

0411707

3289

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 <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number (N.T.A.'s only) <b>06-16-166029</b>																															
Charge Type: Check as many as apply <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 2 1. Yes 2. No N/A		Multiple Clearance Indicator 03																															
Location of Arrest (Including Name of Business) <b>2408 TREASURE ISLE DR PBC</b>				Location of Offense (Business Name, Address) <b>DONALD ROSS RD / PROSPERITY FARMS RD PBC</b>																															
Date of Arrest <b>12/17/2016</b>		Time of Arrest <b>2:15 PM</b>		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle																							
Name (Last, First, Middle) <b>BARTHOLOMEW, PAUL</b>				Alias (Name, DOB, Soc. Sec. #, Etc.)																															
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex <b>M</b>		Date of Birth <b>4/24/1969</b>		Height <b>6'00</b>		Weight <b>200</b>		Eye Color <b>BROWN</b>		Hair Color <b>GREY</b>		Complexion <b>LIGHT</b>		Build <b>MED</b>																			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) N/A				Marital Status N/A		Religion NONE		Indication of Alcohol Influence Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Unk <input type="checkbox"/>		Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk <input type="checkbox"/>																									
Local Address (Street, Apt. Number) (City) (State) (Zip) <b>2408 TREASURE ISLE DRIVE, PALM BEACH GARDENS, FL, 33410</b>				Phone <b>(561) 776-8411</b>				Residence Type: 1. City 2. County 3. Florida 4. Out of State <b>2</b>																											
Permanent Address (Street, Apt. Number) (City) (State) (Zip) <b>2408 TREASURE ISLE DRIVE, PALM BEACH GARDENS, FL, 33410</b>				Phone ( )				Address Source <b>VERBAL</b>																											
Business Address (Name, Street) (City) (State) (Zip) ( )				Phone ( )				Occupation <b>BANKER</b>																											
D/L Number, State <b>B634681691440, FL</b>		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) <b>GEORGETON, VIRGINIA</b>		Citizenship <b>US</b>																											
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile																							
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile																							
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other:		Name (Last) (First) (Middle)		Address (Street, Apt. Number) (City) (State) (Zip)		Residence Phone ( )		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 <input type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)				School Attended		Grade																													
Property Come? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property		Value of Property																															
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Dispense/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other		Drug Type N. N/A A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Denv.		P. Paraphernalia/ Equipment S. Synthetics		U. Unknown Z. Other															
Charge Description <b>DUI REFUSAL</b>		Counts <b>1</b>		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number <b>316.1939</b>		Violation of ORD #																											
Drug Activity <b>N</b>		Drug Type <b>N</b>		Amount / Unit <b>/</b>		Offense # <b>16-166029</b>		Warrant / Capias Number <b>/</b>		Bond <b>/</b>																									
Charge Description <b>RESISTING ARREST</b>		Counts <b>1</b>		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number <b>843.02</b>		Violation of ORD #																											
Drug Activity <b>N</b>		Drug Type <b>N</b>		Amount / Unit <b>/</b>		Offense # <b>16-166029</b>		Warrant / Capias Number <b>/</b>		Bond <b>/</b>																									
Charge Description <b>FLEEING OR ATTEMPTING TO ELUDE</b>		Counts <b>1</b>		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number <b>316.1935(2)</b>		Violation of ORD #																											
Drug Activity <b>N</b>		Drug Type <b>N</b>		Amount / Unit <b>/</b>		Offense # <b>16-166029</b>		Warrant / Capias Number <b>/</b>		Bond <b>/</b>																									
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number		Violation of ORD #																											
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond																									
Location (Court, Room Number, Address) <b>NORTH COUNTY COURTHOUSE / 3188 PGA BLVD, PALM BEACH GARDENS, FL 33410</b>																																			
Court Date and Time Month <b>JANUARY</b> Day <b>11</b> Year <b>2017</b> Time <b>0830</b> AM <input checked="" type="checkbox"/> 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 WILL 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) <b>[Signature]</b>														Date Signed																					
HOLD for other Agency Name: <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:				Signature of Arresting Officer <b>[Signature]</b> D/S P SCARTOZZI #21289				Name Verification (Printed by Arrestee) <b>SCANNED</b>																											
Intake Deputy <b>G. Henderson</b>				ID # <b>4716</b>				Pouch #				Transporting Officer <b>SAME</b>				ID # <b>21289</b>				Agency <b>PBSO</b>				Witness here if present signed with "X"				DEC 18 2016				PAGE 1 OF 1			

OBTS Number		<b>PROBABLE CAUSE AFFIDAVIT</b>		1. Arrest 3. Request For Warrant 2. N.T.A. 4. Request For Capias		1	Juvenile	N
Agency ORI Number <b>FLO 5 0 0 0 0 0</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number <b>06</b>		<b>16-166029</b>		
Charge Type: Check as many as apply		<input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes				
Defendant Name (Last, First, Middle) <b>BARTHOLOMEW PAUL ANDREW</b>								
Race		Sex		Date of Birth				
<b>W</b>		<b>M</b>		<b>4/24/1969</b>				
Charge <b>Resist W/O Violence</b>				Charge <b>Fleeing or attempting to elude a law enforcement officer</b>				
Victim Name (Last, First, Middle) <b>STATE OF FLORIDA</b>								
Local Address (Street, Apt. Number)		City		State		Zip		Phone
Business Address (Street, Apt. Number)		City		State		Zip		Phone
								Address Source
								Occupation
The undersign 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... <input checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to admitting to the below facts. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.								
On the <b>17</b> day of <b>DECEMBER</b> 20 <b>16</b> at <b>9:19pm</b> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM								

On 12/17/2016 at approximately 2115 hours, while conducting a traffic control detail at the intersection of Donald Ross Rd and Prosperity Farm Rd, a Black Mercedes (FL tag WFM7N) pulled up to where I was standing. I made contact with the driver (later identified as Paul Bartholomew) and asked him if he lived in the area or if he was going to to see the Christmas lights at Bay Harbor.

When Paul pulled up, I immediately noticed his bloodshot glassy eyes and smelled a strong odor of an alcoholic beverage coming from his person that got stronger when he spoke. When he answered me he was slurring his words to the point that I could barely understand him.

Based on my observations, I ordered Paul to stop and turn off his car. Paul continued to inch his vehicle forward as if he was trying to get by my car without hitting it. I ordered him several more times to stop his car and pull over to the side of the road.

After clearing my car, Paul accelerated quickly South on Prosperity Farms Rd. I got into my car and caught up to him about a quarter mile down the road. I activated my lights on my marked patrol vehicle #68612 in an attempt to get him to stop. He continued to drive South so I activated my siren. Paul drove into the residential area of Mariners cove. At no time did Paul reach high speeds.

As we pulled into Mariners cove I was 2 feet from his bumper. He activated the security gate to let in his vehicle. I started to follow his vehicle in but he stopped right as my vehicle was underneath the raised arm of the gate. He paused for a second and looked at the arm to see if it was going to come down on my vehicle.

When it didn't Paul drove up to his residence at 2408 TREASURE ISLE DR. I pulled up behind him and watched Paul get out of the vehicle and proceed towards the garage door of the residence. I got out of my vehicle activated my Dart Firing Stun Gun and ordered Paul to the ground. Paul eventually got to the ground.

The foregoing instrument was sworn to and affirmed before me this <b>17th</b> day of <b>December</b> 20 <b>2016</b> by:	
<b>PATRICK SCARTOZZI</b> Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	<b>D/S SWANSON</b> Name of Arresting/Investigating Officer
<b>26674</b> Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	<b>26674</b> Signature of Arresting/Investigating Officer

SCANNED

DEC 18 2016

2016 DEC 18 AM 5:59

Page  
1 of 2



# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 17 DAY OF December 20 16, AT 2113 AM ☒ PM

SUBJECT: BARTHOLOMEW, PAUL CASE NUMBER: 16-166029

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S P SCARTOZZI #21289

## PERSONAL CONTACT

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

See Supplemental probable cause affidavit provided by D/S Swanson ID #26674

## OBSERVATION OF DRIVER:

Upon contact with the driver I immediately detected an obvious and strong odor of an unknown alcoholic beverage emitting from his person and face area which intensified as he spoke to me. He had glassy, glazed, and blood shot eyes. His speech was slow, slurred, thick, and at times difficult to understand. His movements were slow and deliberate while retrieving the vehicle documents. He was lethargic in his movements with poor coordination. He had an unsteady gate while walking to my patrol vehicle.

## DRIVER'S STATEMENTS:

Immediately upon getting close to the driver I could smell the overwhelmingly strong odor of an unknown alcoholic beverage emitting from the driver's general area. When I got close to the driver the odor of an unknown alcoholic beverage intensified. Driver would not answer any questions, however he would ask me the same questions over and over again for example while I was walking him back to the front of my patrol vehicle he asked if he could say goodbye to his girlfriend before we left, I informed he would be able to speak to his girlfriend after he was done and he asked the same question again.

## ODORS:

A strong and obvious odor of an unknown alcoholic beverage was emitting from his person and face area. This odor intensified as she spoke with me.

## GENERAL OBSERVATIONS

SPEECH: Very slow, Slurred, Thick, Difficult to understand

ATTITUDE: Cooperative, Mood swings

CLOTHING: White long sleeve T shirt, Blue Jean pants, Black Shoes

MEDICAL/OTHER: Defendant advised he has no medical problems.

STATE OF FLORIDA  
COUNTY OF PALM BEACH

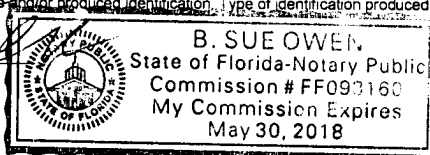
D/S P SCARTOZZI #21289

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 17 day of December 20 16 by D/S P SCARTOZZI #21289

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

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



SCANNED  
DEC 18 2016

SUBJECT: BARTHOLOMEW, PAUL

CASE NUMBER 16-166029

### ROADSIDE TASKS

#### HORIZONTAL GAZE NYSTAGMUS:

- |  |  |
|--|--|
| <input type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT                           | <input type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT                           |
| <input type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES          | <input type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES          |

#### Other Observations:

Immediately upon getting close to the driver I could smell the overwhelmingly strong odor of an unknown alcoholic beverage emitting from the driver's general area. When I got close to the driver the odor of an unknown alcoholic beverage intensified. Driver would not answer any questions, however he would ask me the same questions over and over again for example while I was walking him back to the front of my patrol vehicle he asked if he could say goodbye to his girlfriend before we left, I informed he would be able to speak to his girlfriend after he was done and he asked the same question again.

#### WALK & TURN:

**\*\*Refused\*\***

#### ONE LEG STAND:

**\*\*Refused\*\***

#### FINGER TO NOSE:

**\*\*Refused\*\***

#### ROMBERG ALPHABET:

**\*\*Refused\*\***

#### BREATH TEST RESULTS:

1) REFUSED 2)            3)            4)           

STATE OF FLORIDA  
COUNTY OF PALM BEACH

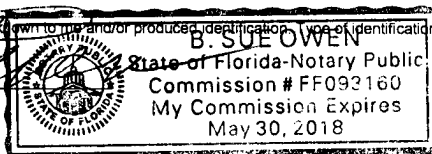
D/S P SCARTOZZI #21289

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 17 day of December 20 16 by D/S P SCARTOZZI #21289

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

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



**SCANNED**  
**DEC 18 2016**

# WITNESS LIST

CASE NUMBER: **16-166029**

ARRESTING OFFICER: **D/S P SCARTOZZI #21289**

ADDRESS: **DISTRICT 3**

PHONE NUMBERS (HOME): **561-688-3000** (WORK) **(561)688-4900**

CAN TESTIFY TO: **DUI INVESTIGATION**

NAME: **D/S Swanson ID 26674**

ADDRESS: **3228 Gun Club Road, West Palm Beach, FL, 33417**

PHONE NUMBERS (HOME) **561-688-3000** (WORK) **561-688-3000**

CAN TESTIFY TO: **Original observations of the driver, First stopping deputy.**

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

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: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

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: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

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**

**DEC 18 2016**

# TESTING FACILITY TASK REPORT

AGENCY: PBSO  
SUBJECT: Bartholomew, Paul CASE NUMBER: 16-166029  
DATE: 12/17/16 VIDEO TAPE NUMBER: 000# 61842  
BEGINNING TIME: 2320 ENDING TIME: 2323

BREATH TESTS RESULTS: **REFUSED** TIME 2322 (A.M./P.M.) 2) TIME TIME A.M./P.M.  
3) TIME A.M./P.M. 4) TIME A.M./P.M.

BREATH OPERATOR: S. Owen #3184

MAINTENANCE TECHNICIAN: J. Karlecki #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: \_\_\_\_\_

ATTITUDE: quiet, co-operative

CLOTHING: black shoes, jeans, LS shirt

MEDICAL CONDITIONS: dehydrated (having trouble standing up)

MEDICATIONS: none

OTHER: Strong odor of unknown alcoholic beverage  
Δ would not get on X stood by instrument  
did not want to be on video,

COMMENTS: A/O & Δ arrived at 2255 hrs  
A/O observed 20 minutes  
A/O requested breath test, Δ refused  
A/O read ± IC, Δ understood, still refused  
A/O read c/w, Δ understood  
Refused Q & A

SCANNED

DEC 18 2016

SUBJECT: Bartholomew, PAUL CASE NUMBER: 16-166029

## 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 DIS SCARTOZZI of the P.B.S.O

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**

**DEC 18 2016**



SUBJECT: Bartholomew, Paul CASE NUMBER: 16-166029

## 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? attorney

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? \_\_\_\_\_ WHERE? \_\_\_\_\_

INTERVIEWER: \_\_\_\_\_

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL

SCANNED  
DEC 18 2016

**STATE OF FLORIDA  
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES  
AFFIDAVIT OF  
REFUSAL TO SUBMIT TO BREATH, URINE, OR BLOOD TEST**

I, D/S P SCARTOZZI #21289, a duly certified Law Enforcement Officer or Correctional Officer,  
(Person reading Implied Consent Warning)

am a member of Palm Beach County Sheriff's Office, and I do swear  
(Name of enforcement agency)

or affirm that on or about the 17 day of December, 20 16, at 09:51 PM A.M.  
(Circle One)

NAME PAUL ANDREW BARTHOLOMEW  
(Type or Print) FIRST MIDDLE OR MAIDEN LAST

DL# B634681691440, FL, state of Florida, was placed under lawful arrest for  
the offense of DUI by D/S P SCARTOZZI #21289 and  
(Name of Arresting Officer)  
issued Citation # A0ZZYZP

That on or about the 17 day of December, 20 16, at 11:22 PM A.M.  
(Circle One)  
in Palm Beach County, **[PLEASE CHECK THE BOX OR BOXES THAT APPLY]** I did request said

person to submit to a ☒ breath, ☐ urine, or ☐ blood test to determine the content of alcohol in his or her blood or breath or the presence of chemical or controlled substances therein. I did inform said person that any refusal to submit to such test or tests would result in the suspension of his or her privilege to operate a motor vehicle for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if the driving privilege of such person had been suspended previously for refusing to submit to such test or tests. I did inform said person that he or she commits a misdemeanor, if said person refuses to submit to a lawful test as requested above, and his or her driving privilege has been previously suspended for a prior refusal to submit to a lawful test of his or her breath, urine, or blood. If driver holds a CDL or is operating a CMV, I did inform said person that the refusal will result in the disqualification of the driver's Commercial Driver's License/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 such test.

Said person did at that time and place refuse to submit to such test or tests.

  
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:

\_\_\_\_\_  
Signature of Attesting Officer

(AFFIX SEAL)

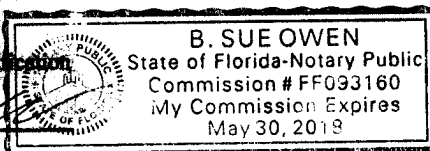
The foregoing instrument was sworn and subscribed before  
me this 17 day of December, 20 16,  
by D/S P SCARTOZZI #21289,

Title \_\_\_\_\_  
Date \_\_\_\_\_

who is personally known to me or who has produced

Notary Public

as identification



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 78054 (REV. 12/13)

SCANNED  
DEC 18 2016