0217766 20CT3636ASB,639

	OBTS Number ARREST / NOTICE TO Juvenile Referral Re							N				
17/1	11	Agency ORI Number FLO 500000	Agency Na	BEACH COU	NTY SHERIFF	'S OFFICE	Agency R	1eport Number 20-04340	(N.T.A.'s only)			
MISTRA	l La	hargeType:	c Felony	3. Misdemeanor	5. C	ordinance Other	02	apon Seized / Typ 1. Yes 2. No	oe .	Multip Clean Indica	ance n)1
ADMIN		Military Trail / Palo Verde Dr,	Boynton Beach, F	L 33437				s Name. Address Verde Dr., Bo) ynton Beach, F	L 33437	,	
	1	Date of Arrest 02/28/2020	Time of Arrest 03:10	Booking Date 02/28/2020	Booking Time	Jail Date	Jail Time	Location of Priority T				
Γ		lame (Last, First, Middle) Letoile-Ruggieri, Al	lison Ging	er	<u> </u>		Alias (Nar	ne, DOB, Soc. Se			····	
	R	lace V - White I - American Indian 3 - Black 0- Oriental/Asian		te of Birth	2/07/1975 Heigh	5'06 Weigh				omplexion	Build	
	S	cars, Marks, Tatoos, Unique Physic Vone				200	Mantal Status	Religion Religion	Indication of		Mediu	
z	t	ocal Address (Street, Apt. Number)		(City)	(State)	(Zip)	Divorced	NONE	Alcohol Influe Drug Influe Residence	nce vpe:		Unk.
DEFENDAN		'872 Springfield Lake Dermanent Address (Street, Apt. Nur		h, FL 33467 (City)	(State)	(Zip)	(561) Phone	302-2844	1. City 2. County Address Soi		orida ut of State	02
DE	, B	usiness Address (Name, Street)		(City)	(State)			· <u> </u>	Drivers L	icense		******
					(oldic)	(Zip)	Phone (Occupation			
L	ł	/L Number, State .346007755470, FL	1 So:	c, Sec. Number		INS Number	r		e of Birth (City, Statensockett, RI	e)	US Citizenship	
DEF	C.	o-Defendant Name (Last, First, Midd	ile)			Race Sex	Cate o	Birth	1. Arrested 2. At Large	□ 4.	. Felony . Misdemeanor	
S	C	o-Defendant Name (Last, First, Midd	lle)			Race Sex	Cate o	Birth	☐ 1. Arrested	□ 3.	, Juvenile . Felony . Misdemeanor	
r	E	Parent Legal Custodian	ſ,						2. At Large		Juvenile	
		Other: idress (Street, Apt. Number)			City)		(State)	(Zip)		Business :	Phone	
	No	otified by: (Name)			Date	Time	Juvenile	e Disposition ded/processed w			<u> </u>	
ENILE	Re	eleased To: (Name)			Relationshi		1 Hand Dept	died/ processed w t. and Released.	3. Incarc	erated	Trin-	L
Ę								·	Dat	e	Time	
		ne above address provided by keep the Juvenile Court Clerk (Ph Yes, by: (Name)		ormed of any chan	ants The child and 7 (age of address. son)	or parent was told	Scho	of Attended			Grade	
		pperty Crime? Description Yes No	of Property				Value	of Property				
CODE	P.	N/A B. Buy D. I Possess T. Traffic E. I	Deliver Dis	inbute Prod Cultiv	vate	Drug Type N. N/A A. Amphetamine		ne M. Ma	irijuana	Paraphemi Equipment Synthetics	alia/ U. Unkn Z. Othe	
RGE	D	arge Description UI		01	ounts Domestic Violence Y N	Statute Violation 316.193(1)(a				Vio	ation of QRD #	¥
CHO	Dn N	ug Activity Drug Type Amount / N	Unit	Offense # 20-043402	,	Warrant I Capies	s Number			Band		
35)	Ch	arge Description		Co	Damestic Violence	Statute Violation	Number			Vic	clation of ORD	#
CHARGE	Dn	ug Activity Drug Type Amount /	Unit	Offense #	. 12 3	Warrant / Capias	Number	· · · · · · · · · · · · · · · · · · ·		Bond		
GE	CF	arge Description		Co	Dunts Domestic	Statute Violation	Number			Vio	lation of ORD #	#
CHARGE	Dπ	g Activity Drug Type Amount I	Unit	Offense #		Warrant / Capias	Number			Band		
3SE	Cha	arge Description	1	Co	ounts Domestic Violence	Statute Violation	Number			₩ Vir	olation of ORD	#
CHARGE	Dru	g Activity Drug Type Amount /	Unit	Offense #		Warrant / Capias	s Number		(Page)	Bond		-
AR		cation (Court, Room Number, Address outh County Courthouse		ic Ave, Delray	Beach FL 3344	4			::		:	
APPE	М	urt Date and Time onth March	Day 23	Va	ar 2020	Time 8:30		AM 2	X	PM		
CE 1	FAI	BREE TO APPEAR AT THE TIME . L TO APPEAR BEFORE THE COU	AND PLACE DESIGN RT AS REQUIRED B	NATED TO ANSWE Y THIS NOTICE TO	R THE OFFENSE CI	HARGED OR TO AY BE HELD IN C	PAY THE FINE CONTEMPT OF	E SUBSCRIBED.	LUNDERSTAND WARRANT FOR MY	THAT SHO	SHALL BE ISS	JLLY SUED
NOT		Signature of Defendant (28/2020 Date Signed	ස		<i></i> 2	
	HO!	LD for other Agency		Signature of Arrestif	ng Officer		Name V	erification (Printe	<u></u>		P	
MIN		Dangerous Resisted Arre		Name of Arresting C		I.D. #	(PRINT)	i i		ro	
¥	Inta	Suicidal Other:	# Pauch #	D/S Ryan Dalto Transporting Office	er ID#	Agency		hace de 1-1-1	;	- ¤	PAGE	,]
	D/S Ryan Dalton 32421 PBSO Witness here if subject signed with an -X" 01 OF 01											

\

OBTS Number	PROB	ABLE C	AUSE AFFIC			equest For Warrant equest For Capias	Juvenile N
331	BEACH COU	NTY SHE	RRIF'S OFFI	CE Agency Repo		20	-043402
Charge Type Check as many as apply 1. Felony 2. Traffic Felony 4. Traffic Misdemeanor 2. Traffic Felony 4. Traffic Misdemeanor	5. Ordinance 6. Other			Special Notes Sumoler	nentzi	75	
Defendant Name (Last, First, Middle) LETOILE-RUGGIERI	ALLISON			GINGER	Race W	Sex F	Date of Birth 02/07/1975
DRIVING UNDER THE INFLUENCE Charge							
Charge			Charge				
Victin Name (Last, First, Middle)					Race	Sex	Date of Birth
Local Address (Street, Apt. Number)	у		State Zip	Phone	1	Address Source	
Business Address (Street, Apt. Number) Cit	,		State Zip	Phone	İ	Occupation	
The undersign 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.				bysaw the arrested perso		ho told	
confessed to admitting to the below facts.							(described) investigation.
On the 28th day of February	20 20	at 0310) ×AM	P M			

On February 28, 2020 at approximately 0221 hours, I was conducting speed enforcement on South Military Trail at Palo Verde Drive in the unincorporated area of Boynton Beach, Palm Beach County, Florida which has a speed limit of 45MPH. At such time, I visually observed a Gray Volkswagen bearing FL tag: GFI G04 traveling southbound on South Military Trail at an estimated speed of 60MPH. I then confirmed the vehicles speed of 62MPH using my agency issued Stalker DSR Radar (Serial# DC108114) and initiated a traffic stop. Upon conducting the traffic stop, I identified the driver as Allison Letoile-Ruggieri by Florida Driver's License. During my interaction with Letoile-Ruggieri I observed signs of impairment which prompted me to request a traffic unit. The case was then turned over to D/\$ Dalton (ID: 32421).

The foregoing instrument was sworn to and affirmed before me this 28TH	day of	FEBRUARY 20 20 by:	
DIS Ryin Dalton #32421	_	D/s T.Cole # 3/850	
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	_	Name of Arresting/Investigating Officer	
T.A		1. Com	Page
Signature of Notary Public (Clerk of Coult / Officer (F.S.S. 117.00)		Signature of Arresting/Investigating Officer	of

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 28	DAY OF _ February	20 _20	, AT 02:25	AM PM
SUBJECT: Letoile-	-Ruggieri, Allison, Ginger		CASE NU	MBER: 20-043402
AGENCY: PALM BI	EACH COUNTY SHERIFF'			
		PERSONAL (
DRIVING PATTER	N: <u>actual physical control (</u>	PHYSICAL EVIDE	NCE OR STATEMENTS PU	TTING DEF. BEHIND WHEEL OF VEHICLE)
observed a vehic in excess of the sagency issued St vehicle, bearing Blvd and Militar via her Florida cother occupants OBSERVATION OF During D/S Cole's in eyes, lethargic mover seemed to fumble with incoherent at times. Shome. While she spot very lethargic and la	ele traveling southbound on speed limit. He clocked the valker DSR Radar (S/N DC) Florida tag GFIG04, pulled by Trail. The driver and soldriver's license. When I arrain the vehicle. **DRIVER:* teraction with the driver, he observation with the driver, he observation it (dexterity). When I was on see She kept repeating herself that she ke to me, I could see that her eyes we bored and I could smell the odor of	S. Military T vehicle traveli 108114) and collist over into the e occupant warded on scene, wed several indicated by S. Cole stated the ne and I observed hadn't had a tickeyere bloodshot/waf an unknown alco	rail near the intersecting at 62mph in a poonducted the traffic plaza on the northers is identified as Ms. As she was still in the control of the speech was slurred/met since 2001 and to not gettery and that her eyelids we holic beverage coming from the strain of the speech was slurred/met since 2001 and to not gettery and that her eyelids we holic beverage coming from the strain of the speech was slurred/met since 2001 and to not gettery and that her eyelids we holic beverage coming from the strain of the strain o	ccording to D/S Cole, he had ction of Palo Verde Dr. traveling sted 45mph zone using his stop for the speed violation. The ast corner of Boynton Beach allison Ginger Letoile-Ruggieri drivers seat and there were no de slurred speech, watery and droopy get her paperwork for the traffic stop, she umbled and that her responses were ther in trouble; that she just wanted to go were very droopy. Her mannerisms were m her breath/mouth area. I then asked to positioned nearby in an area that was
well lit, level, and cle chilly this evening. I	ar of debris. Prior to proceeding w noticed that she seemed unbalance	ith the exercises, N	1s. Letoile-Ruggieri put o	n a thick sweater due to the weather being
perform field so hurry up this pr	ove, I explained to her that	to do so. She	repeatedly told me (irment and requested that she that she wanted to go home, to reluctant to provide any
ODORS:)		
	lic beverage coming from b	ner breath/mo	uth area.	
SPEECH: Slurre		RAL OBSI	ERVATIONS	
ATTITUDE: Mod	od swings; briefly polite	, mostly ang	ry and uncoopera	ative
	k pants, black shirt, slack sw			
MEDICAL/OTHER:	Not diabetic, no epilepsy. Was r medications.	eluctant to provi	de any additional infor	nation regarding health history or
TATE OF FLORIDA TOUNTY OF PALM BEACH D/S Ryan Dalto Signature of Arresting/Investigative Of the foregoing instrument was sworn to	n #32421	day of Februar	y ₂₀ 20	by D/S Ryan Dalton #32421
	Officer), who is personally known to me and/or produ	uced identification. Type of		•
lotary Public, Clerk of Court, Officer (F.S S 117 10) Notary Pul	blic State of Florida H Leahey ission GG 347108	*	

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:	
LT EYE-LACK OF SMOOTH PURSUIT	RT EYE-LACK OF SMOOTH PURSUIT
LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION	RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES	RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
Other Observations:	
I also observed that during her attempt at the exercise she exhibited a distinct sway; and had to be reminded not to; and she had a difficult time following my instructions aspects of my instructions.	the would stop looking and focusing on the pen light; she repeatedly moved her head to stand with her feet together. I had to remind her several times to following different
WALK & TURN:	
I laid down a clearly visible yellow line using duct tape. While doing so, she made it explained and demonstrated the exercise to her, she continued to interrupt me and slowly and deliberately walk her through each step of how to place her left food on demonstrating for her, she had a difficult time following instruction. Once she was acknowledged that she understood. During her attempt at the exercise I observed to balance while listening to the instructions; she raised her arms for balance; she did instructed to do so; she took the incorrect number of steps; and she improperly per	would talk over me or attempt to begin before being instructed to do so. I had to the line with her right foot directly in front; heel touching toe. Even when in the starting position, I continued to explain and demonstrate the exercise until she he following clues of impairment: Ms. Letoile-Ruggieri was unable to maintain her not touch heel-to-toe on several steps; she attempted the exercise before being formed the turnaround. During the course of the exercise(s), she made the statement rnings"; letting her know that if she refused to proceed with the exercises, I would be
ONE LEG STAND:	
Refused to proceed with exercises.	
FINGER TO NOSE: Refused to proceed with exercises.	
ROMBERG ALPHABET:	
Refused to proceed with exercises.	
nerased to proceed with each case.	
BREATH TEST RESULTS: 1) .205 2) .198	[3) [4)
STATE OF FLORIDA COUNTY OF PALM BEACH D/S Dyon Dolton #22/21	
D/S Ryan Dalton #32421 (Signature of Arresting/Investigative Officer)	20
The foregoing instrument was sworn to or affirmed and subscribed before meiths 28 day of February and Februar	
(Print name of Agresting/Investigative Officer), who is personally known to me and/or produced identification. It is not any Public State of Florida	pe of identification produced Known LEO

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: 02/28/2020

Date of Last Agency Inspection: 02/14/2020

Observation Period Began: 03:55

Subject's Name: ALLISON G LETOILE-RUGGIERI

DOB: 02/07/1975 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	04:22	
	Air Blank	0.000	04:22	
	Control Test	0.081	04:22	
	Air Blank	0.000	04:23	
	Subject Sample #1	0.205	04:24	
	Air Blank	0.000	04:25	
	Air Blank	0.000	04:27	
	Subject Sample #2	0.198	04:27	
	Air Blank	0.000	04:28	
	Control Test	0.080	04:28	
	Air Blank	0.000	04:29	
	Diagnostics Check	OK	04:29	

Cylinder Lot: 00919080A3 Exp: 03/05/2021

Breath Test Operator:

State of Florida, County of Palin Beach

Personally appeared before me the undersigned authority, who $(\underline{\smile})$ is personally known to me or $(\underline{})$ 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.

S

Date: 02/28/2020

Sworn to for affirmed) before me this 28th day of Fabruary

day of Habrowy, 2000

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 bergin. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.



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

PBSO CASE # 20-043402	2	PBSO	ZONE 6-32
AGENCY CASE #		CRASH	CASE #
TIME OF STOP/CRASH	02:25 DATE	02/28/202	20 DAY Friday
SUBJECT'S NAME Letoile	-Ruggieri, Allison, Gingo	er RACE	W SEX F
HGT <u>5'06</u> W	GT 140	DOB	02/07/1975
LOCATION Military Tra	il / Palo Verde Dr, Boy	nton Bea	ch, FL 33437
ARRESTING OFFICER'S NA	AME & ID D/S Ryan D	alton #32	421 0 AGENCY PBSO
DIVISION: Patrol/ D6		NOT:	IFIED BY COMMO
		ARR	IVAL AT FACILITY 03:55
			ARREST TIME 03:10
BREATH RESULTS: 1) , 205 2) , 198 3) N/A 4) N/A			
TESTING OFFICER'S	ID <u>19183</u>	PBSO VII	DEOTAPE #

WITNESS LIST

CASE NUMBER: 20-043402 ARRESTING OFFICER: D/S Ryan Dalton #32421 ADDRESS: PBSO District 6 - 7894 S. Jog Road, Lake Worth FL 33467 (WORK) (561) 688-4860 PHONE NUMBERS (HOME): CAN TESTIFY TO: Driver still in control of vehicle, field sobriety, Taylor Warnings, arrest, breath test NAME: D/S Cole # 31850 ADDRESS: PBSO District 6 - 7894 S. Jog Road, Lake Worth FL 33467 PHONE NUMBERS (HOME) (WORK) (561) 688-4860 CAN TESTIFY TO: Initial Traffic stop, initial observations NAME: ADDRESS PHONE NUMBERS (HOME) ______ (WORK) CAN TESTIFY TO: NAME: ADDRESS PHONE NUMBERS (HOME) (WORK) (WORK) CAN TESTIFY TO: NAME: ADDRESS PHONE NUMBERS (HOME) CAN TESTIFY TO: NAME: ADDRESS ___ (WORK) PHONE NUMBERS (HOME) 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:

TESTING FACILITY TASK REPORT

	AGENCY: FB> C
SUBJECT: Letoile-Ruggier, Allismia	CASE NUMBER: 20 04340 R
DATE: 02/28/2020	VIDEO TAPE NUMBER:
BEGINNING TIME: 04 17	ENDING TIME: <u>043/</u> 21/AMC/P.M. 2) 198 TIME 0427 A.M./P.M.
BREATH TESTS RESULTS: 1) , 905 TIME 04	21/AMC/PM. 2) 1/98 TIME 04 27 AM/P.M.
3)/A TIME	
BREATH OPERATOR: Thakey # 19183	
MAINTENANCE TECHNICIAN: J Kurlente # 646	7
TESTING OFFICER'S OBSERVATIONS	
SPEECH: Flick old brande, Slavers	
ATTITUDE: This testing rain in more, angu	
CLOTHING: black skitch parts black.	swalshing to destroy coppershoes
MEDICAL CONDITIONS: declared to an surer-	HIMA
MEDICATIONS: Lectioned to assumer - HI	44A
OTHER: eyes glassy + 12/06/3/4	
oder of unknown alcoholic beck	funga in brandly
COMMENTS: average at center to	
absence tion, united at 63 83	forts
	(1
Dosked for lawyer-wash + sure on	is to asswer to be note to 51
Alurend I fo + d stated she we	ileasted TK
A squeed of perform wheth 4	
Tech read breath test results	y Ashited she understood
brouth test sesully	
210 read rights 1 Ashestated	she understood rights
Dinsoka Cright We sumsel-No	4 * K

SUBJECT: Letsile Ruggieri Allisay G CASE NUMBER: 20.043402

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

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

NOTE: NUMBER OF THE PROPERTY O
I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.
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 _ D/S R Deltan# 3242/ of the _ PBSO
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
CONSTITUTIONAL WARRINGS
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.
 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) Read an cancera

SUBJECT: Letoile Ruggier, Allismy CASE NUMBER: 20-04340	SUBJECT: <u>Le)</u>	toile R	Zuggieri.	Allismy	CASE NUMBER:	20-04340
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OUESTIONS 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 OUESTIONS 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? ∠ WITH WHOM? HOW MUCH? WHERE? WHEN DID YOU HAVE YOUR FIRST DRINK? AND YOUR LAST DRINK? HOW DID YOU CONSUME YOUR LAST TWO DRINKS ARD YOU UNDER THE INFLUENCE? CAN YOU FEEL THE EFFECTS OF THE ALCOHOLY 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 OF INJURIES? WHAT? ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? DO YOU LIMP? _____ DID YOU RECPIVE A ROMP 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 FODAY WHO? WHY? ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? ____ WHEN? ____ DO YOU HAVE: 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?

YELLOW - DHSMV PINK - CENTRAL RECORDS

WHITE - STATE ATTY.



Palm Beach County Sheriff's Office – Arrests Only

	х	Florida State Statute	Description	Page Number(s)
		119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
L/E Exemptions		943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	'
		119.071(4)(c)	Undercover personnel.	
I/E E		119.071(2)(f)	Confidential informants (CIs).	
		119.071(2)(e)	Confession.	
suc		985.04(1)	Juvenile offender records.	
emptic		119.071(h)(i)	Assets of a crime victim.	
Public Info. Exemptions	٥	395.3025(7)(a), 456.057(7)(a)	Medical information.	
blic In		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.	
	X	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
(Rule of 23)		(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.	
ration 2.420				
Florida Rules of Judicial Administration 2.420 (Rule of 23)				
Florida Rul	П			
Other			Other:	
ర			Other:	

REVIEW COMPLETED BY

Booking Number: 2020006741	Date: 2/28/2020
BOOKING NUMBER: 2020008741	Specialist Name/ID: B Evans / 23649