OSO19072 19CT22645 308

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 19144986

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 NONE

Multiple Clearance Indicator: 01

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
10420 FOREST HILL BLVD. WELLINGTON, FL. 33414	10420 FOREST HLL BLVD. WELLINGTON, FL. 33414

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
12/05/2019	2235					PRIORITY TOWING

DEFENDANT

Name (Last, First, Middle): FRAZIER KARA — Alias (Name, DOB, Soc. Sec. #, Etc.)

Race (W - White I - American Indian B - Black 0- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	2/5/1983	5'08"	180	BLUE	BLONDE	LIGHT	THIN

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description): TATTOO - SAILBOAT - LEFT CALF

Marital Status: Married — Religion: NONE — Indication of: Alcohol Influence (Y ☉ N ☐ Unk. ☐) Drug Influence (Y ☐ N ☐ Unk. ☉)

Local Address (Street, Apt. Number) (City) (State) (Zip): 9583 PHIPPS LN. WELLINGTON, FL. 33414 — Phone ( ) — Residence Type: 1. City 2. County 3. Florida 4. Out of State: 1

Permanent Address (Street, Apt. Number) (City) (State) (Zip): , — Phone ( ) — Address Source: FL D/L

Business Address (Name, Street) (City) (State) (Zip): — Phone ( ) — Occupation: THERAPIST

D/L Number, State	INS Number	Place of Birth (City, State)	Citizenship
F-626-502-83-545-0, FL		WEST PALM BEACH, FL.	U.S.

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth		
				☐ 1. Arrested ☐ 2. At Large	☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
				☐ 1. Arrested ☐ 2. At Large	☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Legal Custodian ☐ 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 ☐ defendant and / or ☐ 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. ☐ Yes, by: (Name) ☐ No: (Reason) — School Attended — Grade

Property Crime? ☐ Yes ☐ No — Description of Property — Value of Property

CODE

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

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DRIVING UNDER THE INFLUENCE	1	☐Y ☐N	316.193(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant I Capias Number	Bond
N	N	NONE	19144986		OR

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
REFUSAL TO ACCEPT SUMMONS	1	☐Y ☉N	318.14(3)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	NONE	19144986		OR

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

NOTICE TO APPEAR

Location (Court, Room Number, Address): **CRIMINAL JUSTICE COMPLEX / 3228 GUN CLUB ROAD, WPB, FL 33406**

Court Date and Time: Month DECEMBER Day 19 Year 2019 Time 8:30 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

Signature of Defendant (or Juvenile and Parent /Custodian) — Date Signed: 12/05/2019

ADMIN

HOLD for other Agency Name: — Signature of Arresting Officer: X — Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other: — Name of Arresting Officer (Print): INV. ZEITZ — I.D. #: 24970

Intake Deputy — Pouch # — Transporting Officer: INV. ZEITZ — ID #: 24970 — Agency: PBSO — Witness here if subject refused to sign with an X

PAGE 1 OF 1

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PBSO #148 REV. 8/97

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SCANNED DEC 0 6 2019

PROBABLE CAUSE AFFIDAVIT

OBTS Number

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

Juvenile

ADMIN

Agency ORI Number: FLO 500000

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 06- 19144986

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

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
Frazier, Kara		W	F	02/05/1983

CHARGES

Charge Description: DUI

Charge Description

Charge Description

Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
STATE OF FLORIDA			

Local Address (Street, Apt. Number) (City) (State) (zip)	Phone	Address Source
	( )	
Business Address (Name, Street) (City) (State) (zip)	**Phone**	**Occupation**
	( )	GOVERNMENT

PROBABLE CAUSE STATEMENT

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

- [x] committed the below acts in my presence.
- [ ] confessed to _____ admitting to the below facts.
- [ ] was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
- [x] was found to have commited the below acts, resulting from my (described) investigation.

On the 5TH day of DECEMBER 2019 at 22:30 [ ] A.M. [x] P.M. (Specifically include facts constituting cause for arrest.)

On December 5th, 2019 at approximately 2140 hours while investigating a disturbance at 10616 Forest Hill Blvd. which is located in the Village of Wellington, Palm Beach County, Florida. I was informed that the suspect related to the disturbance had left the scene in her vehicle and was going to get something from Walgreens. The male employee at the front desk informed me that a white female had been acting erratic and was showing signs of intoxication. The employee described the female as being white with blonde hair, wearing a bright pink and blue leggings. With the information provided I made my way to the closest Walgreens located at 10520 Forest Hill Blvd. and waited for any signs of the suspect. Shortly after my arrival, I observed a white Toyota Highlander bearing FL Tag LBJJ46 pull into a parking space and a white female matching the description exited the vehicle from the drivers seat appearing to almost stumble. The female was the sole occupant of the vehicle. I then observed the female subject enter the Walgreens and purchase alcohol and cigarettes. The female then exited the store without the items reentered her vehicle from the passenger side front seat and pulled out what appeared to be a debit card. During the process of getting the items from the front seat the female appeared off balance and almost fell again when she opened the door. She then went back into the store and finished her purchase. She then exited the store again and sat on the ground next to her vehicle. A female then approached her and was checking on her well being when I decided to make contact with her, who I would later identify as Kara Frazier from her FL DL. Upon making contact with the Frazier, I immediately detected an obvious and strong odor of an unknown alcoholic beverage emitting from her person and face area. This odor intensified as I spoke to her. she had glassy, glazed, and blood shot eyes. her speech was slurred, slow, thick, and at times difficult to understand. her movements were slow, deliberate, lethargic with poor coordination.

Kara Frazier showed signs of possible impairment so I requested a DUI Unit to conduct an assessment. This affidavit is for supplemental purposes only.

NOT A CERTIFIED COPY

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S G PALMER 25514
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 5th day of December 2019 by D/S G PALMER 25514
(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)

PBSO #0004 REV. 04/01 DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY

SCANNED
DEC 06 2019

SUBJECT: FRAZIER KARA CASE NUMBER 19144986

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- [x] RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Frazier would sway roughly in a side to side front to back pattern throughout the task. She did not touch the tip of the pen as directed to positively identify the point to be tracked. She was reminded numerous times to track the pen with her eyes only. She failed to keep her head still while tracking the stimulus.

WALK & TURN:

I explained and demonstrated the instructions for the "Walk & Turn" to Frazier who stated that she understood. During the task, I observed her to sway roughly in a side to side, front to back pattern throughout the demonstration phase. She could not maintain her balance while listening to instructions. She stepped out of the instructional stance during the demonstration to catch her balance. She would stop walking to steady herself. Frazier missed heel-to-toe steps. Frazier performed an improper turn. Frazier then stopped the task on her on and did not complete the second set of steps.

ONE LEG STAND:

I explained and demonstrated the instructions for the "One Leg Stand" to Frazier who stated that she understood. During the task, I observed her to sway roughly in a side to side, front to back pattern throughout the demonstration phase. She continued to sway while balancing on one leg. She used her arms to balance raising them more than 6 inches from her sides. Frazier failed to count out loud. Frazier put her foot down to regain balance numerous times before the 30 seconds had elapsed. She put her foot down three times all before counting to 30 seconds, thusly not being able to complete the task.

FINGER TO NOSE:

I explained and demonstrated the instructions for the "Finger to Nose" task to Frazier who stated that she understood. During the task, I observed her to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Frazier's index finger did not touch the tip of the nose on 3 of 6 attempts. Frazier searched for the tip of her nose using the finger to find their nose prior to touching the tip. She used the hand other than that which was called before self-correcting. The sequence used for this task was L, R, L, R, R, L.

ROMBERG ALPHABET:

I explained and demonstrated the instructions for the "Rhomberg Alphabet" task to Frazier who stated that she understood. During the task, I observed her to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Frazier would sway more than 2 inches.

BREATH TEST RESULTS: REFUSED

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. ZEITZ
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 6th day of DECEMBER 2019 by INV. ZEITZ

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

Shari O'Neal (#6212)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

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SCANNED
DEC 06 2019

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 5TH DAY OF DECEMBER 20 19, AT 2123 AM ✓ PM

SUBJECT: FRAZIER KARA CASE NUMBER: 19144986

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV. ZEITZ

PERSONAL CONTACT

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

On the above date and time, I responded to the Walgreens located at 10420 Forest Hill Blvd in reference to a suspected impaired driver. Upon arrival I met with D/S Palmer #25514 who informed me of the following:

D/S Palmer was dispatched to a disturbance at the Fairfiled Inn Suites. While en route to the call, he was informed that the subject involved in the disturbance was acting erratic and appeared to be intoxicated. He was told that the subject was leaving and heading to a nearby Walgreens store. D/S Palmer went to the nearest Walgreens and waited for the subject, who was described as a white female wearing bright pink and blue leggings. D/S Palmer then observed a white Toyota SUV bearing FL tag LBJJ46 pull into a parking space at the Walgreens. A white female matching the description exited the vehicle from the driver's seat appeared to stumble while exiting. The female then entered the Walgreens. She exited a short time later and entered the passenger seat of the vehicle. She appeared to be unstable and almost fell again while entering the vehicle. She then went back into the store and completed her purchase. She exited again and sat on the floor next to her vehicle. Another female approached her and appeared to be checking on her well-being when D/S Palmer conducted a consensual encounter to check on the welfare of the subject. D/S Palmer identified the female as Kara Frazier by her FL driver license. While speaking with her, D/S Palmer observed a number of articulable indicators of impairment and called for a DUI unit to respond.

OBSERVATION OF DRIVER:

Upon making contact with the driver who was identified by her Florida driver license as Kara Frazier, I immediately detected an obvious and strong odor of an unknown alcoholic beverage emitting from her person and breath. This odor intensified as I spoke to her. She had glassy and glazed eyes. Frazier's speech was slurred and slow. Her movements were slow, deliberate, and lethargic with poor coordination. She had an unsteady gait while walking to my patrol vehicle and had extreme difficulty following directions given to her. Frazier was wearing an inside-out jacket, pink and blue leggings, and blue sandals.

DRIVER'S STATEMENTS:

Pre-Miranda: Stated that she was staying at the hotel because of an issue with her former employer. She stated that she had 2 glasses wine earlier in the night along with taking her Seraquil, (Sleeping medicine) earlier in the night.

Post-Miranda: Became belligerent and uncooperative during the interview portion. Refused to answer any questions.

ODORS:

A strong and obvious odor of an unknown alcoholic beverage was emitting from her person and breath which intensified as I spoke to her.

GENERAL OBSERVATIONS

SPEECH: **Frazier's speech was slurred, slow, and at times difficult to understand.**

ATTITUDE: **Pleading and later argumentative, belligerent and insulting.**

CLOTHING: **Inside out blue jacket, blue and pink leggings and blue sandals.**

MEDICAL/OTHER: **SEE BAT REPORT.**

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. ZEITZ
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 6th day of DECEMBER 20 19 by INV. ZEITZ

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

Shari O'Neal (#6212)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # FF 968954
My Comm. Expires Jun 26, 2020
Bonded through National Notary Assn.

SCANNED
DEC 0 6 2019

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

PBSO CASE # 19144986 PBSO ZONE 8-51

AGENCY CASE # _____ CRASH CASE # _____

TIME OF STOP/CRASH 2123 DATE 12/05/2019 DAY Thursday

SUBJECT'S NAME FRAZIER (LAST) KARA (FIRST) _____ (MID) RACE W SEX F

HGT 5'08" WGT 180 DOB 2/5/1983

LOCATION 10420 FOREST HILL BLVD. WELLINGTON, FL. 33414

ARRESTING OFFICER'S NAME & ID INV. ZEITZ 24970 AGENCY PBSO

DIVISION: VCD/DUI

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 2309

ARREST TIME 2235

BREATH RESULTS:

REFUSED

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TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # N/A

SCANNED
DEC 0 6 2019

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

I, INV. ZEITZ #24970 , 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 5TH day of DECEMBER , 20 19 , at 2236 ☒ P.M ☐ A.M.

DRIVER KARA FRAZIER ,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# F626502835450 , state of FLORIDA , was placed under lawful arrest for

the offense of DUI by INV. ZEITZ and
(Name of Arresting Officer)

issued Citation # A2GCY7P .

That on or about the 5TH day of DECEMBER , 20 19 , at 2338 ☒ 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)

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this 5TH day of DECEMBER , 20 19 ,

by INV. ZEITZ #24970 ,

who is personally known to me or who has produced

PERSONALLY KNOWN as identification

Notary Public

The foregoing instrument was sworn and subscribed before me:

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.

HSMV-BAR1001 (REV. 10/2016)

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SCANNED
DEC 0 6 2019

TESTING FACILITY TASK REPORT

6

AGENCY: [illegible]

SUBJECT: [illegible] CASE NUMBER: [illegible]

DATE: [illegible] VIDEO TAPE NUMBER: N/A

BEGINNING TIME: [illegible] ENDING TIME: [illegible]

BREATH TESTS RESULTS: REFUSED 1) [illegible] TIME [illegible] A.M./P.M. 2) _____ TIME _____ A.M./P.M.

3) _____ TIME _____ A.M./P.M. 4) _____ TIME _____ A.M./P.M.

BREATH OPERATOR: [illegible]

MAINTENANCE TECHNICIAN: [illegible]

TESTING OFFICER'S OBSERVATIONS

SPEECH: [illegible]

ATTITUDE: [illegible]

CLOTHING: [illegible]

MEDICAL CONDITIONS: /

MEDICATIONS: /

OTHER: [illegible]

COMMENTS: [illegible]

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SCANNED
DEC 06 2013

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

PBSO #8129A REV.11/02

SUBJECT: _____ 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.

SCANNED
DEC 06 20[illegible]

SUSPECT'S SIGNATURE: (X)_____

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

PBSO #0129B REV. 06/11

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SUBJECT: _____ 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 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: _____

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SCANNED
DEC 06

WITNESS LIST

CASE NUMBER: 19144986

ARRESTING OFFICER: INV. ZEITZ

ADDRESS: 3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) (561) 688-4001

CAN TESTIFY TO: SEE DUI PROBABLE CAUSE AFFIDAVIT & OFFENSE REPORT

NAME: D/S PALMER #25514

ADDRESS: 3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406

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

CAN TESTIFY TO: SEE SUPPLEMENTAL PROBABLE CASUE AFFIDAVIT

NAME: ERIC SANDERS

ADDRESS 9050 S. RICHMOND AVE. EVERGREEN PARK, IL. 60805

PHONE NUMBERS (HOME) 312-545-0269 (WORK) _____

CAN TESTIFY TO: SEE WITNESS STATEMENT

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: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2-5
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐	539.001 FS	Other: All records relating to pawnbroker transactions.	
	☐	119.0712(2)	Other: Personal information contained within a motor vehicle record	

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REVIEW COMPLETED BY

Booking Number: 2019038971	**Date:** 12/06/2019
	Specialist Name/ID: howardt7185

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