

0490376		1		1761 17CT 14603	
OBTS Number		ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	
Agency ORI Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N.T.A.'s only) 3, 2   2017-011015	
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) 999 S DIXIE HWY		Location of Offense (Business Name, Address) 999 S DIXIE HWY, BOCA RATON, FL 33432			
Date of Arrest 08/06/2017	Time of Arrest 22:13	Booking Date 08/06/2017	Booking Time 22:23	Jail Date 08/06/2017	Jail Time 22:25
Name (Last, First, Middle) PERRY, MARK CHRISTOPHER		Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White B - Black O - Oriental/Asian W		Sex M	Date of Birth 12/28/1972	Height 5'11	Weight 189
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status M	Religion NONE	Eye Color BLUE	Hair Color BLONDE
Local Address (Street, Apt. Number) 9777 MAJESTIC WAY, BOYNTON BEACH, FL 33437		(City)	(State)	(Zip)	Complexion LIGHT
Permanent Address (Street, Apt. Number) 9777 MAJESTIC WAY, BOYNTON BEACH, FL 33437		(City)	(State)	(Zip)	Build Medium
Business Address (Name, Street) FLORIDA CRYSTAL, 1 CLEMATIS ST WEST PALM BEACH		(City)	(State)	(Zip)	Indication of: Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
D/L Number, State P600543724680 / FL		Soc. Sec. Number	INS Number	Place of Birth (City, State) AUGUSTA, GA	Residence Type: 1. City 2. County 3. Florida 4. Out of State 2
Citizenship US		Occupation Senior Buyer			
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
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian		Name (Last, First, Middle)			
Address (Street, Apt. Number)		(City)	(State)	(Zip)	Residence Phone
Notified by: (Name)		Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated	
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	
Drug Activity S. Sell N. N/A P. Possess		S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Disperse/ Distribute	M. Manufacture/ Produce/ Cultivate
Charge Description DUI - PROPERTY DAMAGE/ INJURY TO PROPERTY OR PERSON ENHANCED		Statute Violation Number 316.193(3C1)		Violation of ORD #	
Drug Activity N		Drug Type N	Amount / Unit /	Offense # 2017-011015	Counts 1
Charge Description		Statute Violation Number		Violation of ORD #	
Drug Activity		Drug Type	Amount / Unit	Offense #	Counts
Charge Description		Statute Violation Number		Violation of ORD #	
Drug Activity		Drug Type	Amount / Unit	Offense #	Counts
Health / Apparent Physical Condition of Defendant GOOD		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			
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		PROPERTY - Received By LIMA		Released By LIMA	
Transported By C. Desr 712		Date Transported 8-7-17	Time Transported	Released To	
<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 33442		Court Date and Time 09/11/2017 08:30:00	
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) X Mark			
HOLD for Other Agency		Signature of Arresting Officer 795		Name Verification (Printed by Arrestee) E 0239 Jmw	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		Name of Arresting Officer (Print) LIMA, ALFREDO		(PRINT)	
Intake Deputy SPANN 8101		Transporting Officer C Desr 712		I.D. # 795	
Pouch #		Agency BOCA		Witness here if subject signed with an "X".	
				PAGE 1 OF 1	

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE	N
A D M I N I S T R A T I V E	Agency ORI Number <b>FL 0500200</b>		Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>			Agency Report Number <b>3   2   2017-011015</b>				
	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:						
D E F	Name (Last, First, Middle) <b>PERRY, MARK CHRISTOPHER</b>						Race <b>W</b>		Sex <b>M</b>	Date of Birth <b>12/28/1972</b>
	Alias									
C H A R G E S	Charge Description <b>316.193(3C1) DUI- PROPERTY DAMAGE/ INJURY TO PROPERTY</b>			Charge Description						
	Charge Description			Charge Description						
V I C T I M	Victim's Name (Last, First, Middle) <b>STATE OF FLORIDA,</b>						Race		Sex	Date of Birth
	Local Address (Street, Apt. Number) (City) (State) (Zip) <b>100 NW 2ND AVE, BOCA RATON, FL 33432</b>						Phone <b>(561) -</b>		Address Source	
	Business Address (Name, Street) (City) (State) (Zip)						Phone <b>(56) -</b>		Occupation	
<p>The undersigned certifies and swears that he/she has just and resonable 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.           <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.         </p> <p> <input type="checkbox"/> confessed to _____ admitting to the below facts.           <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.         </p> <p>On the <b>6</b> day of <b>August</b>, <b>2017</b> at <b>22:13</b> (Specifically include facts constituting cause for arrest.)</p> <p>On 08/06/2017, at approximately 2200 hours, I responded to the area of 999 S Dixie Hwy in reference to a traffic accident.</p> <p>Upon my arrival I met with Ofc. McCabe who advised one of the drivers involved in the crash, Mark Perry, may be under the influence of alcohol. I walked over to Perry's vehicle, a blue Ford F150 bearing FL tag 473JTK, and began speaking with him. Perry's eyes appeared to be only half open, and were very glossy. While speaking, Perry's speech was slurred on multiple occasions. I asked Perry if he was ok following the crash. Perry stated he was fine and stated he misjudged the light, causing the accident. While speaking with Perry, he stated he was travelling home from Delray Beach. Perry stated he lived in Boynton Beach but felt as though he was lost. I asked Perry which city he was in, to which he replied West Palm Beach.</p> <p>While speaking with Perry, Ofc. McCabe informed me he had completed his accident investigation. I then informed Perry that the accident investigation was completed and informed him I would now be conducting a DUI investigation. I then read Perry his Miranda Rights from my preprinted department issued Constitutional Warning Card. Perry advised he understood his rights and stated he was willing to speak with me. I asked Perry to walk with me to the front of my patrol vehicle. When stopping in front of my patrol vehicle, Perry lost his balance. I asked Perry where he was coming from, to which Perry stated Delray Beach. Perry advised he was on his way home to Boynton Beach. Perry was unable to remember the name of the restaurant he was at earlier. I again asked Perry what city he was currently in, to which he replied Delray Beach (he earlier stated West Palm Beach). I asked Perry how much he had to drink tonight, to which Perry stated he drank two beers. When asked what size beers, Perry stated they were normal size and advised they were both IPAs. Perry stated he had his first drink around 3 hours ago and had his last drink about an hour ago. I asked Perry what he had eaten, to which he replied a Chicken Quesadilla. I then asked Perry if he would consent to voluntary</p>										
A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME									
	<b>PATTERSON, MARC P</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 17.10)					 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER				
	<b>08/06/2017</b> DATE					<b>LIMA, ALFREDO (795)</b> NAME OF OFFICER (PLEASE PRINT)				
						<b>08/06/2017</b> DATE				
PAGE <b>1 OF 3</b>										

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

**PROBABLE CAUSE AFFIDAVIT  
SUPPLEMENT**

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

**1** JUVENILE

A D M I N I S T R A T I V E	OBTS Number		Agency ORI Number <b>FL 0500200</b>		Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>		Agency Report Number <b>3   2   2017-011015</b>		
	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) <b>PERRY, MARK CHRISTOPHER</b>					Alias		Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>12/28/1972</b>

roadside sobriety tasks, to which Perry agreed. I asked Perry if he had any medical conditions that would affect his ability to perform the tasks, to which he stated no.

I then gave Perry the instructions and demonstrated the first roadside sobriety task, which was the Walk and Turn. Perry stated he understood all the instructions, but failed to maintain the proper starting position during my instructions. Perry began the task before being told to do so. While performing the task, Perry lost his balance on his first step and missed heel to toe on several other steps. Perry took too many steps on both the first and second walk, he also did not turn around properly. Perry also paused for a few seconds and looked at me before taking the second 9 steps. Perry did not count any of the steps out loud.

I then gave Perry the instructions for the One Leg Stand and demonstrated. As I began to explain the task, Perry stated he has tumors on the bottom of his feet. I told Perry he would not have to perform the task, but Perry repeatedly stated he wanted to perform the task. Perry did not maintain the starting position while I read the instructions. During the task, Perry started too soon and put his foot down several times. At one point, Perry put his foot down and did not pick it back up until told to do so. Perry did not count out loud at all.

I gave Perry the instructions for and demonstrated the Finger to Nose task. Perry indicated he understood the instructions. While performing the task, Perry held his finger to his nose for several seconds, until told to put his hand back down. Perry did this multiple times.

I then gave Perry the instructions for the Rhomberg with Recitation. I asked Perry for his current level of education and if she was familiar with the English Alphabet. Perry stated he has an associate's degree and knows the English alphabet. Perry then began the task. During the task Perry repeated several letters twice and on multiple occasions jumped back to the letter "H."

Ofc. Van Camp then performed the Horizontal Gaze Nystagmus with Perry. Perry was initially unable to follow Ofc. Van Camp's directions. There was a lack of smooth pursuit in both of Perry's eyes. There was distinct and sustained nystagmus at maximum deviation in both of Perry's eyes. The onset of the nystagmus was before 45 degrees in both of Perry's eyes.

Based on my observations and investigation, I took Perry into my custody and transported him to BRPD booking.

Ofc. Van Camp acted as my Breath Test Operator. Ofc. Van Camp and I conducted the 20 minute observation and then took Perry into the BAT room. Perry consented to the breath test. Perry's first B.A.C. reading was .189 and the second was .190. I read Perry his

SWORN AND SUBSCRIBED BEFORE ME

**PATTERSON, MARC P**

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 147.10)

**08/06/2017**

DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

**LIMA, ALFREDO (795)**

NAME OF OFFICER (PLEASE PRINT)

**08/06/2017**

DATE

PAGE

**2 OF 3**

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		Name (Last, First, Middle) <b>PERRY, MARK CHRISTOPHER</b>		Alias		Race <b>W</b>		Sex <b>M</b>		Date of Birth <b>12/28/1972</b>			
		<p>Constitutional Warnings but Perry stated he did not wish to answer any questions. While still in the BAT room, Perry asked what his B.A.C. was and stated it should be ok because he only had 3 beers (earlier he stated 2 beers).</p> <p>Mark Perry was charged under F.S.S. 316.193(1) for DUI. The video footage and was submitted into BRPD evidence. Perry was taken to Boca Raton ER for medical clearance and then turned over to Palm Beach County Jail. Perry's Vehicle was towed from the scene by Emerald Towing.</p>											
		<p>NOT A CERTIFIED COPY</p>											
		<p>SWORN AND SUBSCRIBED BEFORE ME</p> <p><b>PATTERSON, MARC P</b> <i>MP/6/17</i> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p><b>08/06/2017</b> DATE</p> <p><i>[Signature]</i> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p><b>LIMA, ALFREDO (795)</b> NAME OF OFFICER (PLEASE PRINT)</p> <p><b>08/06/2017</b> DATE</p> <p>PAGE <b>3 OF 3</b></p>											

FLORIDA DEPARTMENT OF LAW ENFORCEMENT  
ALCOHOL TESTING PROGRAM  
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000  
Instrument Registered To: BOCA RATON PD  
Instrument Serial Number: 80-006622 Software: 8100.27  
Date of Test: 08/06/2017

Date of Last Agency Inspection: 07/21/2017

Observation Period Began: 22:24

Subject's Name: MARK C PERRY

DOB: 12/28/1972 Sex: M

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:	Test	g/210L	Time
	Diagnostics Check	OK	22:46
	Air Blank	0.000	22:47
	Control Test	0.078	22:47
	Air Blank	0.000	22:48
	Subject Sample #1	0.189	22:49
	Air Blank	0.000	22:50
	Air Blank	0.000	22:51
	Subject Sample #2	0.190	22:52
	Air Blank	0.000	22:53
	Control Test	0.078	22:53
	Air Blank	0.000	22:54
	Diagnostics Check	OK	22:54

Cylinder Lot: 20016080A1

Exp: 09/05/2018

State of Florida, County of Palm Beach.

Personally appeared before me the undersigned authority, who ( ) is personally known to me or ( ) produced FLDL as identification, and who after being placed under oath, states:

I JERRY A VAN CAMP, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: [Signature]

Signature

Date: 8-6-17

Sworn to (or affirmed) before me this 6 day of August, 2017

Signature of Notary Public-State of Florida

Printed Name of Notary Public-State of Florida

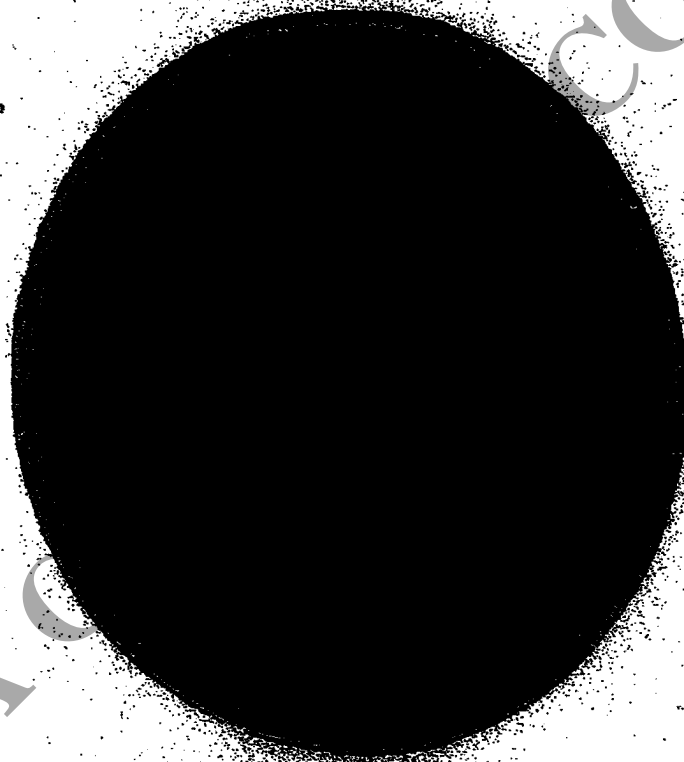
Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

2017-11-13

Observation - 2224

Perry, Mark

# **D. U. I. INFLUENCE REPORT**



**Boca Raton Police Services Department  
100 Northwest Second Avenue  
Boca Raton, Florida 33432**

WITNESS LIST

ARRESTING OFFICER: Lims

Name: Off. McCabe Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

Address: \_\_\_\_\_

Can testify to: \_\_\_\_\_

Name: Off. VanCamp Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

Address: \_\_\_\_\_

Can testify to: \_\_\_\_\_

Name: \_\_\_\_\_ Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

Address: \_\_\_\_\_

Can testify to: \_\_\_\_\_

Name: \_\_\_\_\_ Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

Address: \_\_\_\_\_

Can testify to: \_\_\_\_\_

Name: \_\_\_\_\_ Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

Address: \_\_\_\_\_

Can testify to: \_\_\_\_\_

Name: \_\_\_\_\_ Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

Address: \_\_\_\_\_

Can testify to: \_\_\_\_\_

Name: \_\_\_\_\_ Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

Address: \_\_\_\_\_

Can testify to: \_\_\_\_\_

BOCA RATON POLICE DEPARTMENT

Agency Case# 2017-11015

PART II D.U.I. REPORT  
To be filled out at testing facility

I. INTRODUCTION

(Instrument Operator faces video camera)

A. The day is: Sunday, August, 6<sup>th</sup>, 2017  
(day) (month) (date) (year)

B. The time is now approximately 6:46 AM/PM

C. The following is in reference to case number 2017-11015

D. Present at this time is Lima / Van Camp of the Boca Raton Police  
Department. (Officer's Name)

E. Officer Lima, Have you arrested Mark Perry  
(Defendant's name)

In violation of Florida State Statute 316.193?

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

G. Mr./Mrs./Ms. Perry, I am required to  
Inform you these proceedings are being video taped.

Operator Note: Video tape breath request, breath sample, and interview

Agency Case # 17-11615

**ADULT CONSTITUTIONAL WARNINGS**  
(Juvenile warning on reverse side)

"I am required to warn you before you make any statement that you have the following 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 the right to the presence of a lawyer 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 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.

**DO YOU UNDERSTAND THESE RIGHTS AS I HAVE READ THEM TO YOU AND DO YOU WISH TO SPEAK TO ME?**

(X) No

**QUESTIONS AND ANSWERS**

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

Where were you going? \_\_\_\_\_

What street or highway were you on? \_\_\_\_\_

Direction of travel? \_\_\_\_\_

Where did you start driving from? \_\_\_\_\_

What City (County) were you stopped in? \_\_\_\_\_

What time did you start? \_\_\_\_\_ AM/PM What time is it now \_\_\_\_\_

What is today's date? \_\_\_\_\_ What day of the week is it? \_\_\_\_\_

Agency Case # 297-11015**H. 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.***2.**

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: \_\_\_\_\_

**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.

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 \_\_\_\_\_ (Month) \_\_\_\_\_ (Day) \_\_\_\_\_ (Year) and the time \_\_\_\_\_ AM/PM

A refusal form will be completed by the arresting officer.