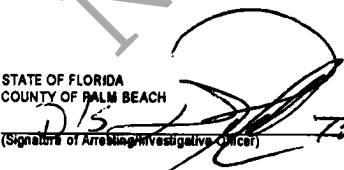


0508901

1384

ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		Juvenile ☒ N												
OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-19-085402												
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 01														
Location of Arrest (Including Name of Business) Powerline Road / Boca Grove blvd, Boca Raton, FL 33433				Location of Offense (Business Name, Address) Powerline Road / Boca Grove blvd, Boca Raton, FL 33433														
Date of Arrest 06/23/2019	Time of Arrest 00:19	Booking Date 06/23/2019	Booking Time	Jail Date	Jail Time	Location of Vehicle Westway Towing, 1700 NW 1st Ave, Boca Raton, FL 33432, (561) 368-4466												
Name (Last, First, Middle) Timmons, Patrick, Kevin				Alias (Name, DOB, Soc. Sec. #, Etc.)														
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex M	Date of Birth 1/29/1963	Height 5'09	Weight 170	Eye Color brown	Hair Color brown	Complexion light											
Build medium																		
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) none				Marital Status Single	Religion CATHOLIC	Indication of Alcohol Influence Drug Influence ☐ Y ☐ N ☐ Unk.												
Local Address (Street, Apt. Number) (City) (State) (Zip) 15135 Michelangelo Blvd, Delray Beach, FL 33546				Phone (561) 674 3045		Residence Type 1. City 2. County 3. Florida 4. Out of State 2												
Permanent Address (Street, Apt. Number) (City) (State) (Zip)				Phone		Address Source verbal												
Business Address (Name, Street) (City) (State) (Zip)				Phone		Occupation salesman												
DL Number, State 103094187, SC		Soc. Sec. Number		INS Number		Place of Birth (City, State) Fort Lauderdale, FL												
Citizenship US																		
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											
Parent Name (Last) (First) (Middle) 1. OK				Residence Phone														
Legal Custodian 2. OK				Business Phone														
Address (Street, Apt. Number) (City) (State) (Zip) 3. OK																		
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												
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>Drug Activity N. N/A P. Possess</td> <td>S. Sell B. Buy T. Traffic</td> <td>R. Smuggle D. Deliver E. Use</td> <td>K. Dispense/ Distribute</td> <td>M. Manufacture/ Produce/ Cultivate</td> <td>Z. Other</td> <td>Drug Type N. N/A A. Amphetamine</td> <td>B. Barbiturate C. Cocaine E. Heroin</td> <td>H. Hallucinogen M. Marijuana O. Opium/deriv.</td> <td>P. Paraphernalia/ Equipment S. Synthetics</td> <td>U. Unknown Z. Other</td> </tr> </table>								Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine	B. Barbiturate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/deriv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other
Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine	B. Barbiturate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/deriv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other								
Charge Description Driving Under the Influence				Counts 1	Domestic Violence ☐ Y ☒ N	Statute Violation Number 316.193(1)		Violation of ORD #										
Drug Activity N				Drug Type N	Amount / Unit	Offense # 19-085402		Warrant / Capias Number										
Bond																		
Charge Description Refusal to submit to test (2nd or subsequent refusal)				Counts 1	Domestic Violence ☐ Y ☒ N	Statute Violation Number 316.193		Violation of ORD #										
Drug Activity N				Drug Type N	Amount / Unit	Offense # 19-085402		Warrant / Capias Number										
Bond																		
Charge Description Driving with a suspended license with knowledge				Counts 1	Domestic Violence ☐ Y ☒ N	Statute Violation Number 322.34(10)(B)(1)		Violation of ORD #										
Drug Activity N				Drug Type N	Amount / Unit	Offense # 19-085402		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) South County Courthouse, Courtroom #1, 200 W. Atlantic Ave., Delray Beach, FL 33444 - Ph: (561) 355-2996																		
Court Date and Time Month July Day 22 Year 2019 Time 08:30 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) <i>Patrick Timmons</i>								Date Signed 06/23/2019										
HOLD for Other Agency Name: <i>Patrick Timmons</i>				Signature of Arresting Officer <i>[Signature]</i>		Name Verification (Printed by Arrestee) <i>[Signature]</i>												
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:				Name of Arresting Officer (Print) D/S POINTU P.		I.D. # 16032												
Intake Deputy <i>[Signature]</i>				I.D. # 16032		Agency PBSO												
Witness here if subject signed with an X																		

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 06-19-085402							
CHARGES	Charge Type: Check as many as apply. ☐ 1. Felony ☒ 2. Traffic Felony ☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other									
DEF	Name (Last, First, Middle) Timmons, Patrick, Kevin Alias _____ Race W Sex M Date of Birth 1/29/1963									
CHARGES	Charge Description _____ Charge Description _____ Charge Description _____ Charge Description _____									
VICTIM	Victim's Name (Last, First, Middle) STATE OF FLORIDA, . 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. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the <u>22</u> day of <u>JUNE</u> 20 <u>19</u> at <u>2341</u> ☐ A.M. ☒ P.M. (Specifically include facts constituting cause for arrest.)										
On Saturday June 22, 2019, at approximately 2341hrs, while on routine patrol around the 21,500 block of Powerline Road, I observed a white Ford Expedition bearing South Carolina tag# JKK-742 standing southbound in the right lane. The aforementioned vehicle was obstructing the normal flow of traffic (at a stand still) and multiple vehicles were going around the vehicle to avoid a rear end collision. The driver was identified by his suspended South Carolina driver license as Patrick Timmons. Importantly, Patrick had an odor of an unknown alcoholic beverage on his breath and his eyes were blood shot red and glassy. Patrick speech was also slurry. Moreover, Patrick stated that he was drinking in Delray Beach and he was currently in Delray Beach. Furthermore, after issuing Patrick several citations for my traffic stop, I turned over the aforesaid investigation to D/S P. Pointu ID# 16032 who conducted a DUI investigation.										
NOT A CERTIFIED COPY										
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH  D/S D. POWELL (Signature of Arresting/Investigative Officer)									
The foregoing instrument was sworn to or affirmed and subscribed before me this <u>23</u> day of <u>JUNE</u> 20 <u>19</u> by <u>D/S D. POWELL</u> (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>D/S D. POWELL</u> <u>D/S P. Pointu ID# 16032</u> Notary Public, Clerk of Court, Officer (F.S.S. 117.10)										
										PAGE <u>1</u> OF <u>1</u>

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 22 DAY OF June 20 19, AT 23:41 AM ☒ PM

SUBJECT: Timmons, Patrick, Kevin CASE NUMBER: 19-085402

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S POINTU P.

PERSONAL CONTACT

DRIVING PATTERN: Actual physical control (physical evidence or statements putting def. behind wheel of vehicle)

Patrick Timmons was sitting in the driver seat of a Ford Expedition bearing South Carolina tag JKK742, the car was stopped on the roadway, impeding traffic, on lane 2 of Southbound Powerline road, South of the intersection with Boca Grove blvd, unincorporated Boca Raton, Palm Beach County, Florida. He was identified by his SC driver's license.

Upon my arrival, Timmons was still sitting on the driver's seat with the engine running.

OBSERVATION OF DRIVER:

Glassy and bloodshot eyes. Very slow and sluggish. Drowsy. Unsteady gait.

DRIVER'S STATEMENTS:

Post Miranda, admitted having been drinking two beers since 5 pm. Also admitted knowing that his driver's license was suspended.

ODORS:

odor of unknown alcohol beverage that become stronger when he talked.

GENERAL OBSERVATIONS

SPEECH: slurred speech

ATTITUDE: Initially cooperative

CLOTHING: blue polo shirt, khaki shorts, khaki shoes

MEDICAL/OTHER: no medical condition disclosed, no medication taken. Once at the BAT he disclosed heart problem and taking Amiodarone and blood pressure medication.

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S POINTU P.

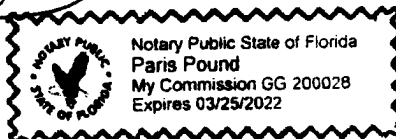
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 23rd day of June 20 19 by D/S POINTU P.

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

Paris Pound (#24639)

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



SCANNED
JUN 23 2019

SUBJECT: Timmons, Patrick, Kevin

CASE NUMBER 19-085402

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:

Swayed. Could not keep both of his feet together. Moved his head multiple times and had to be reminded to keep his head still. Had also to remind him to focus on the stimulus as he was looking at me instead. No resting nystagmus. Equal pupils. LOC present. Glassy and bloodshot. Very early onset of HGN.

WALK & TURN:

Could not get into the instructional stance as he lost his balance multiple times attempting to do so. Eventually stood with both feet more than 5 inches apart. Also started before being told. Did not count out loud. Took 11 wide steps forward, more than 5 inches apart. Stepped off the line. Did not perform the proper turn. Did not walk back and stopped the task.

ONE LEG STAND:

Started the task before being told, lowered his leg multiple times, stopped the task after counting 1005 and said "I didn't do to well".

FINGER TO NOSE:

Open his eyes multiple time. Swayed. Touched the side of his nose at every step.

ROMBERG ALPHABET:

Opened his eyes Recited: "A B C D E F G H I J J Q F J" then said that's about it.

BREATH TEST RESULTS: refused

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S POINTU P.

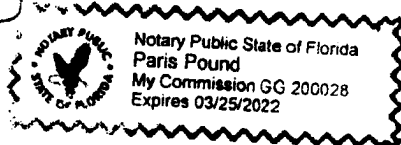
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 23rd day of June 2019 by D/S POINTU P.

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

Paris Pound (#24639)

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



SCANNED
JUN 23 2019

WITNESS LIST

CASE NUMBER: 19-085402

ARRESTING OFFICER: D/S POINTU P.

ADDRESS: Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

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

CAN TESTIFY TO: see report

NAME: D/S Powell

ADDRESS: Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

PHONE NUMBERS (HOME) 0 (WORK) (561) 688 3000

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) 0 (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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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
JUN 23 2019

TESTING FACILITY TASK REPORT

AGENCY: P1350

SUBJECT: TIMMONS, PATRICK A CASE NUMBER: 19-085402

DATE: 06/23/19 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 01:33 ENDING TIME: 01:50

BREATH TESTS RESULTS: 2) R TIME 01:41 A.M./P.M. 2) N/A TIME — A.M./P.M.
1. VNM, 196 01:41 3) N/A TIME — A.M./P.M. 4) N/A TIME — A.M./P.M.

BREATH OPERATOR: P. POUND # 24639

MAINTENANCE TECHNICIAN: J. KARLECKE # 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: CALM, QUIET

CLOTHING: GARY PANTS, BLUE SHIRT, GREEN SHOES

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER: EYES

A. STATED HE HAD A BOTTLE OF BEER IN Q1A
COMMENTS: ARRIVED AT CENTER A/D BEGAN THE 20
MINUTE OBSERVATION PERIOD AT 01:11 HRS

A. AGREED TO TAKE TEST.

A. REFUSED TO FOLLOW INSTRUCTIONS AS FAR AS
TAKING TEST. A. REFUSED TO BLOW, THEN STARTED TO
BLOW, BUT REFUSE TO KEEP THEN TONE GOING.

A/D. READ I/C A. STATED HE UNDERSTOOD I/C
AND WOULD REFUSE TO TEST.

A/D. READ RIGHTS A. STATED HE UNDERSTOOD RIGHTS

A/D. CONDUCTED Q1A

A. ANSWER QUESTIONS.

REFUSED

SCANNED

JUN 23 2019

SUBJECT: Timmons, Patrick A CASE NUMBER: 19-085402

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 D/S. P. POINTU of the PBSO

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

SCANNED

SUBJECT: Timmons, Patrick K CASE NUMBER: 19-085402

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? > WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

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

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE: EPILEPSY? _____
 GLASS EYE? _____
 FALSE TEETH? _____
 EAR INFECTION? _____
 INNER EAR TROUBLE? _____
 DIABETES? _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? IL WHERE? _____

INTERVIEWER: _____

SCANNED
JUN 23 2019

**FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT**

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006029 Software: 8100.27
Date of Test: 06/23/2019

Date of Last Agency Inspection: 06/13/2019
Observation Period Began: 01:11
Subject's Name: PATRICK K TIMMONS

DOB: 01/29/1963 Sex: M

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:	Test	g/210L	Time
	Diagnostics Check	OK	01:36
	Air Blank	0.000	01:37
	Control Test	0.081	01:37
	Air Blank	0.000	01:38
	Subject Sample #1	VNM*	01:41
	Air Blank	0.000	01:41
	Air Blank	0.000	01:43
	Subject Sample #2	REF**	01:43
	Air Blank	0.000	01:44
	Control Test	0.078	01:44
	Air Blank	0.000	01:45
	Diagnostics Check	OK	01:45

*Volume Not Met (0.196 - Breath Sample Not
Reliable to Determine Breath Alcohol Level)
**Subject Test Refused

Cylinder Lot: 00919080A3
Exp: 03/05/2021

State of Florida, County of Palm Beach,

Personally appeared before me the undersigned authority, who (X) is personally known to me or
() produced _____ as identification, and who after being placed under oath,
states:

I PARIS D POUND, hold a valid Breath Test Operator permit issued by the Florida
Department of Law Enforcement, I administered the above breath test to the subject named above in
accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate
report of that breath test.

Breath Test Operator: _____

Signature

Date: 06/23/19

Sworn to (or affirmed) before me this 23rd day of JUNE, 2019

Signature of Notary Public-State of Florida

Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic
accident investigation officers and traffic infraction enforcement officers are notaries public when engaged
in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is
admissible without further authentication and is presumptive proof of the results herein. To be used in
accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

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

19-085402

I, D/S POINTU P., a duly certified Law Enforcement Officer or Correctional Officer,

(Name of Officer reading Implied Consent Warning)

am a member of Palm Beach County Sheriff's Office, and I do swear

(Name of law enforcement agency)

or affirm that on or about the 23 day of June, 20 19, at 00:19 ☐ P.M. ☒ A.M.

DRIVER Patrick Kevin Timmons,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# 103094187, state of South Carolina, was placed under lawful arrest for

the offense of Driving Under the Influence by D/S POINTU P. and
(Name of Arresting Officer)

issued Citation # A2G3WLP

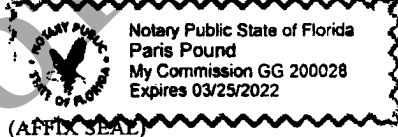
That on or about the 23rd day of June, 20 19, at 01:41 ☐ P.M. ☒ A.M.

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:

The foregoing instrument was sworn and subscribed before

me this 23rd day of June, 20 19,

by D/S POINTU P.,

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

Notary Public Paris Pound (#246391)

Signature of Attesting Officer

Title _____

Date 06/23/2019

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)

SCANNED
JUN 23 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	☐	539.001(b)(1), 539.003 FSS	Other: Pawn Broker Information	
	☐	3119.0712 (2)	Other: Personal Information Contained in a Motor Vehicle Record	

REVIEW COMPLETED BY

Booking Number: 2019020549	Date: 6/23/2019
	Specialist Name/ID: M. Took #8557

SCANNED
JUN 23 2019