

J# 0350216

17CT15234

PCH#94

ARREST / NOTICE TO APPEAR Juvenile Referral Report			1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile					
OBTS Number <b>FLO 500000</b>			Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>			Agency Report Number (N.T.A.'s only) <b>06 17-114438</b>					
ADMINISTRATIVE	ChargeType: Check as many as apply: 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other			Weapon Seized / Type 1. Yes 2. No			Multiple Clearance Indicator 1 2				
	Location of Arrest (Including Name of Business) <b>ADONIS DR AND ATHENA DR LANTANA FL 33462</b>			Location of Offense (Business Name, Address) <b>HYPOLUXO RD AND S MILITARY TRAIL</b>			<b>LANTANA FL 33462</b>				
Date of Arrest <b>08/13/2017</b>	Time of Arrest <b>2147</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle					
Name (Last, First, Middle) <b>GALVIN LAWRENCE M</b>											
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex <b>W M</b>	Date of Birth <b>12/02/1963</b>	Height <b>508</b>	Weight <b>180</b>	Eye Color <b>BRO</b>	Hair Color <b>GRY</b>	Complexion <b>MED</b>	Build <b>MED</b>		
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>SCARS RIGHT HAND(THUMB INDEX FINGER) RT KNEE/LFT ANKLE</b>						Marital Status <b>M</b>	Religion <b>CATHOLIC</b>	Indication of: 1. Alcohol Influence 2. Drug Influence Y N Unk.			
DEFENDANT	Local Address (Street, Apt. Number) <b>8677 WINDY CIR</b>			(City) <b>BOYNTON BEACH</b>	(State) <b>FL 33472</b>	(Zip) <b>(561) 735 0914</b>	Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State <b>1</b>			
	Permanent Address (Street, Apt. Number) ,			(City)	(State)	(Zip)	Phone ( )	Address Source <b>FL DL</b>			
	Business Address (Name, Street) <b>6800 OKEECHOBEE BV</b>			(City) <b>WEST PALM BEACH</b>	(State) <b>FL 33411</b>	(Zip)	Phone <b>(561) 478 0341</b>	Occupation <b>SALES ASSOCIATE</b>			
	D/L Number, State <b>(FL)G-415-533-63-442-0</b>		Soc. Sec. Number [REDACTED]	INS Number		Place of Birth (City, State) <b>CLEVELAND OH</b>		Citizenship <b>US</b>			
CO-DEF	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		
JUVENILE	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other						Residence Phone ( )				
	Address (Street, Apt. Number)			(City)	(State)	(Zip)	Business Phone ( )				
	Notified by: (Name)			Date	Time	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				
	Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> 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 <b>DUI W/ PROPERTY DAMAGE</b>			Counts 1	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number <b>316.193(1)</b>			Violation of ORD #	
	Drug Activity /	Drug Type /	Amount / Unit N/A	Offense # <b>17-114438</b>	Warrant / Capias Number			Bond			
CHARGE	Charge Description <b>LEAVING THE SCENE OF TRAFFIC CRASH PROPS DAMAGE</b>			Counts 1	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number <b>316.061(1)</b>			Violation of ORD #	
	Drug Activity /	Drug Type /	Amount / Unit N/A	Offense # <b>17-114438</b>	Warrant / Capias Number			Bond			
CHARGE	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			
CHARGE	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			
NOTICE TO APPEAR	Location (Court Room Number Address) <b>3228 GUN CLUB RD WEST PALM BEACH FL 33406</b>								Date <b>08/13/2017</b>		
	Court Date and Time Month <b>SEPTEMBER</b> Day <b>7</b> Year <b>2017</b> Time <b>0830</b>			AM <input checked="" type="checkbox"/> PM <input type="checkbox"/>							
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)  <i>[Signature]</i>											
HOLD for other Agency Name:  <i>[Signature]</i>				Signature of Arresting Officer X			Name Verification (Printed by Arrestee)  <b>SCANNED</b>				
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other				Name of Arresting Officer (Print) <b>INV E. K. WHITE</b>			I.D. # <b>7209</b>				
Intake Deputy <b>Span 810</b>				Transporting Officer <b>E. K. WHITE</b>			ID # <b>7209</b>		Agency <b>PBSO</b>	PAGE <b>107</b>	
Witness <input type="checkbox"/> subject signed with an -X" OF											

OBTs Number

## PROBABLE CAUSE AFFIDAVIT

1. Arrest   3. Request For Warrant  
2. N.T.A.   4. Request For CopiesJuvenile  

Agency ORI Number <b>FLO 5 0 0 0 0 0</b>	Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>	Agency Report Number <b>06</b>	<b>17-114438</b>		
Charge Type: Check as many as apply <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other			Special Notes		
Defendant Name (Last, First, Middle)			Race	Sex	Date of Birth
Charge		Charge			
Charge		Charge			
Victim Name (Last, First, Middle)			Race	Sex	Date of Birth
Local Address (Street, Apt. Number)		City	State	Zip	Phone
Business Address (Street, Apt. Number)		City	State	Zip	Phone
The undersigned 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...					
<input checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to admitting to the below facts. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.					
On the <u>13th</u> day of <u>August</u> 20 <u>17</u> at <u>2041</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM					

On 08/13/2017, at approximately 2041 hours, while on patrol in my marked issued PBSO vehicle, I observed a minivan exiting the parking lot of Walmart, which is located at 4545 Hypoluxo Rd. The vehicle then made a right hand turn going southbound on S. Military Trail and upon approaching Hypoluxo Rd. the vehicle's two right tires climbed the side walk as the vehicle was attempting to make a right hand turn onto Hypoluxo Rd. The vehicle then continue to go westbound on Hypoluxo Rd. at a high rate of speed. The vehicle then turned right (northbound) on Adonis Dr. While travelling northbound on Adonis Dr. the vehicle then turned off its driving lights in effort to prevent the license plate to be seen. I then initiated a traffic stop on that vehicle by activating my overhead lights. The vehicle, a beige Kia minivan with FL Tag: UVP7M came to a complete stop on Athena Dr. and Adonis Dr.

I approached the driver side and made contact with the driver of the vehicle, sole occupant. The driver, a white male, Lawrence Galvin identified himself by his FL DL. In speaking with Galvin, I immediately detected an obvious and strong odor of an unknown alcoholic beverage emitting from his face and person. Mr. Galvin uttered "I am going to jail tonight" he then stated that he has been drinking and drank 6 beers and was just going home from Lakeside Inn. I then explained to him that I could smell an unknown odor of an alcoholic beverage coming from inside of the vehicle and his facial area. His speech was slurred and slow, I could also observed that Mr. Galvin was showing signs of possible impairment, I requested a DUI Unit to respond. The on scene investigation was turned over to DUI investigator Edward White # 7209.

SCANNED  
AUG 17 2017

The foregoing instrument was sworn to and affirmed before me this <u>13th</u> day of <u>August</u> 20 <u>17</u> , by:	<u>D/S J. Alvarez</u> <u>17620</u>
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Name of Arresting/Investigating Officer
<u>Erik - bohite</u>	<u>Signature of Arresting/Investigating Officer</u>
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Signature of Arresting/Investigating Officer
Page <u>1</u> of <u>1</u>	

OBTS Number

## PROBABLE CAUSE AFFIDAVIT

1. Arrest   3. Request For Warrant  
2. N.T.A.   4. Request For CapiasJuvenile  

Agency ORI Number <b>FLO 5 0 0 0 0 0</b>	Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>	Agency Report Number <b>06 17-114438</b>				
Charge Type: Check as many as apply <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		Special Notes				
Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		
Charge		Charge				
Charge		Charge				
Victim Name (Last, First, Middle)		Race	Sex	Date of Birth		
Local Address (Street, Apt. Number)		City	State	Zip	Phone	Address Source
Business Address (Street, Apt. Number)		City	State	Zip	Phone	Occupation
<p>The undersigned 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...</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence.   <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> confessed to admitting to the below facts.   <input type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.</p>						
<p>On the <u>13th</u> day of <u>August</u> 20 <u>17</u> at <u>2041</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM</p>						

On 08/13/2017, at approximately 2041 hours, while on patrol in my marked issued PBSO vehicle, I observed a minivan exiting the parking lot of Walmart, which is located at 4545 Hypoluxo Rd. The vehicle then made a right hand turn going southbound on S. Military Trail and upon approaching Hypoluxo Rd. the vehicle's two right tires climbed the side walk as the vehicle was attempting to make a right hand turn onto Hypoluxo Rd. The vehicle then continue to go westbound on Hypoluxo Rd. at a high rate of speed. The vehicle then turned right (northbound) on Adonis Dr. While travelling northbound on Adonis Dr. the vehicle then turned off its driving lights in effort to prevent the license plate to be seen. I then initiated a traffic stop on that vehicle by activating my overhead lights. The vehicle, a beige Kia minivan with FL Tag; UVP7M came to a complete stop on Athena Dr. and Adonis Dr.

I approached the driver side and made contact with the driver of the vehicle, sole occupant. The driver, a white male, Lawrence Galvin identified himself by his FL DL. In speaking with Galvin, I immediately detected an obvious and strong odor of an unknown alcoholic beverage emitting from his face and person. Mr. Galvin uttered "I am going to jail tonight" he then stated that he has been drinking and drank 6 beers and was just going home from Lakeside Inn. I then explained to him that I could smell an unknown odor of an alcoholic beverage coming from inside of the vehicle and his facial area. His speech was slurred and slow, I could also observed that Mr. Galvin was showing signs of possible impairment, I requested a DUI Unit to respond. The on scene investigation was turned over to DUI Investigator Edward White # 7209.

SCANNED  
AUG 17 2017

The foregoing instrument was sworn to and affirmed before me this	<u>13th</u>	day of	<u>August</u>	20	<u>17</u>	, by:
<u>E. K. WHITE</u>						<u>D/S J. Alvarez</u>
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)						<u>17620</u>
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)						Signature of Arresting/Investigating Officer
						Page <u>1</u> of <u>1</u>

ADMIN	OBTS Number		PROBABLE CAUSE AFFIDAVIT				1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	Juvenile 1
	Agency ORI Number	Agency Name	PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number			
DEF	FLO 500000	Check as many as apply.	1. Felony 2. Traffic Felony	3. Misdemeanor 4. Traffic Misdemeanor	5. Ordinance 6. Other	Special Notes:			
CHARGES	Name (Last, First, Middle) <b>GALVIN, LAWRENCE, M</b>			Alias		Race W	Sex M	Date of Birth 12/02/1963	
	Charge Description <b>DUI W/ PROPERTY DAMAGE</b>		316.193(1)		Charge Description <b>LEAVING THE SCENE OF TRAFFIC CRASH PROP DAMAGE</b>			316.061(1)	
VICTIM	Charge Description			Charge Description					
	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		
<p>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.</p> <p>The Person taken into custody</p> <p><input type="checkbox"/> committed the below acts in my presence.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts.</p> <p><input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p>									
<p>On the <u>13</u> day of <u>AUGUST</u> <u>2014</u> at <u>2041</u> <input type="checkbox"/> A. M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p>									
<p>On Sunday, August 13, 2017 at approximately 2046 hours, I was dispatched to Adonis Avenue and Athena Drive in the unincorporated area of Lantana (Palm Beach County) Florida to assist Deputy Jon Alvarez with what appeared to be a traffic stop involving a possible drunk driver. Prior to being dispatched I heard D/S Alvarez announce over the radio that he saw a van leaving an area at a high rate of speed. He eventually stopped the vehicle at the previously mentioned location. Upon my arrival I noticed D/S Alvarez's patrol car stopped behind a light colored van with his emergency lights activated. Both vehicles were stopped in the roadway on Athena Drive facing eastbound. Deputy Samuel Gorfido was also on scene as a back up officer. I also saw a black small utility vehicle stopped at the stop sign. I made contact with D/S Alvarez who told me the following: On 08/13/2017, at approximately 2041 hours, while on patrol in my marked issued PBSO vehicle, I observed a minivan exiting the parking lot of Walmart, which is located at 4545 Hypoluxo Rd. The vehicle then made a right hand turn going southbound on S. Military Trail and upon approaching Hypoluxo Rd. the vehicle's two right tires climbed the side walk as the vehicle was attempting to make a right hand turn onto Hypoluxo Rd. The vehicle then continue to go westbound on Hypoluxo Rd. at a high rate of speed. The vehicle then turned right (northbound) on Adonis Dr. While travelling northbound on Adonis Dr. the vehicle then turned off its driving lights in effort to prevent the license plate to be seen. I then initiated a traffic stop on that vehicle by activating my overhead lights. The vehicle, a beige Kia minivan with FL Tag; UVP7M came to a complete stop on Athena Dr. and Adonis Dr.</p>									
<p>I approached the driver side and made contact with the driver of the vehicle, sole occupant. The driver, a white male, Lawrence Galvin identified himself by his FL DL. In speaking with Galvin, I immediately detected an obvious and strong odor of an unknown alcoholic beverage emitting from his face and person. Mr. Galvin uttered "I am going to jail tonight" he then stated that he has been drinking and drank 6 beers and was just going home from Lakeside Inn. I then explained to him that I could smell an unknown odor of an alcoholic beverage coming from inside of the vehicle and his facial area. His speech was slurred and slow, I could also observed that Mr. Galvin was showing signs of possible impairment, I requested a DUI Unit to respond. The on scene investigation was turned over to DUI investigator Edward White # 7209. :</p>									
<p>D/S Alvarez wrote a sworn witness statement on a probable cause affidavit regarding this incident.</p>									
<p>I made contact with the occupants of the black utility vehicle. the registered owner identified herself as Keshia Cox. Cox told me her boyfriend (Deandra Jerkines), her small child (Skylar Jerkines) and she were stopped in the outside lane of Hypoluxo Road facing westbound awaiting the traffic light to cycle green. She told me Deandra ws driving. She said a car hit them on her vehicle's left side and continued to travel away from the scene. She thought the driver would stop but he made a left on Military and started north. He made a U-turn and drove back to Hypoluxo where he made a right turn. They eventually followed him to Adonis and Athena where a police officer had stopped the vehicle. Deandra added that her heard a loud noise when the vehicle hit theirs. While following the vehicle he told me he heard tires screeching from the van and the driver of the van was driving recklessly. Cox wrote a sworn witness statement regarding this incident.</p>									
<p>Prior to making contact with the driver of the van I observed a broken lens on the left side of Cox's vehicle. I also noticed a small dent underneath the lens.</p>									
<b>SCANNED</b> <b>AUG 17 2017</b>									
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p>INV E. K. WHITE</p> <p>(Signature of Arresting/Investigative Officer)</p>									
<p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>13</u> day of <u>AUGUST</u> <u>2017</u> by <u>INV. E. K. WHITE</u></p> <p>(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>KNOWN</u></p> <p>Notary Public - State of Florida Notary Public, Clerk of Court, Officer (F.S.S. 117.10) My Comm. Expires Nov 18, 2017 Commission # FF 059684</p>									
<p>PAGE <u>1</u> OF <u>2</u></p>									

ADMIN	OBTS Number		PROBABLE CAUSE AFFIDAVIT				1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile	
	Agency ORI Number	Agency Name				Agency Report Number					
DEF	FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE			06- 17-114438			Special Notes:			
CHARGES	Charge Type: Check as many as apply.	1. Felony <input type="checkbox"/>	3. Misdemeanor <input type="checkbox"/>	5. Ordinance <input type="checkbox"/>	2. Traffic Felony <input type="checkbox"/>	4. Traffic Misdemeanor <input type="checkbox"/>	6. Other <input type="checkbox"/>				
DEF	Name (Last, First, Middle)	GALVIN, LAWRENCE, M			Alias		Race	Sex	Date of Birth		
	W	M	12/02/1963								
VICTIM	Charge Description	DUI W/ PROPERTY DAMAGE			316.193(1)	Charge Description	LEAVING THE SCENE OF TRAFFIC CRASH PROP DAMAGE			316.061(1)	
	Charge Description					Charge Description					
	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		
					( )						
<p>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</p> <p><input type="checkbox"/> committed the below acts in my presence.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts.</p> <p><input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p>											
<p>On the 13 day of AUGUST 2014 at 2041 <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p>											
<p>I proceeded to the van and made contact with the driver who was sitting in the driver seat. He later identified himself as Lawrence Michael Galvin by his Florida driver license. During my interview I noticed his eyes were red, watery and glossy. His speech seemed normal, but his mouth was dry and his face was flushed. I could smell a strong odor of an unknown alcoholic beverage emanating from the inside of the vehicle that is registered to him. He was the sole occupant inside the vehicle. I explained to the driver that his vehicle was involved in a crash that involved the small utility vehicle. He acknowledged being in a crash and leaving the scene. He told me his mirror struck the vehicle. I looked at the mirror and saw paint transfer that was consistent with the utility vehicle's color. I also noticed the mirror missing from the side view mirror housing. I told him to remain inside his vehicle while I completed the crash investigation. I did not locate the crash scene, but when I pulled up the intersection on Google earth Deandra and Cox showed me the approximate area where they were stopped. After completing my crash report I gave both subject's preliminary copies of the crash report to include the case number. I explained for them to contact their respective insurance companies and inform them that they were involved in a traffic crash.</p>											
<p>I made contact with Galvin and told him I had completed my crash investigation. I told him his vehicle struck the utility vehicle with its right side mirror while trying to change lanes. Moreover, I explained him not remaining on scene or pulling over to a safe area to have the incident either investigated by law enforcement, or exchange information with the other driver, is cause for him to be charged with leaving the scene of a traffic crash with property damage. I also told him that I had a suspicion he had been drinking an unspecified amount of unknown alcoholic beverages. He told me he had been drinking. I asked if he would consent to performing Standardized Field Sobriety Evaluations (SFSTs) for the purpose of determining if he was impaired while operating a motor vehicle. He initially consented to performing the SFSTs. Prior to exiting the vehicle I asked if he had any physical problems with his body that would inhibit him from performing light physical movements. I also asked if he was on medication. He told me he has injuries from his service in the military. He mentioned problems with his knees. I asked what if any medications he was prescribed. He told me he was taking vitamins and motrin. I asked if he was employed and he told me he works for Lowes. He advised his duties required him to stand on his feet and walk throughout the store. I told him the SFSTs would not be as demanding as his daily routine on his job. I asked him to exit his vehicle. When he exited I noticed he staggered and labored in maintaining his balance. I escorted him to a smooth and level surface on the roadway that was free from obstructions and debris. The area was well lighted by the lights from our patrol car. I could now smell a strong odor of an unknown alcoholic beverage coming from his breath which intensified when he spoke. He stood with his feet more than shoulder width apart. When I tried to place him in position for the pen light task, he asked what would happen if he did not perform the tasks. I explained Taylor warnings and told him the evidence that I already had against him (I.E. all previous mentioned indicators) would be strong basis for him being arrested. I also told him his refusal could be used against him in a court of law. I also reminded him that being issued driver license is a privilege and it states directly on his license that operation of a motor vehicle constitutes consent to any sobriety test required by law. He did not wish to cooperate and told me to take him to gun club. Based on Galvin driving his vehicle and causing damage to another vehicle while that vehicle was stopped prior to the intersection, coupled with D/S Alvarez's observation of the defendant's vehicle in motion and my observation of personal indicators of impairment exhibited by him, probable cause was established for DUI. He was placed under lawful arrest for DUI. He was searched and handcuffed (double locked and checked for tightness) prior to being seated into the rear of my patrol car. We located a receipt from Lakeside Anchor Inn (212 Floral Road, Lantana Fl 33462). The receipt showed on this date at 2027 hours the card member swiped his card to settle a bill of \$35.00. The defendant noticed us looking at the bill and uttered, "There was a lot of alcohol being purchased but it doesn't mean I drank all of it".</p>											
<b>SCANNED</b>											
AUG 17 2017											
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p>INV E. K. WHITE</p> <p>(Signature of Arresting/Investigative Officer)</p>											
<p>13 day of AUGUST 2017 by INV E. K. WHITE</p> <p>(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced</p> <p>KNOWN</p> <p>James G. BIGGS Notary Public - State of Florida My Comm. Expires Nov 18, 2017 Commission # FF 059684 Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>											
<p>PAGE 2 OF 2</p>											

# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 13 DAY OF AUGUST 20 14, AT 2041 AM  PM  
SUBJECT: GALVIN LAWRENCE M CASE NUMBER: 17-114438  
AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV E. K. WHITE  
PERSONAL CONTACT

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

## OBSERVATION OF DRIVER:

SEE PC AFFIDAVITS

## DRIVER'S STATEMENTS:

ADMITTED TO DRINKING ALCOHOLIC BEVRAGES AND LEAVING THE SCENE OF THE CRASH.

## ODORS:

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

## GENERAL OBSERVATIONS

SPEECH: normal

ATTITUDE: hesitant and offering excuses

CLOTHING: blue short pants, gray shirt and black flip flops

MEDICAL/OTHER: unk

STATE OF FLORIDA  
COUNTY OF PALM BEACH

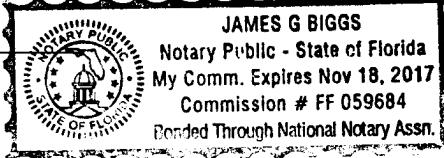
**INV E. K. WHITE**

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 13 day of AUGUST 20 17 by INV E. K. WHITE

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

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



SCANNED

AUG 17 2017

## ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

<input type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT	<input type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT
<input type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION	<input type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
<input type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES	<input type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

## Other Observations:

**REFUSED**

## WALK &amp; TURN:

**REFUSED**

## ONE LEG STAND:

**REFUSED**

## FINGER TO NOSE:

**REFUSED**

## ROMBERG ALPHABET:

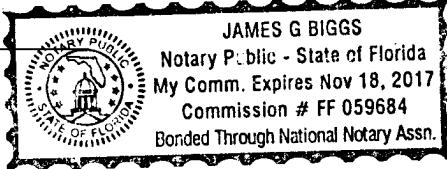
**REFUSED****BREATH TEST RESULTS: REFUSED****SCANNED****AUG 17 2017**STATE OF FLORIDA  
COUNTY OF PALM BEACH**INV E. K. WHITE**

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 13 day of AUGUST 2017 by INV E. K. WHITE

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

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



Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.

WITNESS  VICTIM  OTHER



CASE #: <u>17-114438</u>	ZONE: <u></u>	SUSPECT: <u></u>	DATE & TIME OF ORIGINAL EVENT/OFFENSE: <u>8/13/17 2041</u>
EVENT TYPE: <u></u>	DEPUTY: <u></u>	ID#: <u></u>	

**COMPLETE EVERYTHING BELOW – PRINT LEGIBLY**

LAST NAME: <b>Cox</b>	FIRST NAME: <b>Keshia</b>	MIDDLE INITIAL: <b>V</b>	RACE: <b>Black</b>	SEX: <b>F</b>	
DATE OF BIRTH: <b>03/15/1990</b>	(MM/DD/YYYY)	YOUR HEIGHT: <b>5'2</b>	YOUR WEIGHT: <b>125</b>	YOUR HAIR COLOR: <b>Black</b>	YOUR EYE COLOR: <b>Brown</b>
YOUR HOME ADDRESS: <b>4793 Via Bari</b>	<input type="checkbox"/> CHECK IF HOMELESS		CITY: <b>Lake Worth</b>	STATE: <b>FL</b>	ZIP: <b>33463</b>
YOUR WORK NAME & ADDRESS: <b></b>	<input type="checkbox"/> CHECK IF UNEMPLOYED OR RETIRED		CITY: <b></b>	STATE: <b></b>	ZIP: <b></b>
WORK PHONE: <input type="checkbox"/> CHECK IF NONE (   )	CELL PHONE: <input type="checkbox"/> CHECK IF NONE <b>15611 631-2458</b>	HOME PHONE: <input type="checkbox"/> CHECK IF NONE (   )	EMAIL: <b>Keshia.cox80@yahoo.com</b>	<input type="checkbox"/> CHECK IF NONE	

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL – PRINT LEGIBLY

1	YOUR NAME: Keshia Cox	DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...
<p>On the intersection of military <del>and</del> before and Hypoluxo the car hit our rear on the left side. We thought he would pull over to exchange information but he proceeded to drive. We then followed him into the Walmart plaza but he never slowed down. He turned out of the plaza that's when the officer pulled him over because he jumped over a <del>area</del> <sup>curb</sup> cutout to get away from us. We were trying to get his <del>licens</del> plate number. Luckily the officer pulled him over.</p>		

PAGE 1 OF 1

**READ AND SIGN**

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED  
STATEMENTS ARE CORRECT AND TRUE:

YOUR SIGNATURE: X 

DEPUTY SHERIFF NOTARY PUBLIC FSS: 117.10  
SWORN TO AND SUBSCRIBED BEFORE ME TODAY:  
DATE: 8/13/18 TIME: 215  
SIGNATURE: ID: 1763

**IF YOU DO NOT WISH TO PROSECUTE, COMPLETE THE ABOVE STATEMENT, READ THIS DISCLAIMER AND INITIAL BELOW. I AM OF LEGAL AGE AND I AM THE REPORTED VICTIM OF A CRIME UNDER FLORIDA LAW. I HEREBY STATE THAT I WILL NOT COOPERATE ANY FURTHER WITH THE INVESTIGATION OF THE ALLEGED CRIME. I FURTHER RELEASE THE PALM BEACH COUNTY SHERIFF'S OFFICE OF ANY PRESENT OR FUTURE RESPONSIBILITY AS TO MY CASE. I ACKNOWLEDGE THAT I UNDERSTAND MY RIGHTS AS A CRIME VICTIM, PARTICULARLY REGARDING VICTIM COMPENSATION ELIGIBILITY, WHICH INCLUDES SUCH BENEFITS AS REIMBURSEMENT FOR: DISABILITY; LOST WAGES; LOSS OF SUPPORT; MEDICAL, DENTAL, MENTAL HEALTH COUNSELING AND FUNERAL EXPENSES. I AM AWARE I MAY BE GIVING UP THESE RIGHTS FOR MY FAMILY AND MYSELF BY INITIALLING BELOW. I AM TAKING THIS POSITION OF MY OWN FREE WILL KNOWING THAT THE CASE IS NOT OVER UNTIL IT IS INVESTIGATED AND PROSECUTED WITH MY COOPERATION.**

**(PROSECUTION WAIVER NOT TO BE USED FOR CASES INVOLVING DOMESTIC OR DATING VIOLENCE PER G.O. 508.00)**

WHITE - RECORDS COPY   CANARY - STATE ATTORNEY COPY   PINK - OFFICER'S COPY   GOLD - WITNESS / VICTIM CORAUG 11/2011

PBSQ #0134 REV. 12/11

DO NOT WISH TO PROSECUTE (INITIAL) SEARCHED

4/16 17 2017

PALM BEACH COUNTY SHERIFF'S OFFICE - SWORN STATEMENT

Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.

WITNESS  VICTIM  OTHER

CASE #:	ZONE:	SUSPECT:	DATE & TIME OF ORIGINAL EVENT/OFFENSE:
EVENT TYPE:		DEPUTY:	ID#:

COMPLETE EVERYTHING BELOW - PRINT LEGIBLY

LAST NAME:	FIRST NAME:	MIDDLE INITIAL:	RACE:	SEX:
DATE OF BIRTH: (MM/DD/YYYY)	YOUR HEIGHT:	YOUR WEIGHT:	YOUR HAIR COLOR:	YOUR EYE COLOR:
YOUR HOME ADDRESS:	<input type="checkbox"/> CHECK IF HOMELESS	CITY:	STATE:	ZIP:
YOUR WORK NAME & ADDRESS:	<input type="checkbox"/> CHECK IF UNEMPLOYED OR RETIRED	CITY:	STATE:	ZIP:
WORK PHONE: <input type="checkbox"/> CHECK IF NONE ( )	CELL PHONE: <input type="checkbox"/> CHECK IF NONE ( )	HOME PHONE: <input type="checkbox"/> CHECK IF NONE ( )	EMAIL:	<input type="checkbox"/> CHECK IF NONE

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL - PRINT LEGIBLY

I	YOUR NAME:	DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...
<p>He made a reckless turn. Almost flipping the van. He was driving at a high speed. We pulled on the side of him to let him know he hit us he proceeded to look front back facing without looking at us.</p>		
<p> </p>		

SCANNED

AUG 17 2017

PAGE 2 OF 2

READ AND SIGN

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:

YOUR SIGNATURE: X

DEPUTY SHERIFF  NOTARY PUBLIC FSS: 117.10  
SWORN TO AND SUBSCRIBED BEFORE ME TODAY:  
DATE: 9/3/17 TIME: 2115  
SIGNATURE: \_\_\_\_\_ ID: \_\_\_\_\_

IF YOU DO NOT WISH TO PROSECUTE, COMPLETE THE ABOVE STATEMENT, READ THIS DISCLAIMER AND INITIAL BELOW: I AM OF LEGAL AGE AND I AM THE REPORTED VICTIM OF A CRIME UNDER FLORIDA LAW. I HEREBY STATE THAT I WILL NOT COOPERATE ANY FURTHER WITH THE INVESTIGATION OF THE ALLEGED CRIME. I FURTHER RELEASE THE PALM BEACH COUNTY SHERIFF'S OFFICE OF ANY PRESENT OR FUTURE RESPONSIBILITY AS TO MY CASE. I ACKNOWLEDGE THAT I UNDERSTAND MY RIGHTS AS A CRIME VICTIM, PARTICULARLY REGARDING VICTIM COMPENSATION ELIGIBILITY, WHICH INCLUDES SUCH BENEFITS AS REIMBURSEMENT FOR: DISABILITY; LOST WAGES; LOSS OF SUPPORT; MEDICAL, DENTAL, MENTAL HEALTH COUNSELING AND FUNERAL EXPENSES. I AM AWARE I MAY BE GIVING UP THESE RIGHTS FOR MY FAMILY AND MYSELF BY INITIALLING BELOW. I AM TAKING THIS POSITION OF MY OWN FREE WILL KNOWING THAT THE CASE CAN ONLY BE FURTHER INVESTIGATED AND PROSECUTED WITH MY COOPERATION.

DO NOT WISH TO PROSECUTE (INITIAL \_\_\_\_\_)

(PROSECUTION WAIVER NOT TO BE USED FOR CASES INVOLVING DOMESTIC OR DATING VIOLENCE PER G.O. 508.00)

WHITE - RECORDS COPY CANARY - STATE ATTORNEY COPY PINK - OFFICER'S COPY GOLD - WITNESS / VICTIM COPY

# WITNESS LIST

CASE NUMBER: 17-114438

ARRESTING OFFICER: INV E. K. WHITE

ADDRESS: HQ

PHONE NUMBERS (HOME): \_\_\_\_\_ (WORK) 561 688 3000

CAN TESTIFY TO: FACTS

NAME: D/S JON ALVAREZ

ADDRESS: DIST 6

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) 561 688 3000

CAN TESTIFY TO: OBSERVING THE VEHICLE IN MOTION LEAVING AN AREA AT A HIGH RATE OF SPEED

NAME: KESHIA COX

ADDRESS 4793 VIA BARI LAKE WORTH FL 33463

PHONE NUMBERS (HOME) 561 631 2458 (WORK) \_\_\_\_\_

CAN TESTIFY TO: FACTS

NAME: DEANDRA JERKINES

ADDRESS 4793 VIA BARI LAKE WORTH FL 33463

PHONE NUMBERS (HOME) 0 (WORK) 0

CAN TESTIFY TO: FACTS

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

**SCANNED**

**AUG 17 2017**

# TESTING FACILITY TASK REPORT

AGENCY: PBSO-WHITE

SUBJECT: GALVIN, LAWRENCE M

CASE NUMBER: 17-114438

DATE: Aug 13, 2017

VIDEO DVD NUMBER: 63202

BEGINNING TIME: 2235

ENDING TIME: 2238

BREATH TESTS RESULTS: 1) REF TIME 2237 A.M.  P.M.  2) XX TIME XX A.M.  P.M.   
3) XX TIME XX A.M.  P.M.  4) XX TIME XX A.M.  P.M.

BREATH OPERATOR: J Biggs# 7607

MAINTENANCE TECHNICAN: D/S J Karklecke #6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH: DELIBERATE, SOMEWHAT SLURRED

ATTITUDE: COOPERATIVE

CLOTHING: GRAY SHIRT, BLACK SHORTS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

## OTHER:

EYES GLASSY, RED  
ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE ON SUBJECT

---

## COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 2215  
SUBJECT REFUSED THE TEST INITIALLY  
IMPLIED CONSENT WAS READ TO SUBJECT  
SUBJECT REFUSED THE TEST ONCE AGAIN  
MIRANDA WAS READ  
SUBJECT REFUSED QUESTIONS

SCANNED  
AUG 17 2017

**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 D/S WHITE of the PBSO.

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) Read on Camera

**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**

**AUG 17 2017**

SUSPECT'S SIGNATURE: (X) Read on Camera

## 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? \_\_\_\_\_

SCANNED

AUG 17 2017

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: JAN. E. K. WHITE

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL

0047

Server: JUSTIN V

08/13/17 20:27, Swiped

Rec: 76

T: 998 Term: 4

LAKESIDE ANCHOR INN  
2412 FLORAL ROAD  
LANTANA, FL 33462  
(561)868-5900  
MERCHANT #:

CARD TYPE                    ACCOUNT NUMBER  
MASTER CARD                XXXXXXXXXX  
Name: LAWRENCE GALVIN  
00 TRANSACTION APPROVED  
AUTHORIZATION #: 02237Z  
Reference: 0813020000047  
TRANS TYPE: Credit Card SALE

CHECK :                    31.02

TIP :

TOTAL : 35.00

X \_\_\_\_\_

\*\*\*Duplicate Copy\*\*\*

CARDHOLDER WILL PAY CARD ISSUER ABOVE  
AMOUNT PURSUANT TO CARDHOLDER AGREEMENT

NOT A CERTIFIED COPY

SCANNED

AUG 17 2017



Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.

WITNESS  VICTIM  OTHER

CASE #:	17-114438	ZONE:	SUSPECT:	DATE & TIME OF ORIGINAL EVENT/OFFENSE:	8/13/17 2041
EVENT TYPE:		DEPUTY:		ID#:	

COMPLETE EVERYTHING BELOW - PRINT LEGIBLY

LAST NAME:	FIRST NAME:	MIDDLE INITIAL:	RACE:	SEX:	
Cox	Keshia	V	B	F	
DATE OF BIRTH: (MM/DD/YYYY)	YOUR HEIGHT:	YOUR WEIGHT:	YOUR HAIR COLOR:	YOUR EYE COLOR:	
03/15/1990	5'2	125	Black	Brown	
YOUR HOME ADDRESS:	<input type="checkbox"/> CHECK IF HOMELESS		CITY:	STATE:	ZIP:
2793 Via Bari			Lake Worth	FL	33463
YOUR WORK NAME & ADDRESS:	<input type="checkbox"/> CHECK IF UNEMPLOYED OR RETIRED		CITY:	STATE:	ZIP:
WORK PHONE: <input type="checkbox"/> CHECK IF NONE	CELL PHONE: <input type="checkbox"/> CHECK IF NONE	HOME PHONE: <input type="checkbox"/> CHECK IF NONE	EMAIL: <input type="checkbox"/> CHECK IF NONE	Keshia.Cox80@yahoo.com	
WORK PHONE: ( ) 15611 631-2458 HOME PHONE: ( )					

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL - PRINT LEGIBLY

YOUR NAME:	DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...
<p>I, Keshia Cox</p> <p>On the intersection of military <del>and before</del> and Hypoluxo the car hit our rear on the left side. We thought he would pull over to exchange information but he proceeded to drive. We then followed him into the Walmart plaza but he never slowed down. He turned out of the plaza that's when the officer pulled him over because he jumped over a curb <sup>curb</sup> to get away from us. We were trying to get his license plate number. Luckily the officer pulled him over.</p>	

PAGE 1 OF 1

READ AND SIGN

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:

YOUR SIGNATURE: X Keshia Cox

DEPUTY SHERIFF  NOTARY PUBLIC FSS: 117.10  
SWORN TO AND SUBSCRIBED BEFORE ME TODAY:  
DATE: 8/13/17 TIME: 2:15  
SIGNATURE: Deputy Sheriff ID: 17620

IF YOU DO NOT WISH TO PROSECUTE, COMPLETE THE ABOVE STATEMENT, READ THIS DISCLAIMER AND INITIAL BELOW. I AM OF LEGAL AGE AND I AM THE REPORTED VICTIM OF A CRIME UNDER FLORIDA LAW. I HEREBY STATE THAT I WILL NOT COOPERATE ANY FURTHER WITH THE INVESTIGATION OF THE ALLEGED CRIME. I FURTHER RELEASE THE PALM BEACH COUNTY SHERIFF'S OFFICE OF ANY PRESENT OR FUTURE RESPONSIBILITY AS TO MY CASE. I ACKNOWLEDGE THAT I UNDERSTAND MY RIGHTS AS A CRIME VICTIM, PARTICULARLY REGARDING VICTIM COMPENSATION ELIGIBILITY, WHICH INCLUDES SUCH BENEFITS AS REIMBURSEMENT FOR: DISABILITY; LOST WAGES; LOSS OF SUPPORT; MEDICAL, DENTAL, MENTAL HEALTH COUNSELING AND FUNERAL EXPENSES. I AM AWARE THAT I MAY WAIVE THESE RIGHTS FOR MY FAMILY AND MYSELF BY INITIALLING BELOW. I AM TAKING THIS POSITION OF MY OWN FREE WILL KNOWING THAT THE CASE CAN ONLY BE FURTHER INVESTIGATED AND PROSECUTED WITH MY COOPERATION.

(PROSECUTION WAIVER NOT TO BE USED FOR CASES INVOLVING DOMESTIC OR DATING VIOLENCE PER G.O. 508.00)

DO NOT WISH TO PROSECUTE Deputy Sheriff AUG 17 2017

SCANNED AUG 17 2017

WHITE - RECORDS COPY CANARY - STATE ATTORNEY COPY PINK - OFFICER'S COPY GOLD - WITNESS / VICTIM COPY



Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.

WITNESS  VICTIM  OTHER

CASE #:	ZONE:	SUSPECT:	DATE & TIME OF ORIGINAL EVENT/OFFENSE:
EVENT TYPE:	DEPUTY:		ID#:

**COMPLETE EVERYTHING BELOW – PRINT LEGIBLY**

LAST NAME:	FIRST NAME:			MIDDLE INITIAL:	RACE:	SEX:
DATE OF BIRTH: (MM/DD/YYYY)	YOUR HEIGHT:	YOUR WEIGHT:	YOUR HAIR COLOR:		YOUR EYE COLOR:	
YOUR HOME ADDRESS:		<input type="checkbox"/> CHECK IF HOMELESS		CITY:	STATE:	ZIP:
YOUR WORK NAME & ADDRESS:		<input type="checkbox"/> CHECK IF UNEMPLOYED OR RETIRED		CITY:	STATE:	ZIP:
WORK PHONE: <input type="checkbox"/> CHECK IF NONE	CELL PHONE: <input type="checkbox"/> CHECK IF NONE	HOME PHONE: <input type="checkbox"/> CHECK IF NONE	EMAIL: <input type="checkbox"/> CHECK IF NONE			

**WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL – PRINT LEGIBLY**

I	YOUR NAME:	DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...
<p>He made a reckless turn. Almost flipping the van. He was driving at a high speed. We pulled on the side of him to let him know we hit us he proceeded to look front <del>back</del> facing without looking at us.</p>		

PAGE 2 OF 2

**READ AND SIGN**

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED  
STATEMENTS ARE CORRECT AND TRUE:

DEPUTY SHERIFF       NOTARY PUBLIC      FSS: 117.10

FSS: 117.10

NOTARY PUBLIC

SWORN TO AND SUBSCRIBED BEFORE ME TODAY:

DATE: 8/3/17

TIME: 2115

SIGNATURE: \_\_\_\_\_ ID: \_\_\_\_\_

YOUR SIGNATURE: X

**THIS DISCLAIMER AND INITIAL BELOW: I AM OF LEGAL AGE AND I AM THE**

**IF YOU DO NOT WISH TO PROSECUTE, COMPLETE THE ABOVE STATEMENT, READ THIS DISCLAIMER AND INITIAL BELOW: I AM OF LEGAL AGE AND I AM THE REPORTED VICTIM OF A CRIME UNDER FLORIDA LAW. I HEREBY STATE THAT I WILL NOT COOPERATE ANY FURTHER WITH THE INVESTIGATION OF THE ALLEGED CRIME. I FURTHER RELEASE THE PALM BEACH COUNTY SHERIFF'S OFFICE OF ANY PRESENT OR FUTURE RESPONSIBILITY AS TO MY CASE. I ACKNOWLEDGE THAT I UNDERSTAND MY RIGHTS AS A CRIME VICTIM, PARTICULARLY REGARDING VICTIM COMPENSATION ELIGIBILITY, WHICH INCLUDES SUCH BENEFITS AS REIMBURSEMENT FOR: DISABILITY; LOST WAGES; LOSS OF SUPPORT; MEDICAL, DENTAL, MENTAL HEALTH COUNSELING AND FUNERAL EXPENSES. I AM AWARE THAT BY CHECKING UP THESE RIGHTS FOR MY FAMILY AND MYSELF BY INITIALLY SCANNED AND SIGNING UP THESE**

**(PROSECUTION WAIVER NOT TO BE USED FOR CASES INVOLVING DOMESTIC OR DATING VIOLENCE PER G.O. 508.00)**

THAT THE CASE CAN ONLY  
TO PROSECUTE (INITIAL —  
AIE 17 2017

ION WAIVER NOT TO BE USED FOR CASES INVOLVING DOMESTIC OR CRIMINAL VIOLENCE. FILE G.S. 50-5.5.



Operations of a non-bank financial institution subject to any solvency test required by law.

NOT A CERTIFICATE

SCANNED  
AUG 17 2017