

JFL 0500337

18CF 7445

ARREST / NOTICE TO APPEAR

1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capias 1 JUVENILE 0

Agency ORI Number 0501700	Agency Name Jupiter Police Department	Agency Report Number (N T A's only) 5, 4 18-003854
Charge Type Check as many as apply <input checked="" type="checkbox"/> 1 Felony <input type="checkbox"/> 2 Traffic Felony	<input checked="" type="checkbox"/> 3 Misdemeanor <input type="checkbox"/> 4 Traffic Misdemeanor	<input type="checkbox"/> 5 Ordinance <input type="checkbox"/> 6 Other
Location of Arrest (Including Name of Business) 5500 MILITARY TRL, JUPITER, FL		Location of Offense (Business Name, Address) 5500 MILITARY TRL, JUPITER, FL 33458
Date of Arrest 08/02/2018	Time of Arrest 23:49	Booking Date 08/02/2018
Booking Time 23:59	Jail Date	Jail Time
Location of Vehicle ALL HOOKED UP TOWIG		
Name (Last, First, Middle) SPRINGFIELD, MARNI FRANCES		Alias (Name, DOB, Soc Sec #, Etc.)
Race W - White B - Black O - Oriental/Asian W	Sex F	Date of Birth 12/17/1978
Height 5'04	Weight 205	Eye Color HAZEL
Hair Color BROWN	Complexion LIGHT	Build Medium
Local Address (Street, Apt. Number) 12957 LAROCHELLE CIRCLE, PALM BEACH GARDENS, FL 33410		Phone
Permanent Address (Street, Apt. Number) 12957 LAROCHELLE CIRCLE, PALM BEACH GARDENS, FL 33410		Phone
Business Address (Name, Street) DL		Occupation
D/L Number, State S165546789570 / FL	Sec. No. Number	INS Number
Place of Birth (City, State) PBG, FL		Citizenship US
Co-Defendant Name (Last, First, Middle)	Race	Sex
Date of Birth	<input type="checkbox"/> Arrested	<input type="checkbox"/> Felony
<input type="checkbox"/> Juvenile	<input type="checkbox"/> 2 At Large	<input type="checkbox"/> 4 Misdemeanor
Co-Defendant Name (Last, First, Middle)	Race	Sex
Date of Birth	<input type="checkbox"/> Arrested	<input type="checkbox"/> Felony
<input type="checkbox"/> Juvenile	<input type="checkbox"/> 2 At Large	<input type="checkbox"/> 4 Misdemeanor
<input type="checkbox"/> Parent <input type="checkbox"/> Other <input type="checkbox"/> Legal Custodian	Name (Last, First, Middle)	
Address (Street, Apt. Number)		(City) (State) (Zip)
Notified by (Name)	Date	Time
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	Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Description of Property
Value of Property	Drug Acctn by N N/A P Posses	S Sell B Buy T Traffic
R Seuggle 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 Synthetic	U Unknown Z Other
Charge Description DRUGS - CONTROLLED SUBST W/O PRESCRIPTION (INFLUENZA) K	Statute Violation Number 893.13(6)(A)	Violation of ORD # 3000.00
Drug Activity	Drug Type	Amount / Unit
Offense #	Counts	Domestic Violence
Warrant / Capias Number	Bond	
Charge Description DRUGS - POSSESS MARIJUANA NOT MORE THAN 20 GRAMS	Statute Violation Number 893.13(6)(B)	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit
Offense #	Counts	Domestic Violence
Warrant / Capias Number	Bond CR	
Charge Description DRUGS - POSSESS AND/OR USE DRUG PARAPHERNALIA	Statute Violation Number 893.147(1)	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit
Offense #	Counts	Domestic Violence
Warrant / Capias Number	Bond OR	
Health / Apparent Physical Condition of Defendant		Any knowledge of the following <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Defamation <input type="checkbox"/> Injuries
Check which applies <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. Court, Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health		PROPERTY - Received By
Released By	Released To	
Transported By	Date Transported	Time Transported
Other		
<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)	
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	Signature of Arresting Officer A. BORROWS	Name Verification (Printed by Arrestee) B
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other	Name of Arresting Officer (Print) BORROWS, ANDREW	ID # 1138
Issue Deputy D S Collins 7022	Transporting Officer A BORROWS	ID # 380
Pouch #	Agency JPD	Witness here if subject signed with an "X"

AGENCY CENTRAL RECORDS JAIL CRIME ANALYSIS P.L.O. DEFENDANT

3629

AUG 3 2018

2018 AUG - 3 AM 6: No Photo Available

**ARREST / NOTICE TO APPEAR
Additional Charge List**

Agency ORI Number 0501700		Agency Name Jupiter Police Department			Agency Report Number (N.T.A.'s only) 5, 4 18-003854						
C O D E	Drug Activity	S Sell	R Smuggle	K Dispense/ Distribute	M Manufacture/ Produce/ Cultivate	Z Other	Drug Type	B Barbiturate	H Hallucinogen	P Paraphernalia/ Equipment	U Unknown
	N N/A	B Buy	D Deliver				N N/A	C Cocaine	M Marijuana	Z Other	
	P Possess	T Traffic	E Use				A Amphetamine	E Heroin	O Opium/Deeriv	S Synthetic	
C H A R G E S	Charge Description DUI - DRIVING WHILE UNDER INFLUENCE							Statute Violation Number 316.193(1)		Violation of ORD #	
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capas Number	Bond		CK	
			/		1	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N					

NOT A CERTIFIED COPY

PROBABLE CAUSE AFFIDAVIT

1 Arrest
2 NTA
3 Request for Warrant
4 Request for Capas

1 JUVENILE

OBTS Number	Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT	Agency Report Number 5 4 18-003854
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Charge Type Check as many as apply	<input checked="" type="checkbox"/> 1 Felony	<input checked="" type="checkbox"/> 3 Misdemeanor	<input type="checkbox"/> 5 Ordinance	Special Notes
	<input type="checkbox"/> 2 Traffic Felony	<input checked="" type="checkbox"/> 4 Traffic Misdemeanor	<input type="checkbox"/> 6 Other	

Name (Last, First, Middle) SPRINGFIELD, MARNI FRANCES	Alias	Race W	Sex F	Date of Birth 12/17/1978
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Charge Description DUI DRIVING UNDER THE INFLUENCE	Charge Description POSSESSION OF HASH OIL
Charge Description POSSESSION OF MARIJUANA UNDER 20	Charge Description POSSESSION OF DRUG PARAPHERNALIA

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 2 day of August, 2018 at 23:24 (Specifically include facts constituting cause for arrest.)

On the above date at approximately 2324 hours, I responded to the area of 5500 Military Trail in reference to a suspicious person, in the Town of Jupiter, Palm Beach County, Florida.

The manager of the Starbucks, known only as "Joe" at this time, at this location reported a vehicle driving recklessly in the parking lot before stopping near the front of the store with its flashers on. The driver was then reportedly slumped behind the wheel.

Police Officer First Class Kimbark and Officer Matonti were the first on scene. Both verbally advised me that they approached the vehicle and made contact with the driver, Marni Springfield. Springfield started the car a short time after they arrived or as they approached her. Springfield appeared to be intoxicated, with slurred speech and bloodshot, glassy eyes. Springfield's vehicle was damaged, with its front driver's side tire flat and partially off the rim.

Upon my arrival, I made arrangements to conduct a DUI investigation. All officers on scene left the area except for Officer Fandrey. I walked up to the vehicle, a 2012 Nissan bearing Florida license plate Z63DFD, and had Springfield exit. I saw the damage to the front driver's side tire. Springfield was in the driver's seat with the engine running. I later found the key-fob to the vehicle was on Springfield's purse, which she was wearing over her shoulder. I noted that Springfield had bloodshot, glassy eyes and that her speech was slurred. I could smell the odor of an unknown alcoholic beverage on Springfield's breath. Springfield seemed to trail off while speaking and had a difficult time holding a normal conversation.

I advised Springfield that I was conducting a DUI investigation. Springfield agreed to complete SFSTs. I conducted the full battery of tasks. For specifics, please see the

SWORN AND SUBSCRIBED BEFORE ME	
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 118) Saphantha Palmer My Commission GG 233762 Expires 10/26/2022	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER BORROWS, ANDREW (1138) NAME OF OFFICER (PLEASE PRINT)
DATE 08/03/2018	DATE 08/03/2018

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

1 Arrest
2 NTA
3 Request for Warrant
4 Request for Capias

1

JUVENILE

QETS Number	Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT	Agency Report Number 5 4 18-003854
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Change Type: Check as many as apply	<input checked="" type="checkbox"/> 1 Felony	<input checked="" type="checkbox"/> 3 Misdemeanor	<input type="checkbox"/> 5 Ordinance	Special Notes
	<input type="checkbox"/> 2 Traffic Felony	<input checked="" type="checkbox"/> 4 Traffic Misdemeanor	<input type="checkbox"/> 6 Other	

Name (Last, First, Middle) SPRINGFIELD, MARNI FRANCES	Alias	Race W	Sex F	Date of Birth 12/17/1978
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forthcoming roadside tasks affidavit, which will be completed when I have had the opportunity to fully review all video associated with this case. I am a certified Drug Recognition Expert and noted all six standardized clues of Horizontal Gaze Nystagmus. I observed multiple other clues during the roadside tasks that led me to establish probable cause for Springfield's arrest for DUI.

I placed Springfield under arrest for DUI. I advised Springfield and secured her in handcuffs which I checked for spacing and double locked. I secured Springfield in the rear of my patrol car and placed Springfield in the seatbelt. I then searched Springfield's vehicle. Springfield is the sole registered owner of the vehicle. In the center console, I located a small bag with loose marijuana. I also located a "vape" pen with an oily substance inside, along with cigarette papers. I seized the items.

I transported Springfield to the Palm Beach County Breath Alcohol Testing Facility, where I conducted a 20 minute observation period. During transport, Springfield appeared to fall asleep in the seat. I requested Springfield provide a sample of her breath. She refused. I read Springfield Implied Consent from a prepared text, which Springfield indicated that she understood. Springfield again refused to provide a sample of her breath. Springfield refused to answer questions post Miranda.

I secured Springfield in a holding cell while I completed my paperwork. Shortly after this, Springfield began to vomit in the toilet in the cell.

I tested a sample of the oil from the vape pen, which reacted positively for the presence of THC, the main ingredient in marijuana. I also tested a small sample of the loose marijuana, which also reacted positively to the presence of THC.

I then booked Springfield into the Palm Beach County Jail, where I charged her with DUI per FSS 316.193(1), Possession of Hash Oil per FSS 893.13(6) (A), Possession of Marijuana under 20 grams per FSS 893.13(6) (B), and Possession of Drug Paraphernalia per FSS 893.147(1).

My on scene investigation was captured on my issued body worn camera.
Springfield was subdued and cooperative during my investigation.

SWORN AND SUBSCRIBED BEFORE ME	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <i>[Signature]</i>
NOTARY PUBLIC / CLERK OF COURT / OFFICER (Notary Seal) Notary Public State of Florida Samantha Palmer My Commission GG 233762 Expires 10/26/2022	NAME OF OFFICER (PLEASE PRINT) BORROWS, ANDREW (1138) DATE 08/03/2018
DATE 08/03/2018	DATE 08/03/2018

SUBJECT: _____ CASE NUMBER: _____

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? _____

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: _____

SUBJECT: _____ CASE NUMBER: _____ 41

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.

-OR-

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances.

-OR-

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence of chemical or controlled substances.

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

I am _____ of the _____

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X) _____

CONSTITUTIONAL WARNINGS

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

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X) _____

TESTING FACILITY TASK REPORT

AGENCY: JPD/BORROWS

SUBJECT: SPRINGFIELD, MARNI

CASE NUMBER: 18-104680

DATE: Aug 3, 2018

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0044

ENDING TIME: 0047

BREATH TESTS RESULTS: 1) R TIME 0046 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: S. PALMER #24520

MAINTENANCE TECHNICAN: J Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLOW

ATTITUDE: QUIET, CALM

CLOTHING: BLACK DRESS, BLACK SANDALS

MEDICAL CONDITIONS: ANXIETY

MEDICATIONS: ZOLOFT

OTHER:

EYES GLASSY AND BLOODSHOT, ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0020
SUBJECT REFUSED TO TAKE BREATH TEST
A/O READ I/C
SUBJECT STATED SHE UNDERSTOOD I/C
AND AGAIN REFUSED TO TAKE BREATH TEST @ 0046
A/O READ RIGHTS
SUBJECT STATED SHE UNDERSTOOD RIGHTS
AND REFUSED ANY QUESTIONING

WITNESS LIST

CASE NUMBER: 18-003854

ARRESTING OFFICER: Ofc. A. Borrows 380 / 1138

ADDRESS: 210 Military Trail, Jupiter Fl 33458

PHONE NUMBERS (HOME): _____ (WORK) 561 746 6201

CAN TESTIFY TO: PC

NAME: Officer John Matonti

ADDRESS: 210 Military Trail, Jupiter Fl 33458

PHONE NUMBERS (HOME) _____ (WORK) 561 746 6201

CAN TESTIFY TO: Supp PC

NAME: Officer Christopher Fandrey

ADDRESS 210 Military Trail, Jupiter Fl 33458

PHONE NUMBERS (HOME) _____ (WORK) 561 746 6201

CAN TESTIFY TO: Scene, tow of vehicle

NAME: PFC Scott Kimbark 367

ADDRESS 210 Military Trail, Jupiter FL 33458

PHONE NUMBERS (HOME) 0 (WORK) 561 746 6201

CAN TESTIFY TO: Initial scene/contact

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) _____

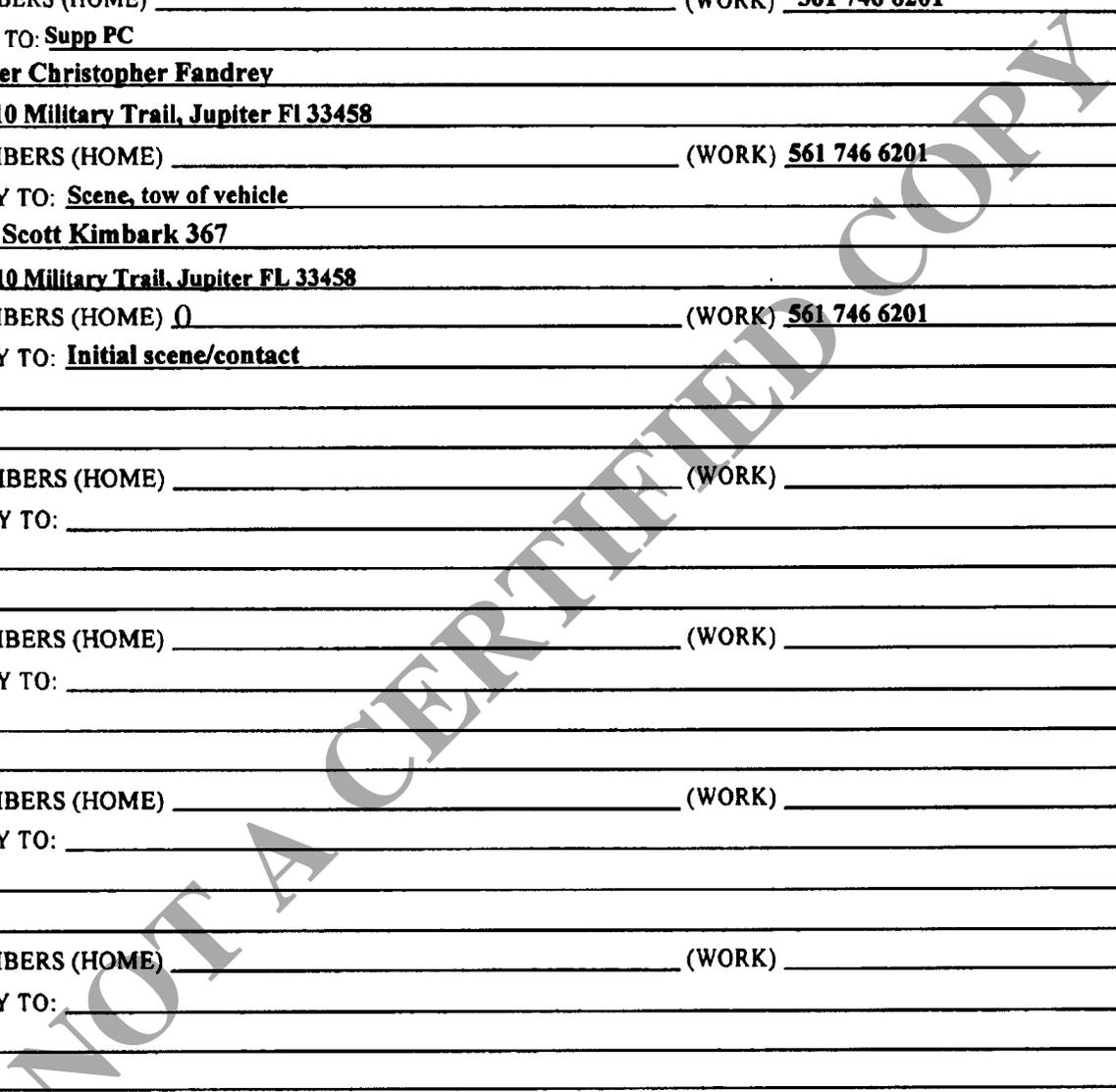
CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____



STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH AND/OR URINE TEST

I, Ofc. A. Borrows 380 / 1138, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of Jupiter Police Department, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 2nd day of August, 2018, at 2349 P.M.

DRIVER Marni Frances Springfield
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# S-165-546-78-957-0, state of Florida, was placed under lawful arrest for
the offense of DUI by Ofc. A. Borrows 380 / 1138 and
issued Citation # A9KWDNE
(Name of Arresting Officer)

That on or about the 3rd day of August, 2018, at 0046 A.M.
in PALM BEACH County,

I requested that the driver submit to a X breath and/or urine test to determine his or her blood alcohol level
and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such
test(s) would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or
for a period of eighteen (18) months if his or her driving privilege had been previously suspended for refusing to
submit to a breath, urine or blood test. I also informed the driver that he or she commits a misdemeanor by refusing
to submit to a lawful test as requested above if his or her driving privilege has been previously suspended for
refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he
or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's
License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has
previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver
refused to submit to the test(s) requested.

Signature of Law Enforcement Officer or
Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)



(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before
me this 3rd day of August, 2018,
by Ofc. A. Borrows 380 / 1138,

who is personally known to me or who has produced
PERSONALLY KNOWN as identification

Notary Public

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title

Date

Note: Mail or hand deliver to the designated
Bureau of Administrative Reviews office,
Department of Highway Safety and Motor
Vehicles, with the driver's license, the
appropriate copy of the UTC, and the
probable cause affidavit.



Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FOLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential Informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2018025718	Date: 08/03/18
	Specialist Name/ID: Stewart/5660