	r a	0335951	ARREST / NOTICE	TO APPEAR	11226	1795
		BTS Number Igency ORI Number	Juvenile Referra		1. Arrest 3. Request fi 2. N.T.A. 4. Request fi	or Capias 1 N
ATIVE	F	LO 500000 PALM	BEACH COUNTY SHERIFF		Agency Report Number (N.T.A.'s 06- 19138112	
HSTR	31	s apply. 2. Traffic Felony		Ordinance Other	Weapon Seized / Type 2 1. Yes NONE	Multiple Clearance Indicator 01
ADMIN	Ľ	ocation of Arrest (Including Name of Business) AKE WORTH RD / S CONGRESS AV	E. LAKE WORTH, FL. 3340	Location of Offer 6 LAKE WORT	nse (Business Name, Address) 'H RD / S CONGRESS AVE	LAKE WORTH, FL. 33406
2	1	to of Arrest Time of Arrest 1/85/2019 0124	Booking Date Booking Time	Jail Date	Jail Time Location of Vehicle	
		ame (Last, First, Middle) ROSALES	SUZANNE M	ARIE	Alias (Name, DOB, Soc. Sec. #, Etc.)
	8 S 3	ace V - White I - American Indian - Black 0- Oriental/Asian W F	ate of Birth 7/12/1972	ht Weight 5'01"	Eye Color Hair Color 155 BRWN BROW	
	T	dars, Marks, Tatnos, Unique Physical Features (Location ATTOO - LEFT ARM - "ERNEST"	n, Type, Description)		Single CUDISTIAN	Indication of: Y N Unk. Alcohol Influence
DANT		cal Address (Street, Apt. Number) 437 NE 4TH ST.	(City) (State) BOYNTON BEACH, FI	(Zip) L. 33435	Phone F	Residence Type:
DEFENDAN	Pe ,	ermanent Address (Street, Apt. Number)	(City) (State)	(Zip)	Phone A	address Source
	Bu	usiness Address (Name, Street)	(City) (State)	(Zip)	Phone	Decupation PUBLIC WORKS MANAGER
		Number, State Sc 242-793-72-752-1, FL	c. Sec. Number	INS Number	Place of Birth	(City, State) Citizenship
ĒĒ		-Cefendant Name (Last, First, Middle)		Race Sex	Date of Birth 1. Ar	
CO-DE	Ca	p-Defendant Name (Last, First, Middle)		Race Sex	Date of Birth	tested 3. Felony
۲	IШ		0		2. At	Residence Phone
		Other: blress (Street, Apt. Number)	(ch)	-	State) (Zip)	Business Phone
u,	No	plified by: (Name)	Date	Time	Juvenile Disposition 1. Handled processed within	2. TOT HRS/DYS
JUVENILE	Rea	deased To: (Name)	Relations	hip	Dept. and Released.	3. Incarcerated Time
	The	e above address provided bydefendant and / or keep the Juvenile Court Clerk (Phone 355-2528) inf	defendant's parents The child and 7	or parent was told	School Attended	Grade
	ب	Yes, by: (Name) perty Crime? Description of Property Yes No	☐ No. (Reason)		Value of Property	
CODE	Dr.	ug Activity S. Sell R. Smuggle K. Dir	spense/ M. Manufacture/ Z. Other stribute Produce/	Drug Type N. N/A	B. Barbiturate H. Halfucinoger C. Cocaine M. Mariuana	
		arge Description	Counts Domestic	A. Amphetamine Statute Violation i	E. Heroin O. Opium/Deriv.	Equipment Z. Other S. Synthetics Violation of ORD #
CHARGE	ć	DRIVING UNDER THE INFLUENCE Amount / Unit	Offense #	316.193(1) Warrant Capies N	Number	Bond
Н	Chi	N N NONE	19138112 Counts Domestic	Statute Violation N	Number	Violation of ORD #
CHARGE	Oru	g Activity Drug Type Amount / Unit	Viotence Viotence	Warrant / Capias N	Number	Bond
H	Cha	arge Description	Counts Domestic	Statute Violation N		Violation (PORD #
HARGE	Drug	g Activity Drug Type Amount / Unit	Violence □Y □N			
Ö	Cha	rge Description	Counts Domestic	Statute Violation N		Bend
CHARGE	Oruc	g Activity Drug Type Amount / Unit	Viplence Y N			Violation of ⊕RO #
õ		Man IP and Down Namber Address		TYON BILLY Capies	valing (Bond
EAR.	٠	CRIMINAL JUSTIC	E COMPLEX / 3228	GUN CLUB	ROAD, WPB, FL 33	406
TO AP	Мо	onth DECEMBER Day 5	Year 2019	Time 8:30	$_{AM}$ $ imes$	PM
NOTICE TO APPEAR	AIL	REE TO APPEAR ATITHE TIME AND PLACE DESIG TO APPEAR BEFORE THE COURT AS REQUIRED E	NATED TO ANSWER THE OFFENSE OF THIS NOTICE TO APPEAR, THAT IN	CHARGED OR TO PA MAY BE HELD IN CO	AY THE FINE SUBSCRIBED. I UNDE NTEMPT OF COURT AND A WARRAN 1/03/2019	RSTAND THAT SHOULD I WILLFULLY IT FOR MY ARREST SHALL BE ISSUED
4		Signature of Defendant (or Juvenile and Pare			Date Signed	
	iami		Signature of Arresting Officer		Name Verification (Printed by Arres	IV 18 AM (2:09
]		Name of Arresting Officer (Print)	1.D. # 24970	(PRINT)	PAGE PAGE
		1 LUNGA 10 P	Transporting Officer ID# INV. ZEITZ 2497	0 Agency PBSO	Witness here if subject sig	
2850		DISTRIBUTION: WHITE - COURT COPY	GREEN - STATE ATTORNEY YE	LLOW - AGENCY	PINK - AGENCY CA	SCANNED

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 16TH DAY OF	NOVEMBER	20 19 , AT 0	057	AM PM	
SUBJECT: ROSALES	SUZANNE	MARIE	CASE NUM	BER: 19138112	
AGENCY: PALM BEACH CO	UNTY SHERIFF'S OF	FICE ARREST	ING OFFICER: II	NV. ZEITZ	
	PER	SONAL CONTA	ACT		i
DRIVING PATTERN: ACTUAL P	HYSICAL CONTROL (PHYS	ICAL EVIDENCE OR	STATEMENTS PUTT	ING DEF. BEHIND WHEEL O	F VEHICI
On the above date and time,	I was traveling East or	n Lake Worth Rd	on routine patro	l. I observed a blue Toy	ota 4
door vehicle traveling Eastbeturn lane to enter a plaza on travel East into the Westboulanes. As I made a U-turn to median before continuing East Lag JYVQ43 and initiated	the North side of the r nd lanes of Lake Wort step out with the vehic astbound on Lake Wor	oad. The vehicle of the Rd before brakele, I observed the the Rd. I made and	lid not mke a left ing and coming t vehicle reverse b other U-turn and	hand turn and continue as stop still in the Weseack into the break into got behind the Toyota	ed to tbound the
I approached the vehicle and	l identified the driver a	as W/F Suzanne R	osales by her Flo	rida Driver License.	
OBSERVATION OF DRIVER: Upon making contact with					j
person and breath. This of speech was slightly slurred while walking to my patro black shirt, blue denim pa	l and slow. Her move I vehicle and had diff	ments were slow iculty following	and deliberate.	She had an unsteady	gait
Pre-Miranda - Stated that wanted to call someone to		n a funeral. Rosa	les stated that s	he had been drinking	and jus
<u>ODORS:</u> A strong and obvious odor of an u	nknown alcoholic beverage	was emitting from he	er person and breath	which intensified as I spok	e to her.
	GENERA	L OBSERV	ATIONS		
SPEECH: Rosales' speec	h was slightly slur	red and slow			
ATTITUDE: Cooperative					
CLOTHING: Black shirt wit	h blue denim pants an	d black high hee	ls		
EDICAL/OTHER: SEE BAT	REPORT				1
TE OF FLORIDA UNTY OF PALM BEACH					
INV. ZEITZ ature of Arresting/Investigative Officer)	<i>5 /)</i>				
oregoing instrument was swom to or affirmed and a	•	nutrification. Type of identification	22260	by INV. ZEITZ IALLY KNOWN LEO	i
Bell					
try Public, Clerk of Court, Officer (F.S.S. 117.10)		JOSHUA B MY COMMISSION EXPIRES: JUN Bonded through 1st S	#GG346008 18, 2023	SCANN	IED

NOV 18 2019

ROADSIDE TASKS

HORIZONTAL GA	ZE NYSTAGMUS:				· ·	
LT EYE-LACK OF SMOO	TH PURSUIT		RT EYE-LACK O	OF SMOOTH PURSUIT	•	
LT EYE-DISTINCT & SUS	TAINED NYSTAGMUS AT MAX. I	DEVIATION	RT EYE-DISTING	CT & SUSTAINED NY	STAGMUS AT MAX. DI	EVIATION
LT- EYE-ONSET OF NYS	TAGMUS PRIOR TO 45 DEGREES		RT- EYE-ONSET	OF NYSTAGMUS PR	IOR TO 45 DEGREES	
Other Observations:						
Rosales would sway in to track the pen with he	a side to side front to bac er eyes only. She failed to	ck pattern t b keep her h	roughout the tas ead still while tra	k. Rosales was acking the stimu	reminded numer dus.	ous times
WALK & TURN:		· · · · · · · · · · · · ·			•	
I explained and demon	strated the instructions rved her to sway in a sid	for the "Wa	alk & Turn" to R	Rosales who stat	ted that she unde	erstood.
She could not maintain	her balance while lister	ning to instr	uctions. She step	ped out of the i	instructional star	ıce
during the demonstrati	on to catch her balance nce by raising them mor	. Rosales sta re than six i	erted the task bein nches and did no	fore being instr t touch heel to	ucted to do so. R toe on anv step d	osales uring the
task.				,		•
ONE LEG STAND:						
	strated the instructions					
	rved her to sway in a sid while balancing on one l			-		
	Rosales put her foot dow			he 30 seco <mark>nds</mark> h	ad elapsed. She	then
FINGER TO NOSE:	own before the 30 seco	nas elapsea	•		ı	Í
I explained and demonstr	ated the instructions for th					
	sway roughly in a side to sales' index finger did not to					
• •	fore self-correcting to the p	-		-		
ROMBERG ALPHABE	7					
	ed the instructions for the "R in a side to side, front to bac					
	not comfortable reciting the a					
BREATH TEST RESU	LTS: 194	.196				
STATE OF FLORIDA COUNTY OF PALM BEACH						
INV. ZEITZ (Signature of Arresting/Investigative Officer)						:
The foregoing instrument was sworn to or affin	med and subscribed before me this 16th	day of NOVE	MBER 20 19	by INV. Z	EITZ	
(Print name of Arresting/Investigative Officer),	who is personally known to me and/or produc	ed identification. Type	of identification produced	PERSONALLY KI	NOWN LEO	
			JOSHUA BELL	ζ.	COMMINIO.	
Notary Public Clerk of Court, Officer (F.S.S. 1	17.1U) ,		OMMISSION #GG346008 XPIRES: JUN 18, 2023 Ind through 1st State Insurance	Energy	POANNEL NOV 18 2019)
:		Bollu	o though for trace		10 2013	

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: 80-006238 Software: 8100.27

Date of Test: 11/16/2019				
Date of Last Agency Inspect Observation Period Began: 0 Subject's Name: SUZANNE M R	1:47		DOB: 67/12/1972 Sex: 3	S. A. S. Sangap et 4 - ASS University
The subject was observed for test to ensure that the subj				Lipsch
-				
Results:	Diagnostics Check O Air Blank 0 Control Test 0 Air Blank 0 Subject Sample #1 0 Air Blank 0 Control Test 0	.000 .030 .000 .194 .000 .030 .196 .000	Time 02:25 02:25 02:26 02:26 02:27 02:28 02:29 02:30 02:30 02:31 02:31	
Cylinder Lot: 17919080A1 Exp: 08/05/2021			ng ay yang a manay yang ay ang ay ang	
State of Florida, County of				
Personally appeared before me () produced states: I JOSHUA J RELL Department of Law Enforcement	as identif	ication, and wi	ho after being placed broad rator permit issued by cla	cath,
accordance with Chapter 11D-6 report of that breath test. Breath Test Operator:	3, Florida Administ	crative Code, a	nd this form is a true and Date: 11/15/19	accurace
Sworn to (or iffirmed) before	e me this 16 da	JV. Zeitz	(, 2019 #24970 ry Public-Reals of File Isla	***************************************
Note: Pursuant to section 117.1 accident investigation officers in the performance of official dadmissible without further authe accordance with Section 316.1934	and traffic infraction uties. In accordance ntication and is pre-	on enforcement of e with section 31 sumptive proof of	ficers are ordances public who 6.1934(5), F.S., whis complete The results berein. To by up	er engagen Ed form us Es in

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

SCANNED NOV 18 2019

TESTING FACILITY TASK REPORT

		A	GENCY: PBS	J		
SUBJECT: ROSALES, SI	JZANNE M		ASE NUMBER:	19-138112		
DATE: 11/16/19	v	DEO TAPE NU	MBER:	N/A	, ,	
BEGINNING TIME: 0223	E	NDING TIME:	0240			
BREATH TESTS RESULTS:	1) .194	0227	_A.M./P.M.	2) .196	0230	_AM/PM
	3) N/A	TEME XX	_AM_/PM.	4) N/A	TIME XX	A.M./PM
BREATH OPERATOR: J. BE	LL #8656		·			
MAINTENANCE TECHNICIAN	J. KARLEC	KE #6467	·····			
TESTING OFFICER'S OBSER	VATIONS					
SPEECH: SLURRED					O y	
ATTITUDE: TALKATIVE,	COOPERA	TIVE	1			
CLOTHING: BLACK LON	G SLEEVE	SHIRT, BLUE	JEANS, NO	SHOES	/	
MEDICAL CONDITIONS:						
MEDICATIONS:						!
OTHER: EYES:BLOODSH	ОТ					
ODOR OF AN UNKNOWN ALCHOLIC BEVERAGE COMING FROM BREATH						
SUBJECT STATED SHE DRANK 3 GLASSES OF E AND J (Q AND A)						
COMMENTS: ARRIVED AT CENTER A/O BEGAN 20 MIN OBSERVATION AT 0147 HRS						
	· · · · · · · · · · · · · · · · · · ·					
SUBJECT STATED S	SHE WOULD	TAKE BREA	TH TEST			
		JY				
A/O READ RIGHTS						!
SUBJECT STATED S	SHE UNDER	RSTOOD HER	RIGHTS			<u> </u>
						:
TECH READ BREAT	H TEST RE	SULTS				
SUBJECT STATED SHE UNDERSTOOD BREATH TEST RESULTS						
A/O CONDUCTED Q	AND A				, pro-10-1111	
SUBJECT ANSWER	ED QUESTI	ONS				
				·		:
				· · · · · · · · · · · · · · · · · · ·		<u> </u>
·	•					
						1

*****3**C**ANNED NOV 18 2819

WITNESS LIST

CASE NUMBER: 19138112 ARRESTING OFFICER: INV. ZEITZ ADDRESS: 3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406 (WORK) (561) 688-4001 PHONE NUMBERS (HOME): CAN TESTIFY TO: SEE DUI PROBABLE CAUSE AFFIDAVIT & OFFENSE REPORT NAME: ADDRESS: _____ PHONE NUMBERS (HOME) ______ (WORK) _____ 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 (WORK) _____ PHONE NUMBERS (HOME) CAN TESTIFY TO: NAME: _____ ADDRESS PHONE NUMBERS (HOME) (WORK) _____ CAN TESTIFY TO: NAME: ADDRESS __ ____(WORK) ____ PHONE NUMBERS (HOME) _____ CAN TESTIFY TO: NAME: ______ ADDRESS _____ (WORK) _____ PHONE NUMBERS (HOME) 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: NUV 18 2919

SUBJECT: ROSales, Suzane M CASE NUMBER: 19-136112	
QUESTIONS AND ANSWERS	
I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.	ALL OF, OR
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?	· 4
WHAT TIME DID YOU START? 1000 WHAT TIME IS IT NOW?	
WHAT IS TODAY'S DATE? 11/15/11 WHAT DAY OF THE WEEK IS IT? 1-0000	
WHAT COUNTY AND CITY ARE YOU IN NOW? Parm Buck Control	
WHEN DID YOU LAST EAT? AM WHAT DID YOU EAT?	
WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS?	
HOW MUCH DO YOU WEIGH? 160 HAVE YOU BEEN DRINKING? 15 WHAT? 15	
HOW MUCH? 1 Glass 20 WHERE? 1 loca ere! Concrat WITH WHOM? From y	
WHEN DID YOU HAVE YOUR FIRST DRINK? 600 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?	
WHA':? WHERE? WHEN?	
WHAT LINE OF WORK ARE YOU IN? A COLOR WHEN DID YOU LAST WORK?	vel 1
DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? WHAT?	1
ARE YOU SICK OR INJURED? WHAT'S WRONG?	
DO YOU LIMP? 1/1 DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY?	
WERE YOU IN AN ACCIDENT TODAY?	
V- terres	11-
HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? WHO? WHY?	
ARE YOU TAKING ANY PRESCRIPTION MEDICINES? WHAT? WHAT?	
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? _

PINK - CENTRAL RECORDS

SUBJECT: ROSales, Suzanne M CASE NUMBER: 19-138112

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

<u>NC</u>	OTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TIPE OF TEST TOO ARE RECOESTI	<u>vo.</u>			
I am ne conten	now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol out.				
chemic	now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of cal or controlled substances. OR-				
I am nand th	now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol corne presence of chemical or controlled substances.	itent			
	NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.				
I am _		·			
If you period of a re reques of your is adm	I fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as efusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test sted of you and if your driving privilege has been previously suspended for a prior refusal to submit to a law in breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested into evidence in any criminal proceeding.	ed for a a result at I have vful test d of you			
٠.	ECT'S SIGNATURE: (X)				
Synji	ECI 3 SIGNATURE. (A)				
	CONSTITUTIONAL WARNINGS				
IAME	REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING F	<u> EIGHTS:</u>			
1. Yo	ou have the right to remain silent and not answer any questions.				
2. A1	my statement must be freely and voluntarily given.				
	You have the right to the presence of a lawyer of your choice before you make any statement and during any uestioning.	y			
st	f you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make tatements and during any questioning.				
5. If	f at any time during the interview you do not wish to answer any questions, you are privileged to remain si	lent.			
6. I	I can make no threats or promises to induce you to make a statement. This must be of your own free will.				
7. A	7. Any statement can and will be used against you in a court of law.				
SUSP	PECT'S SIGNATURE: (X) Read on Camera				
	WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL	LEND AN			



Palm Beach County Sheriff's Office - Arrests Only

	х	Florida State Statute	Description	Page Number(s)
		119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
ions		943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
L/E Exemptions		119.071(4)(c)	Undercover personnel.	
1/E E	П	119.071(2)(f)	Confidential informants (CIs).	
	П	119.071(2)(e)	Confession.	
suc	П	985.04(1)	Juvenile offender records.	
mptio		119.071(h)(i)	Assets of a crime victim.	
Public Info. Exemptions	Ø	395.3025(7)(a), 456.057(7)(a)	Medical information.	7,9
blic In		394.4615(7)	Mental health information.	
Pu		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.	
	×	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	7	(viii) 394.4615(7)	Clinical records under the Baker Act.	
of 23)	q	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
Rule		(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)		- 19 - 19		
al Administr	0			
es of Judicia				
Florida Rul				
Other	а	1	Other:	
ਠੱ			Other:	

REVIEW COMPLETED BY

Booking Number: 2019036984	Date: 11/17/2019
	Specialist Name/ID: AM/31562

