

0487304

1631

ARREST / NOTICE TO APPEAR Juvenile Referral Report				1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile N			
OB's 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- 17067974</b>						
Agency ORI Number <b>FLO 500000</b>		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 1. Yes 2. No		Multiple Clearance Indicator 1				
Location of Arrest (Including Name of Business) <b>19699 BOCA GREENS DR , Boca Raton, FL 33498</b>		Location of Offense (Business Name, Address) <b>19699 BOCA GREENS DR , Boca Raton, FL 33498</b>								
Date of Arrest <b>04/22/2017</b>		Time of Arrest <b>2030</b>		Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle <b>19699 BOCA GREENS DR , Boca Raton, FL 33498</b>		
Name (Last, First, Middle) <b>Adamski, Warren, Charles</b>										
Alias (Name, DOB, Soc. Sec. #, Etc.)										
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex W M	Date of Birth <b>03/03/1944</b>	Height <b>5'10</b>	Weight <b>180</b>	Eye Color <b>brown</b>	Hair Color <b>Brown</b>	Complexion <b>light</b>	Build <b>thin</b>	
Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description) <b>Scar front torso</b>						Marital Status <b>Divorced</b>	Religion <b>LUTHERAN</b>	Indication of: Alcohol Influence Drug Influence		
Local Address (Street, Apt. Number) <b>19699 Boca Greens Dr, Boca Raton, FL 33498</b>						Phone <b>(561) 716-1114</b>	Residence Type: 1. City 2. County 3. Florida 4. Out of State			
Permanent Address (Street, Apt. Number) <b>19699 Boca Greens Dr, Boca Raton, FL 33498</b>						Phone <b>( )</b>	Address Source <b>Driver's License/verbal</b>			
Business Address (Name, Street) <b>19699 Boca Greens Dr, Boca Raton, FL 33498</b>						Phone <b>( )</b>	Occupation <b>Retired</b>			
D/L Number, State <b>A352883440830, FL</b>			Soc. Sec. Number <b>[REDACTED]</b>		INS Number		Place of Birth (City, State) <b>Chicago, IL</b>		Citizenship <b>USA</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: Address (Street, Apt. Number) <span style="font-size: 2em; vertical-align: middle;">J</span> (City) (State) (Zip) 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 Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property				Value of Property				
Drug Activity 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/A A. Amphetamine	B. Barbiturate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Der.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other
Charge Description <b>Driving Under the Influence (DUI)</b>				Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number <b>316.193(1)</b>		Violation of ORD #		
Drug Activity <b>N</b>	Drug Type <b>n</b>	Amount / Unit		Offense # <b>17067974</b>		Warrant / Capias Number		Bond		
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #		
Drug Activity	Drug Type	Amount / Unit		Offense #		Warrant / Capias Number		Bond		
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #		
Drug Activity	Drug Type	Amount / Unit		Offense #		Warrant / Capias Number		Bond		
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input 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>South County Courthouse, Courtroom #1, 200 W. Atlantic Ave., Delray Beach, FL 33444 - Ph: (561) 355-2996</b>										
Court Date and Time Month <b>May</b> Day <b>15</b> Year <b>2017</b> Time <b>0830</b> AM <input checked="" type="checkbox"/> PM <span style="float: right;">APR 23 2017</span>										
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 <b>04/22/2017</b>										
Signature of Defendant (or Juvenile and Parent /Custodian) <span style="float: right;">Date Signed 8:00 PM</span>										
HOLD for other Agency Name: <b>X</b>				Signature of Arresting Officer <b>X</b>			Name Verification (Printed by Arresting Officer) <b>2017 APR 23</b>			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal				Name of Arresting Officer (Print) <b>D/S Jacob Frey</b>			(PRINT)			
<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:				I.D. # <b>9658</b>						
Intake Deputy <b>SPANN 8161</b>		I.D. # <b>8161</b>	Pouch #	Transporting Officer <b>D/S Jacob Frey</b>	ID # <b>9658</b>	Agency <b>PBSO</b>	Witnessed by / Subject signed with an "X" <b>SCANNED</b>			
DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - JUVENILE DEFENDANT (N.T.A.'s ONLY) APR 27 2017										

# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 22 DAY OF Apr 20 17, AT 19:33 AM ✓ PM

SUBJECT: Adamski, Warren, Charles CASE NUMBER: 17067974

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S Jacob Frey

## PERSONAL CONTACT

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

On 22Apr17 at approximately 1933hrs I was assisting in investigating a domestic dispute (17067965) at 19699 BOCA GREENS DR, Boca Raton, in unincorporated Palm Beach County. During the investigation I observed a blue Chevy Cruz (FL CRUY93) pull into the driveway. I approached the driver's side of the vehicle and observed an older white male in the driver's seat, he was later identified as Warren Adamski.

### OBSERVATION OF DRIVER:

As he opened the door I could smell the odor of an unknown alcoholic beverage coming from inside the vehicle. Warren had watery eyes and it appeared he had difficulty focusing. His speech was very slurred. I asked for his license. He had a difficult time removing his wallet from his back right pocket. He slowly opened his wallet and had difficulty removing his driver's license. He then turned his body and placed his legs outside the vehicle. He had a difficult time sitting upright. During this time he made several spontaneous utterances: "I had a couple drinks" and "I had a few cocktails". I asked him to exit the vehicle. As he exited the vehicle he used the driver's door for support. He immediately leaned against the rear door on the driver's side and could not stand without the support of his vehicle. I asked him to walk to the rear of his vehicle. He used the driver's side of the vehicle as he walked to the back of his vehicle. He staggered as he walked. At the rear of the vehicle I could smell the odor of an unknown alcoholic beverage coming from his breath.

### DRIVER'S STATEMENTS:

He made numerous statements during the entire time I was with him. He stated "I had 2 or 3 drinks", "I had a couple of cocktails", "I drank vodka", "I drink my drinks straight up", "I am drunk", "I will be sober by the time we get there", and several other statement. He repeated several of the statements numerous times. His speech was slurred and mumbled. He continued to repeat himself.

### ODORS:

The odor of an unknown alcoholic beverage coming from his breath

## GENERAL OBSERVATIONS

SPEECH: His speech was slurred and mumbled.

ATTITUDE: cooperative, profanity, agitated, confused

CLOTHING: white t-shirt (stained), gray shorts (stained and bleached), black sandals

MEDICAL/OTHER: Numerous medical problems - Nerve damage feet, both knee replacement, back and neck pain, bypass surgery, ruptured eardrums

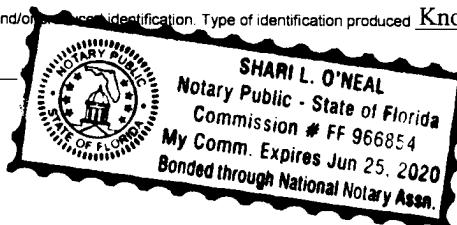
STATE OF FLORIDA  
COUNTY OF PALM BEACH

D/S Jacob Frey  
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 22 day of Apr 20 17 by D/S Jacob Frey

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

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



SCANNED  
APR 27 2017

## ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

<input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT	<input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT
<input type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION	<input checked="" 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:**

His body swayed during the task and he could not stand with his feet together. He could not follow the my stylus with his eye and had to move his head. I was unable to get a complete reading on the HGN. He had Vertical Gaze Nystagmus (VGN) in both eyes. His eyes were watery.

**WALK & TURN:**

I attempt to instruct the Walk and Turn. He was unable to stand and almost fell over several times. D/S Digsby and I had to catch him several times. He had to use a mailbox for support several time. Based on his inability to stand without falling I did not have him complete this task.

**ONE LEG STAND:**

Based on his inability to stand without falling I did not have him complete this task.

**FINGER TO NOSE:**

Since Warren was having a difficult time standing unassisted I had him lean his back against the mailbox to complete this task. I instructed and demonstrated the finger to nose. He acknowledged he understood. He could not keep his head leaned back as instructed and had his eyes open during the entire task. On every command he touched across the bridge of his nose or the side of his nose. The task was completed on a dry and level surface while using the mailbox for support.

**ROMBERG ALPHABET:**

He told me his highest level of education was 2 years at Rights College in Chicago and several years in military schools. He stated English is his primary language. I instructed and demonstrated the Rhomberg Alphabet. He acknowledged he understood. He completed the task with the assistance of the mailbox. He mumbled the alphabet. He repeated and skipped several letters. He ended the alphabet with several numbers. He had a difficult time keeping his head leaned back. The tasks was completed on a dry and level surface.

**BREATH TEST RESULTS:** 1) .163      2) .171      3)      4)

STATE OF FLORIDA  
COUNTY OF PALM BEACH

**D/S Jacob Frey**  
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 22 day of Apr 20 17 by D/S Jacob Frey

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

*S. O'Neal*  
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



SCANNED  
APR 27 2017

## WITNESS LIST

CASE NUMBER: 17067974

ARRESTING OFFICER: **D/S Jacob Frey**

ADDRESS: 3228 Gun Club Rd, WPB

PHONE NUMBERS (HOME): \_\_\_\_\_ (WORK) 561-688-3000

CAN TESTIFY TO: Physical control, personal contact, SFST

NAME: **D/S Digsby**

ADDRESS: 3228 Gun Club Rd, WPB

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) 561-688-3000

CAN TESTIFY TO: Physical control, personal contact

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: \_\_\_\_\_

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

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

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

ADDRESS \_\_\_\_\_

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

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

**SCANNED**

APR 27 2017

# TESTING FACILITY TASK REPORT

AGENCY: \_\_\_\_\_

SUBJECT: \_\_\_\_\_ CASE NUMBER: \_\_\_\_\_

DATE: \_\_\_\_\_ VIDEO TAPE NUMBER: \_\_\_\_\_

BEGINNING TIME: \_\_\_\_\_ ENDING TIME: \_\_\_\_\_

BREATH TESTS RESULTS: 1) \_\_\_\_\_ TIME \_\_\_\_\_ A.M./P.M. 2) \_\_\_\_\_ TIME \_\_\_\_\_ A.M./P.M.  
3) \_\_\_\_\_ TIME \_\_\_\_\_ A.M./P.M. 4) \_\_\_\_\_ TIME \_\_\_\_\_ A.M./P.M.

BREATH OPERATOR: \_\_\_\_\_

MAINTENANCE TECHNICIAN: \_\_\_\_\_

## TESTING OFFICER'S OBSERVATIONS

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

ATTITUDE: \_\_\_\_\_

CLOTHING: \_\_\_\_\_

MEDICAL CONDITIONS: \_\_\_\_\_

MEDICATIONS: \_\_\_\_\_

OTHER: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

ANS: Required for the report.

D: Submitted in the report.

D: Completed in the report.

CL: \_\_\_\_\_

SCANNED  
APR 27 2017

SUBJECT: A. J. L. V. C.

CASE NUMBER: 17-007474

## **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 \_\_\_\_\_ 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 into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X) \_\_\_\_\_

## **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) \_\_\_\_\_

**SCANNED**

# 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? no

WHERE WERE YOU GOING? My Pharmacy

WHAT STREET OR HIGHWAY WERE YOU ON? 19th and Lee Avenue

DIRECTION OF TRAVEL? W WHERE DID YOU START? Subway

WHAT TIME DID YOU START? 7:30 a.m. WHAT TIME IS IT NOW? 7:30 a.m.

WHAT IS TODAY'S DATE? 7-07-17 WHAT DAY OF THE WEEK IS IT? Sat.

WHAT COUNTY AND CITY ARE YOU IN NOW? Palm Beach County

WHEN DID YOU LAST EAT? 7 days ago WHAT DID YOU EAT? Breakfast

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? With 1/5

HOW MUCH DO YOU WEIGH? 170 HAVE YOU BEEN DRINKING? yes WHAT? Two bottles

HOW MUCH? 2 drinks WHERE? Home WITH WHOM? alone

WHEN DID YOU HAVE YOUR FIRST DRINK? 7 pm AND YOUR LAST DRINK? 1 pm

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? 1/2

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? No ARE YOU UNDER THE INFLUENCE? No

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? no HOW MUCH?

WHAT?   WHERE?   WHEN?  

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

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES?   WHAT?  

ARE YOU SICK OR INJURED? No WHAT'S WRONG?

DO YOU LIMP? No DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? Yes - 2 weeks ago

WERE YOU IN AN ACCIDENT TODAY? No

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN?

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? No WHO?   WHY?

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? No WHAT?   WHEN?  

DO YOU HAVE: EPILEPSY? No

GLASS EYE? No

FALSE TEETH? No

EAR INFECTION? No

INNER EAR TROUBLE? 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 HAD A DRIVER'S LICENSE IN ANY OTHER STATE? Yes WHERE? IL

**SCANNED**

APR 27 2017

INTERVIEWER: D/J T. Frey

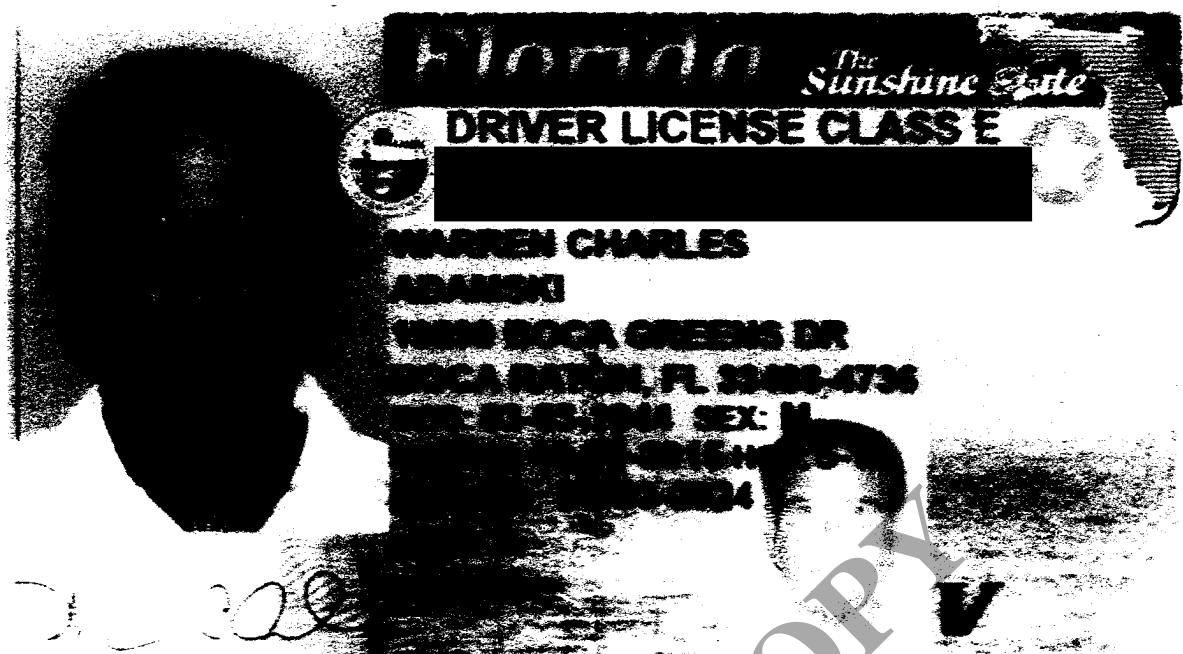
9058

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL



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

SCANNED  
APR 27 2017