

0498585 18CT9379 559

ARREST / NOTICE TO APPEAR

ADMI NIST RATI ON	OBTS Number		Agency ORI Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N T A 's only) 3 2 2018-007303		1 Arrest 2 N T A 3 Request for Warrant 4 Request for Capas 1		JUVENILE	
DEF END ANT	Charge Type Check as many as apply <input type="checkbox"/> 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		If Weapon Seized Enter Type None/not Applicable		Multiple Clearance Indicator			
	Location of Arrest (Including Name of Business) 20 SE 14TH STREET BOCA RATON FL, 3342					Location of Offense (Business Name, Address) 20 SE 14TH ST, BOCA RATON, FL 33432						
	Date of Arrest 05/28/2018	Time of Arrest 01:30	Booking Date 05/28/2018	Booking Time 01:40	Jail Date 05/28/2018	Jail Time 01:40	Location of Vehicle TOWED BY WESTWAY					
	Name (Last, First, Middle) STAMILE, KELSEY LYNN		Alias:		Alias (Name, DOB, Soc Sec #, Etc.)							
Race W - White B - Black I - American Indian O - Oriental/Asian W		Sex F	Date of Birth 09/04/1991	Height 5'11	Weight 150	Eye Color BLUE	Hair Color BLONDE	Complexion LIGHT	Build Medium			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT R ANKLE / SEASHELL; TATT BACK BACK / WINGS		Marital Status S	Religion NONE	Indication of Alcohol Influence Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>		Indication of Drug Influence Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>						
Local Address (Street, Apt. Number) 1420 SE 3RD ST 6, DEERFIELD, FL 33441		(City)	(State)	(Zip)	Phone (732) 718-9941		Residence Type 1 City 2 County 3 Florida 4 Out of State 1					
Permanent Address (Street, Apt. Number) 1420 SE 3RD ST 6, DEERFIELD, FL 33441		(City)	(State)	(Zip)	Phone (732) 718-9941		Address Source FL DL					
Business Address (Name, Street) SELF EMPL,		(City)	(State)	(Zip)	Phone		Occupation SELF Empl					
D/I Number, State S354512918240 / FL		Soc Sec Number	INS Number		Place of Birth (City, State) NEW BRUNSWIK, NJ		Citizenship USA					
CO-DEF ENDANT	Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		<input type="checkbox"/> 1 Arrested <input type="checkbox"/> 2 At Large		<input type="checkbox"/> 3 Felony <input type="checkbox"/> 4 Misdemeanor		<input type="checkbox"/> 5 Juvenile	
	Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		<input type="checkbox"/> 1 Arrested <input type="checkbox"/> 2 At Large		<input type="checkbox"/> 3 Felony <input type="checkbox"/> 4 Misdemeanor		<input type="checkbox"/> 5 Juvenile	
JUVE NILE	<input type="checkbox"/> Parent <input type="checkbox"/> Other <input type="checkbox"/> Legal Custodian		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 Department and Released 2 TOT JAC 3 Incarcerated 3							
Released To (Name)		Relationship	Date	Time								
The above address was 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's Office (Phone 355-2526) informed of any change of address.		School Attended		Grade								
<input type="checkbox"/> Yes, by <input type="checkbox"/> No		Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property BLACK PHONE		Value of Property						
CHARGE	Drug Activity S Sell N N/A P Possess		R Seizure 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/Derv	P Paraphernalia/ Equipment S Synthetic	U Unknown Z Other
	Charge Description DUI		Statute Violation Number 316.193(1)		Violation of ORD #							
Drug Activity		Drug Type N	Amount / Unit	Offense #	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capas Number		Bond None			
Charge Description		Statute Violation Number		Violation of ORD #								
Drug Activity		Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capas Number		Bond			
Charge Description		Statute Violation Number		Violation of ORD #								
Drug Activity		Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capas Number		Bond			
INTAKE	Health / Apparent Physical Condition of Defendant NORMAL		Any knowledge of the following <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries Explain									
	Check which applies <input type="checkbox"/> Released O R <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health		<input checked="" type="checkbox"/> TOT County Jail		PROPERTY - Received By HORNE 791		Released By HORNE 791		Released To TOT CJ			
Transported By HORNE 791		Date Transported 05/28/2018	Time Transported 03:45	Other								
NOTICE TO APPEAR	<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.		Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444									
	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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.											
Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed										
ADMI NIST RATI ON	HOLD for Other Agency		Signature of Arresting Officer 		Name Verification (Printed by Arrestee) MAY 28 AM 0559							
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suscoidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) HORNE, A.		ID # 791		PAGB 1 OF 1			
Intake Desk PHO MAS		Pouch #	Transporting Officer HORNA		ID # 791	Agency BOCA		Witness here if subject signed with an "X"				

SCANNED
MAY 31 2018

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

OBTS Number	Agency ORI Number FL 0500200		Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2018-007303
Charge Type Check as many as apply	<input type="checkbox"/> 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	Special Notes	

Name (Last, First, Middle) **STAMILE, KELSEY LYNN** Alias _____

Charge Description 316.193(1) DUI	Charge Description	Race W	Sex F	Date of Birth 09/04/1991
Charge Description	Charge Description			

Victim's Name (Last, First, Middle) **STATE OF FLORIDA,**

Local Address (Street, Apt Number) 100 NW 2ND AVE, BOCA RATON, FL 33432	(City)	(State)	(Zip)	Phone (561) -	Address Source
Business Address (Name, Street)	(City)	(State)	(Zip)	Phone (56) -	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.

confessed to _____ admitting to the below facts.

was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.

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

On the 28 day of May, 2018 at 01:30 (Specifically include facts constituting cause for arrest.)

On 05/28/2018 at approximately 0104 hours, while on active patrol Sgt. Frenz observed a 2006 silver Toyota Camry bearing FL tag# ANDF42 while he was northbound on SW 12th Ave approaching Palmetto Park Rd. According to Sgt. Frenz, when the vehicle was travelling southbound on SW 12th Ave it completely ran the stop sign at 1 SW 12th Ave. The vehicle then proceeded southbound at a high rate of speed. The vehicle then went eastbound on E Camino Real. Sgt. Frenz was having difficulty catching up to the vehicle and had to approach the speeds of 65 mph to gain on the vehicle in a 30 mph posted speed zone. Sgt. Frenz then dropped down to 50 mph near the 700 block of W. Camino Real to attempt to pace the vehicle but the vehicle was pulling away from him, so he had to speed up more to effect a traffic stop. The vehicle was stopped at the red light at Camino Real and Camino Gardens Blvd. The vehicle proceeded past the stop bar and into the crosswalk southbound on Dixie Hwy. The vehicle then made a left hand turn and then went attempting to make a left hand turn onto SE 14th St. where Sgt. Frenz conducted the traffic stop.

Sgt. Frenz made contact with the driver, who produced her FL DL identifying herself as white female Kelsey Stamile. While speaking with her Sgt. Frenz was able to smell a strong odor of an alcoholic beverage coming from her breath. Her eyes were also red and glassy. Kelsey denied having anything to drink this evening. Kelsey stated that she was going to pick her friend up at a nearby apartment complex. Based on her driving pattern and the observations Sgt. Frenz had of Stamile I conducted a DUI investigation. I then met with Kelsey Stamile who was occupying the driver seat. Kelsey had blood shot red eyes and was twitching while I was speaking to her. I asked Kelsey how was she doing and she stated "good". I then asked Kelsey if she knew what date it was and she stated "yes its 05/27/18" (the correct date was 05/28/18). While speaking with Kelsey she was also mumbling her speech and had a strong odor of an unknown alcoholic beverage emanating from her person.

SWORN AND SUBSCRIBED BEFORE ME	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
FRENZ, JONATHAN RYAN	<i>[Signature]</i>
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F S S 117 10)	HORNE, ASHTON (791)
05/28/2018	NAME OF OFFICER (PLEASE PRINT)
DATE	05/28/2018
	DATE

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

OBTS Number	Agency ORI Number FL 0500200		Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2018-007303
Charge Type Check as many as apply	<input type="checkbox"/> 1 Felony	<input type="checkbox"/> 3 Misdemeanor	<input type="checkbox"/> 5 Ordinance	Special Notes
	<input type="checkbox"/> 2 Traffic Felony	<input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6 Other	
Name (Last, First, Middle)	Alias			Race W
STAMILE, KELSEY LYNN				Sex F
				Date of Birth 09/04/1991

Based on my observations I asked Kelsey if she would submit to roadside sobriety tasks and she stated that she would not submit but was willing to give a blood sample. I explained to Kelsey that a blood sample was not practical during this current time. I then advised Kelsey of her Taylor warning at which point she opted to conduct the task. I then walked Kelsey over to the front of my marked patrol vehicle. The tasks that were conducted were HGN, Walk and Turn, One leg Stand, Finger to Nose, Rhomberg balance test and Rhomberg Alphabet.

First, Kelsey conducted the Horizontal Gaze Nystagmus Exercise and she advised she understood my instructions. Kelsey displayed a lack of smooth pursuit in the right and left eye. Kelsey also displayed a distinct nystagmus at maximum deviation and an onset of nystagmus prior to forty five degrees in the right and left eyes.

I then asked Kelsey to conduct the Walk and Turn exercise. Kelsey was unable to maintain the instruction position. Several times while explaining the exercise she started walking. While walking Kelsey did not walk heel to toe. Kelsey turned around instead of making a series of small steps during the exercise. Kelsey was swaying and using her arms for balance during this task.

Next, was the One leg stand. Kelsey was unable to maintain the starting position, multiples times she spread her feet apart and did not keep her hands to her side. While raising her legs Kelsey had an issue counting. At the start of the task she counted one one thousand twice instead of counting in sequence.

Next, was the Finger to Nose exercise (L-R-L-R-R-L). Kelsey completed the arm sequence correctly but failed to touch the tip of her nose with the tip of her finger throughout the entire exercise. During this exercise Kelsey opened her eyes several times and failed to keep her head tilted back.

Next, was the Rhomberg balance test. Kelsey was able to properly count but used her arms to balance her body weight. Kelsey also did not tilt her head back during the course of this exercise.

Lastly, was the Rhomberg Alphabet. She was able to recite the alphabet correctly, until she got to the letter "W" and started to repeat the letter. Kelsey was unable to complete the alphabet after the letter W. While reciting the alphabet Kelsey continued to sway and use her arms for balance.

Based on my investigation and Kelsey's driving pattern, she was placed under arrest for DUI. While walking to the patrol vehicle Kelsey was unsteady and continued to sway. I then transported Kelsey to the BAT facility located at the Police Department. Officer

SWORN AND SUBSCRIBED BEFORE ME	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
FRENZ, JONATHAN RYAN	HORNE, ASHTON (791)
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F S S. 117.10)	NAME OF OFFICER (PLEASE PRINT)
05/28/2018	05/28/2018
DATE	DATE

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

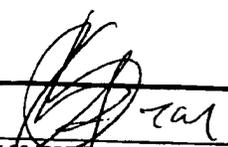
1 JUVENILE

OBTS Number		
Agency ORI Number FL 0500200	Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2018-007303
Charge Type. Check as many as apply. <input type="checkbox"/> 1 Felony <input type="checkbox"/> 2 Traffic Felony <input checked="" type="checkbox"/> 4 Traffic Misdemeanor <input type="checkbox"/> 3 Misdemeanor <input type="checkbox"/> 5 Ordinance <input type="checkbox"/> 6 Other	Special Notes:	
Name (Last, First, Middle) STAMILE, KELSEY LYNN	Alias	Race Sex Date of Birth W F 09/04/1991

Reissi #776 acted as my breath operator. Reissi and I conducted the 20 minute observation and then took Kelsey into the BAT room. Kelsey provided two valid samples of .175 and .170, I also read Kelsey her Constitutional Rights which she advised she understood. Kelsey answered all questions regarding this incident. See DUI influence report. Kelsey is being charged under F.S.S. 316.193(1) for DUI. Kelsey was then transported to the Palm Beach County Jail for further processing.

All video pertaining to this call was marked and classified.

NOT A CERTIFIED COPY

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME	
	FRENZ, JONATHAN RYAN NOTARY PUBLIC / CLERK OF COURT / OFFICER (F S S 117.10)	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER 
	05/28/2018 DATE	HORNE, ASHTON (791) NAME OF OFFICER (PLEASE PRINT)
		05/28/2018 DATE
		PAGE 3 OF 3

18- 7303

1015- 0130

088- 0147

DUI INFLUENCE REPORT



BOCA RATON POLICE SERVICES DEPARTMENT

100 NW 2nd Avenue

Boca Raton, FL 33432

SCANNED

MAY 31 2018



BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT - PART I

On the _____ day of _____, at _____ AM/PM:

Subject: _____ Case Number: _____

PERSONAL CONTACT

Driving Pattern: All information was documented on the PC. (Probable Cause Affidavit)

Observation of Driver: _____

Driver's Statement: _____

Odors: _____

GENERAL OBSERVATIONS

Speech: Slurred

Attitude: polite

Clothing: Black Dress

Medical Problems: N/A

Medications: None

Other: _____

Horizontal Gaze Nystagmus:

- | | |
|--|---|
| <input type="checkbox"/> Left eye does not follow smoothly | <input type="checkbox"/> Right eye does not follow smoothly |
| <input type="checkbox"/> Left eye jerks at 45 degrees angle or less | <input type="checkbox"/> Right eye jerks at 45 degrees angle or less |
| <input type="checkbox"/> Distinct jerking left eye maximum deviation | <input type="checkbox"/> Distinct jerking right eye maximum deviation |

Can not do, Why? _____

Walk and turn: _____

Can not do, Why? _____

One leg stand: _____

Can not do, Why? _____

Finger to nose: _____

Can not do, Why? _____

Alphabet (speech pattern): _____

Can not do, Why? _____

Breath/Blood test results: _____

State of Florida, County of Palm Beach,
Sworn and subscribed before me this _____ (date) by _____

Notary/Clerk of Court/ Officer (FSS 117.10) Date

Signature of Arresting Officer Name of Officer (print)

ARRESTING OFFICER: Ofc. Horne

Name: Ofc. Clinard Phone # _____ Work # _____

Address: 100 Nw 2nd Ave

Can testify to: Back UP

Name: Sgt. Frenz Phone # _____ Work # _____

Address: 100 Nw 2nd Ave

Can testify to: Back UP

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____



BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT - PART II

To be filled out at testing facility

Agency Case # 18-7303

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is Monday, May, 28th, 2018.
(day) (month) (date) (year)

B. The time is now approximately 0207 AM/PM.

C. The following is in reference to case number 18-7303.

D. Present at this time is Off. Horne of the Boca Raton Police Department.
(Officer's Name)

E. Officer Horne, have you arrested Kelsey Stamite in violation of Florida State Statute 316.193?
(Defendant's name)

F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida? _____

G. Mr./Mrs./Ms. Stamite, I am required to inform you these proceedings are being video recorded.

Operator Note: Video record breath request, breath sample, and interview.

NOT A CERTIFIED COPY

II. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.

Note: Read only the paragraph applicable to the type of test you are requesting.

- A. I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.
- B. I am now requesting that you submit to a lawful test of your **URINE** for the purpose of determining its alcohol content.
- C. 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.

IMPLIED CONSENT WARNINGS

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 Signature: _____

Note: Also read for CDL holders:

IN ADDITION, your refusal to submit will result in the loss of your commercial privileges for one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from operating a commercial motor vehicle.

Note: After reading the implied consent warning, the arresting officer must request a breath sample again.

(IF REFUSAL THEN)

At this time Mr./Mrs./Ms. _____ has refused to submit to a breath test.

The date is _____, _____, _____, and the time is _____ AM/PM.
(month) (day) (year)



BOCA RATON POLICE SERVICES DEPARTMENT
JUVENILE CONSTITUTIONAL WARNINGS

**Rights of suspects prior to custodial questioning.
Identify yourself and state:**

I am required to warn you before you make any statement that you have the following Constitutional rights:

- (1) You have the right to remain silent and not answer any questions. *Tell me in your own words what you think this means.
(You do not have to talk to me or answer any questions about this offense. You can be quiet if you want.)*
- (2) Any statement you make must be freely and voluntarily given. *Tell me in your own words what you think this means.
(If you do talk to me it has to be because you want to and not because anyone is forcing you to speak.)*
- (3) You have a right to the presence and representation of a lawyer of your choice before you make any statement and during any questioning. *Tell me in your own words what you think this means.
(You can talk to a lawyer before we ask you any questions and you can have him/her with you now, during our questioning.)*
- (4) If you cannot afford a lawyer, you are entitled to the presence and representation of a court appointed lawyer before you make any statement and during any questioning. *Tell me in your own words what you think this means
(If you do not have money for a lawyer and you want one, a lawyer will be given to you for free.)*
- (5) If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent. *Tell me in your own words what you think this means.
(If you decide to talk to me then change your mind, you can stop answering my questions at any time.)*
- (6) I can make no threats or promises to induce you to make a statement. This must be of your own free will. *Tell me in your own words what you think this means
(I am not allowed to threaten you or make you any promises to get you to talk to me. If you decide to talk, it must be because you want to.)*
- (7) Any statement can be and will be used against you in a court of law. *Tell me in your own words what you think this means
(Anything you say to me can and will be told to the judge or a jury in court. A judge is a person who decides if you have done something wrong. Sometimes a group of people called a jury decide this, but the Judge is the person who decides what punishment you get.)*
- (8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: _____ Date: _____ Time: _____

SCANNED



BOCA RATON POLICE SERVICES DEPARTMENT
TESTING FACILITY TASK REPORT

SUBJECT: Kelsey Stamile

CASE #: 18-7303 DATE: 5/28/18

BREATH TEST RESULTS

1) TIME .175 212 AM/PM 2) TIME .170 215 AM/PM

3) TIME _____ AM/PM 4) TIME _____ AM/PM

BREATH OPERATOR: Reissi

MAINTENANCE TECHNICIAN: Pare

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred Speech

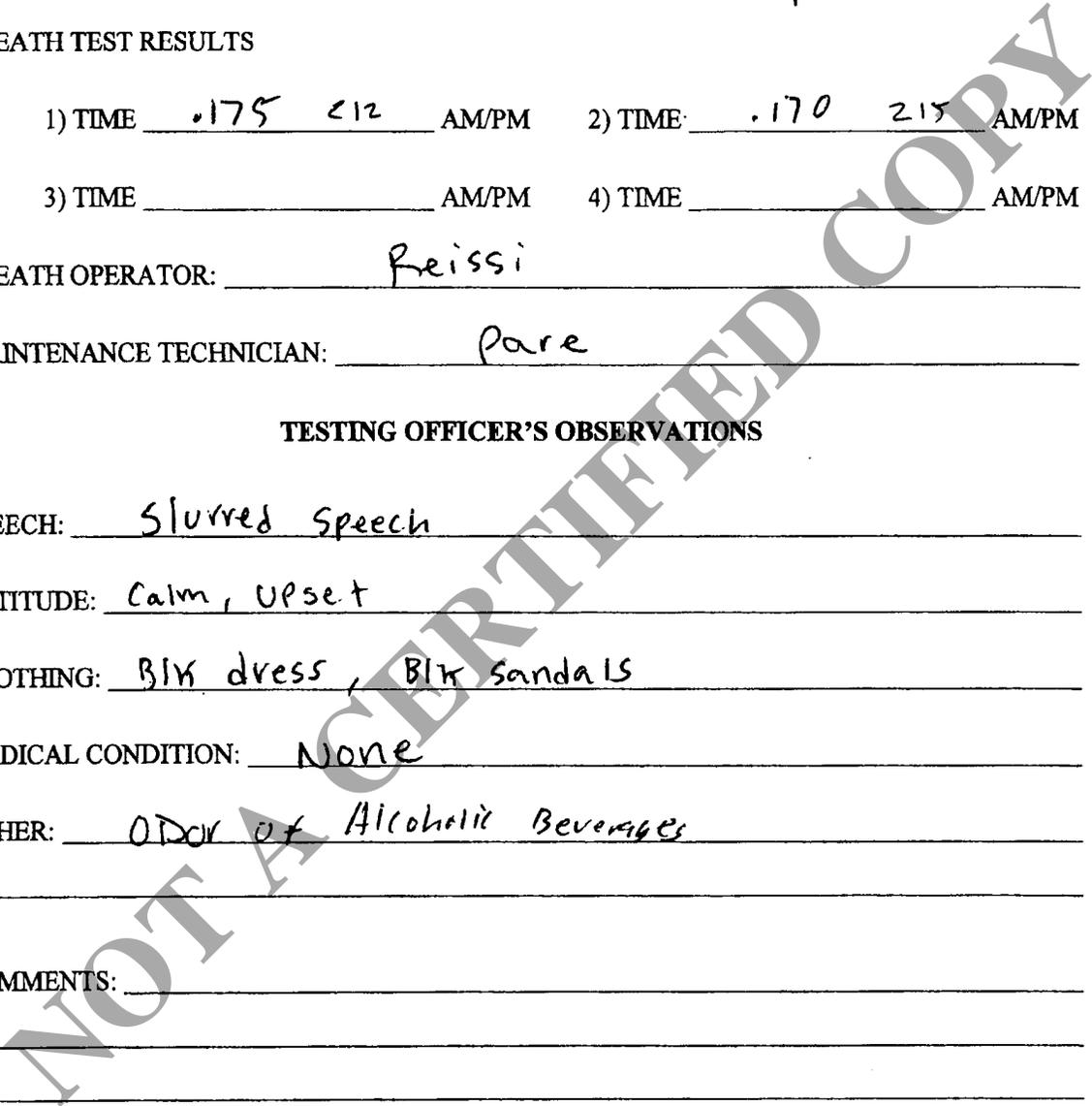
ATTITUDE: Calm, Upset

CLOTHING: Blk dress, Blk sandals

MEDICAL CONDITION: None

OTHER: ODOR of Alcoholic Beverages

COMMENTS: _____



Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

- (1) You have the right to remain silent and not answer any questions.
- (2) Any statement you make must be freely and voluntarily given.
- (3) You have a right to the presence and representation 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 and representation of a court appointed lawyer before you make any statement 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 be and will be used against you in a court of law.
- (8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: [Signature] Date: 5/28/16 Time: 0220

QUESTIONS AND ANSWERS

Were you operating a motor vehicle at the time of the accident/stop? yes

Where were you going? Home

What street or highway were you on? SE 15th Street

Direction of travel? East on SE 15th Street

Where did you start driving from? Coming from 95

What city (county) were you stopped in? Boca Raton

What time did you start? 12 AM PM What time is it now? UNK

What is today's date? 5/28/18 What day of the week is it? Monday

When did you last eat? 10pm What did you eat? grilled vegetables

What have you been doing the past three hours prior to this stop/accident? watching TV (Basketball)

How much do you weigh? 150 Have you been drinking? yes What were you drinking?

Magic Cats

How much? 3 beers Where? hijinks bar With whom were you drinking? sister

When did you have your first drink? 930 AM PM When did you stop drinking? 1030 AM PM

How did you consume your last two drinks? in glass orally

Are you under the influence of alcohol now? Yes No

Can you feel the effects of alcohol? Yes No

Have you consumed alcohol since the accident? Yes No

Can you feel the effects of alcohol? Yes No

Have you consumed alcohol since the accident? Yes No How much? _____

What? _____ Where? _____

What line of work are you in? _____

When did you last work? _____

Do you have any physical defects or injuries? Yes No If yes, explain: _____

Are you sick or injured? Yes No If yes, explain: _____

Do you limp? Yes No Did you get a bump on the head? Yes No

Were you in an accident today? NO

Have you taken any drugs or smoked marijuana today? NO

What? _____ When? _____

Have you seen a doctor or dentist today? Yes No Who? _____

Are you taking any prescription medications? Yes No What? _____ When? _____

Do you have: Epilepsy? Yes No Inner ear trouble? Yes No

Glass eye? Yes No Ear infection? Yes No

False teeth? Yes No Diabetes? Yes No

Any problems not correctable by glasses or contact lenses? NO

Do you take insulin? Yes No If yes, when was your last injection? _____

Have you ever had a driver's license in any other state? NO yes, New Jersey

I am now ending this video recording. The time is now approximately 2:25 PM.

The date is May, 28th, 2018.
(month) (day) (year)

SCANNED
MAY 31 2018



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"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2018017760	Date: 05/28/2018
	Specialist Name/ID: D.Beavers/9606

SCANNED

MAY 31 2018