T# 0510015 2019CT014456AMB PI# 3060

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number

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

Juvenile:

ADMINISTRATIVE

Agency ORI Number: FLO 502600

Agency Name: PALM BEACH GARDENS POLICE DEPARTMENT

Agency Report Number (N.T.A.'s only): 78- 19-004665

Charge Type: Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Weapon Seized / Type: 2 (1. Yes 2. No)

Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): PGA Blvd/Shady Lakes Dr, PBG FL 33410

Location of Offense (Business Name, Address): PGA Blvd/Shady Lakes Dr, PBG FL 33410

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle 4401 East Ave, West Palm Beach FL, 33407
08/07/2019	02:46					Kauff's Transportation Systems

DEFENDANT

Name (Last, First, Middle): Register, Michael, Shane

Alias (Name, DOB, Soc. Sec. #, Etc.):

Race (W - White I - American Indian B - Black 0- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	05/14/1971	6-01	190	Bro	Bro	Lgt	Medium

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description): None

Marital Status: Single

Religion: NONE

Indication of: Alcohol Influence Y ☑ N ☐ Unk. ☐; Drug Influence Y ☐ N ☑ Unk. ☐

Local Address (Street, Apt. Number) (City) (State) (Zip): 1851 RENAISSANCE CMNS BLVD #1220, BOYNTON BEACH, FL 33426

Phone: (561) 346-8288

Residence Type (1 City 2. County 3. Florida 4. Out of State): 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 1851 RENAISSANCE CMNS BLVD #1220, BOYNTON BEACH, FL 33426

Phone: ( )

Address Source: FL DL

Business Address (Name, Street) (City) (State) (Zip): NORTHSTAR, DELRAY BEACH FL

Phone: ( )

Occupation: FUNERAL DIRECTOR

D/L Number, State: R223557711740 FL

Soc. Sec. Number: [redacted]

INS Number:

Place of Birth (City, State): HOLLYWOOD, FL

Citizenship: US

CO-DEF

Co-Defendant Name (Last, First, Middle): | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large | ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

Co-Defendant Name (Last, First, Middle): | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large | ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other — Name (Last) (First) (Middle)

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? ☐ Yes ☐ No | Description of Property | Value of Property

CODE

Drug Activity: N. N/A P. Possess S. Sell T. Traffic B. Buy R. Smuggle D. Deliver E. Use K. Dispense/ Distribute M. Manufacture/ Produce/ Cultivate Z. Other

Drug Type: N. N/A A. Amphetamine B. Barbiturate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/ Equipment S. Synthetics U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DUI	1	☐Y ☒N	316.193(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	N/A			OR

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

NOTICE TO APPEAR

Location (Court, Room Number, Address):

NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700

Court Date and Time: Month SEP Day 19 Year 2019 Time 10:00 AM X PM

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: 08/07/2019

ADMIN

HOLD for other Agency Name.

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other.

Intake Deputy | Pouch #

Signature of Arresting Officer: x [signature] 493

Name of Arresting Officer (Print): Ofc. Trudeau I.D. #: #493

Transporting Officer: Ofc. Trudeau ID #: 493 Agency: PBGPD

Name Verification (Printed by Arrestee)

Witness to subject signed with an "X"

PAGE 1 OF 1

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

NOT A CERTIFIED COPY

SCANNED AUG 07 2019

AUG 7 2019 PM 4:57

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 7th DAY OF August 20 19, AT 0207 ✓ AM PM

SUBJECT: Register, Michael, Shane CASE NUMBER: 19-004665

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: Ofc. Trudeau #493

PERSONAL CONTACT

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

On 08/07/19 at approximately 0217 hours, Ofc. Keel #508 and FTO Leskow #429 were traveling West on PGA Blvd, West of Shady Lakes Dr. They observed a dark colored sedan (Volvo) bearing FL tag (HMNC40) traveling West on PGA Blvd, in the u-turn lane just West of the intersection. The Volvo while making a u-turn traveled south on the East-bound lanes as if it was going straight off the roadway, then quickly turned left, going East on PGA Blvd in the outside straight travel lane. They continued to observe the Volvo as it approached the intersection of PGA Blvd/Shady Lakes Dr. The Volvo came to a complete stop at the intersection while East-bound traffic had a steady green light, causing another vehicle to (Semi-tractor and trailer) maneuver around it. Ofc. Keel conducted a traffic stop on the Volvp utilizing his patrol vehicles overhead light bar. As soon as Ofc. Keel ignited the light bar, the Volvo's lights turned off. Ofc. Keel approached the vehicle and observed a white male, later identified as the registered owner, Michael Shane Register, as the driver and the sole occupant of the vehicle.

OBSERVATION OF DRIVER:

Upon arrival I observed Michael sitting in the driver's seat with the vehicle turned off. I observed Michael's face to be flushed, the sclera of his eyes to be reddened, his pupils to be dilated more than a normal persons, and his reaction to light to be slowed. I also observed Michael's clothes to be ruffled and soiled with urine. I also observed Michael's walk to be unsteady as he walked to the rear of my patrol car. He crossed his feet and began leaning, needing to be steadied by Ofc. Keel.

DRIVER'S STATEMENTS:

Michael stated he was coming from Palm Beach Gardens and going home in Boynton Beach. He also stated he ran out of gas and was trying to go to the closest gas station (Shell) near the Turnpike/PGA Blvd. Michael advised he consumed a cocktail with dinner at a steakhouse restaurant in Palm Beach Gardens. Michael was unaware of his surroundings and changed his story when talking form one Officer to another. Michael originally told Ofc. Keel that he was coming from his house, and going to his house. Michael stated he was trying to get gas but ran out of gas because the Shell gas station he passed was too expensive.

ODORS:

Strong odor of the additives of an unknown alcoholic beverage emitting from his breath from a conversational distance.

GENERAL OBSERVATIONS

SPEECH: **Slow, slight slur**

ATTITUDE: **Polite**

CLOTHING: **Soiled (Urine), Ruffled**

MEDICAL/OTHER: **Michael stated he took medication for cancer, anxiety, and other heart conditions, however he did not know the names of them. He also stated he did not take his dosage of any prescribed medication today, last taking them the previous night before going to sleep. Michael also stated he does not have a limp and has no other medical ailments.**

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STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 7th day of August 20 19 by Ofc. Trudeau

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

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

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

SUBJECT: Register, Michael, Shane CASE NUMBER 19-004665

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:

REFUSED.

WALK & TURN:

REFUSED.

ONE LEG STAND:

REFUSED.

ROMBERG ALPHABET:

REFUSED.

FINGER TO NOSE:

REFUSED.

BREATH TEST RESULTS: | 1) Refused | 2) Refused | 3) N/A | 4) N/A |

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 7th day of August 2019 by Ofc. Trudeau

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

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

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

NOT A CERTIFIED COPY

TRUDEAU
(493)

19004665

FLORIDA DUI UNIFORM TRAFFIC CITATION A56H2DE

COUNTY OF: PALM BEACH 06
CITY (IF APPLICABLE): PALM BEACH GARDENS
☐ (1) F.H.P. ☒ (2) P.D. ☐ (3) S.O. ☐ (4) OTHER
AGENCY NAME: PALM BEACH GARDENS
AGENCY #: 78

IN THE COUNTY DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON

COMPLAINT (RETAINED BY COURT)

DAY OF WEEK	MONTH	DAY	YEAR	
WEDNESDAY	08	07	2019	03:25 ☒ A.M. ☐ P.M.

NAME (FIRST) FIRST: MICHAEL MIDDLE: SHANE LAST: REGISTER

STREET: 1851 RENAISSANCE CMNS BLVD - 12 (IF DIFFERENT THAN ONE ON DRIVER LICENSE "X" HERE ▶)

CITY: BOYNTON BEACH STATE: FL ZIP CODE: 33426

TELEPHONE NUMBER	DATE OF BIRTH MO	DAY	YR	RACE	SEX	HGT
	05	14	1971	W	M	601

DRIVER LICENSE NUMBER: R 2 2 3 5 5 7 7 1 1 7 4 0
STATE: FL CLASS: E CDL LICENSE: ☐ Y ☒ N YR LICENSE EXP: 2026 COMMERCIAL VEHICLE: ☐ YES ☒ NO

VEHICLE YR	MAKE	STYLE	COLOR	PLACARDED HAZARDOUS MATERIAL
2019	VOLV	4D	BLU	☐ YES ☒ NO

VEHICLE LICENSE NO.: HMNC40 TRAILER TAG NO.: STATE: FL YEAR TAG EXPIRES: 2020 ≥ 15 PASSENGERS: ☐ YES ☒ NO

UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY: PGA BLVD/SHADY LAKES DR. PALM BEACH GARDENS
MOTORCYCLE: ☐ YES ☒ NO
COMPANION CITATION(S): ☐ YES ☒ NO

FT. _____ MILES _____ ☐ N ☐ S ☐ E ☐ W OF NOCB _____

DID UNLAWFULLY COMMIT THE OFFENSE OF DRIVING UNDER THE INFLUENCE OF ALCOHOLIC BEVERAGES, CHEMICAL OR CONTROLLED SUBSTANCES; DID DRIVE, OR WAS IN ACTUAL PHYSICAL CONTROL OF A VEHICLE, WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE/CHEMICAL SUBSTANCE/CONTROLLED SUBSTANCE TO THE EXTENT NORMAL FACULTIES WERE IMPAIRED, OR WITH A BLOOD OR BREATH ALCOHOL LEVEL OF .08 OR ABOVE OF REF

COMMENTS PERTAINING TO OFFENSE (ONLY ACTUAL TEST RESULTS)
DUI - DRIVING UNDER INFLUENCE
RE-EXAM: ☐ YES ☒ NO

☐ AGGRESSIVE DRIVER | PASSENGER < 18 YEARS: ☐ YES ☒ NO | STATE STATUTE | SECTION: 316.193 | SUB-SECTION: (1)

CRASH: ☐ YES ☒ NO | DAMAGE TO OTHER PROPERTY: ☐ YES $ _____ ☒ NO | INJURY TO ANOTHER: ☐ YES ☒ NO | SERIOUS BODILY INJURY TO ANOTHER: ☐ YES ☒ NO | FATAL: ☐ YES ☒ NO

THIS IS A CRIMINAL VIOLATION, COURT APPEARANCE REQUIRED, AS INDICATED BELOW.

COURT DATE: 09/11/2019 TIME: 10:00 AM A56H2DE
NORTH COUNTY GOVERNMENT CENTER
3188 PGA Boulevard PBG, FL 33410
OFFICE LOCATION

ARREST DELIVERED TO _____ DATE _____

I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION. WILLFUL REFUSAL TO ACCEPT AND SIGN THIS CITATION MAY RESULT IN ARREST. I UNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF THE COURT.

X _____ SIGNATURE OF VIOLATOR

EFFECTIVE IMMEDIATELY, YOUR DRIVING PRIVILEGE IS SUSPENDED/DISQUALIFIED FOR:

☐ DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. THIS SUSPENSION IS FOR A PERIOD OF SIX MONTHS IF THIS IS THE FIRST VIOLATION OR ONE YEAR IF PREVIOUSLY SUSPENDED FOR DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR ONE YEAR FOR THE FIRST OFFENSE OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT OFFENSE.

☒ REFUSAL TO SUBMIT TO LAWFUL BREATH, BLOOD OR URINE TEST SECTION 322.2615, F.S. THIS SUSPENSION IS FOR A PERIOD OF ONE YEAR IF THIS IS A FIRST REFUSAL OR 18 MONTHS IF PREVIOUSLY SUSPENDED FOR THIS OFFENSE. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR A PERIOD OF ONE YEAR FOR A FIRST REFUSAL OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT REFUSAL.

LICENSE SURRENDERED? ☒ YES ☐ NO REASON REFUSAL
ELIGIBLE FOR PERMIT? ☒ YES ☐ NO REASON _____

UNLESS INELIGIBLE, THIS CITATION SHALL SERVE AS A TEMPORARY DRIVER LICENSE AND WILL EXPIRE AT MIDNIGHT ON THE 10TH DAY FOLLOWING THE DATE OF SUSPENSION.
AT THE LANTANA 33462-1516 BUREAU OF ADMINISTRATIVE REVIEWS OFFICE, YOU MAY REQUEST, WITHIN 10 DAYS AFTER THE DATE OF SUSPENSION, A REVIEW OF SUSPENSION BY THE DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES OR A REVIEW TO DETERMINE ELIGIBILITY FOR A RESTRICTED LICENSE IF THIS IS ~~YOUR FIRST~~ DUI RELATED OFFENSE. SEE REVERSE SIDE.

RANK/SIGNATURE OF OFFICER _____ BADGE NO. _____ ID NO. _____ TROOP/UNIT _____

HSMV 75894 (Rev. 10/14)

COMPLAINT

CASE NO. _____ DOCKET NO. _____ PAGE NO. _____

DATE	COURT ACTION AND OTHER ORDERS
	BAIL FIXED AT $ _____ OR CASH DEPOSIT OF $ _____ _____ SIGNATURE OF PERSON GIVING BAIL _____ SIGNATURE OF PERSON TAKING BAIL
	FINE IN THE AMOUNT OF $ _____ RECEIVED AS REQUIRED BY COURT SCHEDULE. _____ SIGNATURE OF CLERK
	CONTINUANCE TO _____ REASON _____
	CONTINUANCE TO _____ REASON _____
	BOND ESTREATED _____
	WARRANT ISSUED _____
	VIOLATOR FAILED TO APPEAR-DRIVER LICENSE SUSPENDED
	VIOLATOR ARRAIGNED ON _____ (DATE) PLEA: _____ FINDING: _____ ADJUDICATION: _____ SENTENCE: FINE _____ COST _____ JAILED _____ DAYS DRIVER IMPROVEMENT SCHOOL _____ OTHER _____ DRIVER LICENSE SUSPENDED OR REVOKED FOR _____ DAYS RECOMMEND DRIVER LICENSE SUSPENSION FOR _____ DAYS RECOMMEND RE-TEST _____ _____ SIGNATURE OF JUDGE
	TESTIMONY - JUDGE'S NOTES (OR OTHER COURT ORDERS):
	APPEAL BOND OF $ _____
	VIOLATOR'S FINGERPRINT WHEN APPLICABLE ⟶

NOT A CERTIFIED COPY

19-004665

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

I, **Ofc. Trudeau**, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of **Palm Beach Gardens Police Department**, and I do swear
(Name of law enforcement agency)

or affirm that on or about the **7th** day of **August**, 20 **19**, at **02:46** ☐ P.M ☑ A.M.

DRIVER **Michael** **Shane** **Register**,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# **R223557711740**, state of **FL**, was placed under lawful arrest for

the offense of **DUI** by **Ofc. Trudeau** and
(Name of Arresting Officer)

issued Citation # A56H2DE.

That on or about the **7th** day of **August**, 20 **19**, at **0410** ☐ P.M ☑ A.M.

in **PALM BEACH** County,

I requested that the driver submit to a ✕**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)

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this **7th** day of **August**, 20 **19**, by **Ofc. Trudeau**, 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 **08/07/2019**

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.

HSMV-BAR1001 (REV. 10/2016)

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PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 19-101330 PBSO ZONE 3-15

AGENCY CASE # 19-004665 CRASH CASE #

TIME OF STOP/CRASH 0217hrs DATE 8-7-19 DAY Wed

SUBJECT'S NAME Register, Michael, Shane RACE W SEX M

HGT 6-1 WGT 190 DOB 5-14-71

LOCATION PGA Blvd / Shady Lakes Dr

ARRESTING OFFICER'S NAME & ID TRUDEAU 493 AGENCY PBGPD

DIVISION: Road

NOTIFIED BY COMMO 0259

ARRIVAL AT FACILITY 0309

BREATH RESULTS: Arrest Time 0246

1. [redacted]
2. [redacted]
3.
4.

TESTING OFFICER'S ID 8656 PBSO VIDEOTAPE # N/A

NOT A CERTIFIED COPY

PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 19-101330 PBSO ZONE 3-15

AGENCY CASE # 19-004665 CRASH CASE #

TIME OF STOP/CRASH 0217hrs DATE 8-7-19 DAY Wed

SUBJECT'S NAME Register, Michael, Shane RACE W SEX M

HGT 6-1 WGT 190 DOB 5-14-71

LOCATION PGA Blvd / Shady Lakes Dr

ARRESTING OFFICER'S NAME & ID TRUDEAU 493 AGENCY PBGPD

DIVISION: Road

NOTIFIED BY COMMO 0259

ARRIVAL AT FACILITY 0309

BREATH RESULTS:

Arrest Time 0246

1. [redacted]
2. [redacted]
3.
4.

TESTING OFFICER'S ID 8656 PBSO VIDEOTAPE # N/A

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: PBGPD

SUBJECT: REGISTER, MICHAEL S. CASE NUMBER: 19-101330

DATE: 08/07/19 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 0330 ENDING TIME: 0343

BREATH TESTS RESULTS: 1) R TIME 0331 A.M./P.M. 2) N/A TIME XX A.M./P.M.

3) N/A TIME XX A.M./P.M. 4) N/A TIME XX A.M./P.M.

BREATH OPERATOR: J. BELL #8656

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: ARROGANT, TALKATIVE

CLOTHING: BLACK POLO SHIRT, BLUE JEANS, BLACK LOAFERS

MEDICAL CONDITIONS: MITRAL VALVE PROLAPSE, HEMOCHROMATOIS / DEPRESSION

MEDICATIONS: MULTIPLE MEDICATIONS CONTACT MY DOCTOR / HIV MED'S

OTHER: EYES: BLOODSHOT, GLASSY

ODOR OF AN UNKNOWN ALCHOLIC BEVERAGE COMING FROM BREATH

SUBJECT STATED HE DRANK 1 GLASS OF WINE (Q AND A)

COMMENTS: ARRIVED AT CENTER A/O BEGAN 20 MIN OBSERVATION AT 0309 HRS

SUBJECT STATED HE WOULD NOT TAKE BREATH TEST

A/O READ I.C.

SUBJECT STATED HE UNDERSTOOD I.C. AND REFUSED TO TAKE BREATH TEST

A/O READ RIGHTS

SUBJECT STATED HE UNDERSTOOD HIS RIGHTS

A/O CONDUCTED Q AND A

SUBJECT ANSWERED QUESTIONS

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: PBGPD

SUBJECT: REGISTER, MICHAEL S. CASE NUMBER: 19-101330

DATE: 08/07/19 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 0330 ENDING TIME: 0343

BREATH TESTS RESULTS: 1) R TIME 0331 A.M./P.M. 2) N/A TIME XX A.M./P.M.

3) N/A TIME XX A.M./P.M. 4) N/A TIME XX A.M./P.M.

BREATH OPERATOR: J. BELL #8656

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: ARROGANT, TALKATIVE

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SUBJECT STATED HE UNDERSTOOD HIS RIGHTS

A/O CONDUCTED Q AND A

SUBJECT ANSWERED QUESTIONS

NOT A CERTIFIED COPY

SUBJECT: Register, Michael S CASE NUMBER: 19-004665

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? Yes Sir

WHERE WERE YOU GOING? I was heading home

WHAT STREET OR HIGHWAY WERE YOU ON? Palm Beach Gardens Blvd

DIRECTION OF TRAVEL? E WHERE DID YOU START? Heading From West/My Home

WHAT TIME DID YOU START? 8:20pm WHAT TIME IS IT NOW? I have No Clue

WHAT IS TODAY'S DATE? August 5th or 6th WHAT DAY OF THE WEEK IS IT? Wednesday

WHAT COUNTY AND CITY ARE YOU IN NOW? Palm Beach County, West Palm

WHEN DID YOU LAST EAT? 7:00pm WHAT DID YOU EAT? Pizza, Chicken Wings, Calamari

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? Harassed

HOW MUCH DO YOU WEIGH? 190 HAVE YOU BEEN DRINKING? Yes, Fluids WHAT? Ice Tea, Water, Red Wine

HOW MUCH? 12 oz Red Wine WHERE? The Rest/Atlantic/Tuna Mike WITH WHOM? Greg/Patt Lynn

WHEN DID YOU HAVE YOUR FIRST DRINK? 6:20pm Red wine AND YOUR LAST DRINK? After Dinner, I dont know How Long it lasted

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? With my meal

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? No ARE YOU UNDER THE INFLUENCE? No

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? No HOW MUCH? —

WHAT? — WHERE? — WHEN? —

WHAT LINE OF WORK ARE YOU IN? Funeral Director WHEN DID YOU LAST WORK? Today 3pm

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? Mitro Valve Prolapse, Depression, HIV

ARE YOU SICK OR INJURED? No WHAT'S WRONG? Marks on wrists

DO YOU LIMP? No DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? Just getting into Police Vehicle

WERE YOU IN AN ACCIDENT TODAY? No

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN? —

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? No WHO? — WHY? —

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? Yes WHAT? HIV Medication WHEN? Yesterday Last Dose

DO YOU HAVE:

EPILEPSY?	No
GLASS EYE?	No
FALSE TEETH?	No
EAR INFECTION?	No
INNER EAR TROUBLE?	No
DIABETES?	Borderline / No insulin

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? No

DO YOU TAKE INSULIN? No IF SO, WHEN WAS YOUR LAST INJECTION? —

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? No WHERE? —

INTERVIEWER: TRUDEAU #493

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

PBSO #0129C REV. 9/93

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SUBJECT: Register, Michael S CASE NUMBER: 19-004665

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) Read On Camera

CONSTITUTIONAL WARNINGS

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

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

SUSPECT'S SIGNATURE: (X) Read On Camera

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

PBSO #0129B REV. 06/11

NOT A CERTIFIED COPY

PALM BEACH COUNTY
SHERIFF'S OFFICE
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐	539.001 FS	Other: All records relating to pawnbroker transactions.	
	☐	119.0712(2)	Other: Personal information contained within a motor vehicle record	

NOT A CERTIFIED COPY

REVIEW COMPLETED BY

Booking Number: 2019025746	**Date:** 08/07/2019
	Specialist Name/ID: howardt/7185