05/17/63 20CT9660 1662

ARREST / NOTICE TO APPEAR

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

ADMINISTRATION

OBTS Number

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
0501700	Jupiter Police Department	5 4 20-002741

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 NONE | Multiple Clearance Indicator

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
4399 S CENTRAL BLVD/W FREDERICK SMALL JU	4399 S CENTRAL BLVD/W FREDERICK SMALL RD, JUPITER,

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
08/11/2020	00:20	08/11/2020	00:20			

DEFENDANT

Name (Last, First, Middle): BRABENDER, ADRIANNE MARGARET Alias:

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	11/02/1981	5'03	145	Grn	Blonde	Fair	Small

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): None

Marital Status: D | Religion: CATHOLIC | Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. / Drug Influence

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type (1. City 2. County 3. Florida 4. Out of State)
1496 CADES BAY AVE 5107, JUPITER, FL 33458				(336) 972-6217	1

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
1496 CADES BAY AVE 5107, JUPITER, FL 33458				(336) 972-6217	FL DL

Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation
					Self Employed

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
B615013819021 / FL	[redacted]		WINSTON SALEM,	US

CO-DEF

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

JUVENILE

☐ Parent ☐ Other: ☐ 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 ☐ 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.
☐ Yes, by: ☐ No

School Attended | Grade

Property Crime? ☐ Yes ☒ No | Description of Property | Value of Property

CODE

Drug Activity: N. N/A, P. Possess, S. Sell, B. Buy, T. Traffic, R. Smuggle, D. Deliver, E. Use, K. Disperses/ 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

Charge Description	Statute Violation Number	Violation of ORD #
DUI - DRIVING UNDER THE INFLUENCE/NORMAL FACULTIES IMPAIRED	316.193(1)(A)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		OR

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain:

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
	/ /	:	

NOTICE TO APPEAR

☒ 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: 09/16/2020 08:30:00

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.

Signature of Defendant (or Juvenile and Parent/Custodian) — August 12, 2020 Date Signed

No Photo Available

ADMIN

HOLD for Other Agency: ☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Signature of Arresting Officer: 340/11852

Name of Arresting Officer (Print): FANDREY, CHRISTOPHER I.D. # 1182

Name Verification (Printed by Arrestee) (PRINT) Adrianne Brabender

Intake Deputy: DS COLLINS I.D. # 7622 Pouch #

Transporting Officer: CFANDREY I.D. # 340 Agency JPD

Witness here if subject signed with an "X"

PAGE 1 OF 1

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ DOR ☐ OTHER

SCANNED AUG 11 2020 AUG 12 AM 4:20

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 11 DAY OF August 20 20, AT 2352 AM ✓ PM

SUBJECT: Brabender Adrianne M CASE NUMBER: 20-002741

AGENCY: JUPITER POLICE DEPARTMENT ARRESTING OFFICER: C Fandrey

PERSONAL CONTACT

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

At approximately 2352hrs I was driving southbound on S Central Blvd negotiating the Frederick Small Rd roundabout in the outside lane continuing south. I observed a silver 4 door bearing FL tag RKE411 going east bound on Frederick Small Rd approaching the roundabout. I was fully in the roundabout and the vehicle going east bound had a yield sign. The vehicle failed to yield and entered the roundabout directly in front of my vehicle. This action caused me to have to hit my brakes and swerve to the left to avoid a collision with the other vehicle.

OBSERVATION OF DRIVER:

I made contact with the driver and sole occupant of the vehicle who was positively identified as WF Adrianne M. Brabender (11/02/1981). I advised Brabender I was Officer Fandrey of the Jupiter Police and asked her if she understood why I pulled her over. Brabender stated she understood and began to look for her drivers license, insurance, and registration as I requested. Brabender handed me her registration and told me that it was her out of date insurance. Brabender asked if she could get her insurance off her phone and she was told yes. While waiting on her insurance I was speaking to Brabender and she forgot to finish looking for her insurance. Brabender had red bloodshot glassy eyes and the odor of an unknown alcoholic beverage coming from her person.

DRIVER'S STATEMENTS:

Brabender stated she was coming from Das which is a bar in Jupiter FL near where Brabender lives. Brabender stated she was on her way home, but would have already passed her residence. Brabender later explained she went home to get her dog and then was going to McDonalds to get food before she was going to return home. Brabender also explained she is "aggressive in roundabouts because everyone could drive in them better." Brabender stated she had two beers tonight which were 2 16oz Stellas about an hour and a half before the stop. Brabender thought the time was approximately 1 or 130 when the actual time was just after midnight. Brabender stated on a scale of 1-10 with 1 being completely sober and 10 being the most drunk she has ever been that she was at about a 2. Brabender stated she thought she was fine to drive.

ODORS:

Strong odor of an unknown alcoholic beverage coming from her person.

GENERAL OBSERVATIONS

SPEECH: **slightly slurred and mumbled.**

ATTITUDE: **cooperative and upset**

CLOTHING: **black dress, tan shoes**

MEDICAL/OTHER: **None stated.**

STATE OF FLORIDA
COUNTY OF PALM BEACH

C Fandrey
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of August 20 20 by C Fandrey

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

Leahey #19183
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

Notary Public State of Florida
Thomas H Leahey
My Commission GG 347108
Expires 08/20/2023

SUBJECT: Brabender Adrianne CASE NUMBER 20-002741

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- [x] RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Vertical nystagmus

WALK & TURN:

Brabender elected to take off her shoes. Brabender failed to maintain the starting position and had to be reminded multiple times to return to the starting position while giving the instructions. Based on Brabender failing to maintain the starting position and her starting too soon she was explained the instructions multiple times. Brabender stated she understood the instructions and did not have any questions. Brabender failed to touch heel to toe on each step. Brabender stepped off line several times. Brabender used her arms for balance. Brabender took the incorrect amount of steps. Brabender failed to turn around and continued to walk straight out. Brabender failed to complete the task as instructed.

ONE LEG STAND:

Brabender stated that she understood the instructions and had no questions. Brabender was told to begin and she asked "which leg" and I reminded her that I explained that in the instructions. Brabender lifted her left leg off the ground but it was bent and not straight. Brabender was reminded to keep both legs straight. At this point I stopped the task and again asked if she understood the instructions. I once again started to explain the instructions and demonstrate the task. Brabender began to get emotional and she stated she was very intimidated. I explained that I was not trying to intimidate her and I wanted to make sure she understood everything. Brabender was again explained the task to ensure she understood what I was asking her to do. Brabender again explained she understood the instructions. She failed to keep both legs straight and placed her foot down multiple times and stopped the task at approximately 24 seconds.

FINGER TO NOSE:

Did not complete based on Brabender stating she has issues with knowing her left from right.

ROMBERG ALPHABET:

Brabender stated she had a four year degree. Brabender was explained the instructions and stated she understood the instructions. Brabender stated "A B C D E F G H I J K L M N O P OH FUCK L M N O P T I H K L M N O P L M N O P..." and continued incorrectly reciting the alphabet while being placed into handcuffs.

BREATH TEST RESULTS: 1) .226 | 2) .230 | 3) | 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

C Fandrey
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of August 2020 by C Fandrey

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

Leahey #19183
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

Notary Public State of Florida
Thomas H Leahey
My Commission GG 347108
Expires 06/20/2023

WITNESS LIST

CASE NUMBER: 20-002741

ARRESTING OFFICER: C Fandrey
ADDRESS: 210 MILITARY TRAIL JUPITER FL 33458
PHONE NUMBERS (HOME): ______ (WORK) 561-746-6201
CAN TESTIFY TO: SEE PC

NAME: Ofc K. Anderson
ADDRESS: 210 MILITARY TRAIL JUPITER FL 33458
PHONE NUMBERS (HOME) ______ (WORK) 561-746-6201
CAN TESTIFY TO: Female search

NAME: Ofc. Ferguson
ADDRESS 210 Military Trail Jupiter FL 33458
PHONE NUMBERS (HOME) ______ (WORK) 561-746-6201
CAN TESTIFY TO: Assisting on Scene

NAME: ______
ADDRESS 210 Military Trail Jupiter FL 33458
PHONE NUMBERS (HOME) ______ (WORK) 561-746-6201
CAN TESTIFY TO: ______

NAME: ______
ADDRESS ______
PHONE NUMBERS (HOME) ______ (WORK) ______
CAN TESTIFY TO: ______

NAME: ______
ADDRESS ______
PHONE NUMBERS (HOME) ______ (WORK) ______
CAN TESTIFY TO: ______

NAME: ______
ADDRESS ______
PHONE NUMBERS (HOME) ______ (WORK) ______
CAN TESTIFY TO: ______

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: ______
ADDRESS ______
PHONE NUMBERS (HOME) ______ (WORK) ______
CAN TESTIFY TO: ______

SUBJECT: Brabender, Adrianne M CASE NUMBER: 2002741

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: Brabender, Adrianne M CASE NUMBER: 20-002741

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 Ofc C Fandrey #340 of the JPD.

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) Refused on camera

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) Refused on camera

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

PBSO CASE # 20-096372 PBSO ZONE 3-15

AGENCY CASE # 20-002741 CRASH CASE #

TIME OF STOP/CRASH 2352 DATE 08/11/2020 DAY Tuesday

SUBJECT'S NAME Brabender (LAST) Adrianne (FIRST) M (MID) RACE White SEX Female

HGT 503 WGT 145 DOB 11/02/1981

LOCATION Frederick Small Rd/S Central Blvd Jupiter FL

ARRESTING OFFICER'S NAME & ID C Fandrey 340 AGENCY Jupiter PD

DIVISION: Road Patrol/Traffic

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 0110

ARREST TIME 0020

BREATH RESULTS:

1) .228
2) .230
3) N/A
4) N/A

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

TESTING FACILITY TASK REPORT

AGENCY: JPD

SUBJECT: Brabender, Adrianne M

CASE NUMBER: 20-096372

DATE: 08/12/2020

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0132

ENDING TIME: 0152

BREATH TESTS RESULTS: 1) .228 TIME 0145 A.M. ☒ P.M. ☐ 2) .230 TIME 0149 A.M. ☒ P.M. ☐

3) n/a TIME 0 A.M. ☐ P.M. ☐ 4) n/a TIME 0 A.M. ☐ P.M. ☐

BREATH OPERATOR: Thomas H Leahey #19183

MAINTENANCE TECHNICAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: slurred, thick

ATTITUDE: crying , cooperative, talkative

CLOTHING: black dress, brown shoes

MEDICAL CONDITIONS: none

MEDICATIONS: none

OTHER:

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

COMMENTS:

arrived at center A/O conducted 20 minute observation period at 0110 hrs

subject refused to perform breath test - what would happen if refused

A/O read I/C - several times & subject understood I/C

subject agreed to perform 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 declined to answer questions

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006238 Software: 8100.27
Date of Test: 08/12/2020

Date of Last Agency Inspection: 07/17/2020
Observation Period Began: 01:10
Subject's Name: ADRIANNE M BRABENDER DOB: 11/02/1981 Sex: F

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	01:41
Air Blank	0.000	01:42
Control Test	0.079	01:42
Air Blank	0.000	01:42
Subject Sample #1	0.228	01:45
Air Blank	0.000	01:46
Air Blank	0.000	01:48
Subject Sample #2	0.230	01:49
Air Blank	0.000	01:49
Control Test	0.076	01:50
Air Blank	0.000	01:50
Diagnostics Check	OK	01:50

Cylinder Lot: 14020080A1
Exp: 07/05/2022

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: 08/12/2020
Signature

Sworn to (or affirmed) before me this 12th day of August, 2020

Signature of Notary Public-State of Florida

Ofc C Fandrey #340
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.

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

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: 2020019096	**Date:** 08/12/2020
	Specialist Name/ID: T Howard/7185