

OBTS Number		ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		Juvenile N	
Agency ORI Number FLO 502600		Agency Name Palm Beach Gardens Police Department		Agency Report Number (N.T.A.'s only) 78- 17004349					
Charge Type: Check as many as apply.		<input 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		Weapon Seized / Type N 1. Yes 2. No		Multiple Clearance Indicator 1			
Location of Arrest (Including Name of Business) 11264 N JOG RD PRG, FL 33410		Location of Offense (Business Name, Address) Same as Arrest 11264 N JOG RD PRG FL 33410							
Date of Arrest 07/20/2017	Time of Arrest 0441	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle KAUFFS TOWING Q			
Name (Last, First, Middle) GRAY GREGORY, MELISSA C.		Alias (Name, DOB, Soc. Sec. #, Etc.)							
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian	Sex W F	Date of Birth 05/24/1970	Height 5-05	Weight 145	Eye Color HAZEL	Hair Color BLOND	Complexion FAIR	Build SMALL	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE				Marital Status S	Religion CHRIST	Indication of Alcohol Influence Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk <input type="checkbox"/>			
Local Address (Street, Apt. Number) 1801 N FLAGLER DR APT 809		(City) WEST PALM BEACH	(State) FL	(Zip) 33407	Phone (972) 9653883		Residence Type: 1. City 2. County 3. Florida 4. Out of State 2		
Permanent Address (Street, Apt. Number) Same as Local Address					Phone () Same		Address Source DL		
Business Address (Name, Street) 3065 FORCE LANE		(City) DALLAS	(State) TX	(Zip) 75403	Phone (972) 9653883		Occupation BUSINESS OWNER		
D/L Number, State G626543706840		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) ADA, OK		Citizenship US	
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile		
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile		
Parent Name (Last)		(First)		(Middle)		Residence Phone ()			
Legal Custodian		Other:				Business Phone ()			
Address (Street, Apt. Number)		(City)		(State)		(Zip)			
Notified by: (Name)				Date	Time	Juvenile Disposition 1. Handled/processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated			
Released To: (Name)				Relationship		Date	Time		
The above address provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parents. The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)						School Attended		Grade	
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property				Value of Property			
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 Description POSSESSION OF OPEN CONTAINER		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(3)(A)		Violation of ORD # 6-8.1(C)(3)			
Drug Activity N/A		Drug Type N/A	Amount / Unit N/A	Offense #	Warrant / Capias Number		Bond OR		
Charge Description DUI		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)		Violation of ORD #			
Drug Activity N/A		Drug Type N/A	Amount / Unit N/A	Offense #	Warrant / Capias Number		Bond OR		
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond		
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond		
Location (Court, Room Number, Address) North County Courthouse 3188 PGA Blvd, Palm Beach Gardens, FL 33410									
Court Date and Time Month AUG Day 23 Year 2017 Time 10:00 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>Melissa Gray</i> Date Signed 7/20/17									
HOLD for other Agency Name:		Signature of Arresting Officer <i>[Signature]</i>		Name Verification (Printed by Arrestee) YACINTHE, W		(PRINT)			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest		<input type="checkbox"/> Suicidal <input type="checkbox"/> Other:		Name of Arresting Officer (Print) YACINTHE, W		ID # 460		PAGE	
Intake Deputy LOUIS, B.		814 #	Pouch #	Transporting Officer YACINTHE, W		ID # 460	Agency PBGPD	Witness here if subject signed with an -X-	

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PS90146 REV. 8/97

SCANNED

JUL 24 2017

0489859

2852

ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile		N	
OBTS Number		Agency ORI Number FLO 502600		Agency Name Palm Beach Gardens Police Department		Agency Report Number (N.T.A.'s only) 78- 17004349					
Charge Type: Check as many as apply.		<input 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		Weapon Seized / Type N 1. Yes 2. No		Multiple Clearance Indicator					
Location of Arrest (Including Name of Business) 11264 N JOG RD PRG, FL 33410		Location of Offense (Business Name, Address) Same as Arrest 11264 N JOG RD PRG, FL 33410		Date of Arrest 07/20/2017		Time of Arrest 0441		Booking Date		Booking Time	
Jail Date		Jail Time		Location of Vehicle KAUFFS TOWING Q							
Name (Last, First, Middle) GRAY GREGORY, MELISSA C.											
Alias (Name, DOB, Soc. Sec. #, Etc.)											
Race W - White / American Indian		Sex F		Date of Birth 05/24/1970		Height 5-05		Weight 145		Eye Color HAZEL	
Hair Color BLOND		Complexion FAIR		Build SMALL							
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE		Marital Status S		Religion CHRIST		Indication of Alcohol Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk.					
Local Address (Street, Apt. Number) 1801 N FLAGLER DR APT 809		(City) WEST PALM BEACH		(State) FL		(Zip) 33407		Phone (972) 9653883		Residence Type: 1. City 2. County 3. Florida 4. Out of State 2	
Permanent Address (Street, Apt. Number) Same as Local Address		(City) Same		(State) Same		(Zip) Same		Phone () Same		Address Source DL	
Business Address (Name, Street) 3065 FORCE LANE		(City) DALLAS		(State) TX		(Zip) 75405		Phone (972) 9653883		Occupation BUSINESS OWNER	
D/L Number, State G626543706840		Soc. Sec. Number		INS Number		Place of Birth (City, State) ADA, OK		Citizenship US			
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			
Parent Name (Last, First, Middle)		Legal Custodian		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 defendant and / or 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.		Yes, by: (Name)		No: (Reason)		School Attended		Grade			
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property		Value of Property							
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 P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Dispense/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other	
Charge Description POSSESSION OF OPEN CONTAINER		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 316.193(3)(A)		Violation of ORD # 6-8.1(C)(3)			
Drug Activity N/A		Drug Type N/A		Amount / Unit N/A		Offense #		Warrant / Capias Number		Bond OR	
Charge Description DUI		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 316.193(1)		Violation of ORD #			
Drug Activity N/A		Drug Type N/A		Amount / Unit N/A		Offense #		Warrant / Capias Number		Bond OR	
Charge Description		Counts		Domestic Violence		Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond	
Charge Description		Counts		Domestic Violence		Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond	
Location (Court, Room Number, Address) North County Courthouse 3188 PGA Blvd, Palm Beach Gardens, FL 33410											
Court Date and Time Month AUG Day 23 Year 2017 Time 10:00 AM <input checked="" type="checkbox"/> PM											
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Signature of Defendant (or Juvenile and Parent /Custodian) <i>Melissa Gray</i> Date Signed 7/20/17											
HOLD for other Agency Name:		Signature of Arresting Officer <i>[Signature]</i>		Name Verification (Printed by Arrestee) W		(PRINT)		PAGE		OF	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Releated Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) YACINTHE, W		I.D. # 460		Witness here if subject signed with an "X"					
Intake Deputy LOHUIS, B.		# 814		Pouch #		Transporting Officer YACINTHE, W		ID # 460		Agency PBGPD	

PD80 #148 REV. 8/97

DISTRIBUTION: WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - AGENCY

GOLD - DEFENDANT (N.T.A.'s ONLY)

SCANNED

JUL 24 2017

2852

0489859

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 20TH DAY OF JULY 20 17 AT 04:14 AM PM
SUBJECT: GRAY GREGORY, MELISSA C. CASE NUMBER: 17004349
AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: YACINTHE, W

PERSONAL CONTACT

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

UPON MY ARRIVAL, VEHICLE WAS PARKED SOUTHBOUND IN THE NORTHBOUND LANES. VEHICLE WAS ON AND RUNNING. MELISSA C. GRAY-GREGORY WAS BEHIND THE DRIVING WHEEL OF THE VEHICLE UNRESPONSIVE AND SLEEPING.

OBSERVATION OF DRIVER:

DRIVER'S SPEECH WAS SLURRED AND BREATH SMELLED OF AN UNKNOWN ALOCHOLIC BEVERAGE. DRIVER WAS CONFUSED AND UNSURE OF WHERE SHE WAS. DRIVER WAS LETHARGIC IN MOVEMENTS. DRIVER'S EYES WERE GLASSY AND GLAZED OVER.

DRIVER'S STATEMENTS:

DRIVER ADVISED SHE WAS "TIRED" AND PULLED OVER. DRIVER COULD NOT CONFIRM WHERE SHE WAS GOING, JUST THAT SHE WAS DRIVING.

ODORS:

UNKNOWN ALCOHOLIC BEVERAGE.

GENERAL OBSERVATIONS

SPEECH: SLURRED, SLOW

ATTITUDE: COOPERATIVE

CLOTHING: DISHOVELED

MEDICAL/OTHER:

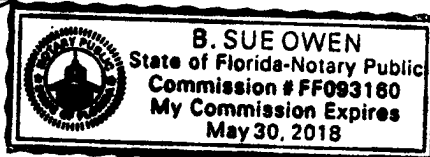
STATE OF FLORIDA
COUNTY OF PALM BEACH

W. Yacinte
(Signature of Arresting Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 20th day of July 20 17 by Off Yacinte

(Print name of Arresting Investigative Officer), who is personally known to me and/or produced satisfactory evidence of identity.

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



SCANNED
JUL 24 2017

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:☒ LT EYE-LACK OF SMOOTH PURSUIT☒ RT EYE-LACK OF SMOOTH PURSUIT☒ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION☒ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION☒ LT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES☒ RT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREESOther Observations:

DRIVER HAD A HARD TIME KEEPING HER HEAD STILL, HAD TO CORRECT HER SEVERAL TIMES NOT TO TURN HER HEAD.

WALK & TURN:

SUBJECT FAILED TO FOLLOW DIRECTIONS. SUBJECT DID NOT PLACE HER FEET IN THE HEEL TO TOE PLACEMENT AS DIRECTED DURING INSTRUCTIONS. SUBJECT FAILED TO KEEP HER HAND AT HER SIDES, INSTEAD PLACED THEM ON HER HIPS. DURING THE WALK AND TURN SUBJECT FAILED TO COUNT OUT LOUD EACH STEP. SUBJECT MISSED HEEL AND TOE ON EVERY SUBSEQUENT STEP. SUBJECT FAILED TO TAKE 9 HEEL TO TOE STEPS. SUBJECT TOOK APPROXIMATELY 12-15 STEPS. SUBJECT FAILED TO EXECUTE A SERIES OF SMALL STEPS WHEN TURNING AROUND. SUBJECT FAILED TO TAKE THE CORRECT NUMBER OF RETURN STEPS AND DID NOT COUNT OUT LOUD EACH STEP.

ONE LEG STAND:

SUBJECT FAILED TO PLACE HER HEELS TOGETHER AND KEPT HER HAND ON HER HIPS DURING THE INSTRUCTIONS. DURING THE ONE LEG STAND SUBJECT MOVED HER HANDS TO HER HIPS AND USED HER ARMS FOR BALANCE. SUBJECT DID NOT EXECUTE THE ONE LEG STAND CORRECTLY, SUBJECT FAILED TO KEEP HER KNEE STRAIGHT AND INSTEAD LIFTED HER KNEE STRAIGHT UP.

FINGER TO NOSE:

DID NOT ADMINISTER

ROMBERG/ALPHABET:

DID NOT ADMINISTER

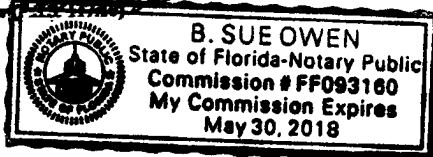
BREATH TEST RESULTS: REFUSED

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was notarized or sworn before me this 28th day of July, 2017 by JOE YACINTHE
who is personally known to me and/or produced identification. Type of identification produced badge

Notary Public, Clerk of Court, Officer



SCANNED
JUL 24 2017

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 20TH DAY OF JULY 20 17 AT 04:14 AM PM
SUBJECT: GRAY GREGORY, MELISSA C. CASE NUMBER: 17004349

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: YACINTHE, W

PERSONAL CONTACT

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

UPON MY ARRIVAL, VEHICLE WAS PARKED SOUTHBOUND IN THE NORTHBOUND LANES. VEHICLE WAS ON AND RUNNING. MELISSA C. GRAY-GREGORY WAS BEHIND THE DRIVING WHEEL OF THE VEHICLE UNRESPONSIVE AND SLEEPING.

OBSERVATION OF DRIVER:

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DRIVER'S STATEMENTS:

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ODORS:

UNKNOWN ALCOHOLIC BEVERAGE.

GENERAL OBSERVATIONS

SPEECH: SLURRED, SLOW

ATTITUDE: COOPERATIVE

CLOTHING: DISHOVELED

MEDICAL/OTHER:

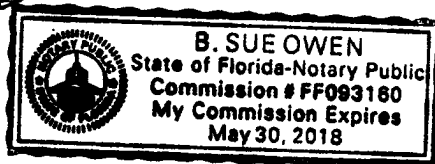
STATE OF FLORIDA
COUNTY OF PALM BEACH

W. Yacinthe
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 20th day of July 20 17 by ofc Yacinthe

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

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



SCANNED
JUL 24 2017

ROADSIDE TASKS**HORIZONTAL GAZE NYSTAGMUS:**☒ LT EYE-LACK OF SMOOTH PURSUIT☒ RT EYE-LACK OF SMOOTH PURSUIT☒ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION☒ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION☒ LT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES☒ RT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES**Other Observations:**

DRIVER HAD A HARD TIME KEEPING HER HEAD STILL, HAD TO CORRECT HER SEVERAL TIMES NOT TO TURN HER HEAD.

WALK & TURN:

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FINGER TO NOSE:

DID NOT ADMINISTER

ROMBERG/ALPHABET:

DID NOT ADMINISTER

BREATH TEST RESULTS: REFUSED

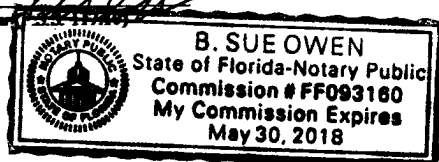
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was notarized or sworn before me this 20th day of July, 2017 at WOT YACIN THE

who is personally known to me and/or produced identification. Type of identification produced badge

Notary Public, Clerk of Court Officer



SCANNED
JUL 24 2017



MELISSA CLORETA
GRAY GREGORY
1001 N FLAGLER DR APT 800
WEST PALM BEACH, FL 334076662
DOB: 05-24-1979 SEX: F
HGT: 5-05
07-24-2021

Melissa Gray Gregory
07-24-2021

SAFE DRIVER

Operation of a motor vehicle constitutes consent to any sobriety test required by law.

NOT A CERTIFIED COPY

SCANNED
JUL 24 2017

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 20TH DAY OF JULY 20 17 AT 04:14 AM PM
SUBJECT: GRAY GREGORY, MELISSA C. CASE NUMBER: 17004349

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GENERAL OBSERVATIONS

SPEECH: SLURRED, SLOW

ATTITUDE: COOPERATIVE

CLOTHING: DISHOVELED

MEDICAL/OTHER:

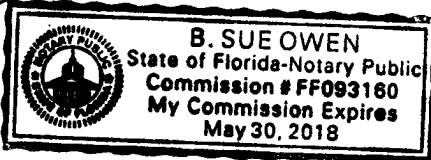
STATE OF FLORIDA
COUNTY OF PALM BEACH

W. Jacinth
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 20th day of July 20 17 by ofc Yacinthe

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

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



SCANNED
JUL 24 2017

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:☒ LT EYE-LACK OF SMOOTH PURSUIT☒ RT EYE-LACK OF SMOOTH PURSUIT☒ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION☒ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION☒ LT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES☒ RT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREESOther Observations:

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FINGER TO NOSE:

DID NOT ADMINISTER

ROMBERG/ALPHABET:

DID NOT ADMINISTER

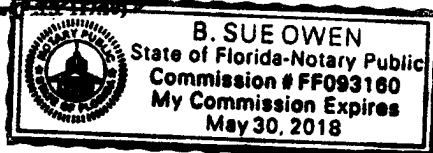
BREATH TEST RESULTS: REFUSED

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was notarized or sworn before me this 20th day of July, 2017, by OR YACINTHE
who is personally known to me and/or produced identification. Type of identification produced badge

Notary Public, Clerk of Court, Officer



SCANNED
JUL 24 2017

TESTING FACILITY TASK REPORT

AGENCY: PB Gardens P.D.

SUBJECT: Gray Gregory, Melissa Cloteta CASE NUMBER: 17-104701

DATE: 7/20/17 VIDEO TAPE NUMBER: AVD# 03023

BEGINNING TIME: 0534 ENDING TIME: 0544

BREATH TESTS RESULTS: **REFUSED** TIME 0537 Q A.M./P.M. 2) TIME A.M./P.M.
3) TIME A.M./P.M. 4) TIME A.M./P.M.

BREATH OPERATOR: S. Owen #3184

MAINTENANCE TECHNICIAN: J. Karleeke #0407

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slightly slurred

ATTITUDE: quiet, co-operative

CLOTHING: Flip Flops, white jeans, blue print top

MEDICAL CONDITIONS: None

MEDICATIONS: Kanax, anti depressant

OTHER: 4740A

COMMENTS: A/O arrived at 0513 hrs.

A/O observed 20 minutes

A/O requested breath test, A refused

A/O read I/C, A understood, still refused

A/O read C/W, A understood rights

A answered Q & A Driving last 3 hours

was tired. SAID she had not been drinking

I kept throwing questions back to officer.

SCANNED

JUL 24 2017

SUBJECT: _____ CASE NUMBER: _____

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) _____

SCANNED

JUL 24 2017