
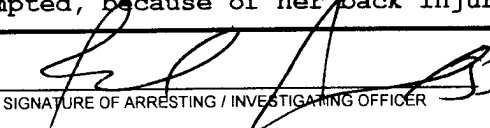


| AD<br>M<br>I<br>N<br>I<br>S<br>T<br>R<br>A<br>T<br>I<br>O<br>N   |  | OBT Number<br>048 2264   |  | ARREST / NOTICE TO APPEAR                                   |  | 1. Arrest<br>2. N.T.A.<br>3. Request for Warrant<br>4. Request for Capias   |  | 1   |  | 1378<br>JUVENILE  |  |
|--|--|--|--|---|--|---|--|---|--|---|--|
| Agency ORI Number<br>0500200   |  | Agency Name<br>Boca Raton Police Department  |  | Agency Report Number (N.T.A.'s only)<br>3, 2 2016-015811    |  |   |  |   |  |   |  |
| Charge Type:<br>Check as many as apply<br><input type="checkbox"/> 1. Felony<br><input type="checkbox"/> 2. Traffic Felony<br><input checked="" type="checkbox"/> 3. Misdemeanor<br><input checked="" type="checkbox"/> 4. Traffic Misdemeanor<br><input type="checkbox"/> 5. Ordinance<br><input type="checkbox"/> 6. Other |  | If Weapon Seized<br>Enter Type<br>None/not Applicable  |  | Multiple Clearance Indicator<br>01                          |  |   |  |   |  |   |  |
| Location of Arrest (Including Name of Business)<br>3200 N FEDERAL HWY, BOCA RATON, FL  |  | Location of Offense (Business Name, Address)<br>3200 N FEDERAL HWY, BOCA RATON, FL 33431   |  |   |  |   |  |   |  |   |  |
| Date of Arrest<br>10/28/2016   |  | Time of Arrest<br>23:28  |  | Booking Date<br>10/28/2016                                  |  | Booking Time<br>23:38   |  | Jail Date   |  | Jail Time   |  |
|  |  |  |  |   |  |   |  |   |  | Location of Vehicle<br>EMERALD TOWING   |  |
| Name (Last, First, Middle)<br>STUMM, MELISSA KATHERINE   |  | Alias:   |  | Alias (Name, DOB, Soc. Sec. #, Etc.)                        |  |   |  |   |  |   |  |
| Race<br>W - White<br>B - Black<br>I - American Indian<br>O - Oriental/Asian<br>W   |  | Sex<br>F   |  | Date of Birth<br>10/31/1980                                 |  | Height<br>5'06  |  | Weight<br>180   |  | Eye Color<br>BROWN  |  |
|  |  |  |  |   |  |   |  |   |  | Hair Color<br>BROWN   |  |
|  |  |  |  |   |  |   |  |   |  | Complexion<br>LIGHT   |  |
|  |  |  |  |   |  |   |  |   |  | Build<br>Stocky   |  |
| Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)<br>TATT L FOOT / GOTHIC CROSS; TATT LO BACK / GOTHIC   |  | Marital Status<br>S  |  | Religion  |  | Indication of:<br>Alcohol Influence<br>Drug Influence<br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/> |  |   |  |   |  |
| Local Address (Street, Apt. Number)<br>17 ROYAL PALM WAY 505, BOCA RATON, FL 33432   |  | (City)<br>Boca Raton   |  | (State)<br>FL   |  | (Zip)<br>33432  |  | Phone<br>(561) 909-8989   |  | Residence Type:<br>1. City<br>2. County<br>3. Florida<br>4. Out of State<br>1         |  |
| Permanent Address (Street, Apt. Number)<br>17 ROYAL PALM WAY 505, BOCA RATON, FL 33432   |  | (City)<br>Boca Raton   |  | (State)<br>FL   |  | (Zip)<br>33432  |  | Phone<br>(561) 909-8989   |  | Address Source<br>SUBJECT   |  |
| Business Address (Name, Street)<br>PALM BEACH ORTHOPEDIC INSTITUT, 4215 BURNS ROAD   |  | (City)<br>Boca Raton   |  | (State)<br>FL   |  | (Zip)<br>33432  |  | Phone<br>(561) 694-7776   |  | Occupation<br>Rad Tech  |  |
| D/L Number, State<br>S350551808910 / FL  |  | Soc. Sec. Number   |  | INS Number  |  | Place of Birth (City, State)<br>MANHATTAN, NY,  |  | Citizenship<br>US   |  |   |  |
| Co-Defendant Name (Last, First, Middle)  |  | Race   |  | Sex   |  | Date of Birth   |  | <input type="checkbox"/> 1. Arrested<br><input type="checkbox"/> 2. At Large<br><input type="checkbox"/> 3. Felony<br><input type="checkbox"/> 4. Misdemeanor<br><input type="checkbox"/> 5. Juvenile |  |   |  |
| Co-Defendant Name (Last, First, Middle)  |  | Race   |  | Sex   |  | Date of Birth   |  | <input type="checkbox"/> 1. Arrested<br><input type="checkbox"/> 2. At Large<br><input type="checkbox"/> 3. Felony<br><input type="checkbox"/> 4. Misdemeanor<br><input type="checkbox"/> 5. Juvenile |  |   |  |
| <input type="checkbox"/> Parent<br><input type="checkbox"/> Legal Custodian  |  | Name (Last, First, Middle)   |  | Residence Phone   |  |   |  |   |  |   |  |
| Address (Street, Apt. Number)  |  | (City)   |  | (State)   |  | (Zip)   |  | Business Phone  |  |   |  |
| Notified by: (Name)  |  | Date   |  | Time  |  | JUVENILE DISPOSITION<br>1. Handled/Processed within<br>Department and Released<br>2. TOT JAC<br>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.<br>The child and/or parent was told to keep the Juvenile Court Clerk's Office<br>(Phone 355-2526) informed of any change of address.   |  | School Attended  |  | Grade   |  |   |  |   |  |   |  |
| <input type="checkbox"/> Yes, by: <input type="checkbox"/> No:   |  | Property Crime?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |  | Description of Property                                     |  | Value of Property   |  |   |  |   |  |
| Drug Activity<br>N. N/A<br>P. Possess  |  | S. Sell<br>B. Buy<br>T. Traffic  |  | R. Smuggle<br>D. Deliver<br>E. Use                          |  | K. Disperse/<br>Distribute  |  | M. Manufacture/<br>Produce/<br>Cultivate  |  | Z. Other  |  |
| Drug Type<br>N. N/A<br>A. Amphetamine  |  | B. Barbiturate<br>C. Cocaine<br>E. Heroin  |  | H. Hallucinogen<br>M. Marijuana<br>O. Opium/Deriv.          |  | P. Paraphernalia/<br>Equipment<br>S. Synthetic  |  | U. Unknown<br>Z. Other  |  |   |  |
| Charge Description<br>DUI  |  | Statute Violation Number<br>316.193(1)   |  | Violation of ORD #  |  |   |  |   |  |   |  |
| Drug Activity  |  | Drug Type<br>N   |  | Amount / Unit   |  | Offense #<br>2016-015811  |  | Counts<br>1   |  | Domestic Violence<br><input type="checkbox"/> Y <input checked="" type="checkbox"/> N |  |
| Charge Description   |  | Statute Violation Number   |  | Violation of ORD #  |  |   |  |   |  |   |  |
| Drug Activity  |  | Drug Type  |  | Amount / Unit   |  | Offense #   |  | Counts  |  | Domestic Violence<br><input type="checkbox"/> Y <input type="checkbox"/> N            |  |
| Charge Description   |  | Statute Violation Number   |  | Violation of ORD #  |  |   |  |   |  |   |  |
| Drug Activity  |  | Drug Type  |  | Amount / Unit   |  | Offense #   |  | Counts  |  | Domestic Violence<br><input type="checkbox"/> Y <input type="checkbox"/> N            |  |
| Health / Apparent Physical Condition of Defendant<br>GOOD  |  | Any knowledge of the following:<br><input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries |  | Explain:  |  |   |  |   |  |   |  |
| Check which applies:<br><input type="checkbox"/> Released O.R.<br><input type="checkbox"/> Posted Bond   |  | <input type="checkbox"/> Released to Parent/Guardian<br><input type="checkbox"/> South County Mental Health  |  | <input checked="" type="checkbox"/> T.O.T. County Jail      |  | PROPERTY - Received By<br>785   |  | Released By<br>785  |  | Released To<br>CJ   |  |
| Transported By   |  | Date Transported   |  | Time Transported  |  | Other   |  |   |  |   |  |
| <input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court<br><input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court<br>but must comply with instructions on Page 2.   |  | Location (Court, Room)<br>South County 200 W Atlantic Ave Delray Beach, FL 33444   |  | Court Date and Time<br>11/28/2016 08:30:00                  |  |   |  |   |  | No Photo Available  |  |
| 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<br>JESIONEK, ROBERT S.  |  | Name Verification (Printed by Arresting Officer)<br>(PRINT) |  |   |  |   |  |   |  |
| <input type="checkbox"/> Dangerous<br><input type="checkbox"/> Resisted Arrest<br><input type="checkbox"/> Suicidal<br><input type="checkbox"/> Other  |  | Intake Deputy<br>C. J. Anderson  |  | Pouch #<br>4716   |  | Transporting Officer<br>JESIONEK  |  | I.D. #<br>531   |  | Agency<br>BRPD  |  |
|  |  |  |  |   |  |   |  |   |  | Witness here if subject signed with an "X".   |  |

SCANNED OCT 29 AM 4:18  
OCT 30 2016

| OBTS Number   |   | PROBABLE CAUSE AFFIDAVIT |  | 1. Arrest<br>2. N.T.A. |  | 3. Request for Warrant<br>4. Request for Capias  |  | 1               | JUVENILE                           |  |
|---|---|--------------------------|--|------------------------|--|--|--|-----------------|------------------------------------|--|
| A<br>D<br>M<br>I<br>N<br>I<br>S<br>T<br>R<br>A<br>T<br>I<br>V<br>E  | Agency ORI Number<br><b>FL 0500200</b>  |                          | Agency Name<br><b>BOCA RATON POLICE DEPARTMENT</b> |                        | Agency Report Number<br><b>3   2   2016-015811</b> |  |  |                 |                                    |  |
|   | Charge Type: Check as many as apply.<br><input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance<br><input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other |                          |  |                        |  | Special Notes:   |  |                 |                                    |  |
| D<br>E<br>F<br>E<br>N<br>D<br>A<br>N<br>T   | Name (Last, First, Middle)<br><b>STUMM, MELISSA KATHERINE</b>   |                          |  |                        |  | Race<br><b>W</b>   |  | Sex<br><b>F</b> | Date of Birth<br><b>10/31/1980</b> |  |
|   | Alias   |                          |  |                        |  |  |  |                 |                                    |  |
| C<br>H<br>A<br>R<br>G<br>E<br>S   | Charge Description<br><b>316.193(1) DUI</b>   |                          |  |                        |  | Charge Description   |  |                 |                                    |  |
|   | Charge Description  |                          |  |                        |  | Charge Description   |  |                 |                                    |  |
| V<br>I<br>C<br>T<br>I<br>M  | Victim's Name (Last, First, Middle)<br><b>State Of Florida</b>  |                          |  |                        |  | Race   |  | Sex             | Date of Birth                      |  |
|   | Local Address (Street, Apt. Number) (City) (State) (Zip)  |                          |  |                        |  | Phone  |  | Address Source  |                                    |  |
| P<br>R<br>O<br>B<br>A<br>B<br>L<br>E  | 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 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 checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <b>28</b> day of <b>October</b>, <b>2016</b> at <b>23:28</b> (Specifically include facts constituting cause for arrest.)</p> <p>On 10/28/2016 at 2247 hours, Officer Gannon was on patrol in the area of 3200 North Federal Highway, Boca Raton, Florida. He observed a vehicle stopped along the northbound lanes of travel. When he walked up to the vehicle, the engine was running, but the driver told him that she was out of gas. He observed signs of possible impairment coming from the driver, Melissa Stumm. He called myself and Officer Mcquiston to the scene at 2252 hours. We arrived at 2313 hours. After speaking with Officer Gannon, I made contact with Stumm as she was still sitting in the driver's seat.</p> <p>I asked Stumm if she had any medical conditions and she stated no. She did not know what road she was driving on or what city. She stated she was coming from work in Palm Beach Gardens where she attended a Halloween party and trying to get to her mother's house where she is residing. She would only state she had a couple of drinks.</p> <p>I could smell a strong odor of an alcoholic beverage coming from her breath. Her eyes were red and glassy. Her speech was slow and slurred. Her face was flush.</p> <p>I set up my in car camera in an adjacent parking lot. I asked her to walk to the front of my vehicle. She was walking slowly. She was swaying and stumbling while walking. I asked her if she would attempt the road side tasks. She stated she had a prior spine injury from a previous accident.</p> <p>She takes xanax which she last took between 4 and 5 pm. She now stated she had 2 wines at the party.</p> <p>The first task was the horizontal gaze nystagmus. There was a lack of smooth pursuit in each eye. Distinct and sustained nystagmus at maximum deviation in each eye. Onset of nystagmus prior 45 degrees in each eye. She was swaying side to side at times.</p> <p>The walk and turn and one leg stand were not attempted, because of her back injury.</p> |   |                          |  |                        |  |  |  |                 |                                    |  |
| S<br>W<br>O<br>R<br>N   | SWORN AND SUBSCRIBED BEFORE ME<br><br><b>WOLLSCHLAGER, ANTHONY J</b><br>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)<br><b>10/29/2016</b><br>DATE  |                          |  |                        |  | <br>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER<br><b>JESIONEK, ROBERT S (531)</b><br>NAME OF OFFICER (PLEASE PRINT)<br><b>10/29/2016</b><br>DATE |  |                 |                                    |  |
|   |   |                          |  |                        |  | PAGE<br><b>1 OF 2</b>  |  |                 |                                    |  |

COURT


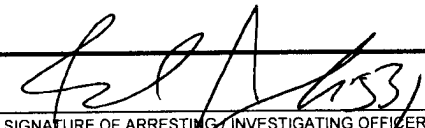
STATE ATTORNEY

CENTRAL RECORDS

JAIL

 CRIME ANALYSIS  
 SCANNED  
 OCT 30 2016

P. I. O.

|  |  |  |  |   |   |                 |                                    |
|--|--|--|--|---|---|-----------------|------------------------------------|
| OBT Number   |  | PROBABLE CAUSE AFFIDAVIT<br>SUPPLEMENT             |  | 1. Arrest<br>2. N.T.A.  | 3. Request for Warrant<br>4. Request for Capias | <b>1</b>        | JUVENILE                           |
| A<br>D<br>M<br>I<br>N<br>I<br>S<br>T<br>R<br>A<br>T<br>I<br>V<br>E | Agency ORI Number<br><b>FL 0500200</b>   | Agency Name<br><b>BOCA RATON POLICE DEPARTMENT</b> | Agency Report Number<br><b>3   2   2016-015811</b> |   |   |                 |                                    |
|  | Charge Type: Check as many as apply.<br><input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance<br><input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other  |  |  | Special Notes:  |   |                 |                                    |
| D<br>E<br>F  | Name (Last, First, Middle)<br><b>STUMM, MELISSA KATHERINE</b>  |  |  | Alias   | Race<br><b>W</b>                                | Sex<br><b>F</b> | Date of Birth<br><b>10/31/1980</b> |
|  | <p>The second task was the finger to nose (L-R-L-R-R-L). She missed the tip of her nose on the 1st, 2nd, 3rd, 4th, and 5th movements. She was swaying front to back at times.</p> <p>The third task was the romberg/alphabet. She was swaying front to back. She was opening her eyes. She went to M and then stopped to think about the remaining letters. She was using a pattern to recite the letters.</p> <p>The fourth task was a number sequence (30-60), She started on 31. She was swaying front to back while standing.</p> <p>At 2328 hours, I placed her under arrest. The vehicle was removed by Emerald Towing. We transported her to The BRPD.</p> <p>Officer Bissoon conducted The Intoxilyzer 8000 testing. I asked Stumm to provide a breath sample. She stated probably not. I read her Implied Consent multiple times. When asked if she had any questions she stated, i`m not sure, but would not ask a direct question. I asked her again if she would provide a breath sample and she did not want to comply. At 0028 hours on 10/29/2016 she was issued a refusal.</p> <p>Stumm was charged with DUI FSS 316.193(1). She was issued the court date of 11/28/2016 at 8:30am. The video was submitted into property. After processing she was transported to The PBCJ.</p> |  |  |   |   |                 |                                    |
| A<br>D<br>M<br>I<br>N<br>I<br>S<br>T<br>R<br>A<br>T<br>I<br>V<br>E | SWORN AND SUBSCRIBED BEFORE ME<br><br><b>WOLLSCHLAGER, ANTHONY J</b><br>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)<br><b>10/29/2016</b><br>DATE   |  |  | <br>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER<br><b>JESONEK, ROBERT S (531)</b><br>NAME OF OFFICER (PLEASE PRINT)<br><b>10/29/2016</b><br>DATE |   |                 |                                    |
|  |  |  |  | PAGE<br><b>2 OF 2</b>   |   |                 |                                    |

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

SCANNED

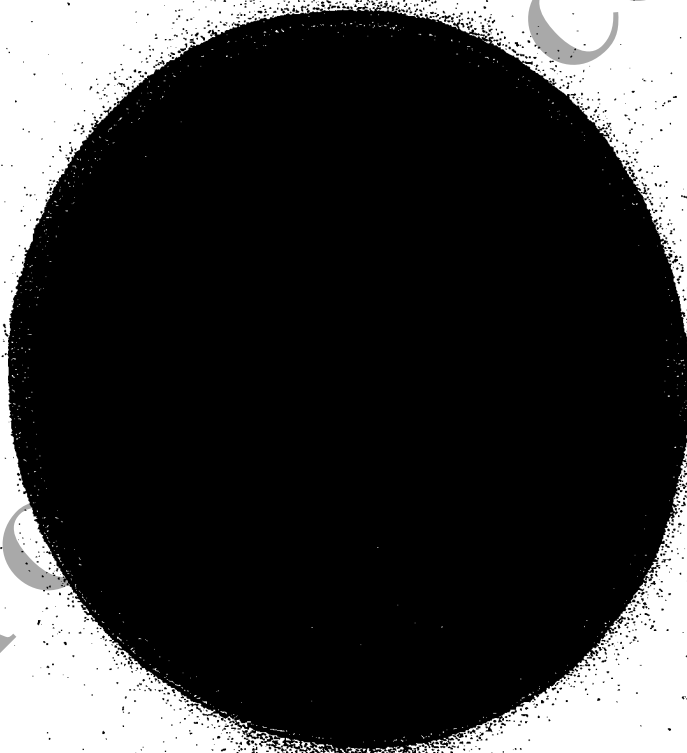
OCT 30 2016

2016-15811

1015: 2324

Obs.  
begin  
0000

# D. U. I. INFLUENCE REPORT



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

SCANNED

OCT 30 2016

BOCA RATON POLICE DEPARTMENT

Agency Case# 2016-15811

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

I. INTRODUCTION

(Instrument Operator faces video camera)

A. The day is: Saturday, October, 29, 2016  
(day) (month) (date) (year)

B. The time is now approximately 12:23 AM/PM

C. The following is in reference to case number 2016-015811

D. Present at this time is Officer Garrison Jensenek McQuiston of the Boca Raton Police  
Department. (Officer's Name)

E. Officer Jensenek, Have you arrested Melissa Stumm  
(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. Stumm, Melissa, I am required to  
Inform you these proceedings are being video taped.

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

BOCA RATON POLICE DEPARTMENT  
TESTING FACILITY TASK REPORT

SUBJECT: Stumm, Melissa

CASE #: 2016-15811 DATE: 10/25/14

BREATH TESTS RESULTS

1) TIME refused AM/PM 2) TIME        AM/PM  
3) TIME        AM/PM 4) TIME        AM/PM

BREATH OPERATOR: Stephen Bisson

MAINTENANCE TECHNICIAN: John Brock, Brian Pare

TESTING OFFICER'S OBSERVATIONS

SPEECH:       

ATTITUDE: Good

CLOTHING: Black Scrubs

MEDICAL CONDITION: Sleep Apnea, Slip discs

OTHER:       

COMMENTS: Stumm had the odor of an alcoholic beverage  
emanating from her person. Her eyes were blood shot  
and glossy.

BOCA RATON POLICE DEPARTMENT

Agency Case # 2016-15811

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.*

1. Probably not
2. I'm not sure
3. I don't
- 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 Off. Seronek of the Boca Raton PD

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: Video

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. Stumm, Melissa has refused to submit to a breath test.

The date is October (Month) 29 (Day) 2016 (Year) and the time 12:38 AM/PM

A refusal form will be completed by the arresting officer.

BOCA RATON POLICE DEPARTMENT

Agency Case # \_\_\_\_\_

**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) \_\_\_\_\_

*Video*

**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 # \_\_\_\_\_

When did you last eat? \_\_\_\_\_ What did you eat? \_\_\_\_\_

What have you been doing the past three hours prior to this stop/accident? \_\_\_\_\_

How much do you weigh? \_\_\_\_\_ Have you been drinking? \_\_\_\_\_ What were you drinking? \_\_\_\_\_

How much? \_\_\_\_\_ Where? \_\_\_\_\_ With whom were you drinking? \_\_\_\_\_

When did you have your first drink? \_\_\_\_\_ AM/PM When did you stop drinking? \_\_\_\_\_ AM/PM

How did you consume your last two drinks? \_\_\_\_\_

Are you under the influence of alcohol now? Yes ☐ No ☐Can you feel the affects of alcohol? Yes ☐ No ☐Have you consumed alcohol since the accident? Yes ☐ No ☐Can you feel the affects of alcohol? Yes ☐ No ☐Have you consumed alcohol since the accident? Yes ☐ No ☐ How much? \_\_\_\_\_ What? \_\_\_\_\_

Where? \_\_\_\_\_

What line of work are you in? \_\_\_\_\_

When did you last work? \_\_\_\_\_

Do you have any physical defects or injuries? Yes ☐ No ☐ If yes, explain: \_\_\_\_\_Are you sick or injured? Yes ☐ No ☐ If yes explain: \_\_\_\_\_

Do you limp? \_\_\_\_\_ Did you get a bump on the head? \_\_\_\_\_

Were you involved in an accident today? \_\_\_\_\_

Have you taken any drugs or smoked marijuana today? \_\_\_\_\_

What? \_\_\_\_\_ When? \_\_\_\_\_

Have you seen a doctor or dentist today? \_\_\_\_\_ Who? \_\_\_\_\_

Are you taking any prescription medicines? Yes ☐ No ☐ What? \_\_\_\_\_ When? \_\_\_\_\_Do you have: Epilepsy? Yes ☐ No ☐Inner ear trouble? Yes ☐ No ☐Glass Eye? Yes ☐ No ☐Ear Infection? Yes ☐ No ☐False Teeth? Yes ☐ No ☐Diabetes? Yes ☐ No ☐

Any eye problems not correctable by glasses or contact lenses? \_\_\_\_\_

Do you take insulin? Yes ☐ No ☐ If yes, when was your last injection? \_\_\_\_\_

Have you ever had a driver's license in any other state? \_\_\_\_\_

I am now ending this videotaping. The time now is approximately 1233 PMThe date is: October (month) 29 (day) 2016 (year).

WITNESS LIST

ARRESTING OFFICER: Sesivich, Robert

Name: Mcquiston, Derek Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

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

Can testify to: Incident

Name: Gannon, Brian Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

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

Can testify to: Back up

Name: Bisson, Stephen Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

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

Can testify to: Breath Test Operator

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: \_\_\_\_\_

| OBT Number  |  | PROBABLE CAUSE AFFIDAVIT                           |  | 1. Arrest<br>2. N.T.A. |  | 3. Request for Warrant<br>4. Request for Capias |  | <b>1</b>         | JUVENILE        |                                    |
|---|--|--|--|------------------------|--|---|--|------------------|-----------------|------------------------------------|
| A<br>D<br>M<br>I<br>N<br>I<br>S<br>T<br>R<br>A<br>T<br>I<br>V<br>E  | Agency ORI Number<br><b>FL 0500200</b> | Agency Name<br><b>BOCA RATON POLICE DEPARTMENT</b> | Agency Report Number<br><b>3   2   2016-015811</b> |                        |  |   |  |                  |                 |                                    |
| Charge Type:<br>Check as many as apply:<br><input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance<br><input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other  |  |  |  |                        |  |   |  | Special Notes:   |                 |                                    |
| Name (Last, First, Middle)<br><b>STUMM, MELISSA KATHERINE</b>   |  |  |  |                        |  |   |  | Race<br><b>W</b> | Sex<br><b>F</b> | Date of Birth<br><b>10/31/1980</b> |
| Charge Description<br><b>316.193(1) DUI</b>   |  | Charge Description                                 |  |                        |  |   |  |                  |                 |                                    |
| Charge Description  |  | Charge Description                                 |  |                        |  |   |  |                  |                 |                                    |
| Victim's Name (Last, First, Middle)<br><b>State Of Florida</b>  |  |  |  |                        |  |   |  | 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 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 checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <b>28</b> day of <b>October</b>, <b>2016</b> at <b>23:28</b> (Specifically include facts constituting cause for arrest.)</p> <p>On 10/28/2016 at 2247 hours, Officer Gannon was on patrol in the area of 3200 North Federal Highway, Boca Raton, Florida. He observed a vehicle stopped along the northbound lanes of travel. When he walked up to the vehicle, the engine was running, but the driver told him that she was out of gas. He observed signs of possible impairment coming from the driver, Melissa Stumm. He called myself and Officer Mcquiston to the scene at 2252 hours. We arrived at 2313 hours. After speaking with Officer Gannon, I made contact with Stumm as she was still sitting in the driver's seat.</p> <p>I asked Stumm if she had any medical conditions and she stated no. She did not know what road she was driving on or what city. She stated she was coming from work in Palm Beach Gardens where she attended a Halloween party and trying to get to her mother's house where she is residing. She would only state she had a couple of drinks.</p> <p>I could smell a strong odor of an alcoholic beverage coming from her breath. Her eyes were red and glassy. Her speech was slow and slurred. Her face was flush.</p> <p>I set up my in car camera in an adjacent parking lot. I asked her to walk to the front of my vehicle. She was walking slowly. She was swaying and stumbling while walking. I asked her if she would attempt the road side tasks. She stated she had a prior spine injury from a previous accident.</p> <p>She takes xanax which she last took between 4 and 5 pm. She now stated she had 2 wines at the party.</p> <p>The first task was the horizontal gaze nystagmus. There was a lack of smooth pursuit in each eye. Distinct and sustained nystagmus at maximum deviation in each eye. Onset of nystagmus prior 45 degrees in each eye. She was swaying side to side at times.</p> <p>The walk and turn and one leg stand were not attempted, because of her back injury.</p> |  |  |  |                        |  |   |  |                  |                 |                                    |
| SWORN AND SUBSCRIBED BEFORE ME<br><div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><b>WOLLSCHLAGER, ANTHONY J</b><br/>             NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)<br/> <b>10/29/2016</b><br/>             DATE</p> </div> <div style="width: 45%;"> <p>_____<br/>             SIGNATURE OF ARRESTING / INVESTIGATING OFFICER<br/> <b>JESTONEK, ROBERT S (531)</b><br/>             NAME OF OFFICER (PLEASE PRINT)<br/> <b>10/29/2016</b><br/>             DATE</p> </div> </div>   |  |  |  |                        |  |   |  |                  |                 |                                    |

|  |  |   |                            |  |   |          |                   |
|--|--|---|----------------------------|--|---|----------|-------------------|
| OBTS Number  |  | PROBABLE CAUSE AFFIDAVIT<br>SUPPLEMENT  |                            | 1. Arrest<br>2. N.T.A.   | 3. Request for Warrant<br>4. Request for Capias | <b>1</b> | JUVENILE          |
| A<br>D<br>M<br>I<br>N<br>I<br>S<br>T<br>R<br>A<br>T<br>I<br>V<br>E   | Agency ORI Number  | Agency Name   | Agency Report Number       |  |   |          |                   |
|  | <b>FL 0500200</b>  | <b>BOCA RATON POLICE DEPARTMENT</b>   | <b>3   2   2016-015811</b> |  |   |          |                   |
| Charge Type:<br>Check as many as apply.  |  | <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance<br><input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other |                            |  | Special Notes:                                  |          |                   |
| Name (Last, First, Middle)   |  | Alias   |                            |  | Race  | Sex      | Date of Birth     |
| <b>STUMM, MELISSA KATHERINE</b>  |  |   |                            |  | <b>W</b>  | <b>F</b> | <b>10/31/1980</b> |
| <p>The second task was the finger to nose (L-R-L-R-R-L). She missed the tip of her nose on the 1st, 2nd, 3rd, 4th, and 5th movements. She was swaying front to back at times.</p> <p>The third task was the romberg/alphabet. She was swaying front to back. She was opening her eyes. She went to M and then stopped to think about the remaining letters. She was using a pattern to recite the letters.</p> <p>The fourth task was a number sequence (30-60), She started on 31. She was swaying front to back while standing.</p> <p>At 2328 hours, I placed her under arrest. The vehicle was removed by Emerald Towing. We transported her to The BRPD.</p> <p>Officer Bissoon conducted The Intoxilyzer 8000 testing. I asked Stumm to provide a breath sample. She stated probably not. I read her Implied Consent multiple times. When asked if she had any questions she stated, i`m not sure, but would not ask a direct question. I asked her again if she would provide a breath sample and she did not want to comply. At 0028 hours on 10/29/2016 she was issued a refusal.</p> <p>Stumm was charged with DUI FSS 316.193(1). She was issued the court date of 11/28/2016 at 8:30am. The video was submitted into property. After processing she was transported to The PBCJ.</p> |  |   |                            |  |   |          |                   |
| NOT A CERTIFIED COPY   |  |   |                            |  |   |          |                   |
| A<br>D<br>M<br>I<br>N<br>I<br>S<br>T<br>R<br>A<br>T<br>I<br>V<br>E   | SWORN AND SUBSCRIBED BEFORE ME   |   |                            | <br>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER |   |          |                   |
|  | <b>WOLLSCHLAGER, ANTHONY J</b><br>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) |   |                            |  |   |          |                   |
|  | <b>10/29/2016</b><br>DATE  |   |                            | <b>JESIONEK, ROBERT S (531)</b><br>NAME OF OFFICER (PLEASE PRINT)  |   |          |                   |
|  |  |   |                            | <b>10/29/2016</b><br>DATE  |   |          |                   |
| PAGE 2 OF 2  |  |   |                            |  |   |          |                   |

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

SCANNED

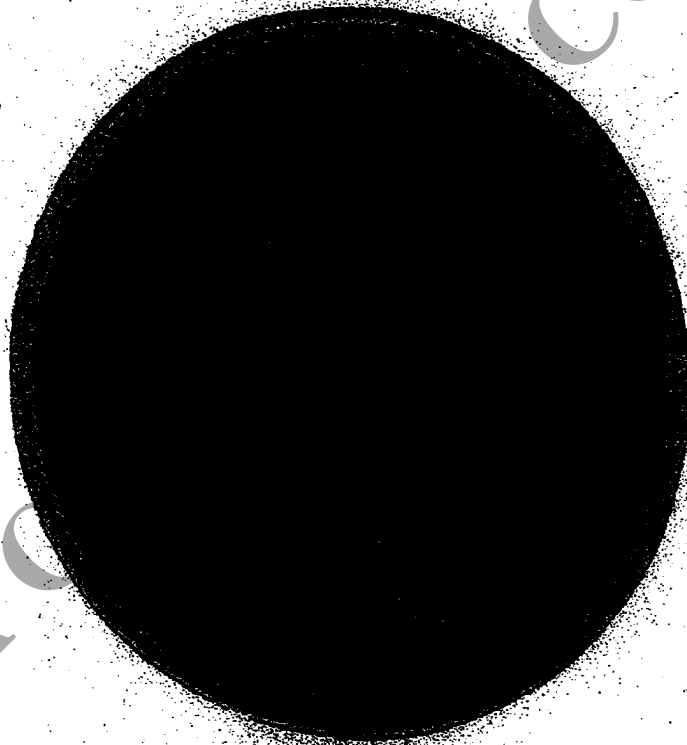
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# D. U. I. INFLUENCE REPORT



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

SCANNED

OCT 30 2016

WITNESS LIST

ARRESTING OFFICER: Sesivich, Robert

Name: Mcquiston, Derek Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

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

Can testify to: Incident

Name: Gannon, Brian Phone # Home \_\_\_\_\_ Work \_\_\_\_\_

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