D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 13 DAY OF February 20 19 AT 19:20 AM ✓ PM

SUBJECT: Stofft, Kelsey, Caroline CASE NUMBER: 19-036973

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S Ryan Dalton #32421

PERSONAL CONTACT

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

Responded to a vehicle crash near the intersection of Gateway Blvd and Hagen Ranch Rd. I observed a black Audi (bearing Florida Tag 942NWU) with front end damage and a gray colored Honda Civic with rear-end damage. The airbags of the black Audi were deployed in in the drivers side and not the passengerside. A white female, identified as Ms. Kelsey Stofft via her Florida DL, was the driver of the black Audi according to the driver of the other vehicle, Mr. Stephen Schild. I also observed that Ms. Stofft had a red seatbelt mark running across her left collarbone area, indicating that she was on the drivers side at the time of the crash. Mr. Schild provided a sworn witness statement indicating that Ms. Stofft was the driver and sole occupant of the black Audi.

OBSERVATION OF DRIVER:

As I spoke to Ms. Stofft, I could smell the strong odor of alcoholic beverage coming from her breath/mouth area. Her speech was slurred, mumbled, and her mannerisms appeared labored. Her eyes were heavily bloodshot and watery. She appeared to unsteady on her feet and stumbled a little while walking around. I asked if she needed medical attention, to which she replied that she felt fine. I had to ask her for her paperwork repeatedly, to which she kept forgetting what I had asked for (i.e. license, registration and insurance information). Once the crash investigation was completed, I advised Ms. Stofft and informed her that due to the indicators of impairment that I had observed, I would be conducting a criminal investigation for DUI. She agreed to perform field sobriety exercises.

DRIVER'S STATEMENTS:

Very apologetic. Continued to slur her words and say that she was sorry and she made a mistake.

ODORS:

Strong odor of alcoholic beverage coming from her breath/mouth area.

GENERAL OBSERVATIONS

SPEECH: **Slurred, mumbled**

ATTITUDE: **Very cooperative and polite**

CLOTHING: **Blue jeans, pink shirt, jacket, and white shoes.**

MEDICAL/OTHER: **Per Ms. Stofft, no injuries or medical issues.**

NOT A CERTIFIED COPY

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S Ryan Dalton #32421
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 13 day of February 20 19 by D/S Ryan Dalton #32421

(Print name of Arresting/Investigative Officer), who is personally known [illegible] produced Known LEO

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

BEVERLY SUE OWEN
MY COMMISSION # GG 188278
EXPIRES: May 30, 2022
Bonded Thru Notary Public Underwriters

NOT A CERTIFIED COPY

SUBJECT: Stofft, Kelsey, Caroline **CASE NUMBER** 19-036973

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

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

Other Observations:

Ms. Stofft had a difficult time follow instructions. She continued to look past the light and had to be reminded numerous time to not move her head. She exhibited a sway as she stood in front of me. The odor of alcohol was very strong.

WALK & TURN:

I explained and demonstrated the exercise to Ms. Stofft. She confirmed that she understood. She also indicated that she did not have any medical issues nor was she diabetic or take any medication. The area where the exercises were being performed was flat, level, and clear of debris. We used the clearly marked white line on the roadside. During the course of the exercise I observed the following clues of impairment: she could not keep her balance while listening to instructions; she stopped walking to steady herself; she missed heel-to-toe multiple times; she stepped off the line; she used her arms for balance; she improperly performed the turn-around; and she took the incorrect number of steps on the return. Ms. Stofft appeared very unsteady on her feet.

ONE LEG STAND:

I explained and demonstrated the exercise to Ms. Stofft. She confirmed that she understood the instructions. During the course of the exercise I observed the following clues of impairment: she swayed while balancing; she used her arms for balance; and she put her foot down multiple times. She appeared very unsteady on her feet.

FINGER TO NOSE:

I explained the exercise to Ms. Stofft. She confirmed that she understood the exercise. During the exercise I observed the following: Ms. Stofft opened her eyes slightly; she didn't touch the tip of her finger to the tip of the nose on multiple occasions. She also learned her head forward and had to be reminded to keep her head back.

ROMBERG ALPHABET:

Not performed for due to the level of impairment and her lack of balance.

BREATH TEST RESULTS:

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S Ryan Dalton #32421
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 13 day of February 20 19 by D/S Ryan Dalton #32421

(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced [illegible] type of identification produced Known LEO

Notary Public, Clerk of Court, Officer (F S S 117 10)

BEVERLY SUE OWEN
MY COMMISSION # GG 103278
EXPIRES: May 30, 2022
Bonded Thru Notary Public Underwriters

NOT A CERTIFIED COPY

NOT A CERTIFIED COPY

WITNESS LIST

CASE NUMBER: 19-036973

ARRESTING OFFICER: D/S Ryan Dalton #32421

ADDRESS: PBSO District 6 - 7894 S. Jog Road, Lake Worth FL 33467

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

CAN TESTIFY TO: Field sobriety exercises, breath test results

NAME: Stephen Schild

ADDRESS: 7045 Brunswick Cir, Boynton Beach FL 33472

PHONE NUMBERS (HOME) 561-252-2435 (WORK) _____

CAN TESTIFY TO: Other party involved in crash. Observed Ms. Stofft exit the drivers seat of the Audi and provided sworn witness statement

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: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NOT A CERTIFIED COPY

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: STAFFT, Kelsey Caroline CASE NUMBER: 19-036973

DATE: 2/3/19 ~~VIDEO TAPE NUMBER:~~ N/A

BEGINNING TIME: 2125 ENDING TIME: 2144

BREATH TESTS RESULTS: 1) .246 TIME 2130 ~~A.M.~~/(P.M) 2) .228 TIME 2133 ~~A.M.~~/(P.M.)

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

BREATH OPERATOR: S. Owen #3184

MAINTENANCE TECHNICIAN: J. Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE: quiet, co-operative, talkative

CLOTHING: white shoes, jeans, pink top

MEDICAL CONDITIONS: none

MEDICATIONS: none

OTHER: 20 yoA

Δ in CRASH HAD pain in shoulder from air bag

COMMENTS: A/o & Δ arrived at 2104 hrs

A/o observed 20 minutes

A/o requested breath test, Δ agreed

Δ blew longer 1st try but adequate samples given.

Tech explained results.

A/o read c/w, Δ understood.

Δ answered Q & A

Δ admitted drinking. Couldn't feel effects

Δ transported to hospital for admission to jail due to accident

NOT A CERTIFIED COPY

NOT A CERTIFIED COPY

SUBJECT: STOFFT, Kelsey Caroline CASE NUMBER: 19-036973

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

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

PBSO #0129B REV. 06/11

NOT A CERTIFIED COPY

NOT A CERTIFIED COPY

SUBJECT: STOFFT, Kelsey Caroline CASE NUMBER: 19-036973

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? Correct

WHERE WERE YOU GOING? Meet dad

WHAT STREET OR HIGHWAY WERE YOU ON? Gateway Blvd

DIRECTION OF TRAVEL? W WHERE DID YOU START? Boyfriends house

WHAT TIME DID YOU START? 7:15 pm WHAT TIME IS IT NOW? No

WHAT IS TODAY'S DATE? ~~13th~~ 13th WHAT DAY OF THE WEEK IS IT? Wednesday

WHAT COUNTY AND CITY ARE YOU IN NOW? Palm Beach County

WHEN DID YOU LAST EAT? 6:30ish WHAT DID YOU EAT? Pizza

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? eating pizza

HOW MUCH DO YOU WEIGH? 130 HAVE YOU BEEN DRINKING? I was WHAT? Pinot Grigio

HOW MUCH? 2 glasses WHERE? at Restraunt WITH WHOM? Boyfriend

WHEN DID YOU HAVE YOUR FIRST DRINK? I don't know AND YOUR LAST DRINK? at restraunt

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? Through a glass

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? No ARE YOU UNDER THE INFLUENCE? No

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? No HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? Insurance WHEN DID YOU LAST WORK? Today

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? I don't think so WHAT? _____

ARE YOU SICK OR INJURED? No WHAT'S WRONG? _____

DO YOU LIMP? No DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? No

WERE YOU IN AN ACCIDENT TODAY? Yes

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? No WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? No WHAT? _____ WHEN? _____

DO YOU HAVE:

EPILEPSY?	No
GLASS EYE?	No
FALSE TEETH?	No
EAR INFECTION?	No
INNER EAR TROUBLE?	No
DIABETES?	No

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

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

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

INTERVIEWER: _____

NOT A CERTIFIED COPY

NOT A CERTIFIED COPY

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
	☐	(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	☐		Other:	
	☐		Other:	

NOT A CERTIFIED COPY

REVIEW COMPLETED BY

Booking Number: 2019005159	**Date:** 2/14/2019
	Specialist Name/ID: LR/ #6673

NOT A CERTIFIED COPY