO1185606 Registered to Juan Marcos Bueno
- VI. **DETAILS OF BUI**
 - A. **Phase I - Initial Observation of vessel in operation**

At approximately 8:40pm, on 14 July 2018, I, Officer Dillan Hudson, of the Florida Fish and Wildlife Conservation Commission (FWC), was conducting state water patrol, along with Officer Marcin Trawinski, also of FWC, in the area of the Boynton Beach Inlet, in Palm Beach County, Florida. Officer Trawinski received a

| | | | | |
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phone call from the Lantana Police Department that there was a possible Boating Under the Influence near Banana Boat Restaurant. Upon arrival in the area I observed a vessel, later identified, by valid federal documentation, DO1185606, as a 41-foot vessel, accelerate aggressively away from Banana Boat Restaurant. I observed an excessive wake trailing behind the 41 ft vessel. I observed a male with no shirt on operating the vessel, and no other individuals on board the vessel. The vessel continued north on the ICW away from Banana Boat restaurant at a high rate of speed.

Behind the 41-foot vessel was another vessel without navigation lights on and I initiated a vessel stop on that vessel. That vessel then activated its navigation lights as I was approaching. That vessel's operator said that the 41-foot vessel that had just left the restaurant hit his boat while it was docked. He also stated that he was going after the 41-foot vessel. While the operator of that vessel was talking, subjects from the restaurant were shouting that we had just passed the boat that had hit that vessel. I advised the operator of that vessel to stay at the restaurant and I headed North towards the 41-foot vessel.

I activated my marked patrol vessel's blue lights and initiated a vessel stop on the 41-foot vessel. The 41-foot vessel continued to travel along the canal and did not stop until approximately 2 minutes later in front of the operator's house. I observed the operator try multiple times to dock his vessel with great difficulty with no wind, wake, or current in the canal. After several minutes the operator finally docked his vessel.

B. Phase 2 - Personal Contact with Operator of Vessel

I pulled up alongside the vessel, identified myself as a law enforcement officer, and asked the operator for his registration to his vessel, and his driver license. As I was tying up to the vessel, the operator was sitting on the floor of the boat and attempted to stand up by grabbing the side of the boat. The operator lost his grip and fell back onto the floor. I asked if the operator was alright and he stated that he was okay. The operator appeared dazed and confused, and I asked again for the registration of the vessel and his driver license. The operator then staggered up the ladder to the top of his vessel and began to dig through the cabin looking for his registration. The operator checked the same compartments multiple times looking for his registration and did not find the registration. The operator then staggered back down the ladder, and his family then came outside of the house and the operator asked his wife to go inside the house and find his registration for the vessel. The operator then just stood there and swayed back and forth.

I asked the operator again for his driver license, to which he pulled his wallet out of his pocket and struggled to get his driver license out of the slot it was in. The operator then walked over to me and handed me his driver license. I identified the operator of the vessel by valid Florida driver license number B500433724640, as Juan Marcos Bueno, of Palm Beach, Florida. When Bueno was handing me his driver license, I smelled a strong odor of an unknown alcoholic beverage emitting from his persons at a conversational distance while outside. Buenos wife then came and handed me the registration of the vessel.

I asked Bueno where he was coming from, to which he responded the ocean. I asked where at on the ocean and he

| | | | | |
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replied here and there. I asked if he was coming from Banana Boat restaurant, to which he stated oh yeah, I drove by there. Bueno lost his balance while talking to me and appeared to fall over in slow motion while he was just standing there. I reached across from my boat and grabbed Bueno, so he would not fall. I asked Bueno if he had anything to drink, to which he responded that he had nothing to drink. I observed Bueno's skin to be red, his eyes watery, and his speech slightly slurred and slow. I observed damage to the rear of Bueno's boat and asked if he had hit anything, to which he replied that he had not. I asked Bueno what happened to his vessel and pointed to the damage on his vessel, to which he walked to the rear, looked down and stated, "oh shit". Bueno did not notice that he had collided with another vessel that was docked. Bueno appeared very confused as he was looking at the damage.

I asked Bueno if he would board my vessel, so I could talk to him, to which he replied that he would. I handed Bueno an orange lifejacket to put on before he boarded my vessel. Bueno put it over his head and asked how to put it on, to which I instructed him to pull the rope around his chest and clip it to the clip. Bueno then began to attempt to wrap the lifejacket around his chest and could not do the simple task of putting on a life jacket. I had to assist Bueno with wrapping the lifejacket around his chest and clipping it for him. Bueno then boarded my patrol vessel. I asked Bueno if he would conduct Standardized Field Sobriety Tasks, to ensure he was safe to operate the vessel. Bueno agreed to perform Standardized Field Sobriety Tasks.

C. Phase 3- Pre-arrest screening and Observations of Operator

Standardized Field Sobriety Tasks

General Instructions:

Bueno was seated and stable onboard my patrol vessel. Bueno stated he understood the general instructions.

Pre - Task Questions:

Subject stated he did not have any physical defects or disabilities.

Subject stated he did not have any defects with his eyes.

Subject stated he was not sick or injured.

Subject stated he was not under the care of a doctor or a dentist.

Subject stated he was not on any medications or drugs.

Horizontal Gaze Nystagmus:

Subject showed Lack of Smooth Pursuit in left and right eye.

| | | | | |
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Subject showed Distinct and Sustained Nystagmus at Maximum Deviation in left and right eye.
 Subject showed Onset of Nystagmus Prior to 45 Degrees in left and right eye.
 Subject had to be told during the task not to move his head and follow with his eyes and his eyes only.

Finger to Nose:

Instruction Stage:

Subject stated he understood the instructions.
 Subject was unable to follow instructions by not remaining in the position while I explained the task.
 Subject started at the wrong time.

Performance Stage:

Did not close eyes
 Did not tilt head
 Moved head greater than 1 inch
 First Left: Not fingertip
 First right: Hesitated, not fingertip
 Second left: Not fingertip
 Second right: Searched, not fingertip, missed tip of nose, had to be told to close eyes again
 Third right: Not fingertip
 Third left: Not fingertip, searched

Palm Pat:

Instruction Stage: Subject stated he understood the instructions.
 Subject was not able to follow instructions by not remaining in the position while I explained the task.
 Subject started at wrong time.

Performance Stage:

Incident Summary Report

| | | | | |
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Subject rolled hands

Subject double pat

Subject chopped Pat

Subject other improper pat, flipped hands over and clapped

Subject did not increase speed

Subject rotated Hands

Subject patted both tops of his hands together several times.

Hand Coordination:

Instruction Stage-

Subject stated he understood the instructions.

Subject started at the wrong time.

Subject was unable to follow instructions by not remaining in position while I explained the task.

I asked the subject if he wanted me to reread the instructions, to which he stated no I got it. I then asked if he was sure and he stated that he was.

Performance Stage:

Task 1 - Forward Steps:

Subject Improperly Touched.

Task 2 - Hand Clapping:

Subject did not perform.

Task 3 - Return Steps:

Subject improperly touched, and improperly counted

Task 4 - End Position:

Subject did not perform.

Subject put hands out to the side and then repeated tasks one through four the same way, three times until I told him to stop, and then subject stated I did good.

| | | | | |
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D. Arrest of Operator

Based on the vessel in motion, personal contact with the operator, Standardized Field Sobriety Tasks, and the totality of circumstances, I placed Bueno under arrest for boating under the influence and boating under the influence with property damage.

Bueno was transported to the Palm Beach County Jail located at 3228 Gun club road, West Palm Beach, FL 33406 by Officer Merizio Luis, of FWC.

I read Bueno implied consent. Bueno's first breath sample was .101VNM g/210 liters of breath. Bueno's second breath sample was .124 g/210 liters of breath. Bueno's third breath sample was .126 g/210 liters of breath.

E. Disposition of operator and Vessel

I booked Bueno into the Palm Beach County Jail under the following charges:

F.S. 327.35(3)(c)1.- BUI with property damage or injury.

F.S. 327.35(2)(b)1.- operating a vessel with an unlawful breath alcohol level of .08 or higher (1st or 2nd violation)

Bueno had a prior conviction for Driving Under the influence.

The vessel remained at Bueno's house docked at his dock.

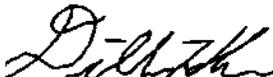
As of this writing, this concludes my involvement of the situation, thus far.

| Sup # | Officer Name | Officer Rank | Involvement On Report | Reporting Role | ID # | Org/Unit | Officer Agency |
|-------|----------------|--------------|-----------------------|-------------------|-------|-------------------------|---|
| 01 | HUDSON, DILLAN | OFFICER | | REPORTING OFFICER | WP108 | FWSAISO REGION AIMARTIN | FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION |

| | | | | |
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The undersigned certifies and swears that he/she has just and reasonable grounds to believe that the above named Defendant, committed violation(s), of law, on the below date(s) and time(s), as listed in the narratives associated with this report:

Officer: Reporting Officer (Supplement01)

| | | | |
|--|------------------------|------------------------|---|
| Officer Name HUDSON, DILLAN | Office Rank OFFICER | Officer ID No WP108 | Sworn and subscribed before me, the undersigned authority This the _____ day of _____ DEPUTY OF THE COURT, NOTARY OR LAW ENFORCEMENT OFFICER |
| Officer Agency FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION | | | |
| Officer Signature  | | | |

NOT A CERTIFIED COPY



FILING PACKAGE RECEIPT FORM

Check One:

- Other - _____
- State Attorney's Office D.U.I. / B.U.I. Intake
- Felony/Misdemeanor Filing Documentation

Case Number: **FWSA18OFF6503**

Defendant: **Bueno, Juan, Marcos**

Deputy Sheriff & ID: **Dillan Hudson P108**

District: **LE**

Date Submitted: _____

Sent By: **Dillan Hudson**

Supervisor Approval: _____

Received By Court Liaison: _____

Date/Time Received: _____

FILING PACKAGE LOGGED BY LIAISON
ON DATE AND TIME LISTED ABOVE

RETURN THIS ORIGINAL RECEIPT TO DEPUTY



Palm Beach County Sheriff's Office



BUI IMPLIED CONSENT WARNING

DEFENDANT'S NAME: Bueno, Juan, Marcos CASE NO: FWSA18OFF6503

READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING

You are under arrest for operating a vessel while under the influence of alcoholic beverages or chemical or controlled substance.

- I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content. Will you submit to a **BREATH** test?
- 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. Will you submit to a **URINE** test?
- I am now requesting that you submit to a lawful test of your **BLOOD** for the purpose of determining its alcohol content and the presence of chemical or controlled substances. Will you submit to a **BLOOD** test?

IF THE SUBJECT REFUSES TO SUBMIT TO TESTING, READ THE FOLLOWING:

I am Dillan Hudson P108 of the FWC
(Officer's Name & ID) (Agency)

If you fail to submit to the test I have requested of you, it will result in a civil penalty of \$500.00. Additionally, if you refuse to submit to the test I have requested of you and have previously been fined for 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.

Will you submit to the test? YES NO

7/14/18
DATE

11:33pm
TIME

[Signature]
DEFENDANT'S SIGNATURE

Dillan Hudson P108
OFFICER'S NAME & ID (PRINT)

[Signature] P108
OFFICER'S SIGNATURE



**PALM BEACH COUNTY SHERIFF'S OFFICE
DUI/BUI TESTING FACILITY
INFORMATION SHEET**

PBSO CASE # FWSA18OFF6503 PBSO ZONE _____

AGENCY CASE # FWSA18OFF6503 CRASH CASE # _____

TIME OF STOP/CRASH 2043 DATE 7/14/18 DAY Saturday

SUBJECT'S NAME Bueno, Juan, Marcos RACE H SEX M

HGT 5'10 WGT 190 DOB 12/24/1972

LOCATION 706 Ocean Inlet Dr. Boynton Beach Fl, 33435

ARRESTING OFFICER'S NAME & ID Dillan Hudson P108 AGENCY PBSO

DIVISION: LE

NOTIFIED BY COMMO _____

ARRIVAL AT FACILITY _____

ARREST TIME 9:03

BREATH RESULTS:

- 1) .101VNM
- 2) .124
- 3) .126
- 4)

TESTING OFFICER'S ID _____ PBSO VIDEOTAPE # _____

NOT A CERTIFIED COPY

RECEIPT FOR PRISONER'S PERSONAL PROPERTY PALM BEACH COUNTY

JAIL
 Jacket # 0157360 Cell # _____ Pouch # 97
798394

Arrest Agency FWC Arrest Date 7/14/18 Arrest Time 9:03PM Tamper-Proof Bag # 877766 DRH
 Print Prisoner's Bueno Juan M
 Prisoner's 12/24/72 [REDACTED] MI
 DATE OF BIRTH SOCIAL SECURITY NUMBER MALE FEMALE WHITE BLACK HISPANIC OTHER

| | | | | | | | | | | |
|----------------------------------|-----|------|------|------|-------|-------|---------------------------------|------------------|------------------|--|
| 1's | 5's | 10's | 20's | 50's | 100's | Other | U.S. Bills Total | U.S. Coins Total | Check/M.O. Total | |
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Total Amount of Money in Writing | | | | | | | Total Amount of Money Numerical | | | |
| 0 zero | | | | | | | \$ 0 | | | |

ARRESTING AGENCY

| DESCRIPTION OF PERSONAL PROPERTY | BAG 1 OF <u>1</u> - BULK PROPERTY - BAG 2 OF <u>0</u> |
|----------------------------------|---|
| <u>1. Driver's license - FL</u> | <u>1. Belt Brown</u> |
| <u>2. Black watch</u> | <u>2. Florida vessel Reg ^{DRH}</u> |
| <u>3. Vessel Registration</u> | <u>3. citations</u> |
| <u>4. Red Bracket</u> | <u>4. Red Bracket ^{DRH}</u> |
| 5. | 5. |
| 6. | 6. |
| 7. | 7. |
| 8. | |
| 9. | |
| 10. | |
| 11. | |

PRISONER IS WEARING

1. ^{DRH} Dark Shorts Blue
2. ^{DRH} Dark long sleeve Grey
3. ^{DRH} Dark Shoes Blue

By my signature, I acknowledge that the above described property is all the property, other than that held as evidence, in my possession at the time of my arrest.

[Signature] SIGNATURE OF PRISONER Dylan Hudson PRINT NAME OF OFFICIAL TAKING PROPERTY P108 ID # [Signature] SIGNATURE

TRANSPORT

CHAIN OF CUSTODY

I certify the above inventory is correct and I have received all items listed above.

| Name | ID Number | Agency | Date |
|--------------------|--------------|-------------|----------------|
| <u>[Signature]</u> | <u>27974</u> | <u>PBCO</u> | <u>7/15/18</u> |
| 2. | | | |
| 3. | | | |

INTAKE

Shower/Uniform Issuance, D/S Print Name and ID #: _____

| Items retained by inmate | Additional property/clothing placed into Property |
|--------------------------|---|
| <u>[Signature]</u> | |
| | |

RELEASE

By my signature, I acknowledge receipt of all my listed property and money in the amount of:

Check Total \$ _____ Cash Total \$ _____

SIGNATURE OF PRISONER _____ SIGNATURE/ID # OF WITNESS _____ DATE