

1761 7251

Rough Arrest Only ☒

ADMINISTRATION	OBTS Number		ARREST / NOTICE TO APPEAR				1. Arrest 3. Request for Warrant		1	Juvenile	N	
	Agency ORI Number		Agency Name		Agency Report Number		2. N.T.A. 4. Request for Capias					
	FL0500700		RIVIERA BEACH POLICE DEPARTMENT		84- 17-03195							
	Charge Type: Check as many as apply.		<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized/Type 1. Yes 2. No <input checked="" type="checkbox"/> 2 N/A		Multiple Clearance Indicator 1	
DEFENDANT	Location of Arrest (Including Name of Business) 7200 GARDEN ROAD RIVIERA BEACH, FLORIDA 33404					Location of Offense (Business Name, Address) 3800 WEST BLUE HERON BLVD RIVIERA BEACH, FLORIDA 33404						
	Date of Arrest 04/21/2017		Time of Arrest 0007		Booking Date		Booking Time		Jail Date		Jail Time	
	Name (Last, First, Middle) MORRIS, STEPHEN EMORY											
	Alias (Name, DOB, Soc. Sec. #, Etc.)											
CO-DEF	Race		Sex		Date of Birth		Height		Weight		Eye Color	
	W - White B - Black		I - American Indian O - Oriental/Asian		W M		12/09/1968		5'11"		210	
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status		Religion		Indication of: Alcohol Influence Drug Influence		Y N Unk.			
	NONE		SINGLE				<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk.					
	Local Address (Street, Apt. Number) (City) (State) (Zip)					Phone		Residence Type				
	4447 SUNNY LANE AVENUE WEST PALM BEACH FLORIDA 33404					() - ()		1. City 3. Florida 1				
	Permanent Address (Street, Apt. Number) (City) (State) (Zip)					Phone		Address Source				
	4447 SUNNY LANE AVENUE WEST PALM BEACH FLORIDA 33404					() - ()		DEF				
	Business Address (Street, Apt. Number) (City) (State) (Zip)					Phone		Occupation				
	() - ()					() - ()						
JUVENILE	D/L Number, State		Soc. Sec. Number		INS Number		Place of Birth		Citizenship			
	M620-785-68-449-0						WEST PALM BEACH, FLORIDA		U.S.A.			
	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	
CHARGE	Parent				Name (Last) (First) (Middle)				Residence Phone			
	<input type="checkbox"/> Legal Custodian											
	<input type="checkbox"/> Other											
	Address (Street, Apt. Number) (City) (State) (Zip)				Business Phone							
	Notified by: (Name)				Date		Time		Juvenile Disposition			
									1. Handled/Processed within Dept. and Released 2. TOT HRS/CYF 3. Incarcerated			
	Released To: (Name)				Relationship		FCIC/NCIC		Date		Time	
	The above address was provided by defendant and/or defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office informed of any change of address.				School Attended				Grade			
	<input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)											
CHARGE	Recovery Information											
	0. N/A 1. Voluntary 2. Located Not Returned 3. Hospitalized 4. HRS Custody 5. Law Enforcement Custody 6. Returned to Parent 7. Deceased 8. Other											
	Drug Activity				S. Sell R. Smuggle K. Dispense/ M. Manufacture Z. Other				Drug Type			
	N. N/A B. Buy D. Deliver Produce/ Cultivate								N. N/A B. Barbiturate H. Hallucinogen P. Paraphernalia/ U. Unknown			
	P. Possess T. Traffic E. Use								C. Cocaine M. Marijuana Equipment Z. Other			
									A. Amphetamine E. Heroin O. Opium/Deriv. S. Synthetic			
	Charge Description				Counts		Domestic Violence		Statute Violation Number		Violation of ORD #	
	DRIVING UNDER THE INFLUENCE				1		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
	Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond	
	U		U		U		17-03195					
CHARGE	Charge Description				Counts		Domestic Violence		Statute Violation Number		Violation of ORD #	
							<input type="checkbox"/> Yes <input type="checkbox"/> No					
	Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond	
	Charge Description				Counts		Domestic Violence		Statute Violation Number		Violation of ORD #	
							<input type="checkbox"/> Yes <input type="checkbox"/> No					
	Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond	
	Charge Description				Counts		Domestic Violence		Statute Violation Number		Violation of ORD #	
							<input type="checkbox"/> Yes <input type="checkbox"/> No					
CHARGE	Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond	
	Charge Description				Counts		Domestic Violence		Statute Violation Number		Violation of ORD #	
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	Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond	
	Charge Description				Counts		Domestic Violence		Statute Violation Number		Violation of ORD #	
							<input type="checkbox"/> Yes <input type="checkbox"/> No					
	Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond	
NOTICE TO APPEAR	<input checked="" type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court		Location (Court, Room Number, Address) (NORTH COUNTY COURTHOUSE) 3188 PALM BEACH GARDENS, FLORIDA 33404									
	<input type="checkbox"/> Instruction No. 2 You need not appear in Court but must Comply with instructions on reverse side.		Court Date and Time									
			Month 05 Day 24 Year 2017 Time 1:30 P.M.									
	I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.											
	Signature of Defendant (or Juvenile and Parent/Custodian) Date Signed 4/21/17											
	HOLD for other Agency				Signature of Arresting Officer				Name Verification (Printed by Arrestee)			
	Name				X				(PRINT)			
	Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other <input type="checkbox"/>				Name of Arresting Officer (Print)				I.D. #			
	Intake Deputy				M. ELYSEE				6347			
	Pouch #				Transporting Officer				I.D. # Agency			
				M. ELYSEE				6347 RBPB				
Witness here is subject signed with an "X"								PAGE 1 OF 1				

ANNEXED 26 2017 APR 2

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 20th DAY OF APRIL, 2010, AT 2357 HOURS
SUBJECT: STEPHEN MORRIS CASE NUMBER# 17-067216
AGENCY: RIVIERA BEACH P.D. ARRESTING OFFICER M. ELYSEE

PERSONAL CONTACT

ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENT PUTTING DEFT, BEHIND THE WHEEL OF THE VEHICLE

DRIVING PATTERN:

Sergeant Menard #5572 observed the vehicle traveling westbound between Garden Road and I-95 over-path. The vehicle failed to maintain a single lane. The vehicle made an illegal u-turn when he arrived at the over-path then proceeded east. Upon arriving at the intersection of West Blue Heron and Garden Road, Sergeant Menard #5572 conducted a traffic stop on the vehicle.

OBSERVATION OF DRIVER:

eyes glossy, speech slurred and slow, the motorist was unbalanced when he stepped out, strong odor of alcohol was emanating from breath,

DRIVER'S STATEMENTS;

Driver spontaneously uttered that he had two beers when Sergeant Menard #5572 asked if he had anything to drink. Driver stated he was confused about where he was and he was going to pick up his girlfriend. Driver became very belligerent then stated he wanted to go home.

ODORS: An alcoholic beverage

GENERAL OBSERVATIONS

SPEECH: Slurred and Slow

ATTITUDE: Uncooperative and vulgar language

CLOTHING: Dark gray shirt, blue jeans, and black shoes

MEDICAL PROBLEMS:

Unknown

MEDICATIONS: Unknown

OTHER: N/A

SC/

APF

SUBJECT STEPHEN MORRIS

CASE NUMBER 17-067216

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|--|---|
| <input type="checkbox"/> LEFT EYE DOES NOT FOLLOW SMOOTHLY | <input type="checkbox"/> RIGHT EYE DOES NOT FOLLOW SMOOTHLY |
| <input type="checkbox"/> LEFT EYE JERKS AT 45 DEGREE ANGLE OR LESS | <input type="checkbox"/> RIGHT EYE JERKS AT 45 DEGREE ANGLE OR LESS |
| <input type="checkbox"/> DISTINCT JERKING LEFT EYE MAXIMUM DEVIATION | <input type="checkbox"/> DISTINCT JERKING RIGHT EYE MAXIMUM DEVIATION |

CAN NOT DO, WHY? REFUSED

WALK AND TURN:

REFUSED

CAN NOT DO, WHY? REFUSED

ONE LEG STAND:

REFUSED

CAN NOT DO WHY? REFUSED

FINGER TO NOSE:

REFUSED

CAN NOT DO WHY? REFUSED

ROMBERG/ALPHABET:

REFUSED

CAN NOT DO WHY? REFUSED

BREATH TEST RESULTS: REFUSED

STATE OF FLORIDA

COUNTY OF PALM BEACH

THE FOLLOWING WAS NOTARIZED OR SWORN BEFORE ME THIS _____ (DATE)

BY: _____

NOTARY/CLERK OF COURT OFFICER (F.S. 117.10)

SIGNATURE OF ARRESTING OFFICER

SCANNED

APR 26 2017

PD 001128B REV. 09/93

WHITE STATE ATTY

YELLOW DHSMV

PINK CENTRAL RECORDS GOLD JAIL

TESTING FACILITY TASK REPORT

AGENCY: RBPB-ELYSEE

SUBJECT: MORRIS, STEPHEN E

CASE NUMBER: 17-067216

DATE: Apr 21, 2017

VIDEO DVD NUMBER: 62477

BEGINNING TIME: 0116

ENDING TIME: 0121

BREATH TESTS RESULTS: 1) REF TIME 0118 A.M. ☒ P.M. ☐ 2) XX TIME XX A.M. ☐ P.M. ☐
3) XX TIME XX A.M. ☐ P.M. ☐ 4) XX TIME XX A.M. ☐ P.M. ☐

BREATH OPERATOR: J Biggs# 7607

MAINTENANCE TECHNICIAN: D/S J Karkleck #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED, MUSHED MOUTH

ATTITUDE: COOPERATIVE, SOMEWHAT UPSET AT TIMES

CLOTHING: DARK GRAY SHIRT, BLUE JEANS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

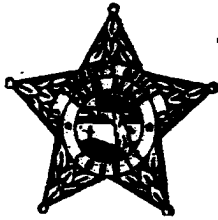
EYES GLASSY, RED

ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE ON SUBJECT

COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0055
SUBJECT REFUSED THE TEST INITIALLY
SUBJECT WAS READ IMPLIED CONSENT, ADVISED HE UNDERSTOOD IT
SUBJECT REFUSED THE TEST ONCE AGAIN
MIRANDA WAS READ AND UNDERSTOOD
SUBJECT ANSWERED A COUPLE QUESTIONS THEN SAID HE WAS DONE

ANINEI



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

PBSO CASE # 17-067216 PBSO ZONE 3-13
AGENCY CASE # 17-03195 CRASH CASE # _____
TIME OF STOP/CRASH 2357 hrs DATE 4/20/17 DAY Thursday
SUBJECT'S NAME Stephen Morris RACE White SEX Male
HGT 5'11 WGT 210 lbs DOB 12 / 09 / 1968
LOCATION 7000 Block of Garden Road Riviera Beach, F
ARRESTING OFFICER'S NAME & ID Elysee #6347 AGENCY _____
DIVISION: Patrol
NOTIFIED BY COMMO _____
ARRIVAL AT FACILITY 0055
ARREST TIME 0007
BREATH RESULTS:
1. **REFUSED**
2. _____
3. _____
4. _____
TESTING OFFICER'S ID 7607 PBSO VIDEOTAPE # 62477

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

I, M. Elysee, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of the Riviera Beach Police Dept., and I do swear
(Name of law enforcement agency)

or affirm that on or about the 20th day of April, 20 17, at 11:58 2357 ☒ P.M. ☐ A.M.

DRIVER Stephen Emory Morris
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# M620-785-68-449-0, state of Florida, was placed under lawful arrest for
the offense of Driving under the influence by Officer M. Elysee and
issued Citation # A3TG4GE (Name of Arresting Officer)

That on or about the 21st day of April, 20 17, at 1:18 ☐ 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] =6347
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:

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before

me this 21 day of April, 20 17,

by _____,

who is personally known to me or who has produced

_____ as identification

Notary Public _____

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.

WITNESS LIST

CASE NUMBER 17-067216

ARRESTING OFFICER: M. ELYSEE

ADDRESS: 7000 BLOCK OF GARDEN ROAD RIVIERA BEACH, FLORIDA 33404

PHONE NUMBERS (HOME) _____ (WORK) 561-845-4123

CAN TESTIFY TO; ALCOHOL ODOR FROM MORRIS' BREATH, MORRIS' GLOSSY EYES

NAME: SERGEANT M. MENARD

ADDRESS: 7000 BLOCK OF GARDEN ROAD RIVIERA BEACH, FLORIDA 33404

PHONE NUMBERS (HOME) _____ (WORK) 561-845-4123

CAN TESTIFY TO; TRAFFIC INFRACTIONS, ALCOHOL ODOR FROM MORRIS' BREATH, MORRI

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) _____

SUBJECT: Officer [unclear] 11/1/11 CASE NUMBER: 17-0117

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 Officer [unclear] 11/1/11 of the Alameda County Sheriff's Dept.

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) [Signature]

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) [Signature]

SUBJECT: Stephen E. H. 111 CASE NUMBER: 17-03195

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? Y

WHERE WERE YOU GOING? Y

WHAT STREET OR HIGHWAY WERE YOU ON? Y

DIRECTION OF TRAVEL? Y WHERE DID YOU START? Y

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

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

WHAT COUNTY AND CITY ARE YOU IN NOW? Y

WHEN DID YOU LAST EAT? Y WHAT DID YOU EAT? Y

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

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

HOW MUCH? Y WHERE? Y WITH WHOM? Y

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

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? Y

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

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

WHAT? Y WHERE? Y WHEN? Y

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

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

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

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

WERE YOU IN AN ACCIDENT TODAY? Y

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

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

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

DO YOU HAVE:

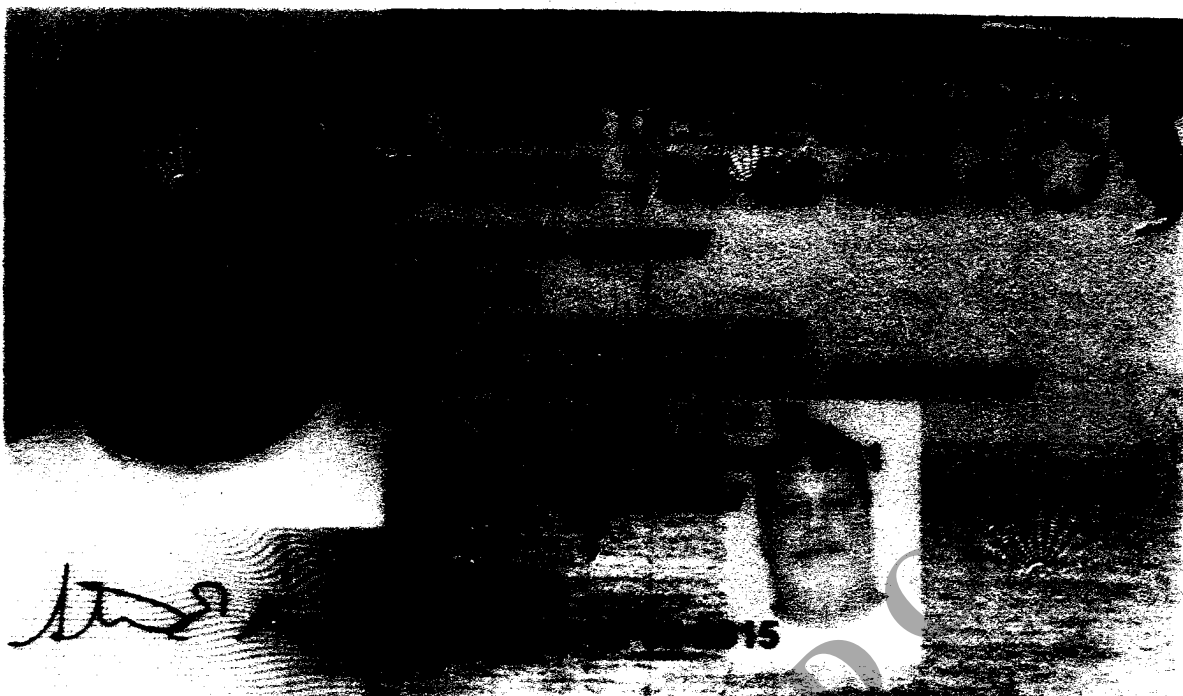
EPILEPSY?	<u>Y</u>
GLASS EYE?	<u>Y</u>
FALSE TEETH?	<u>Y</u>
EAR INFECTION?	<u>Y</u>
INNER EAR TROUBLE?	<u>Y</u>
DIABETES?	<u>Y</u>

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

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

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

INTERVIEWER: Officer [unclear] 11/1/07



Operation of a motor vehicle constitutes consent to any sobriety test required by law.

NOT A CERTIFIED

CAI