

1964

	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 20-002704					
Charge Type:	☒ 1. Felony ☐ 2. Traffic Felony		☒ 3. Misdemeanor ☒ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		If Weapon Seized		Multiple Clearance Indicator					
Location of Arrest (Including Name of Business)								Location of Offense (Business Name, Address)						
S ORANGE AVE/W INDLANTOWN RD								1 S ORANGE AVE/W INDLANTOWN RD, JUPITER, FL 33458						
Date of Arrest	08/07/2020		Time of Arrest	22:56		Booking Date	08/07/2020		Booking Time	23:06				
								Jail Date			Jail Time			
								Location of Vehicle						
Name (Last, First, Middle)										Alias (Name, DOB, Soc. Sec. #, Etc.)				
BUSSEY, ALEXANDER CAMPBELL										Alias:				
Race	W - White B - Black O - Oriental/Asian		Sex	M	Date of Birth	12/21/2000		Height	5'09		Weight	140		
Eyes	HAZEL		Hair Color	BLONDE /		Complexion	LIGHT		Build	Medium				
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)								Marital Status		Religion		Indication of Alcohol Influence		
TATT R ARM / PSALM 23 4								S				Yes ☒ No ☐		
Local Address (Street, Apt. Number)								(City)		(State)		(Zip)		
6429 LONGLEAF PINE DR, JUPITER, FL 33458														
Permanent Address (Street, Apt. Number)								(City)		(State)		(Zip)		
6429 LONGLEAF PINE DR, JUPITER, FL 33458														
Business Address (Name, Street)								(City)		(State)		(Zip)		
PIPELINE POKE,														
D/L Number, State	B200003004610 / FL		Soc. Sec. Number			INS Number			Place of Birth (City, State)	JUPITER, FL, United		Citizenship	US	
Co-Defendant Name (Last, First, Middle)								Race	Sex	Date of Birth		☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile		
												☐ 2. At Large ☐ 4. Misdemeanor		
Co-Defendant Name (Last, First, Middle)								Race	Sex	Date of Birth		☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile		
												☐ 2. At Large ☐ 4. Misdemeanor		
☐ Parent ☐ Other: _____ Name (Last, First, Middle)										Residence Phone				
☐ Legal Custodian										Business Phone				
Address (Street, Apt. Number)														
Notified by: (Name)										Date	Time	JUVENTIL DISPOSITION		
Released To: (Name)										Date	Time	1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated		
The above address was provided by ☐ defendant and/or ☐ defendant's parents.										School Attended		Grade		
The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.										Property Crime?		Description of Property	Value of Property	
☐ Yes, by: _____ ☐ No: _____										☐ Yes ☒ No				
Drug Activity										S. Sell		K. Disperse/Distribute	M. Manufacture/Produce/Cultivate	Z. Other
M. N/A										P. Possess		T. Traffic	E. Use	
Drug Type										B. Barbiturate		H. Hallucinogen	P. Paraphernalia/Equipment	U. Unknown
A. Amphetamine										C. Cocaine		O. Opium/Deriv.	S. Synthetic	Z. Other
E. Heroin														
Charge Description								Statute Violation Number		Violation of ORD #				
DRUGS - CONTROLLED SUBST W/O PRESCRIPTION (INCL MARIJUANA)								893.13(6)(A)						
Drug Activity								Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
N								N	/		1	☐ Y ☒ N		
Charge Description								Statute Violation Number		Violation of ORD #				
DUI - BREATH .08 OR ABOVE								316.193(1)(C)						
Drug Activity								Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
N								N	/		1	☐ Y ☒ N		
Charge Description								Statute Violation Number		Violation of ORD #				
LIQUOR - ALCOHOL BEVERAGE-POSSESS UNDER 21 YO								562.111 (2045)						
Drug Activity								Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
N								N	/		1	☐ Y ☒ N		
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								PROPERTY - Received By		Released By		Released To		
☐ Posted Bond ☐ South County Mental Health														
Transported By								Date Transported	Time Transported	Other				
☐ INSTRUCTION NO. 1 - Mandatory appearance in court								Location (Court, Room)		020 AUG - Photo Available				
☒ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.								To Be Assigned By						
								Court Date and Time						
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)										Date Signed				
HOLD for Other Agency										Signature of Arresting Officer		Name Verification (Printed by Arrestee)		
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other										Name of Arresting Officer (Print)		(PRINT)		
Inmate Docket ID #										ID #				
Pouch #										Transporting Officer		Agency		
S. MCGILLICUDDY										388		JUPITER		
										Witness here if subject signed with an "X".		PAGE 1 of 1		

**No
Photo
Available**

OBTs Number		PROBABLE CAUSE AFFIDAVIT		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 20-002704						
	Charge Type: ☒ 1. Felony ☒ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other			Special Notes:					
D E F	Name (Last, First, Middle) BUSSEY, ALEXANDER CAMPBELL					Race W	Sex M	Date of Birth 12/21/2000	
C H A R G E S	Charge Description 316.193(1)(C) DUI - BREATH .08 OR ABOVE			Charge Description 893.13(6)(A) DRUGS - CONTROLLED SUBST W/O PRESCRIP					
	Charge Description 562.111 LIQUOR - ALCOHOL BEVERAGE-POSSESS UNDER 21								
V I C T I M	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. ☐ confessed to _____ admitting to the below facts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the <u>7</u> day of <u>August</u>, <u>2020</u> at <u>22:37</u> (Specifically include facts constituting cause for arrest.) On 8/7/2020 at approximately 2237 hrs, I was parked to the north of 359 W Indiantown Road, conducting a close area check of the Exxon gas station at that location, due to a recent increase in criminal activity. I observed a grey Acura TL (VEHICLE-1) bearing FL tag EV54B. I observed that the passenger seat was occupied by a male subject now known to me as Dylan Bradford (IO-1). A short time later, a male subject now known to me as Alexander Bussey (DEFENDANT), exited the gas station carrying an 18 pack of beer. Bussey did not look to be of the requisite 21 years of age to purchase alcohol (he is 19). Bussey placed the beer in the back seat of VEHICLE-1. He then got into the driver's seat of the vehicle and pulled onto W Indiantown Road. At this time I observed that VEHICLE-1 had a dimly lit tag light not in compliance with the Florida statute requiring tag illumination at 50 feet. I observed VEHICLE-1 drive west bound and stop in the south bound turn lane of N Loxahatchee Drive and West Indiantown Road. Upon stopping for this red light, I observed VEHICLE-1 stopped passed the stop bar, clearly obstructing the pedestrian crosswalk. Upon the light turning green, VEHICLE-1 made a U-turn. At this time Officer Matonti activated his red/blue lights to conduct a traffic stop on VEHICLE-1. I then pulled up to the stop and took over the investigation. Upon making contact with Bussey and Bradford I detected a strong odor of unknown alcoholic beverage emitting from the vehicle. I asked how old each occupant was. Bradford advised that he is 18 and Bussey advised that he is 19. I could see the 18 pack of beer in plain view on the back left passenger floorboard. I asked Bussey, who I had seen leaving the gas station with the beer, how he was able to purchase it. He advised that he had a fake ID on him. I advised him to hand it to me. He handed me a Florida DL under the name "Connor Fitzmorris", which appeared to be a real Florida driver's license. Bussey advised me that it belonged to his friend and he was using it to purchase alcohol. I could see that Bussey had glassy, bloodshot eyes and spoke with slurred speech. When Officer Matonti asked him for his ID, he provided his insurance card. I advised Officer Matonti that based on my observations of Bussey I was going to									
SWORN AND SUBSCRIBED BEFORE ME NOTARY PUBLIC / CLERK OF COURT / OFFICER (S.S. 1177) <u>08/08/2020</u> DATE Notary Public State of Florida Renee Ragin My Commission GG 886418 Expires 03/05/2024 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <u>MCGILLICUDDY, STEVEN (1216)</u> NAME OF OFFICER (PLEASE PRINT) <u>08/08/2020</u> DATE									

OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
ADMINISTRATIVE	Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 5 4 20-002704		
	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) BUSSEY, ALEXANDER CAMPBELL				Alias	Race W	Sex M	Date of Birth 12/21/2000
be conducting a DUI investigation. I went to the driver's window and talked to Bussey. Now being in close proximity to his person, I detected the same strong odor of unknown alcoholic beverage emitting from his side of the vehicle, which intensified as he spoke to me. I asked him how much he had to drink and he stated "a couple of beers". I advised him that I wanted him to participate in field sobriety exercises and he consented. HORIZONTAL GAZE NYSTAGMUS (HGN) -Equal tracking and pupil size in both eyes -Lack of smooth pursuit in both eyes -Distinct and sustained nystagmus at maximum deviation in both eyes -Onset of nystagmus prior to 45 degrees in both eyes -No vertical nystagmus -6 of 6 clues WALK AND TURN -Started too early (more than once) -Missed heel to toe -Stopped while walking -Improper turn -4 of 8 clues ONE LEG STAND -Swayed -Used arms for balance -Put foot down -3 of 4 clues FINGER TO NOSE 1L - Pad to bridge then tip 2R - Pad to left nostril 3L - Tip to tip 4R - Pad to left of tip 5R - Tip to tip 6L - Tip to under tip RHOMBERG ALPHABET A B C D E F G L C Q R S T U V W X Y AND Z MODIFIED RHOMBERG -Estimated the passage of 30 seconds in 21 seconds							
SWORN AND SUBSCRIBED BEFORE ME <i>[Signature]</i> NOTARY PUBLIC / CLERK OF COURT / OFFICE (F.S.S. 117.00) 08/08/2020 DATE  SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <i>[Signature]</i> MCGILICUDDY, STEVEN (1216) NAME OF OFFICER (PLEASE PRINT) 08/08/2020 DATE							
PAGE 2 OF 3							

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

OBT Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Copies		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 20-002704						
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	
BUSSEY, ALEXANDER CAMPBELL				W		M		12/21/2000	
Based on my investigation I have probable cause to believe that Alexander Bussey was in actual physical control of a motor vehicle while under the influence of an alcoholic beverage, chemical or controlled substance to the point where his normal faculties were impaired. I also had probable cause to believe that he had been a minor (under 21 years of age) unlawfully in possession of alcohol, contrary to F.S.S. 562.111. I placed him under arrest at 2256 hrs. I transported Bussey to the Palm Beach County BAT, arriving at 2327 hrs. I placed Bussey under a 20 minute observation period, during which I did not observe him consume nor regurgitate anything. During the 20 minute observation period I was conducting an inventory of his property. As I began removing the cards from his wallet a plastic baggie containing a white powder fell out of it and onto the desk. I asked Bussey what the substance in the baggie was and he stated that it was cocaine (FTP cocaine). I additionally have probable cause to now charge Bussey with unlawful possession of cocaine, contrary to F.S.S. 893.13(6) (A). We then went on video with BAT Technician Ragin (ID #16877). I asked Bussey to provide breath samples and he agreed. He provides breath samples of .109 BrAC and .109 BrAC. I read him his Miranda rights from a pre-printed sheet and he stated that he understood them and would talk to me. Post-Miranda he admitted to having four beers instead of the earlier stated two. He advised the cocaine was his and he forgot it was in his wallet; he stated he last used it yesterday. I then placed Bussey in a holding cell and completed his paperwork. I then booked him into the Palm Beach County jail. Due to the felony drug charges the court date is to be set. BWC.									
NOT A CERTIFIED COPY									
SWORN AND SUBSCRIBED BEFORE ME NOTARY PUBLIC / CLERK OF COURT / OFFICER 08/08/2020 DATE Notary Public State of Florida Renee Ragin My Commission GG 900418 Expires 03/05/2024 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER McGILLICUDDY, STEVEN (1216) NAME OF OFFICER (PLEASE PRINT) 08/08/2020 DATE									
								PAGE 3 OF 3	

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

**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: 80-006478 Software: 8100.27
Date of Test: 08/08/2020

Date of Last Agency Inspection: 07/17/2020

Observation Period Began: 23:27

Subject's Name: ALEXANDER C BUSSEY

DOB: 12/21/2000 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	23:53
Air Blank	0.000	23:53
Control Test	0.079	23:54
Air Blank	0.000	23:54
Subject Sample #1	0.109	23:55
Air Blank	0.000	23:56
Air Blank	0.000	23:58
Subject Sample #2	0.109	23:58
Air Blank	0.000	23:59
Control Test	0.078	23:59
Air Blank	0.000	00:00
Diagnostics Check	OK	00:00

Cylinder Lot: 28719080A1
Exp: 12/05/2021

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 RENÉE M RAGIN, 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: 08/08/20

Sworn to (or affirmed) before me this 08 day of Aug., 2020

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: Bussey, Alexander C.

CASE NUMBER: 20-095110

DATE: Aug 7, 2020

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 23:50

ENDING TIME: 00:03

BREATH TESTS RESULTS: 1) .109 TIME 23:55 A.M. ☐ P.M. ☒ 2) .109 TIME 23:58 A.M. ☐ P.M. ☒
3) N/A TIME A.M. ☐ P.M. ☐ 4) N/A TIME A.M. ☐ P.M. ☐

BREATH OPERATOR: R. Ragin # 16877

MAINTENANCE TECHNICIAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Calm

CLOTHING: Tan short, blue t-shirt, green flip-flops

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER:

Eyes bloodshot

COMMENTS:

Arrived at center A/O started 20 minute observation period at 23:27hrs.

Subject agreed to take test.

Tech read test results.

Subject stated he understood test results.

A/O read rights.

Subject stated he understood rights.

A/O conducted Q&A.

Subject answered questions.



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

PBSO CASE # 20-095110 PBSO ZONE 6-42
AGENCY CASE # 20-002704 CRASH CASE # _____
TIME OF STOP/CRASH 2237 DATE 08/07/2020 DAY FRIDAY
SUBJECT'S NAME BUSSEY ALEXANDER C RACE W SEX M
LAST FIRST MID
HGT 510 WGT 140 DOB 12/21/2000
LOCATION S ORANGE AVE/W INDIANTOWN
ARRESTING OFFICER'S NAME & ID MCGILLICUDDY 388 AGENCY JUPITER PD
DIVISION: POLICE
NOTIFIED BY COMMO Yes
ARRIVAL AT FACILITY 2327
ARREST TIME 2256

BREATH RESULTS:

1)	.109
2)	.109
3)	N/A
4)	N/A

TESTING OFFICER'S ID 16877 PBSO VIDEOTAPE # N/A

ECT:

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.

-OR-

now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of illegal or controlled substances.

-OR-

now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

_____ of the _____.

u 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 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.

JECT'S SIGNATURE: (X)_____

CONSTITUTIONAL WARNINGS

I REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

You have the right to remain silent and not answer any questions.

Any statement must be freely and voluntarily given.

You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.

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.

If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.

I can make no threats or promises to induce you to make a statement. This must be of your own free will.

Any statement can and will be used against you in a court of law.

SPECT'S SIGNATURE: (X) _____

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: _____

WITNESS LIST

CASE NUMBER: 20-002704

ARRESTING OFFICER: MCGILlicuddy

ADDRESS: 210 Military Trl. Jupiter, FL 33458

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

CAN TESTIFY TO: PC

NAME: OFC. MATONTI

ADDRESS: 210 MILITARY TRL, JUPITER, FL 33458

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: BACKUP ON STOP

NAME: OFC. RALEIGH

ADDRESS 210 MILITARY TRL, JUPITER, FL 33458

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: BACKUP ON STOP

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

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ADDRESS _____

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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: _____



**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)
I/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: 2020018817

Date: 08/08/2020

Specialist Name/ID: T Howard/7185