

0420791 19CT21780AMB

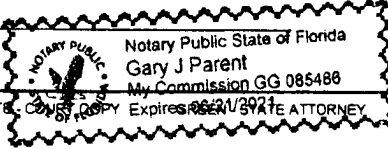
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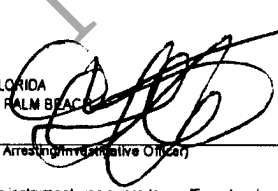
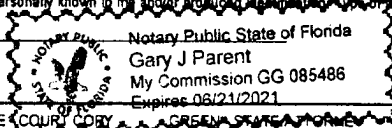
OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile		N									
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number (N.T.A.'s only) 06-19-140795															
Charge Type: Check as many as apply		☐ 1. Felony ☐ 2. Traffic Felony		☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		Weapon Seized / Type 1. Yes 2. No		Multiple Clearance Indicator 1											
Location of Arrest (Including Name of Business) INDIANTOWN RD (W) OF JUPITER FARMS RD JUPITER FL 33478						Location of Offense (Business Name, Address) INDIANTOWN RD (W) OF JUPITER FARMS RD JUPITER FARMS FL 33458															
Date of Arrest 11/23/2019		Time of Arrest 2001		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle TURN OVER TO TRISTEN WHITTAKER									
Name (Last, First, Middle) WHITTAKER MICHELLE						Alias (Name, DOB, Soc. Sec. #, Etc.)															
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian		Sex W		Date of Birth 07/17/1974		Height 509		Weight 160		Eye Color BLUE		Hair Color RED									
Complexion MED		Build MED		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATLEFT HIP "NOT SEAN'S"		Mental Status Divorced		Religion CHRISTIAN		Indication of Alcohol Influence Y ☐ N ☐ Unk. ☐		Indication of Drug Influence Y ☐ N ☐ Unk. ☐									
Local Address (Street, Apt. Number) 16697 127TH DR N JUPITER FL 33478				Phone (561) 633 2168				Residence Type 1. City 2. County 3. Florida 4. Out of State 1													
Permanent Address (Street, Apt. Number) 1900				Phone () ()				Address Source DEFENDANT													
Business Address (Name, Street) 1900				Phone () ()				Occupation WAITRESS													
D/L Number, State (FL)W326540747570		Sec. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) JUPITER FL		Citizenship US													
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		☐ 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											
☐ Parent ☐ Legal Custodian ☐ Other				Residence Phone () ()																	
Address (Street, Apt. Number) () ()				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 () ()													
Drug Activity S. Sell 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 DUI WITH PROPERTY DAMAGE				Counts 1		Domestic Violence ☐ Y ☒ N		Statute Violation Number 316.193(3)C1				Violation of ORD # OR									
Drug Activity /		Drug Type /		Amount / Unit /		Offense # 19-140795		Warrant / Capias Number				Bond									
Charge Description				Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number				Violation of ORD #									
Drug Activity /		Drug Type /		Amount / Unit /		Offense #		Warrant / Capias Number				Bond									
Charge Description				Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number				Violation of ORD #									
Drug Activity /		Drug Type /		Amount / Unit /		Offense #		Warrant / Capias Number				Bond									
Charge Description				Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number				Violation of ORD #									
Drug Activity /		Drug Type /		Amount / Unit /		Offense #		Warrant / Capias Number				Bond									
Location (Court, Room, Number, Address) 3228 GUN CLUB RD WPB FL 33406				Court Date and Time Month DECEMBER Day 19 Year 2019 Time 0830 AM 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) [Signature]				Date Signed 11/23/2019																	
HOLD for other Agency Name				Signature of Arresting Officer [Signature]				Name Verification (Printed by Arrestee) () ()													
☐ Dangerous ☐ Suicidal				☐ Resisted Arrest ☐ Other				Name of Arresting Officer (Print) INV E. K. WHITE				I.D. # 7209									
Intake Deputy [Signature]				ID # 7622				Pouch #				Transporting Officer E. K. WHITE									
ID # 7209				Agency PBSO				Witness here if subject signed with an "X" 1				PAGE 1									

NOV 25 2019

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OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	Juvenile	N
ADMIN	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 06- 19-140795				
	Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony		☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		Special Notes:			
CHARGES	Name (Last, First, Middle) WHITTAKER, MICHELLE.			Alias		Race W	Sex F	Date of Birth 07/17/1974		
	Charge Description DUI WITH PROPERTY DAMAGE			316.193(1)		Charge Description				
VICTIM	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	
PROBABLE CAUSE STATEMENT	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. ☐ confessed to _____ admitting to the below facts. ☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the 23 day of NOVEMBER 20 19 at 1812 ☒ A. M. ☐ P. M. (Specifically include facts constituting cause for arrest.) On Saturday, November 23, 2019 at approximately 1911 hours, I responded to Indiantown Road and Jupiter Farms Road, Jupiter (Palm Beach County) Florida to assist Deputy Terrence Lee with a traffic crash that involved a possible drunk driver. Upon my arrival I noticed a black Volkswagen, bearing current Florida license plates "7367QZ", stopped in the median with a Hispanic female standing next to it. Her family members had also arrived on scene. This vehicle incurred damage to its passenger side mirror where it was separated from the vehicle. It also had damage to its front passenger side door. A black KIA utility vehicle, bearing current Florida license plates "LZLQ11" was stopped ahead of it. A white female subject was leaning against the left rear side of it. Two small children were sitting in the back seat. This vehicle incurred damage to its left front side. I made contact with D/S Lee who told me he was dispatched to the crash and made contact with both drivers. The driver of the Volkswagen who identified herself as Sandra Castro-Velasquez. She explained the KIA struck her vehicle as she waited inside a paved turn around, awaiting westbound traffic to clear. She observed a white female subject driving and exiting the vehicle. They engaged in a brief conversation where the other driver suggested they could settle the damage amongst themselves. During this encounter Castro-Velasquez suspected her (the driver of the KIA) to have been drinking. She notified the police to have them respond. I made contact with the driver of the KIA. She was later identified as Michelle Whittaker by her Florida driver license. She was leaning against her vehicle and unsteady while standing. I watched her sway in a circular manner and stumble backwards on one occasion. I explained that I was assisting D/S Lee with his crash investigation. During this encounter I noticed her eyes were watery and glossy. Her cheeks were flushed. She was wearing faded blue jean shorts, a white shirt and brown sandals. I could smell a strong odor of an unknown alcoholic beverage emanating from her breath that intensified when she spoke. I told her I had completed my assistance with the crash investigation and would be conducting a criminal investigation for DUI. Moreover, I explained my suspicion was prompt by the previously mentioned indicators of impairment she exhibited. I advised her of her Constitutional Rights in which she acknowledged. I asked if she would be willing to speak with me regarding this incident. She obliged. She told me she drank two beers. She also explained the vehicle she hit did not have its lights on.									
	STATE OF FLORIDA COUNTY OF PALM BEACH INV E. K. WHITE (Signature of Arresting/Investigative Officer)									
	The foregoing instrument was sworn to or affirmed and subscribed before me this 23 day of NOVEMBER 20 19 by INV E. K. WHITE 7209									
	(Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification. Type of identification produced KNOWN)									
	Notary Public, Clerk of Court, Officer (F.S.S. 117.10)									
	Notary Public State of Florida Gary J Parent My Commission GG 085486 Expires 06/24/2021									
	Notary Public, Clerk of Court, Officer (F.S.S. 117.10) Notary Public State of Florida Gary J Parent My Commission GG 085486 Expires 06/24/2021									
	Notary Public, Clerk of Court, Officer (F.S.S. 117.10) Notary Public State of Florida Gary J Parent My Commission GG 085486 Expires 06/24/2021									
	Notary Public, Clerk of Court, Officer (F.S.S. 117.10) Notary Public State of Florida Gary J Parent My Commission GG 085486 Expires 06/24/2021									
	Notary Public, Clerk of Court, Officer (F.S.S. 117.10) Notary Public State of Florida Gary J Parent My Commission GG 085486 Expires 06/24/2021									

OBT Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Copies	1	Juvenile	N
ADMIN	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06-19-140795			
	Charge Type: Check as many as apply.		☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Special Notes:			
DEF	Name (Last, First, Middle) WHITTAKER, MICHELLE.				Alias	Race W	Sex F	Date of Birth 07/17/1974
	Charge Description DUI WITH PROPERTY DAMAGE		316.193(1)		Charge Description			
CHARGES	Charge Description				Charge Description			
	Charge Description				Charge Description			
VICTIM	Victim's Name (Last, First, Middle)				Race	Sex	Date of Birth	
	Local Address (Street, Apt. Number)				(City)	(State)	(zip)	Phone
	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. ☐ confessed to _____ admitting to the below facts. ☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the <u>23</u> day of <u>NOVEMBER</u> 20 <u>19</u> at <u>1812</u> ☒ A. M. ☐ P. M. (Specifically include facts constituting cause for arrest.)								
Her passengers were her six (6) year old twin sons. Based on my suspicion of her alcoholic beverage consumption I asked her to perform Standardized Field Sobriety Tasks (SFSTS) for the purpose of determining if she was impaired while operating a motor vehicle. She consented. Prior to her performance I asked if she was injured from the crash and needed EMS to respond. She told me she did not need EMS to come. I asked if she had any previous physical problems with her body that would inhibit her from performing light physical movements. I also asked if she was on medication. She conveyed she neither had anything wrong with her physically, nor was she taking medication. I noticed blood oozing from her shin down to her foot. She told me she cut herself when she was getting something out of the back of her vehicle. She did not suffer the injury in the crash. I initially administered the Romberg Balance task which I explained for her to stand with her feet together and tilt her head back. I asked her to close her eyes and complete a passage of 30 seconds in her mind without counting aloud. After the passage of 30 seconds she was to return her head back to its normal posture, open her eyes and say "STOP". She acknowledged the task by saying she understood. As she performed the task she swayed circularly and side to side. She eventually lost her balance, stumbled backwards and opened her eyes. On her second attempt she swayed and completed the task in 17 seconds. I escorted her to a smooth and level surface that was free from obstructions and debris. This area was well lighted by ambient lighting and the lights from my patrol car. I placed a yellow strip of tape on the roadway that formed a line. She acknowledged the line by placing her left foot on it when prompted to do so. The following SFSTSs were explained, demonstrated and acknowledged by her prior to her performance: HGN, The Walk and Turn, The One Leg Stand, The Finger to Nose and The Romberg Alphabet Recitation. Her deficiencies were recorded on another form on this worksheet. At the conclusion of the SFSTSs, coupled with the witnesses' observation of the defendant's vehicle hitting her vehicle and causing damage, to include her identifying the defendant as the driver, coupled with my observation of personal indicators of impairment exhibited by the defendant, probable cause was established for DUI. I told the defendant he were being placed under lawful arrest for DUI. I allowed her to call a family member to respond to take custody of her children and vehicle. Her daughter (Tristen Whittaker) arrived. The defendant allowed her daughter to take custody of her personal effects and siblings.								
STATE OF FLORIDA COUNTY OF PALM BEACH INV E. K. WHITE (Signature of Arresting/Investigating Officer)								
The foregoing instrument was sworn to or affirmed and subscribed before me this <u>23</u> day of <u>NOVEMBER</u> 20 <u>19</u> by <u>INV E. K. WHITE</u> (Print name of Arresting/Investigating Officer, who is personally known to me and/or produced identification. Type of identification produced <u>KNOWN</u>)								
Notary Public, Clerk of Court, Officer (F.S.S. 117.10) 								

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	Juvenile N	
ADMIN	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06- 19-140795					
	Charge Type: Check as many as apply.		☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Special Notes:					
CHARGES	Name (Last, First, Middle) WHITTAKER, MICHELLE.		Alias		Race W	Sex F	Date of Birth 07/17/1974			
	Charge Description DUI WITH PROPERTY DAMAGE		316.193(1)		Charge Description					
VICTIM	Victim's Name (Last, First, Middle)				Race	Sex	Date of Birth			
	Local Address (Street, Apt. Number)		(City)	(State)	(zip)	Phone	Address Source			
ADMINISTRATIVE	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. ☐ confessed to _____ admitting to the below facts. ☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the <u>23</u> day of <u>NOVEMBER</u> 20<u>19</u> at <u>1812</u> ☒ A.M. ☐ P.M. (Specifically include facts constituting cause for arrest.) She also took custody of the vehicle. I secured the defendant in handcuffs where they were double locked and checked for tightness. Afterward I began transport to the main jail breath analysis facility for further processing. Upon our arrival I escorted the defendant into the facility and began a 20 minute observation period. During this time the defendant did not ingest anything into her body orally or otherwise. Neither did she regurgitate. I escorted her into the testing room and asked her to provide breath samples for the purpose of determining her alcohol content. She refused. I read her implied consent and asked if she understood it. She told me she did understand the "consent". I asked if she would reconsider and provide breath samples. She refused again. At this time she was deemed a "refusal". I reminded her of the advisement of her "Rights" that were read on scene. She acknowledged her "rights". I asked if she would consent to an interview. She obliged. After the interview and medical clearance the defendant was booked into the main jail for DUI with property damage.									
STATE OF FLORIDA COUNTY OF PALM BEACH  INV E. K. WHITE (Signature of Arresting/Investigative Officer)		The foregoing instrument was sworn to or affirmed and subscribed before me this <u>23</u> day of <u>NOVEMBER</u> 20 <u>19</u> by <u>INV E. K. WHITE</u> (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification produced <u>KNOWN</u>								
Notary Public, Clerk of Court, Officer (F.S.S. 117.10) 		PAGE 3 OF 3								

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	Juvenile	n	
ADMIN	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06-19-140795						
	Charge Type: Check as many as apply ☐ 1. Felony ☐ 2. Traffic Felony		☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		Special Notes:				
DEF	Name (Last, First, Middle) Whittaker, Michelle.				Alias		Race W	Sex F	Date of Birth 07/17/1974		
	Charge Description DUI				316.193(1)		Charge Description				
CHARGES	Charge Description						Charge Description				
VICTIM	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 _____ ☐ confessed to _____ that he/she saw the arrested person commit the below acts. ☒ admitting to the below facts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the 23 day of November, 2019 at 1930hrs ☐ A.M. ☒ P.M. (Specifically include facts constituting cause for arrest.)											
On November 23, 2019 at 1820 hours I was dispatched to the area of Jupiter Farms Road and Indiantown Road in reference to a vehicle crash that was just west of the intersection. When I arrived I made contact with the drivers and asked how the crash occurred. While I was speaking with Michelle Whittaker (defendant) I could smell a strong odor of alcohol coming from her breath and person. She also had trouble with her coordination and a slight slur in her speech. Based on my observations I requested a DUI investigator. Investigator White responded to crash to investigate further. While I was waiting on his arrival I continued to investigate the vehicle crash. Investigator White arrived before I completed my crash investigation. When the crash investigation was completed I gave both parties back their vehicle information and drivers exchange of information form, and I told them that the crash was complete. The DUI investigation was turned over to Investigator White.											
STATE OF FLORIDA COUNTY OF PALM BEACH D/S T. Lee 28271 (Signature of Arresting/Investigative Officer) _____ The foregoing instrument was sworn to or affirmed and subscribed before me this 23 day of November, 2019 by D/S Lee (Print name of Arresting/Investigative Officer), who is personally known to me and produces identification. Type of identification produced Known Investigator E. White 7209 Notary Public, Clerk of Court, Officer (F.S.S. 117.10)											

PALM BEACH COUNTY SHERIFF'S OFFICE – **SWORN STATEMENT**

Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.



☒ WITNESS ☒ VICTIM ☐ OTHER

CASE #	19-140795	ZONE:	3-16	SUSPECT:	Michelle Whitaker	DATE & TIME OF ORIGINAL EVENT/OFFENSE:	11/23/2019 1912
EVENT TYPE:	DUI/CRASH	DEPUTY:	WHITE	ID#	7209		

COMPLETE EVERYTHING BELOW – PRINT LEGIBLY

LAST NAME:		FIRST NAME:		MIDDLE INITIAL:	RACE:	SEX:	
Castro-Velasquez		Sandra			H	F	
DATE OF BIRTH:	(MM/DD/YYYY)	YOUR HEIGHT:	YOUR WEIGHT:	YOUR HAIR COLOR:	YOUR EYE COLOR:		
08/22/2001		5'2"	180	BLK	BROWN		
YOUR HOME ADDRESS:		☐ CHECK IF HOMELESS		CITY:	STATE:	ZIP:	
14775 SW 172ND AVE				Indiantown	FL	34956	
YOUR WORK NAME & ADDRESS:		☐ CHECK IF UNEMPLOYED OR RETIRED		CITY:	STATE:	ZIP:	
McDonalds				Jupiter	FL		
WORK PHONE:	☐ CHECK IF NONE	CELL PHONE:	☐ CHECK IF NONE	HOME PHONE:	☐ CHECK IF NONE	EMAIL:	☐ CHECK IF NONE
()		()		()			

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL – PRINT LEGIBLY

YOUR NAME:	DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...
1 Sandra Castro-Velasquez	
I just got off work and was getting heading home. I came out and did my stop and I checked both ways to see if any cars were coming. The coast was clear so I drove to the middle and waited for all the cars to pass. It was busy so I waited a while. The lady pulls up from behind me and I see that she gassed and I was going to beep to be like with. Then that's where I hear the boom. It seemed like she wanted to run away so I went behind. She stopped. She ^{asked} told me if I was OK. I was on the phone with police already. She told me that we can work it out with our insurance. I then see her throw away a brown bottle on the floor. It looked like a budlight bottle. She then picks it up and throws it in her trunk. Hiding it	

READ AND SIGN

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:	☒ DEPUTY SHERIFF ☐ NOTARY PUBLIC FSS: 117.10
YOUR SIGNATURE: X	SWORN TO AND SUBSCRIBED BEFORE ME TODAY:
	DATE: 11/23/19
	SIGNATURE: ID: 7209

IF YOU DO NOT WISH TO PROSECUTE, COMPLETE THE ABOVE STATEMENT, READ THIS DISCLAIMER AND INITIAL BELOW. I AM OF LEGAL AGE AND I AM THE REPORTED VICTIM OF A CRIME UNDER FLORIDA LAW. I HEREBY STATE THAT I WILL NOT COOPERATE ANY FURTHER WITH THE INVESTIGATION OF THE ALLEGED CRIME. I FURTHER RELEASE THE PALM BEACH COUNTY SHERIFF'S OFFICE OF ANY PRESENT OR FUTURE RESPONSIBILITY AS TO MY CASE. I ACKNOWLEDGE THAT I UNDERSTAND MY RIGHTS AS A CRIME VICTIM, PARTICULARLY REGARDING VICTIM COMPENSATION ELIGIBILITY, WHICH INCLUDES SUCH BENEFITS AS REIMBURSEMENT FOR: DISABILITY; LOST WAGES; LOSS OF SUPPORT; MEDICAL, DENTAL, MENTAL HEALTH COUNSELING AND FUNERAL EXPENSES. I AM AWARE I MAY BE GIVING UP THESE RIGHTS FOR MY FAMILY AND MYSELF BY INITIALLING BELOW. I AM TAKING THIS POSITION OF MY OWN FREE WILL KNOWING THAT THE CASE CAN ONLY BE FURTHER INVESTIGATED AND PROSECUTED WITH MY COOPERATION.

☐ DO NOT WISH TO PROSECUTE (INITIAL)

(PROSECUTION WAIVER NOT TO BE USED FOR CASES INVOLVING DOMESTIC OR DATING VIOLENCE PER G.O. 508.00)

WHITE - RECORDS COPY CANARY - STATE ATTORNEY COPY PINK - OFFICER'S COPY GOLD - WITNESS / VICTIM COPY

SCANNED

NOV 25 2019

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 23 DAY OF NOVEMBER 20 19, AT 1812 ✓ AM PM
SUBJECT: WHITTAKER MICHELLE CASE NUMBER: 19-140795
AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV E. K. WHITE

PERSONAL CONTACT

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

OBSERVATION OF DRIVER:
SEE PC AFFIDAVITS

DRIVER'S STATEMENTS:

ODORS:
STRONG ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM SUBJECT'S BREATH.

GENERAL OBSERVATIONS

SPEECH: normal
ATTITUDE: POLITE COOPERATIVE AND INATTENTIVE
CLOTHING: white shirt, blue faded short jeans, brown flip flops
MEDICAL/OTHER: NONE

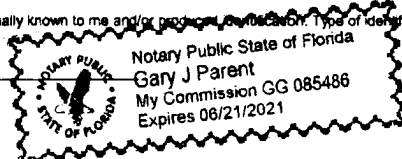
STATE OF FLORIDA
COUNTY OF PALM BEACH

INV E. K. WHITE
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 23 day of NOVEMBER 20 19 by INV E. K. WHITE

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

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



SCANNED
NOV 25 2019

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:

Subject was asked to stand with their feet together and place their hands by their side. They were asked to focus on the stimulus and follow it with their eyes. Lastly they were told not to move their head to assist in following the stimulus with their eyes. Subject showed equal pupil size that tracked equally. Her right eye lacked a smooth pursuit. I saw distinct and sustained Nystagmus at maximum deviation. I also saw an onset of Nystagmus prior to 45 degrees in both eyes. Subject swayed while performing this task.

WALK & TURN:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE WALK AND TURN. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject swayed while placed in the instructional position. During her performance she failed to touch heel to toe, she stepped off the line, she did not keep her hands by her side, she took an incorrect number of steps and she turned improperly.

ONE LEG STAND:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE ONE LEG STAND. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: She was unable to maintain her balance while her leg was elevated, she did not keep her hands by her side as instructed, she failed to count aloud as instructed, she dropped her foot on the ground.

FINGER TO NOSE:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE FINGER TO NOSE. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject swayed while performing this task. She missed touching the tip of her finger to the tip of her nose on 3 occasions. She failed to return her arms to her side after making contact with her nose on occasion.

ROMBERG ALPHABET:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE ROMBERG ALPHABET RECITATION. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject swayed while performing this task but recited the alphabet without flaw.

BREATH TEST RESULTS: 1) REFUSED 2) 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

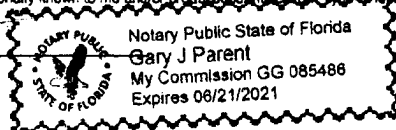
INV E. K. WHITE

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 23 day of NOVEMBER 2019 by INV E. K. WHITE

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

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



SCANNED
NOV 25 2019

WITNESS LIST

CASE NUMBER: 19-140795

ARRESTING OFFICER: INV E. K. WHITE

ADDRESS: HQ

PHONE NUMBERS (HOME): _____ (WORK) 561 688 3000

CAN TESTIFY TO: FACTS

NAME: D/S TERRENCE LEE

ADDRESS: DIST 3

PHONE NUMBERS (HOME) _____ (WORK) 561 688 3000

CAN TESTIFY TO: CRASH INVESTIGATION

NAME: SANDRA CASTRO-VELASQUEZ

ADDRESS 14775 SW 172ND AVE INDIANTOWN FL 34956

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: WITNESSING THE CRASH AND SEEING THE DEF EXIT

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) 0 _____ (WORK) 0 _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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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: _____

SCANNED

NOV 25 2019

TESTING FACILITY TASK REPORT

AGENCY: PBSOSUBJECT: WINTER, MICHELLECASE NUMBER: 19-140795DATE: 12/23/19VIDEO TAPE NUMBER: N/ABEGINNING TIME: 2109ENDING TIME: 2117BREATH TESTS RESULTS: 1) R TIME 2111 AM/PM (PM) 2) N/A TIME — AM/PM
3) — TIME N/A AM/PM 4) N/A TIME — AM/PMBREATH OPERATOR: G. PARSONS # 2909MAINTENANCE TECHNICIAN: KARL G. H. #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: RAPEDATTITUDE: CALM, QUIET, UPSET, CO-OPERATIVECLOTHING: JEAN SHORTS, L/S WHITE T-SHIRT, BROWN SANDALSMEDICAL CONDITIONS: NONEMEDICATIONS: NONEOTHER: EYES GLASSY AND BLOWING**REFUSED**A ADMITTED TO DRINKING 2 BUDWEISERS (Q1A)COMMENTS: ADVISED AT CENTER A/O BEGAN THE 20 MINUTE
DETERMINED PERIOD AT 2045 HRS.A STATED NO SHE WOULD NOT TAKE TESTA/O READ I/CA STATED SHE UNDERSTOOD I/C AND REFUSED TESTA/O ASKED A IF SHE RECALLED RIGHTS BEING READ
AT SCENE A STATED YES SHE DIDA/O CONDUCTED Q1A**REFUSED**A ANSWERED QUESTIONS**SCANNED**

NOV 25 2019

SUBJECT Wheeler, Michelle CASE NUMBER 19-190775

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 the 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 the 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 evidence in any criminal proceeding.

SUBJECT'S SIGNATURE ON _____

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 permitted to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be understood by you.
7. Any statement you give will be used against you in a court of law.

SCANNED
NOV 25 2014

SUBJECT'S SIGNATURE ON _____

Read on Camera

SUBJECT: WHITTAKER, MICHELLE CASE NUMBER: 19-140775

QUESTIONS AND ANSWERS

I AM NOW COMING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OR ALL OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? Yes
WHERE WERE YOU GOING? Actually going Home from gas station
WHAT STREET OR HIGHWAY WERE YOU ON? Indianapolis RD Going towards South
DIRECTION OF TRAVEL? W WHERE DID YOU START? Gas Station
WHAT TIME DID YOU START? 6:45pm WHAT TIME IS IT NOW? 8:45pm
WHAT IS TODAY'S DATE? 25th of Nov WHAT DAY OF THE WEEK IS IT? Saturday
WHAT COUNTY AND CITY ARE YOU IN NOW? Gun Club WVB FL
WHEN DID YOU LAST BAT? 6pm WHAT DID YOU EAT? Cheez Burger
WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? at the coast with the boys
HOW MUCH DO YOU WEIGH? 160 HAVE YOU BEEN DRINKING? Yes WHAT? Beer
HOW MUCH? 2 WHERE? Cheez Burger WITH WHOM? Family
WHEN DID YOU HAVE YOUR FIRST DRINK? 6:30pm AND YOUR LAST DRINK? 7:00pm
HOW DID YOU CONSUME YOUR LAST TWO DRINKS? Slew
CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? Yes ARE YOU UNDER THE INFLUENCE? Yes
HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? NO SIR HOW MUCH?
WHAT? WHERE? WHEN?
WHAT LINE OF WORK ARE YOU IN? Waitress WHEN DID YOU LAST WORK? Yesterday
DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? NO SIR WHAT?
ARE YOU SICK OR INJURED? NO WHAT'S WRONG?
DO YOU LIMB? NO DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? NO
WERE YOU IN AN ACCIDENT TODAY? Yes
HAVE YOU TAKEN ANY DRUGS OR SMOKE ANY MARIJUANA TODAY? NO WHEN?
HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? NO WHEN?
ARE YOU TAKING ANY PRESCRIPTION MEDICINES? NO WHAT?
DO YOU HAVE:
EPILEPSY? NO
GLASS EYE? NO
FALSE TEETH? NO
EAR INFECTIONS? NO
INNER EAR PROBLEMS? NO
DIABETES? NO
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 BEEN IN ANY OTHER STATE? NO WHEN?
INTERVIEWER: INV. E.K. WHITE

SCANNED
NOV 25 2019

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

I, INV E. K. WHITE, a duly certified Law Enforcement Officer or Correctional Officer,
 (Name of Officer reading Implied Consent Warning)

am a member of PBSO, and I do swear
 (Name of law enforcement agency)

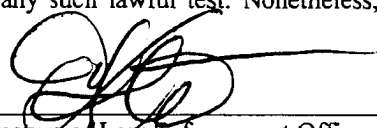
or affirm that on or about the 23 day of NOVEMBER, 20 19, at 2001 ☒ P.M. ☐ A.M.

DRIVER MICHELLE WHITTAKER
 (Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

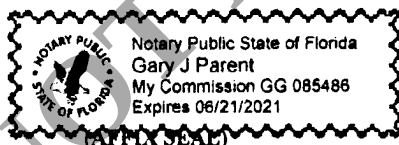
DL# (FL)W326540747570, state of FLORIDA, was placed under lawful arrest for
 the offense of DUI WITH PROPERTY DAMAGE by INV E. K. WHITE and
 issued Citation # _____
 (Name of Arresting Officer)

That on or about the 23 day of NOVEMBER, 20 19, at 2111 ☒ 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)



The foregoing instrument was sworn and subscribed before

me this 23 day of NOVEMBER, 20 19,

by INV E. K. WHITE,

who is personally known to me or who has produced

KNOWN _____ as identification

Notary Public _____

HSMV-BAR1001 (REV. 10/2016)

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.

SCANNED

NOV 25 2019



**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	☐	782.04 (FS)	Other: Witness	
	☐	539.001(h)-(l)FSS, 539.003 FSS	Other: Pawn Broker Information	

REVIEW COMPLETED BY

Booking Number: 2019037782

Date: 11/24/2019

Specialist Name/ID: M. Tooks #8557

SCANNED
NOV 25 2019