

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

1
Juvenile

19CT-15242

OBTS Number			
Agency ORI Number FLO 500000	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number (N.T.A.'s only) 06-19-105627	
Charge Type: <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		Weapon Seized / Type <input type="checkbox"/> 1. Yes <input checked="" type="checkbox"/> 2. No	
Location of Arrest (Including Name of Business) 612 FEDERAL HWY LAKE PARK FL		Location of Offense (Business Name, Address) 612 FEDERAL HWY LAKE PARK FL 33403	
Date of Arrest 08/18/2019	Time of Arrest 2218	Booking Date	Booking Time
		Jail Date	Jail Time
Location of Vehicle TURNED OVER TO HIS WIFE			
Name (Last, First, Middle) AMIN		Alias (Name, DOB, Soc. Sec. #, Etc.) KAMALADEEN	
Race W - White - American Indian B - Black - Oriental/Asian	Sex W M	Date of Birth 11/02/1965	Height 508
Weight 160	Eye Color BRO	Hair Color BLK	Complexion MED
Build MED			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE		Marital Status M	Religion
Local Address (Street, Apt. Number) 306 HAWTHORNE DR APT 5 LAKE PARK FL 33403		Phone ()	Residence Type: 1. City 2. County 3. Florida 4. Out of State 1
Permanent Address (Street, Apt. Number)		Phone	Address Source
Business Address (Name, Street)		Phone	Occupation
D/L Number, State (FL)A550500654020	Soc. Sec. Number	INS Number	Place of Birth (City, State) BERBAC GUYANA
		Citizenship RES	
Co-Defendant Name (Last, First, Middle)		Race	Sex
		Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large
Co-Defendant Name (Last, First, Middle)		Race	Sex
		Date of Birth	<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		Residence Phone	
Address (Street, Apt. Number)		(City)	(State)
		(Zip)	Business Phone
Notified by: (Name)		Date	Time
Released To: (Name)		Relationship	Date
		Time	
<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 DUI	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)
Drug Activity /	Drug Type /	Amount / Unit N/A	Offense # 19-105627
		Warrant / Capias Number	Bond OK
Charge Description	Counts	Domestic Violence	Statute Violation Number
Drug Activity /	Drug Type /	Amount / Unit /	Offense #
		Warrant / Capias Number	Bond
Charge Description	Counts	Domestic Violence	Statute Violation Number
Drug Activity /	Drug Type /	Amount / Unit N/A	Offense #
		Warrant / Capias Number	Bond
Charge Description	Counts	Domestic Violence	Statute Violation Number
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 SEPTEMBER Day 12 Year 2019 Time 0830 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.			
Signature of Defendant (or Juvenile and Parent / Custodian)		Date Signed 08/18/2019	
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	(PRINT) AUG 19 AM 12:41	
Name of Arresting Officer (Print) INV E. K. WHITE	I.D. # 7209		
Transferring Officer E. K. WHITE	ID # 7209	Agency PBSO	Witness here if subject signed with an -X

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEPARTMENT

0504147

SCANNED
218
AUG 20 2019
00:00

ADMIN Agency ORI Number: **FLO 500000** Agency Name: **PALM BEACH COUNTY SHERIFF'S OFFICE** Agency Report Number: **06-19-105627**
 Charge Type: 1. Felony 3. Misdemeanor 5. Ordinance
 2. Traffic Felony 4. Traffic Misdemeanor 6. Other Special Notes:

IDEA Name (Last, First, Middle): **AMIN, KAMALADEEN.** Alias: Race: **W** Sex: **M** Date of Birth: **11/02/1965**

CHARGES Charge Description: **DUI** Charge Description: **316.193(1)**
 Charge Description: Charge Description:

VICTIM Victim's Name (Last, First, Middle): 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.
 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 **18** day of **AUGUST** 20**19** at **2135** A.M. P.M. (Specifically include facts constituting cause for arrest.)

On Sunday, August 18, 2019 at approximately 2140 hours, I responded to The Pelican Restaurant, located at 612 Federal Highway, Lake Park (Palm Beach County) Florida to assist Deputy J Beasley with a traffic stop that involved a possible drunk driver. While en route to this location I was advised that the driver was involved in a domestic dispute with his wife and left his home. Upon my arrival I noticed van stopped in a parking space in the parking lot of the previously mentioned restaurant. D/S Beasley was stopped behind the vehicle in his unmarked patrol vehicle with its emergency lights activated. A single male occupant was sitting inside the van. I made contact with D/S Beasley who told me the following regarding his traffic stop: On 08/18/2019, at 9:30 PM, I responded to 306 Hawthorne Drive in the town of Lake Park Florida 33403 domestic in progress. While traveling eastbound on Hawthorne Drive I noticed a gold Dodge Caravan leaving the residence at a high rate of speed. P.B.S.O. dispatch advised that the suspect later identified by his Florida Driver's License as Kamaladeen Amin left the scene in a gold Dodge Caravan. I conducted a traffic stop on the van and identified myself as a police officer and told him we just had a domestic at his residence and wanted to verify that a crime had not occurred. While speaking with Amin I could smell his breath which emitted an odor of an unknown alcoholic beverage. I also noticed that Amin's eyes were bloodshot and glassy, and he was also slurring his words. Amin spontaneously uttered that he had two Corona beers earlier in the night but he was not drunk. D/S Trinidad arrived on scene as my back up and he maintained visual contact with Amin. I contacted D/S White with the DUI unit to respond to the scene:

D/S Beasley wrote a sworn witness statement on a probable cause affidavit regarding his involvement. I made contact with the driver who was sitting inside the driver seat of the previously mentioned vehicle. He was later identified as Kamaladeen Amin by his Florida driver license. During my interview I noticed the driver's eyes were red, watery and glossy. His cheeks were oily, his mouth was dry and he slurred his speech while speaking. His movements were slow, calculated and lethargic. He was wearing a dark T-shirt, yellow/gray shorts and black flip flops. I could smell a strong odor of an unknown alcoholic beverage emanating from the inside of the vehicle. I told the driver he was being investigated for a domestic complaint that occurred at his home. He told me he left his house to spend the night at a motel. I explained a deputy stopped him and suspected he had been drinking an unknown amount of alcoholic beverages. Moreover, I also told him of my suspicion of his alcoholic beverage consumption. He admitted to drinking and said he was going to a motel.

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 **18** day of **AUGUST** 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**)

ADMINISTRATIVE Notary Public, Clerk of Court, Officer (F.S.S. 117.10)
JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES JUN 18, 2022
 Banded through 1st State Insurance

SCANNED
 AUG 20 2019

PROBABLE CAUSE AFFIDAVIT

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

Juvenile

OBTS Number

Agency ORI Number: FLO 500000 Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE Agency Report Number: 06-19-105627

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

Name (Last, First, Middle): AMIN, KAMALADEEN. Race: W Sex: M Date of Birth: 11/02/1965

Charge Description: DUI 316.193(1)

Victim's Name, Local Address, Business Address

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. On the 18 day of AUGUST 20 19 at 2135 P.M.

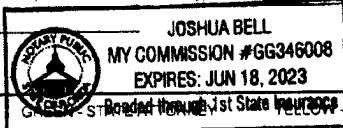
Based on my suspicion I asked if he would consent to performing Standardized Field Sobriety Evaluations (SFSTs) for the purpose of determining if he was impaired while operating a motor vehicle. He consented to performing the SFSTs. Prior to his performance I asked if he had any physical problems with his body that would inhibit him from performing light physical movements. I also asked if he was on medication. The defendant conveyed he neither had anything wrong with him physically, nor was he taking medication. He would later complain of a neck injury during his performance. I placed a yellow strip of tape on the pavement that formed a line. He successfully did so by placing his left foot on it when prompted to do so. This area consisted of a smooth and level surface that was free from obstructions and debris. It was well lighted by the lights from my patrol car and ambient lighting. I could now smell a strong odor of an unknown alcoholic beverage coming from his breath that intensified when he spoke. 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 deputy's observation of the defendant's vehicle in motion and my observation of personal indicators of impairment exhibited by the defendant, probable cause was established for DUI. I told the defendant he was 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. The defendant's wife responding to the scene and took custody of the vehicle. 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 consented. The defendant gave two adequate samples rendering results of .253 and .247. I advised the defendant of his Miranda Warnings and asked if he understood them. He did not seem sure of his "rights" however. He wanted me to speak in another language. Since he seemingly did not understand his "rights" I decided to forgo Q&A. 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 18 day of AUGUST 20 19 by INV E. K. WHITE KNOWN

(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced: JOSHUA BELL MY COMMISSION #GG346008 EXPIRES: JUN 18, 2023

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



SCANNED AUG 20 2019

ADMIN	Agency ORI Number FLO 500000	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06- 19105627
	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:

DEF	Name (Last, First, Middle) AMIN, KAMALADEEN, /	Aliases	Race O	Sex M	Date of Birth 11/02/1965
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CHARGES	Charge Description DUI	316.193(1)	Charge Description
	Charge Description		Charge Description

VICTIM	Victim's 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 (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 _____ that he/she saw the arrested person commit the below acts.


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

admitting to the below facts.

On the **18** day of **AUGUST** 20**19** at **2215** A.M. P.M. (Specifically include facts constituting cause for arrest.)

On 08/18/2019, at 9:30 PM, I responded to 306 Hawthorne Drive in the town of Lake Park Florida 33403, in reference to a domestic in progress. While traveling eastbound on Hawthorne Drive I noticed a gold Dodge Caravan leaving the residence at a high rate of speed. PBSO dispatch advised that the suspect, later identified by his Florida Driver's License as Kamaladeen Amin, left the scene in a gold Dodge Caravan. I conducted a traffic stop on the van and identified myself as a police officer and told him we just had a domestic complaint at his residence and wanted to verify that a crime had not occurred. While speaking with Amin I could smell an odor of an unknown alcoholic beverage coming from his breath. I also noticed that Amin's eyes were bloodshot and glassy, and he was also slurring his words. Amin spontaneously uttered that he had two Corona beers earlier in the night but he was not drunk. D/S Trinidad arrived on scene as my back up and he maintained visual contact with Smin. I contacted D/S White with the DUI unit to respond to the scene.

STATE OF FLORIDA
COUNTY OF PALM BEACH


D/S J. Beasley

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this **18** day of **AUG** 20**19** by **D/S JORDAN BEASLEY**

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

INV. WHITE 7209

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

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 18 DAY OF AUGUST 20 19, AT 2135 AM PM
SUBJECT: AMIN KAMALADEEN CASE NUMBER: 19-105627

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:
I WAS DRINKING

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

GENERAL OBSERVATIONS

SPEECH: **SLURRED AND INAUDIBLE**

ATTITUDE: **LETHARGIC AND INATTENTIVE**

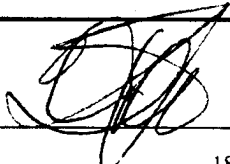
CLOTHING: **SHORT PANTS/T-SHIRT AND FLIP FLOPS**

MEDICAL/OTHER: **NONE**

STATE OF FLORIDA
COUNTY OF PALM BEACH

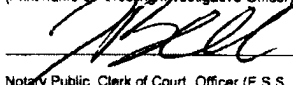
INV E. K. WHITE

(Signature of Arresting/Investigative Officer)

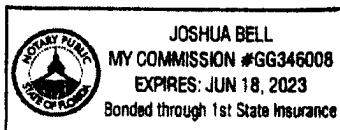


The foregoing instrument was sworn to or affirmed and subscribed before me this 18 day of AUGUST 20 19 by INV E. K. WHITE

(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)



SCANNED
AUG 20 2019

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:

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. Subject turned his head on each pass of the stimulus. He ultimately was unable to complete this task for lack of attention.

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 while placed in the instructional position. He swayed and ultimately abandoned the position. During the task he failed to touch heel to toe, he was unable to maintain his balance while walking on the line, he stepped off the line, he asked for additional instructions prior to making an improper turn, he took an incorrect number of steps and he failed to keep his arms by his side.

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 was unable to maintain his balance while placed in the instructional position (He swayed). He was unable to maintain his balance while trying to elevated his foot. He swayed and immediately dropped his foot on the pavement. I ceased in continuing this task for safety concerns

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 swayed while placed in the instructional position. He did not keep his eyes closed during this task. He interrupted the process with a complaint of his neck being injured. After resuming the task, he failed to touch the tip of his finger to the tip of his nose on all six attempts. Rather he touched the bridge and underneath his nose. On occasion he would slow his hand at the vicinity of his face and begin searching for the tip of his nose.

ROMBERG ALPHABET:

NOT ADMINISTERED

BREATH TEST RESULTS: 1) .253 2) .247 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

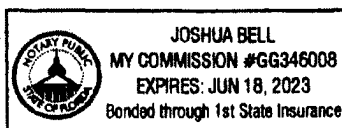
INV E. K. WHITE

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 18 day of AUGUST 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)



SCANNED
AUG 20 2019

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: AMIN, KAMALADEEN

CASE NUMBER: 19-105627

DATE: 08/18/19

VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 2322

ENDING TIME: 2332

BREATH TESTS RESULTS: 1) .253 TIME 2327 A.M./P.M. 2) .247 TIME 2330 A.M./P.M.
3) N/A TIME XX A.M./P.M. 4) N/A TIME XX A.M./P.M.

BREATH OPERATOR: J. BELL #8656

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: ACCENT, SLURRED

ATTITUDE: QUIET

CLOTHING: BLACK NO SLEEVE SHIRT, GREY/YELLOW SWIM SHORTS, BLACK FLIP FLOPS

MEDICAL CONDITIONS: YES (ARE YOU A DOCTOR)

MEDICATIONS: YES

OTHER: EYES: BLOODSHOT, GLASSY

ODOR OF AN UNKNOWN ALCHOLIC BEVERAGE COMING FROM BREATH

COMMENTS: ARRIVED AT CENTER A/O BEGAN 20 MIN OBSERVATION AT 2300 HRS

SUBJECT STATED HE WOULD TAKE BREATH TEST

A/O READ RIGHTS AND EXPLAINED

SUBJECT ACKNOWLEDGED HE UNDERSTOOD SOME OF HIS RIGHTS

A/O ASKED SUBJECT IF HE UNDERSTOOD ALL HIS RIGHTS

SUBJECT STARTED SPEAKING ANOTHER LANGUAGE

A/O DID NOT CONDUCT Q AND A

TECH READ BREATH TEST RESULTS

SUBJECT ACKNOWLEDGED HE UNDERSTOOD BREATH TEST RESULTS

SUBJECT: Amin, Karaladeen

CASE NUMBER: 19-105627

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) Read on camera **SCANNED**

AUG 20 2019

SUBJECT: Amin, Kamaladeen CASE NUMBER: 19-105627

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. E. K. White #7209

SCANNED
AUG 20 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: 08/18/2019

Date of Last Agency Inspection: 08/16/2019
Observation Period Began: 23:00
Subject's Name: KAMALADEEN AMIN

DOB: 11/02/1965 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	23:25
	Air Blank	0.000	23:25
	Control Test	0.081	23:25
	Air Blank	0.000	23:26
	Subject Sample #1	0.253	23:27
	Air Blank	0.000	23:27
	Air Blank	0.000	23:29
	Subject Sample #2	0.247	23:30
	Air Blank	0.000	23:30
	Control Test	0.080	23:31
	Air Blank	0.000	23:31
	Diagnostics Check	OK	23:31

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

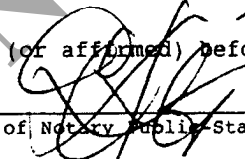
State of Florida, County of Palm Beach

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 JOSHUA J BELL, 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: 08/18/19
Signature

Sworn to (or affirmed) before me this 18 day of August, 2019

Signature of  Notary Public-State of Florida
Printed Name of Notary Public-State of Florida INV. E. K. White #7209

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.

WITNESS LIST

CASE NUMBER: 19-105627

ARRESTING OFFICER: INV E. K. WHITE

ADDRESS: HQ

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

CAN TESTIFY TO: FACTS

NAME: D/ J BEASLEY

ADDRESS: DIST 10

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

CAN TESTIFY TO: SEEING THE DEFENDANT'S CAR IN MOTION

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) _____

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 _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

SCANNED
AUG 20 2019



**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"/>	(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"/>	539.001 FS	Other: All records relating to pawnbroker transactions.	
	<input type="checkbox"/>	119.0712(2)	Other: Personal information contained within a motor vehicle record	

REVIEW COMPLETED BY

Booking Number: 2019027042	Date: 08/19/2019
	Specialist Name/ID: howardt/7185

SCANNED
AUG 20 2019