

04964064

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE	OBTS Number		Agency ORI Number 06/76		Agency Name Palm Beach Police Dept.		Agency Report Number (N.T.A.'s only) 18-000355															
	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				Weapon Seized / Type 2 1. Yes 2. No		Multiple Clearance Indicator N/A															
	Location of Arrest (Including Name of Business) 1 South County Rd					Location of Offense (Business Name, Address) 1 South County Rd																
DEPENDANT	Date of Arrest 03/09/2018	Time of Arrest 0347	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle Towed															
	Name (Last, First, Middle) Vilsack, Kevin Charles					Alias (Name, DOB, Soc. Sec. #, Etc.)																
	Race W - White I - American Indian B - Black O - Oriental/Asian W	Sex M	Date of Birth 06/10/91	Height 600	Weight 205	Eye Color Blue	Hair Color Brown	Complexion Light	Build Average													
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)					Marital Status Single	Religion NONE	Indication of Alcohol Influence Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Unk.														
	Local Address (Street, Apt. Number) 503 Avenidia Hermosa West Palm Beach FL 33411			(City)	(State)	(Zip)	Phone (216) 905-3067	Residence Type: 1. City 2. County 3. Florida 4. Out of State 2														
	Permanent Address (Street, Apt. Number)			(City)	(State)	(Zip)	Phone	Address Source Verbal														
	Business Address (Name, Street)			(City)	(State)	(Zip)	Phone	Occupation Self														
	D/L Number, State TG807444		Soc. Sec. Number		INS Number		Place of Birth Ohio		Citizenship USA													
	Co-Defendant Name (Last, First, Middle)					Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <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"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile													
JUVENILE	<input type="checkbox"/> Parent Name (Last) (First) (Middle)		Residence Phone		<input type="checkbox"/> Legal Custodian																	
	<input type="checkbox"/> Other:		Address (Street, Apt. Number) (City) (State) (Zip)		Business Phone																	
	Notified by: (Name)		Date	Time	Juvenile Disposition 1. Handled/processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated																	
	Released To: (Name)		Relationship		Date	Time																
	The above address provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)					School Attended		Grade														
	Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property			Value of Property																
	<table border="0"> <tr> <td>CODE</td> <td>Drug Activity N. N/A P. Possess</td> <td>S. Sell B. Buy T. Traffic</td> <td>R. Smuggle D. Deliver E. Use</td> <td>K. Dispense/ Distribute</td> <td>M. Manufacture/ Produce/ Cultivate</td> <td>Z. Other</td> <td>Drug Type N. N/A A. Amphetamine</td> <td>B. Barbiturate C. Cocaine E. Heroin</td> <td>H. Hallucinogen M. Marijuana O. Opium/Deriv.</td> <td>P. Paraphernalia/ Equipment S. Synthetics</td> <td>U. Unknown Z. Other</td> </tr> </table>										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
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	Charge Description DUI		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)		Violation of ORD #															
	Drug Activity	Drug Type	Amount / Unit	Offense # 18-000355	Warrant / Capias Number		Bond															
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #																
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Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #																
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond																
Location (Court, Room Number, Address)																						
Court Date and Time Month March Day 29th Year 2018 Time 830 AM																						
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED																						
Signature of Defendant (or Juvenile and Parent /Custodian)					Date Signed																	
HOLD for other Agency Name:		Signature of Arresting Officer C. Machate			Name Verification (Printed by Arrestee) Officer C. Machate																	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:		Name of Arresting Officer (Print) Officer C. Machate			I.D. # 9146		(PRINT)															
Mugshot # 1720 Pouch #		Transporting Officer C. Machate			ID # 9146 Agency PBPD		Witness here if subject signed with an "X"															
DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)																						

1/05
2018 MAR 10 PM 7:01
PALM BEACH COUNTY
COR. DETAIL
BRAN

SCANNED
MAR 12 2018

PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile N

ADMIN	OBTS Number	Agency Name Palm Beach Police Dept.		Agency Report Number 18-000355
	Agency ORI Number 06/76			
Charge Type: Check as many as apply.		Special Notes:		
<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

DEF	Name (Last, First, Middle) Vilsack, Kevin Charles	Alias	Race White	Sex Male	Date of Birth 06/10/91
	Charge Description DUI	316.193(1)			
CHARGES	Charge Description	Charge Description			
	Charge Description	Charge Description			

VICTIM	Victim's Name (Last, First, Middle)	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 _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.

On the **09** day of **March** 20 **18** at **0347** A.M. P.M. (Specifically include facts constituting cause for arrest.)

While on patrol in the 300 blk of Royal Poinciana Way, I observed a 2004 blk Honda bearing Ohio tag #GIQ6990 that was weaving within its lane heading eastbound. As the vehicle turned onto the 100 blk of South County Rd, the vehicle began to weave within its lane another time, almost striking another vehicle.

Based on these observations, I conducted a traffic stop on the vehicle in front of 1 South County Rd(The Breakers) to determine if the driver is possibly distracted or under the influence. After making contact with the driver, later identified as Kevin Vilsack (W/M DOB 06/10/91), I smelled a strong odor of an unknown alcoholic beverage on his breath and person. While speaking with Vilsack, he forgot to place his vehicle in park, and had to be instructed to do so. Vilsack had slurred speech and his eyes were glossy. When asked where he was driving to he stated "West Palm Beach".

Based on my observations, I asked Vilsack to exit the vehicle to submit Standardized Field Sobriety Tasks, to which he complied and agreed to. I conducted standardized field sobriety testing on Vilsack the results are attached below. At 0347 hours I arrested Vilsack for driving under the influence of alcohol and transported him to the PBSO Breath Alcohol Testing Center where he agreed to take a breathalyzer test. The test was conducted two separate times, and the results of the test were .162 BAC, and .169 BAC, .183 BAC, and .189 BAC respectively.

Based upon the information contained in this report, I arrested Kevin Vilsack for Driving under the influence of Alcohol in violation of FSS 316.193(1).

**SCANNED
MAR 12 2018**

ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH Officer C.Machate (Signature of Arresting/Investigative Officer)
	The foregoing instrument was sworn to or affirmed and subscribed before me this 09 day of March 20 18 by Officer C.Machate
	(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced _____
	Notary Public, Clerk of Court, Officer (F.S.S. 117.10) <i>CA Hornum 7206</i>

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 09 DAY OF March 20 18, AT 0347 AM PM

SUBJECT: Vilsack, Kevin Charles CASE NUMBER: 18-000355

AGENCY: Palm Beach Police Dept. ARRESTING OFFICER: Officer C.Machate

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)
Weaving within lane while driving numerous times. Almost struck another vehicle. Failure to use turn signals.

OBSERVATION OF DRIVER:

eyes were glassy. Slurred speech. He advised was heading to "West Palm Beach", as he was just exiting West Palm Beach. Failed to place the vehicle into park as instructed to do so. Would consistently place his hands in his pockets after being told not to.

DRIVER'S STATEMENTS:

Vilsack stated he did have "some drinks" earlier. After I explained the reason for the stop, Vilsack didn't understand and he kept stating I stopped him for a headlight out.

ODORS:

strong odor of an unknown alcoholic beverage

GENERAL OBSERVATIONS

SPEECH: Slurred, Mumbled and Delayed

ATTITUDE: Good

CLOTHING: red sweater, gray sweat pants black shoes

MEDICAL/OTHER:

STATE OF FLORIDA
COUNTY OF PALM BEACH

Officer C.Machate

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 09 day of March 20 18 by _____

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

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

SCANNED
MAR 12 2018

SUBJECT: Vilsack, Kevin Charles

CASE NUMBER 18-000355

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:

swayed back and forth while conducting the nystagmus. After Vilsack was placed in handcuffs, a search was conducted on his person, which revealed a cork top from an alcohol bottle. Then Vilsack spontaneously uttered "that's from drinking earlier"

WALK & TURN

Did not perform.

ONE LEG STAND:

Did not perform.

FINGER TO NOSE:

He did not bring his hands down to his side after touching her nose.

ROMBERG ALPHABET:

He repeated the letter "S" twice.

BREATH TEST RESULTS: .162, .169, .183, .189

STATE OF FLORIDA
COUNTY OF PALM BEACH

Officer C. Machate

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 09 day of March 2018 by _____

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

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

SCANNED
MAR 12 2018

WITNESS LIST

CASE NUMBER: 18-000355

ARRESTING OFFICER: Officer C.Machate

ADDRESS: 345 S. County Rd. Palm Beach, Florida 33480

PHONE NUMBERS (HOME): _____ (WORK) (561) 838-5454

CAN TESTIFY TO: DUI

NAME: Gabriel Dasilva

ADDRESS: 345 South County Rd

PHONE NUMBERS (HOME) 561-838-5454 (WORK) _____

CAN TESTIFY TO: traffic stop and dui investigation

NAME: Kendall Reyes

ADDRESS 345 South County Rd

PHONE NUMBERS (HOME) 561-838-5454 (WORK) _____

CAN TESTIFY TO: Dui Investigation

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

SCANNED
MAR 12 2018

SUBJECT: Vilsack, Kevin Charles CASE NUMBER: 18-000355

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 o chemical or controlled substances.

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

I am Officer C.Machate of the PALM BEACH COUNTY

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 as admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: _____ Vilsack, Kevin Charles

CONSTITUTIONAL WARNINGS

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

You have the right to remain silent and not answer any questions.

Any statement must be freely and voluntarily given.

You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.

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.

If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.

I can make no threats or promises to induce you to make a statement. This must be of your own free will.

Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: _____ Vilsack, Kevin Charles

PALM BEACH COUNTY
SHERIFF'S OFFICE

RIC L. BRADSHAW, SHERIFF



LABORATORY ANALYSIS REQUEST

This Form Must Be Included With the Property Receipt and Accompany the Evidence Submitted for Toxicology Analysis
PRINT LEGIBLY OR TYPE

Agency: Palm Beach Police Dept. Case #: 18-000355

Officer: Officer C.Machate ID#: 9146 District: _____ Division: _____ Phone #: 561-838-5454

Email: _____

Specimen Collected By: _____ Date: _____ Time: _____

Specimen Collected From: Vilsack, Kevin Charles Age: 26 Sex: Male Hgt: 600 Wgt: 205

Specimen Type: Blood Urine Beverage Other-Describe _____

Type of Case: Traffic Accident Fatality DWI/DUI Other Date: _____ Time: _____

Was any medication administered by medical personnel prior to sample being drawn: Yes No

If yes, name of Medication(s): _____

Subject Arrested: Yes No

Breath Test Performed? Yes No Reading: .162, .169, .183, .189

Tests requested: Blood Alcohol Blood Drug Screen Urine Drug Screen

DRE exam performed: Yes No DRE Officer: _____ Agency: _____

DRE Opinion: _____

Drug History and Signs of Impairment (Please list any drugs, medications, or prescriptions the subject may have taken or were in his/her possession.)

SCANNED
MAR 12 2018

Florida Department of Law Enforcement Alcohol Testing Program

CERTIFICATION OF BLOOD WITHDRAWAL

I certify that as a physician, certified paramedic, registered nurse, licensed practical nurse, or other person authorized by a hospital to draw blood, or as a licensed clinical laboratory director, supervisor, technologist or technician, I am authorized by 316.1932, 316.1933, 322.63, 327.352 and 327.353, Florida Statutes, to withdraw blood at the request of a law enforcement officer. I certify that on 03/09/2018 I

withdrew blood from Vilsack, Kevin Charles at the request of
(Driver)

Officer C.Machate The blood sample(s) were collected and labeled in accordance
(Officer)
with the provisions of Rule 11D-8.012, Florida Administrative Code. Before collecting the blood sample(s), the skin was cleansed with an antiseptic that did not contain alcohol. The blood sample(s) were collected in glass evacuation tubes that contained a preservative and an anticoagulant. immediately after collection, the tubes were inverted several times. The blood collection tubes were labeled with the name of the person tested, the date and time the sample(s) were collected and the initials of the person who collected the sample(s).

(Printed name of person withdrawing blood)

(Title)

(Signature)

(Date)

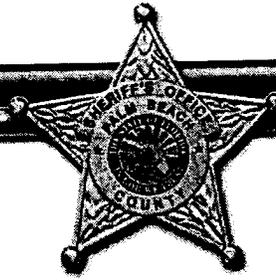
May also be used in administrative proceedings pursuant to s. 322.2615, Florida Statutes. To be forwarded to the local Bureau of Driver Improvement Office, Division of Driver Licenses, Department of Highway Safety and Motor Vehicles.

FDLE/ATP Form 11-Revised August, 2001

SCANNED
MAR 12 2018

PALM BEACH COUNTY
SHERIFF'S OFFICE

RIC L. BRADSHAW, SHERIFF



Date: _____

PBSO Case # 18-000355

I, Vilsack, Kevin Charles freely, knowingly and voluntarily give my consent for Doctor /Nurse / Paramedic / Phlebotomist _____ to obtain a sample (s) of my blood, urine, saliva for DNA, ethanol and/or other analysis or comparison that the Palm Beach County Sheriff's Office may deem necessary. I consent to the obtaining of sample(s) of my blood, urine or saliva with the full understanding *that the* results of any such analysis may be used against me in a court of law, and hereby attest that I am not submitting due to coercion, duress, or promises, that I am consenting to the aforementioned of my own free will.

Signature: _____

Witness by:

3228 Gun Club Road - West Palm Beach, Florida 33406-3001 - (561) 688-3000 - <http://www.pbso.org>

NOT A CERTIFIED COPY

SCANNED
MAR 12 2018

FILING PACKAGE RECEIPT FORM

Check One:

- DHSMV - Bureau of Driver Improvement Hearing Office
- State Attorney's Office D.U.I. Intake
- Felony/Misdemeanor Filing Documentation

Case Number: 18-000355

Defendant: Vilsack, Kevin Charles

Officer: Officer C.Machate ID, # 9146

District: Palm Beach Police Dept. 06/76

Date Submitted: 03/09/2018

Sent By: Officer C. Machate

Supervisor Approval: _____

Received By Court Liaison: _____

Date/Time Received: _____

FILING PACKAGE LOGGED BY LIAISON
ON DATE AND TIME LISTED ABOVE

RETURN THIS ORIGINAL RECEIPT TO OFFICER

Ver-OA-8

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MAR 12 2018