

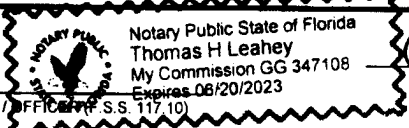
0530521

50-2022-CT-005168-ANB

1160

ADDITIONAL INFORMATION		OBTS Number		ARREST / NOTICE TO APPEAR		1 Arrest 2 N.T.A. 3 Request for Warrant 4 Request for Capias		1 JUVENILE	
Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 5, 4 22-001327					
Charge Type Check as many as apply: ☐ 1 Felony ☐ 2 Traffic Felony ☐ 3 Misdemeanor ☒ 4 Traffic Misdemeanor ☐ 5 Ordinance ☐ 6 Other		If Weapon Seized Enter Type UNARMED		Multiple Clearance Indicator					
Location of Arrest (Including Name of Business) 126 OAKWOOD DR/DEERFIELD DR JUPITER FL 3				Location of Offense (Business Name, Address) 126 OAKWOOD DR/DEERFIELD DR, JUPITER, FL 33458					
Date of Arrest 03/31/2022		Time of Arrest 01:38		Booking Date		Booking Time		Jail Date	
Jail Time		Location of Vehicle							
Name (Last, First, Middle) BURKETT, ADAM TYLER				Alias (Name, DOB, Soc. Sec. #, Etc.)					
Race W - White B - Black O - Oriental/Asian W				Sex M		Date of Birth 01/17/1993		Height 6'02	
Weight 180		Eye Color HAZEL		Hair Color BROWN		Complexion FAIR		Build Medium	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status S		Religion OTHER		Indication of Alcohol Influence Yes ☒ No ☐ Unk ☐	
Local Address (Street, Apt. Number) 118 SHERWOOD CIR 8B, JUPITER, FL 33458				(City)		(State)		(Zip)	
Permanent Address (Street, Apt. Number) 118 SHERWOOD CIR 8B, JUPITER, FL 33458				(City)		(State)		(Zip)	
Business Address (Name, Street) FL DL				(City)		(State)		(Zip)	
D/L Number, State B623018930170 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) BIRMINGHAM, AL		Citizenship US	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		☐ 1 Arrested ☐ 2 At Large ☐ 3 Felony ☐ 4 Misdemeanor ☐ 5 Juvenile	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		☐ 1 Arrested ☐ 2 At Large ☐ 3 Felony ☐ 4 Misdemeanor ☐ 5 Juvenile	
☐ Parent ☐ 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 IAC 3 Incarcerated			
Released To (Name)		Relationship		Date		Time			
The above address was provided by ☐ defendant and/or ☐ defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.				School Attended		Grade			
Property Crime? ☐ Yes ☒ No		Description of Property		Value of Property					
Drug Activity S Sell 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		B Barbiturate C Cocaine E Heroin		H Hallucinogen M Marijuana O Opium/Deriv		P Paraphernalia/ Equipment S Synthetic	
U Unknown Z Other		Charge Description DUI - NORMAL FACULTIES IMPAIRED		Statute Violation Number 316.193(1)(A)		Violation of ORD #			
Drug Activity		Drug Type N		Amount / Unit		Offense #		Counts 1	
Domestic Violence ☐ Y ☒ N		Warrant / Capias Number		Bond					
Charge Description		Statute Violation Number		Violation of ORD #					
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts	
Domestic Violence ☐ Y ☐ N		Warrant / Capias Number		Bond					
Charge Description		Statute Violation Number		Violation of ORD #					
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts	
Domestic Violence ☐ Y ☐ N		Warrant / Capias Number		Bond					
Health / Apparent Physical Condition of Defendant				Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries					
Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health				PROPERTY - Received By		Released By		Released To	
Transported By				Date Transported		Time Transported		Other	
☒ INSTRUCTION NO. 1 - Mandatory appearance in court ☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.				Location (Court, Room) North County PALM BEACH GARD		Court Date and Time 05/11/2022 08:30:00		No Photo Available	
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.				Signature of Defendant (or Juvenile and Parent/Custodian) Adam Burkett		Date Signed 3-31-22			
HOLD for Other Agency		Signature of Arresting Officer Christopher Fandrey		Name Verification (Printed by Arrestee) Adam Burkett		PAGE 1 of 1			
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other		Name of Arresting Officer (Print) FANDREY, CHRISTOPHER		ID # 1182		Witness here if subject signed with an "X"			
Intake Deputy Spinn 8101		Pouch #		Transporting Officer Clarkrey		ID # 3401162 JPP			

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P.T.O.A. ☐ DEFENDANT

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias		1	JUVENILE
Agency ORI Number	Agency Name		Agency Report Number				
FL 0501700	JUPITER POLICE DEPARTMENT		5 4 22-001327				
Charge Type: Check as many as apply ☐ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other			Special Notes				
Name (Last, First, Middle)			Alias		Race	Sex	Date of Birth
BURKETT, ADAM TYLER					W	M	01/17/1993
Charge Description			Charge Description				
316.193(1)(A) DUI - NORMAL FACULTIES IMPAIRED							
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. ☐ confessed to _____ admitting to the below facts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the <u>31</u> day of <u>March</u>, <u>2022</u> at <u>01:38</u> (Specifically include facts constituting cause for arrest.) On 3/31/2022 at approximately 0123hrs I was conducting vehicle patrol in my unmarked Jupiter Police Patrol vehicle with interior overhead lights and sirens equipped. I was in full police uniform with my department issued Axon BWC activated clearly identifying myself as Jupiter Police Officer. I observed a red 2014 Jeep bearing FL Tag Z822RK going southbound on S Central Blvd from W Indiantown Rd, Jupiter, Palm Beach County, Florida. A records check through F/NCIC revealed that the vehicles registration had expired on 01/17/2022. Based on the aforementioned traffic violation, I conducted a traffic stop on the vehicle by activating my red and blue lights. The vehicle came to a complete stop at Oakwood Drive and Deerfield Drive, Jupiter, Palm Beach County, Florida. I approached the driver side of the vehicle and made contact with the driver/sole occupant of the vehicle who was later positively identified by his Florida Class E Driver license to be WM Adam T. Burkett (01/17/1993). Upon making contact with Burkett I immediately noticed the strong and distinct odor of an unknown alcoholic beverage coming from his person. Burkett had red bloodshot glassy eyes and slurred speech. Burkett seemed confused when asked for his vehicle registration and insurance and explained he did not have it. Burkett confirmed he did not believe that he had insurance or registration as he knew the registration was expired prior to him moving to Jupiter. Burkett stated he was coming from "Rachel's" which is a bar/club in West Palm Beach Florida. Burkett explained he had too much to drink tonight and also stated he was at a 5 on a scale of 1-10 with 1 being sober and 10 being the most drunk he has ever been. I asked Burkett if he thought he should be driving and he stated no. Burkett also stated that he would have gotten an Uber had he had to make the choice to drive again. Burkett was asked to step out of his vehicle and he complied. Burkett denied having any medical issues or being under the care of a doctor or a dentist. Burkett stated he did not wear glasses or contacts. Burkett agreed to perform Standardized Field Sobriety Tasks (SFSTs). Burkett performed poorly on each task and I subsequently developed							
SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10) <u>03/31/2022</u> DATE			SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  FANDREY, CHRISTOPHER (1182) NAME OF OFFICER (PLEASE PRINT) <u>03/31/2022</u> DATE				

COURT

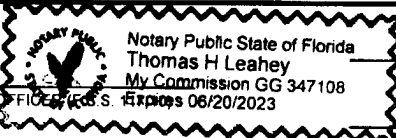
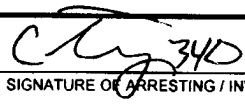
STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

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 I S T R A T I V E	Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 5 4 22-001327				
	Charge Type: Check as many as apply.		☐ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other			Special Notes:			
D E F	Name (Last, First, Middle) BURKETT, ADAM TYLER				Alias		Race W	Sex M	Date of Birth 01/17/1993
	probable cause to arrest him for Driving Under the Influence. See DUI PC for further. Burkett was placed into handcuffs which were double locked and checked for spacing and advised he was under arrest. Burkett was searched which yielded negative results and placed into the back seat of my patrol vehicle and secured by the seatbelt. Burkett agreed to take a breath test when asked roadside and was transported to the Palm Beach County Jail BAT Facility where he provide two breath samples of 0.125 and 0.121 at 0239 and 0242hrs. Burkett did not wish to answer any questions post Miranda and was later secured into a holding cell. Burkett signed a copy of his notice to appear and citations promising to appear in court and was later turned over to the Palm Beach County Jail without incident. Burkett's vehicle was removed on scene by All Hooked Up Towing.								
NOT A CERTIFIED COPY									
A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME				 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER				
	NOTARY PUBLIC / CLERK OF COURT / OFFICER / S. S. 03/31/2022 DATE								
			FANDREY, CHRISTOPHER (1182) NAME OF OFFICER (PLEASE PRINT)		03/31/2022 DATE				
					PAGE 2 OF 2				

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.



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

PBSO CASE # 22-051763 PBSO ZONE 3-14
AGENCY CASE # 22-001327 CRASH CASE # _____
TIME OF STOP/CRASH 0123 DATE 03/31/2022 DAY Thursday
SUBJECT'S NAME Burkett Adam T RACE White SEX Male
LAST FIRST MID
HGT 602 WGT 180 DOB 01171993
LOCATION Jupiter Village Blvd/Oakwood Dr, Jupiter, FL
ARRESTING OFFICER'S NAME & ID C Fandrey 340 AGENCY Jupiter PD
DIVISION: Traffic
NOTIFIED BY COMMO Yes
ARRIVAL AT FACILITY 0213
ARREST TIME 0138

BREATH RESULTS:

1)	.125
2)	.121
3)	N/A
4)	N/A

TESTING OFFICER'S ID 19183 PBSO VIDEOTAPE # N/A

**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: 80-006029 Software: 8100.27
Date of Test: 03/31/2022

Date of Last Agency Inspection: 03/25/2022
Observation Period Began: 02:13
Subject's Name: ADAM T BURKETT

DOB: 01/17/1993 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	02:37
	Air Blank	0.000	02:38
	Control Test	0.081	02:38
	Air Blank	0.000	02:39
	Subject Sample #1	0.125	02:39
	Air Blank	0.000	02:40
	Air Blank	0.000	02:42
	Subject Sample #2	0.121	02:42
	Air Blank	0.000	02:43
	Control Test	0.080	02:43
	Air Blank	0.000	02:44
	Diagnostics Check	OK	02:44

Cylinder Lot: 19021080A2
Exp: 09/05/2023

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 THOMAS H LEAHEY, 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: T Leahy Date: 03/31/22
Signature

Sworn to (or affirmed) before me this 31 day of March, 2022

C. Fandrey O. C. Fandrey
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Note: 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 322.2615, F.S.

TESTING FACILITY TASK REPORT

AGENCY: JPD

SUBJECT: Burkett, Adam T

DATE: Mar 31, 2022

BEGINNING TIME: 0235

CASE NUMBER: 22-051763

VIDEO DVD NUMBER: n/a

ENDING TIME: 0245

BREATH TESTS RESULTS: 1) .125 TIME 0239 A.M. ☒ P.M. ☐ 2) .121 TIME 0242 A.M. ☒ P.M. ☐
3) 0 TIME n/a A.M. ☐ P.M. ☐ 4) n/a TIME 0 A.M. ☐ P.M. ☐

BREATH OPERATOR: Thomas H Leahey #19183

MAINTENANCE TECHNICIAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: thick

ATTITUDE: cooperative

CLOTHING: gray pants, lt gray shirt, gray sneakers

MEDICAL CONDITIONS: depression

MEDICATIONS: Lexipro

OTHER:

eyes are glassy & bloodshot
odor of unknown of alcoholic beverage on breath

COMMENTS:

arrived at center A/O conducted 20 minute observation period 0213 hrs

subject agreed to perform breath test

subject completed breath test

A/O read rights & subject understood rights

tech read breath test results & subject understood breath test results

A/O attempted Q&A

subject invoked right to counsel

WITNESS LIST

CASE NUMBER: 22-001327

ARRESTING OFFICER: C Fandrey

ADDRESS: 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME): _____ (WORK) (561) 746-6201

CAN TESTIFY TO: PC

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

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NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

SUBJECT: _____ CASE NUMBER: _____

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? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

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

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

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

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

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

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ 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? _____

WHAT? _____ WHERE? _____ WHEN? _____

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

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

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

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

WERE YOU IN AN ACCIDENT TODAY? _____

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

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

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

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? _____ WHERE? _____

INTERVIEWER: _____

SUBJECT: _____

CASE NUMBER: _____

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) _____



**PALM BEACH COUNTY
SHERIFF'S OFFICE**
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

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

REVIEW COMPLETED BY

Booking Number: 2022008265

Date: 3/31/2022

Specialist Name/ID: Pinkneya/7796