

22CT 5

ARREST / NOTICE TO APPEAR

1. Arrest (No Warrant) 3. Request for Warrant
6. Arrest (Warrant) 4. Request for Capias
2. N.T.A. 5. Juvenile Referral

1 JUVENILE

AD M I N I S T R A T I O N	OBTS Number	Agency ORI Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N.T.A.'s only) 3 2 2021-015674		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		If Weapon Seized Enter Type: UNARMED		Multiple Clearance Indicator																				
D E F E N D A N T	Location of Arrest (Including Name of Business) 1300 S FEDERAL HWY, 1300 S FEDERAL HWY, BOCA RATON,						Location of Offense (Business Name, Address) 1300 S FEDERAL HWY, BOCA RATON, FL 33432																									
	Date of Arrest 12/31/2021	Time of Arrest 01:26	Booking Date 12/31/2021	Booking Time 02:16	Jail Date 12/31/2021	Jail Time 02:16	Location of Vehicle EMERALD TOWING																									
C O D E F	Name (Last, First, Middle) QUIRK, BARBRA RIBEIRO												Alias (Name, DOB, Soc. Sec. #, Etc.)																			
	Race W - White B - Black O - Oriental/Asian		Sex W		Date of Birth 04/22/1994		Height 5'05		Weight 110		Eye Color BROWN		Hair Color BROWN		Complexion LIGHT		Build Small															
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT LO ABDOMEN / HOOK												Marital Status S		Religion CATHOLIC		Indication of Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unit <input type="checkbox"/>		Indication of Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unit <input type="checkbox"/>													
	Local Address (Street, Apt. Number) 1361 S FEDERAL HWY 402, BOCA RATON, FL 33432						(City)		(State)		(Zip)		Phone (561) 400-7508		Residence Type: 1. City 2. County 3. Florida 4. Out of State 1																	
	Permanent Address (Street, Apt. Number) 1361 S FEDERAL HWY 402, BOCA RATON, FL 33432						(City)		(State)		(Zip)		Phone (561) 400-7508		Address Source VERBAL																	
	Business Address (Name, Street) LOCH BAR,						(City)		(State)		(Zip)		Phone		Occupation Bartender																	
	D/L Number, State 0620076946420 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) NEW ROCHELLE, NY,				Citizenship US																					
	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"/> Other <input type="checkbox"/> Legal Custodian												Name (Last, First, Middle)		Residence Phone																	
Address (Street, Apt. Number)												(City)		(State)		(Zip)		Business Phone														
Notified by (Name)				Date		Time		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated																								
Released To (Name)				Relationship		Date		Time																								
The above address was 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's Office (Phone 355-2526) informed of any change of address.												School Attended		Grade																		
<input type="checkbox"/> Yes, by: <input type="checkbox"/> No				Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property				Value of Property																						
C H A R G E	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. Synthetic		U. Unknown Z. Other	
	Charge Description DRIVE UNDER INFLUENCE ALC												Statute Violation Number 316.193(1A)		Violation of ORD #																	
	Drug Activity		Drug Type		Amount Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond																	
	Charge Description												Statute Violation Number		Violation of ORD #																	
Drug Activity		Drug Type		Amount Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond																		
Charge Description												Statute Violation Number		Violation of ORD #																		
Drug Activity		Drug Type		Amount Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond																		
I N T A K E	Health Apparent Physical Condition of Defendant GOOD												Any knowledge of the following: Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries <input type="checkbox"/>																			
	Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond				<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health				<input checked="" type="checkbox"/> T.O.T. County Jail		PROPERTY - Received By J. CASAS 818		Released By WALTER 848		Released To TOT CJ																	
	Transported By WALTER 848				Date Transported		Time Transported		Other																							
N O T I C E	<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.												Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444																			
													Court Date and Time 01/31/2022 08:30:00																			
A P P E A R	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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.												No Photo Available																			
	In custody - Unable to sign Signature of Defendant (or Juvenile and Parent/Custodian)												Date Signed																			
A D M I N	HOLD for Other Agency				Signature of Arresting Officer [Signature]				Name Verification (Printed by Arrestor) (PRINT)																							
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) CASAS, J.				I.D.# 818																							
	Inmate Number 071 NW/NCAL 7206		I.D.#		Pouch #		Transporting Officer WALTER		I.D.# 848		Agency 848		Witness here if subject signed with an "X"																			

SCANNED

JAN 01 2022

J# 0528415

2845

PROBABLE CAUSE AFFIDAVIT

1 Arrest 3 Request for Warrant
2 NTA 4 Request for Capias

1 JUVENILE

Agency ORI Number FL FL0500200	Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2021-015674
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		Special Notes

Name (Last, First, Middle) QUIRK, BARBRA RIBEIRO	Alias	Race W	Sex F	Date of Birth 04/22/1994
--	-------	------------------	-----------------	------------------------------------

Charge Description 316.193(1A) DUI	Charge Description
Charge Description	Charge Description

Victim's Name (Last, First, Middle)	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 _____ that he/she saw the arrested person commit the below acts admitting to the below facts

was found to have committed the below acts, resulting from my (described) investigation

On the 31 day of December, 2021 at 01:26 (Specifically include facts constituting cause for arrest.)

On 12/31/2021, at approximately 0055 hours, I responded to the area of 1300 S Federal Hwy as a back-up unit for a traffic stop. Upon arrival, I observed that Officer Maranges had stopped a black Volkswagen sedan (FL - QPQD90).

According to Officer Maranges, he first observed the VW blocking a crosswalk while stopped at the intersection of N Federal Hwy and NE 2nd St. Officer Maranges said he then observed the VW leave its lane, cross the solid white line on the right side of the roadway, and begin to drive in the bicycle lane as it traveled southbound on S Federal Hwy.

I then made contact with the driver of the VW who was identified via FL DL as Barbra Quirk. Upon approaching Quirk, I immediately observed that her eyes were red and glassy, and she had an overwhelmingly strong odor of and unknown alcoholic beverage emanating from her breath when she spoke. According to Quirk, she was headed home from a bartending job at Loch Bar which is a local bar. Quirk denied consuming any alcohol while at work.

Based on Quirk's driving pattern, Officer Maranges' observations, and my observations, I suspected that Quirk may have been operating a vehicle within the state while impaired by alcohol and/or chemical or controlled substances. I informed Quirk of my suspicion and requested that she submit to Standardized Field Sobriety Exercises to dispel my alarm. While briefly explaining the exercises that I would be conducting, Quirk uttered "I'm not going to blow" without me ever mentioning a breath test. At this time, I had Quirk exit her vehicle for further investigation.

According to Quirk, she was sick due to COVID. Quirk stated she was not injured and did not limp. Quirk claimed she did not feel comfortable walking in the shoes she was wearing, however, her shoes appeared to have normal wear and tear showing that she

SWORN AND SUBSCRIBED BEFORE ME	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
SHANNAHAN, TIMOTHY C NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 417 10)	CASAS, JAVIER (818) NAME OF OFFICER (PLEASE PRINT)
<u>12/31/2021</u> DATE	<u>12/31/2021</u> DATE

OBT Number Agency ORI Number FL F0500200	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1 Arrest 2 N.T.A. 3 Request for Warrant 4 Request for Capias	1	JUVENILE
Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2021-015674			
Charge Type: Check as many as apply <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other				
Name (Last, First, Middle) Alias Race Sex Date of Birth QUIRK, BARBRA RIBEIRO W F 04/22/1994				
P R O B A B L E C A U S E S T A T E M E N T	<p>chooses to wear and walk in them regularly. Quirk denied taking any medications or drugs and stated she did not smoke any marijuana. Lastly, Quirk stated she was not diabetic or epileptic, and did not have anything wrong with her eyes that isn't corrected by glasses or contact.</p> <p>I then asked Quirk if she was going to participate in the Standardized Field Sobriety Exercises and she stated she did not want to. I then informed Quirk of her Taylor Warnings, and she stated she understood. After some time, Quirk ultimately agreed to participate in the Horizontal Gaze Nystgmus exercise. I administered the instructions and Quirk stated that she understood. I first ensured that Quirk's eyes had equal pupil sizes and tracked equally. I then continued with the exercise. Quirk displayed lack of smooth pursuit, distinct and sustained nystagmus at maximum deviation, and onset of nystagmus prior to 45 degrees in both eyes. She also displayed Vertical Gaze Nystagmus and lack of convergence.</p> <p>I then asked Quirk if she wanted to continue with the exercises and move on to the Walk-and-Turn. Quirk contemplated on whether or not to continue for several minutes. She was also explained her Taylor warnings several times during this time. Quirk's indecisiveness was ultimately deemed a refusal to participate in the Standardized Field Sobriety Exercises. At this time, Quirk was placed under arrest for DUI per F.S.S. 316.193(1a).</p> <p>Quirk was then transported to BRPD for the administration of a breath test and the completion of arrest paperwork. Prior to arrival at BRPD, Quirk had already mentioned several times that she was going to refuse to provide a breath sample. For this reason, and because she kept claiming she was infected by COVID, I asked Quirk to provide a lawful sample of her breath for the purpose of determining its alcohol content prior to entering the enclosed testing facility. Quirk refused to provide a breath sample. I then informed Quirk of implied consent and she continued to refuse to participate in a breath test. A refusal affidavit was completed. See DUI influence report for further.</p>			
A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p style="text-align: center;">SHANNAHAN, TIMOTHY C</p> <p style="text-align: center; font-size: x-small;">NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117 10)</p> <p style="text-align: center;">12/31/2021</p> <p style="text-align: center; font-size: x-small;">DATE</p> </div> <div style="width: 45%;"> <p style="text-align: center;"><i>[Signature]</i></p> <p style="text-align: center; font-size: x-small;">SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p style="text-align: center;">CASAS, JAVIER (818)</p> <p style="text-align: center; font-size: x-small;">NAME OF OFFICER (PLEASE PRINT)</p> <p style="text-align: center;">12/31/2021</p> <p style="text-align: center; font-size: x-small;">DATE</p> </div> </div>			

NOT A CERTIFIED COPY

SCANNED

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

I, OFFICER JAVIER CASAS, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of BOCA RATON POLICE SERVICES DEPARTMENT, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 31ST day of DECEMBER, 20 21, at 0126 P.M. A.M.

DRIVER BARBRA RIBEIRO QUIRK
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# Q620076946420, state of FLORIDA, was placed under lawful arrest for


the offense of DUI by OFFICER JAVIER CASAS and
(Name of Arresting Officer)

issued Citation # A6LQFOE

That on or about the 31ST day of DECEMBER, 20 21, at 0222 P.M. A.M.

in PALM BEACH County,

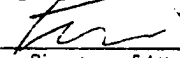
I requested that the driver submit to a breath and/or urine test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) would result in the suspension of his or her driving privilege for a 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:



Signature of Attesting Officer

Title CFC Eric Walter

Date 12/31/2021

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before

me this _____ day of _____, 20 _____,

by _____,

who is personally known to me or who has produced

_____ as identification

Notary Public _____

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.

SCANNED

DUI INFLUENCE REPORT



BOCA RATON POLICE SERVICES DEPARTMENT
100 NW 2nd Avenue
Boca Raton, FL 33432

SCANNED

JAN 01 2022



BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT - PART I

On the _____ day of _____, at _____ AM/PM:

Subject: _____ Case Number: _____

PERSONAL CONTACT

Driving Pattern: _____

Observation of Driver: _____

Driver's Statement: _____

Odors: _____

GENERAL OBSERVATIONS

Speech: _____

Attitude: _____

Clothing: _____

Medical Problems: _____

Medications: _____

Other: _____

NOT A CERTIFIED COPY

SCANNED

JAN 01 2022

Horizontal Gaze Nystagmus:

- Left eye does not follow smoothly
- Left eye jerks at 45 degrees angle or less
- Distinct jerking left eye maximum deviation
- Right eye does not follow smoothly
- Right eye jerks at 45 degrees angle or less
- Distinct jerking right eye maximum deviation

Can not do, Why? _____

Walk and turn: _____

Can not do, Why? _____

One leg stand: _____

Can not do, Why? _____

Finger to nose: _____

Can not do, Why? _____

Alphabet (speech pattern): _____

Can not do, Why? _____

Breath/Blood test results: _____

State of Florida, County of Palm Beach,
Sworn and subscribed before me this _____ (date) by _____.

Notary/Clerk of Court/ Officer (FSS 117.10)

Date

SCANNED

JAN 01 2022

Signature of Arresting Officer

Name of Officer (print)

ARRESTING OFFICER: Ofc. J. CASAS

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

NOT A CERTIFIED COPY

SCANNED

JAN 01 2022



BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT - PART II

To be filled out at testing facility

Agency Case # 2021015674

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is Friday, December, 31, 2021.
(day) (month) (date) (year)

B. The time is now approximately 220 AM/PM.

C. The following is in reference to case number 2021015674.

D. Present at this time is Ofc. J. Casas of the Boca Raton Police Department.
(Officer's Name)

E. Officer Casas, have you arrested Barbra Quirk in violation of Florida State Statute 316.193?
(Defendant's name)

F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida? yes

G. Mr./Mrs./Ms Quirk, I am required to inform you these proceedings are being video recorded.

Operator Note: *Video record breath request, breath sample, and interview.*

NOT A CERTIFIED COPY

SCANNED

JAN 01 2022

II. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.

Note: Read only the paragraph applicable to the type of test you are requesting.

- A.** I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.
- B.** I am now requesting that you submit to a lawful test of your **URINE** for the purpose of determining the presence of chemical or controlled substances.
- C.** I am now requesting that you submit to a lawful test of your **BLOOD** for the purpose of determining its alcohol content and the presence of chemical or controlled substances.

IMPLIED CONSENT WARNINGS

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 Signature: Read on Camera

Note: Also read for CDL holders:

IN ADDITION, your refusal to submit will result in the loss of your commercial privileges for one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from operating a commercial motor vehicle.

Note: After reading the implied consent warning, the arresting officer must request a breath sample again.

(IF REFUSAL THEN)

At this time Mr./Mrs./**Ms.** Quirk has refused to submit to a breath test.

The date is December, 31, 2021, and the time is 0222 **A**MPM.
(month) (day) (year)

A refusal form will be completed by the arresting officer.



BOCA RATON POLICE SERVICES DEPARTMENT
JUVENILE CONSTITUTIONAL WARNINGS

**Rights of suspects prior to custodial questioning.
Identify yourself and state:**

I am required to warn you before you make any statement that you have the following Constitutional rights:

- (1) You have the right to remain silent and not answer any questions. *Tell me in your own words what you think this means.
(You do not have to talk to me or answer any questions about this offense. You can be quiet if you want.)*
- (2) Any statement you make must be freely and voluntarily given. *Tell me in your own words what you think this means.
(If you do talk to me it has to be because you want to and not because anyone is forcing you to speak.)*
- (3) You have a right to the presence and representation of a lawyer of your choice before you make any statement and during any questioning. *Tell me in your own words what you think this means.
(You can talk to a lawyer before we ask you any questions and you can have him/her with you now, during our questioning)*
- (4) If you cannot afford a lawyer, you are entitled to the presence and representation of a court appointed lawyer before you make any statement and during any questioning. *Tell me in your own words what you think this means
(If you do not have money for a lawyer and you want one, a lawyer will be given to you for free.)*
- (5) If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent. *Tell me in your own words what you think this means.
(If you decide to talk to me then change your mind, you can stop answering my questions at any time.)*
- (6) I can make no threats or promises to induce you to make a statement. This must be of your own free will. *Tell me in your own words what you think this means
(I am not allowed to threaten you or make you any promises to get you to talk to me. If you decide to talk, it must be because you want to.)*
- (7) Any statement can be and will be used against you in a court of law. *Tell me in your own words what you think this means
(Anything you say to me can and will be told to the judge or a jury in court. A judge is a person who decides if you have done something wrong. Sometimes a group of people called a jury decide this, but the Judge is the person who decides what punishment you get.)*
- (8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: _____ Date: _____ Time: _____

SCANNED

JAN 01 2022



BOCA RATON POLICE SERVICES DEPARTMENT
TESTING FACILITY TASK REPORT

SUBJECT: _____

CASE #: _____ DATE: _____

BREATH TEST RESULTS

1) TIME _____ AM/PM 2) TIME _____ AM/PM
3) TIME _____ AM/PM 4) TIME _____ AM/PM

BREATH OPERATOR: _____

MAINTENANCE TECHNICIAN: _____

TESTING OFFICER'S OBSERVATIONS

SPEECH: _____

ATTITUDE: _____

CLOTHING: _____

MEDICAL CONDITION: _____

OTHER: _____

COMMENTS: _____

NOT A CERTIFIED COPY
Not Conducted

SCANNED

JAN 01 2022

Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

- (1) You have the right to remain silent and not answer any questions.
- (2) Any statement you make must be freely and voluntarily given.
- (3) You have a right to the presence and representation 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 and representation of a court appointed lawyer before you make any statement 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 be and will be used against you in a court of law.
- (8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: _____ Date: _____ Time: _____

QUESTIONS AND ANSWERS

Were you operating a motor vehicle at the time of the accident/stop? _____

Where were you going? _____

What street or highway were you on? _____

Direction of travel? _____

Where did you start driving from? _____

What city (county) were you stopped in? _____

What time did you start? _____ AM/PM What time is it now? _____

What is today's date? _____ What day of the week is it? _____

When did you last eat? _____ What did you eat? _____

What have you been doing the past three hours prior to this stop/accident? _____

How much do you weigh? _____ Have you been drinking? _____ What were you drinking? _____

How much? _____ Where? _____ With whom were you drinking? _____

When did you have your first drink? _____ AM/PM When did you stop drinking? _____

How did you consume your last two drinks? _____

Are you under the influence of alcohol now? Yes No

Can you feel the effects of alcohol? Yes No

Have you consumed alcohol since the accident? Yes No

Can you feel the effects of alcohol? Yes No

Have you consumed alcohol since the accident? Yes No How much? _____

What? _____ Where? _____

What line of work are you in? _____

When did you last work? _____

Do you have any physical defects or injuries? Yes No If yes, explain: _____

Are you sick or injured? Yes No If yes, explain: _____

Do you limp? Yes No Did you get a bump on the head? Yes No

Were you in an accident today? _____

Have you taken any drugs or smoked marijuana today? _____

What? _____ When? _____

Have you seen a doctor or dentist today? Yes No Who? _____

Are you taking any prescription medications? Yes No What? _____ When? _____

Do you have: Epilepsy? Yes No Inner ear trouble? Yes No
Glass eye? Yes No Ear infection? Yes No
False teeth? Yes No Diabetes? Yes No

Any problems not correctable by glasses or contact lenses? _____

Do you take insulin? Yes No If yes, when was your last injection? _____

Have you ever had a driver's license in any other state? _____

I am now ending this video recording. The time is now approximately _____ AM/PM.

The date is _____ (month) _____ (day) _____ (year)

SCANNED
JAN 01 2022



Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

NOT A CERTIFIED COPY

REVIEW COMPLETED BY

SCANNED

JAN 01 2022

Booking Number: 2021032904	Date: 1/1/2022
	Specialist Name/ID: VARGO/6665