

J#0528390

214 21357

#409

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

OBTS Number	Agency ORI Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N.T.A.'s only) 3, 2 2021-015632	
Charge Type: Check as many as apply	<input type="checkbox"/> 1. Felony	<input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance	<input type="checkbox"/> 6. Other
Location of Arrest (Including Name of Business) 1500 N FEDERAL HWY BOCA RATON, FL 33432, 1500 N				Location of Offense (Business Name, Address) 1000 N FEDERAL HWY, BOCA RATON, FL 33432		
Date of Arrest 12/29/2021	Time of Arrest 21:44	Booking Date 12/29/2021	Booking Time 21:48	Jail Date 12/29/2021	Jail Time 21:48	Location of Vehicle EMERALD TOWING
Name (Last, First, Middle) PRESCOTT, CARL OSCAR III				Alias (Name, DOB, Soc. Sec. #, Etc.)		
Race W - White B - Black	I - American Indian O - Oriental/Asian	Sex M	Date of Birth 11/09/1960	Height 6'03	Weight 235	Eye Color BROWN
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) SCAR STOMACH / APPENDIX SCAR				Marital Status M	Religion	Complexion LIGHT
Local Address (Street, Apt. Number) (City) (State) (Zip) 3720 NW 4TH CT, BOCA RATON, FL 33431				Phone (561) 368-6290	Indication of Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Permanent Address (Street, Apt. Number) (City) (State) (Zip) 3720 NW 4TH CT, BOCA RATON, FL 33431				Phone (561) 368-6290	Residence Type: 1. City 2. County 3. Florida 4. Out of State	
Business Address (Name, Street) (City) (State) (Zip) SELF,				Phone (561) 368-9979	Address Source ARRESTEE	
D/L Number, State P623134604090 / FL		Soc. Sec. Number	INS Number	Place of Birth (City, State) COLUMBIA, SC,		Citizenship US
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
Name (Last, First, Middle)						Residence Phone
Address (Street, Apt. Number) (City) (State) (Zip)						Business Phone
Notified by: (Name)						JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated
Released To: (Name) Relationship						
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
Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Disperse/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine
Charge Description DUI			Statute Violation Number 316.193(1)(A)		Violation of ORD #	
Drug Activity	Drug Type N	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number
Charge Description						Statute Violation Number
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number
Charge Description						Statute Violation Number
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number
Health / Apparent Physical Condition of Defendant INTOXICATED						Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injury Explain: NA
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	
Transported By			PROPERTY - Received By 683	Released By 683	Released To PBCJ	
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			
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.			Court Date and Time 01/31/2022 08:30:00			
Signature of Defendant (or Juvenile and Parent/Custodian)			Date Signed 12/30/21			
HOLD for Other Agency N/A			Signature of Arresting Officer CRAWFORD, A.		Name Verification (Printed by Arrestee) Carl Prescott III	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal			<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		I.D. # 683	
Inmate ID # 0110126			Pouch #		Transporting Officer St. Veyra	
I.D. # 028			A.A. # BRID			

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PROBABLE CAUSE AFFIDAVIT

1. Arrest 3. Request for Warrant
2. N.T.A. 4. Request for Capias

1 JUVENILE

OBTS Number	Agency ORI Number FL FLO500200		Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2021-015632
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				Special Notes:

Name (Last, First, Middle) PRESCOTT, CARL OSCAR III	Aliases	Race W	Sex M	Date of Birth 11/09/1960
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Charge Description 316.193(1) DUI	Charge Description
Charge Description	Charge Description

Victim's Name (Last, First, Middle) State Of Florida	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.
 confessed to _____
 was found to have committed the below acts, resulting from my (described) investigation.
 On the 29 day of December, 2021 at 21:08 (Specifically include facts constituting cause for arrest.)

The following was captured on AVAILWEB.

On 12/29/21, at approximately 2108 hours, while operating stationary speed enforcement at 1000 N Federal Highway with my Dragon Eye Laser (serial #17596), I observed a silver Ford F150 pickup truck in the middle lane approaching my location rapidly. I visually estimated the truck to be doing approximately 54 mph in a 35 mph zone. I targeted the truck with my Dragon Eye Laser and activated it by means of a trigger and the display read 55mph for a 35 mph zone. I immediately pulled out after the truck as it passed my location and activated my overhead lights and siren. However, the truck did not slow or pull over to a stop, instead the truck continued to drive northbound on N Federal Highway in the inside travel lane. While behind the truck with my lights and siren still activated the truck continued northbound and then made a right turn onto NE 15th Terrace. The truck finally came to a stop at the intersection of NE 15th Terrace and NE 4th Avenue.

I then walked up to the Ford and spoke with the driver, Carl Prescott III who was the sole occupant. I advised Prescott that I had stopped him for speeding and he remarked that he had no idea he had been speeding. According to Prescott he was coming from the Post Office downtown where he picked up his mail from his P.O. Box and before that he was at home. I asked Prescott for his driver license, registration, and proof of insurance. After looking for some time, Prescott could not find his driver license or the current registion or insurance. He only managed to locate his 2017 registration and 2019 insurance information. While I spoke with Prescott, I could see his eyes were glassy and bloodshot and I could smell a strong odor of an alcoholic beverage emanating from his breath. According to Prescott he had two Scotch drinks at home over an approximate four hour period before he drove to the Post Office. It should also be noted, I observed in plain view a clear tall cup with ice and yellowish liquid in it in the center console. Prescott advised he had been drinking Scotch with water and ice

SWORN AND SUBSCRIBED BEFORE ME CARUSO, MARK RICHARD NOTARY PUBLIC / CLERK OF COURT / OFFICER, F.S.S. 117.10 <u>12/29/2021</u> DATE	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER CRAWFORD, ANDREW (683) NAME OF OFFICER (PLEASE PRINT) <u>12/29/2021</u> DATE
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OBTS Number Agency ORI Number FL FLO500200	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 2021-015632			
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 PRESCOTT, CARL OSCAR III W M 11/09/1960				
P R O B A B L E C A U S E S T A T E M E N T	<p>before driving. I then asked him what is in the cup and he said water. I told him he had told me already that he had mixed his scotch with water and ice and then he admitted that the drink in his center console was indeed his second drink of scotch and water and was drinking from it while driving. I asked Prescott to step out of his vehicle. I advised Prescott of my observations and to dispel my alarm that he may be impaired, I asked him to complete roadside exercises. Prescott refused to participate in roadside exercises. I advised him of his Taylor warning that if he refused to participate in roadside exercises his refusal to participate can be used against him in a court of law. He kept asking hypothetical questions about what would happen next if he didn't do roadsides and asking for legal advice about what happens if he doesn't do the exercises. I again advised of him of his Taylor warning and advised him the exercises were his choice and I could not force him to do them. I then again asked him again if he would complete the exercises and he again refused.</p> <p>I then told Prescott to turn around and place his hands behind his back and that I was placing him under arrest for DUI. Prescott then immediately uttered that he now wanted to do roadside sobriety tasks. I then attempted to conduct the standard roadside sobriety exercises with Prescott's change of mind. The exercises were performed on a clean, flat, and level surface that was clear of debris. He advised that he did not have any physical injuries or disabilities that would prohibit him from completing the exercises other than vertigo from time to time which he stated he was not experiencing at the moment.</p> <p>HGN: There was lack of smooth pursuit seen in both eyes. There was distinct and sustained nystagmus seen in both eyes at maximum deviation. Onset of nystagmus was also seen prior to 45 degrees. Vertical nystagmus was not seen.</p> <p>Walk and Turn: He was unable to maintain the instruction stance because he lost his balance and stepped off the line. While I was explaining the exercise and demonstrating it, Prescott uttered "I couldn't even do that exercise if I was..." however, he stopped short of saying the word sober. Then Prescott started to panic himself and make himself upset. He then decided he no longer wanted to do the roadside exercises and told me to do what I have to do.</p> <p>Based upon my investigation, I had probable cause to believe Carl Prescott did drive or was in actual physical control of a vehicle, while under the influence of alcoholic beverages or chemical substances as set forth in Florida Statute 877.111, or a controlled substance as set forth in Chapter 893 or any combination thereof, and was affected to the extent that his normal faculties were impaired, contrary to Florida Statute 316.193(1). At 2144 hours, I placed Carl Prescott under arrest for DUI.</p> <p>I transported Prescott to the Boca Raton Police Department for processing and breath testing. I conducted the twenty minute observation period. Officer J. Casas</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;">CARUSO, MARK RICHARD</p> <p style="text-align: center; font-size: x-small;">NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p style="text-align: center;">12/29/2021</p> <p style="text-align: center; font-size: x-small;">DATE</p> </div> <div style="width: 45%;"> <p style="text-align: center; font-size: x-small;">SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p style="text-align: center;">CRAWFORD, ANDREW (683)</p> <p style="text-align: center; font-size: x-small;">NAME OF OFFICER (PLEASE PRINT)</p> <p style="text-align: center;">12/29/2021</p> <p style="text-align: center; font-size: x-small;">DATE</p> </div> </div> <div style="text-align: right; margin-top: 10px;"> <p style="font-size: 2em; font-weight: bold; opacity: 0.5;">SCANNED</p> </div>			
				PAGE 2 OF 3

OBTS Number

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

1. Arrest
2. N.T.A.
3. Request for Warrant
4. Request for Capias

1

JUVENILE

A D M I N	Agency ORI Number	Agency Name	Agency Report Number	
	FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 2	2021-015632

Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	Special Notes:
	<input type="checkbox"/> 2. Traffic Felony	<input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other	

D E F	Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
	PRESCOTT, CARL OSCAR III		W	M	11/09/1960

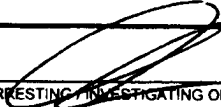
conducted the breath testing process. I asked Prescott to provide a sample of his breath and he said no. I read implied consent and at 2223 hours, he again refused to provide a sample of his breath. A refusal affidavit was completed. I also advised him of his constitutional warnings for which he stated that he understood and he refused to speak with me. Prescott was then transported to the Palm Beach County Jail.

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A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME	
	CARUSO, MARK RICHARD NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER 
	12/29/2021 DATE	CRAWFORD, ANDREW (683) NAME OF OFFICER (PLEASE PRINT)
		12/29/2021 DATE

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PAGE
3 OF 3

**FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT**

Instrument Type: Intoxilyzer 8000
Instrument Registered To: BOCA RATON PD
Instrument Serial Number: 80-006622 Software: 8100.27
Date of Test: 12/29/2021

Date of Last Agency Inspection: 12/22/2021

Observation Period Began: 22:00

Subject's Name: CARL O PRESCOTT

DOB: 11/09/1960 Sex: M

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:	Test	g/210L	Time
	Diagnostics Check	OK	22:29
	Air Blank	0.000	22:29
	Control Test	0.078	22:29
	Air Blank	0.000	22:30
	Subject Sample #1	REF*	22:30
	Air Blank	0.000	22:31
	Control Test	0.079	22:31
	Air Blank	0.000	22:31
	Diagnostics Check	OX	22:32

*Subject Test Refused

Cylinder Lot: 15421080A1

Exp: 03/05/2023

State of Florida, County of Palm Beach,

Personally appeared before me the undersigned authority, who () is personally known to me or () produced _____ as identification, and who after being placed under oath, states:

I, _____, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: [Signature] Date: 12-29-21
Signature

Sworn to (or affirmed) before me this 29th day of December, 2021

[Signature] #683 Off. A Crawford #683
Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with section 316.1934(5), F.S., and in administrative proceedings pursuant to section 316.2615, F.S.

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

I, Ofc Crawford, 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 29th day of December, 20 21, at 9:32 P.M. A.M.

DRIVER Carl Oscar Prescott III,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# P623134604090, state of Florida, was placed under lawful arrest for

the offense of DUI by Ofc. Crawford and
(Name of Arresting Officer)

issued Citation # A6LQFNE

That on or about the 29th day of December, 20 21, at 10:23 P.M. A.M.

in Boca Raton, 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 Ofc. J. CASAS

Date 12-29-21

(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 _____

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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.

21-15632 10-15 2144 Obs 2200

DUI INFLUENCE REPORT



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

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BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT - PART I

On the 29th day of December, at 2144 AM/PM:

Subject: Carl prescott Case Number: 21-15632

PERSONAL CONTACT

Driving Pattern: _____

Observation of Driver: _____

Driver's Statement: _____

Odors: _____

GENERAL OBSERVATIONS

Speech: _____
Attitude: _____
Clothing: _____
Medical Problems: _____
Medications: _____
Other: _____

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ARRESTING OFFICER: Ofc. Crawford

Name: Ofc. Crawford Phone # 561-~~6201~~ 368-6201 Work # _____

Address: _____

Can testify to: Arrest / Refusal

Name: Ofc. CASAS Phone # 561-368-6201 Work # _____

Address: _____

Can testify to: Refusal

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: _____

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BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT - PART II

To be filled out at testing facility

Agency Case # 21-15632

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is Wednesday, December, 29, 2021.
(day) (month) (date) (year)

B. The time is now approximately 2221 AM/PM.

C. The following is in reference to case number 21-15632.
ofc. J. CASAS

D. Present at this time is ofc. Crawford of the Boca Raton Police Department
(Officer's Name)

E. Officer Crawford, have you arrested Carl Prescott 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. Prescott, I am required to inform you these
proceedings are being video recorded.

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

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DEC 30 2021

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. Prescott has refused to submit to a breath test.

The date is December, 29, 2021, and the time is 2223 AM/PM.

A refusal form will be completed by the arresting officer.

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DEC 30 2021



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: _____

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DEC 30 2021



BOCA RATON POLICE SERVICES DEPARTMENT
TESTING FACILITY TASK REPORT

SUBJECT: Carl Prescott

CASE #: 21-15624 DATE: 12-29-21

BREATH TEST RESULTS

1) TIME 2223 Refused AM/PM 2) TIME _____ AM/PM
3) TIME _____ AM/PM 4) TIME _____ AM/PM

BREATH OPERATOR: _____

MAINTENANCE TECHNICIAN: _____

TESTING OFFICER'S OBSERVATIONS

SPEECH: _____

ATTITUDE: Calm - Quiet

CLOTHING: Blue shirt, Gray shorts, Gray sneakers

MEDICAL CONDITION: Diabetes, Depression, Anxiety

OTHER: Red, glassy eyes

COMMENTS: _____

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DEC 30 2021

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: Read on Camera 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? _____ AM/PM

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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 2232 AM/PM

The date is December, 29, 2021.
(month) (day) (year)

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NOT A CERTIFIED COPY
Refused



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:	

REVIEW COMPLETED BY

Booking Number: 2021032811	Date: 12/30/2021	SCANNED DEC 30 2021
	Specialist Name/ID: J. Beck/9007	