0518967

20CT12689

1003

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number:

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

Juvenile: N

ADMINISTRATION

Agency ORI Number	Agency Name	Agency Report Number
FL0500300	BOYNTON BEACH POLICE DEPT.	34-20-049953

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: | Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): SE 12TH AVE $ SE 1ST ST, BOYNTON BEACH, FL 33426

Location of Offense (Business Name, Address): SE 12TH AVE $ SE 1ST ST, BOYNTON BEACH, FL 3342

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
10/08/2020	03:35					

DEFENDANT

Name (Last, First, Middle): Cascio, Andrew, Joseph

Alias (Name, DOB, Soc. Sec. #, Etc):

W - White I - American Indian B - Black O - Oriental / Asian

Race	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	03/24/1989	5'9	190	Brown	Black	Light	Med

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description):

Marital Status: Married | Religion: Unk

Indication of: Alcohol Influence Y ☒ N ☐ Unk. ☐ ; Drug Influence Y ☐ N ☐ Unk. ☒

Local Address (Street, Apt. Number) (City) (State) (Zip): 220 SW 10TH AVE, BOYNTON BEACH, FL 33435

Phone: (561)859-5503

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 1

Permanent Address (Street, Apt. Number) (City) (State) (Zip):

Phone: ( ) -

Address Source: FL DL

Business Address (Street, Apt. Number) (City) (State) (Zip):

Phone: ( ) -

Occupation: Mechanic

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth	Citizenship
C200-010-89-104-0	[redacted]		New Jersey, Dober	USA

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 ☐ Legal Custodian ☐ Other — 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 Dept. and Released 2. TOT HRS/DYS 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 561-355-2526) informed of any change of address: ☐ Yes, By: (Name) ☐ No: (Reason)

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. Dispense/Distribute M. Manufacture Produce/Cultivate Z. Other

Drug Type: N. N/A A. Amphetamine B. Barbituate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/Equipment S. Synthetic U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
DUI	1	☐Yes ☒No	316.193.1A	

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
-	-	-	20-049953		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐Yes ☐No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐Yes ☐No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐Yes ☐No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond

NOTICE TO APPEAR

☐ Instruction No. 1 Mandatory Appearance in Court
☐ Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side.

Location (Court, Room Number, Address): South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444

Court Date and Time: Month November Day 2nd Year 2020 Time 8:30 ☒ A.M. ☐ P.M.

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: 10/08/2020

ADMIN.

HOLD for other Agency Name:

Signature of Arresting Officer:

Name Verification (Printed by Arrestee) (PRINT):

☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other:

Name of Arresting Officer (Print): L.Nalerio — I.D. #: 982

BU#115833

Page 1 OF 1

Intake Deputy — I.D. # 6816 — Pouch #

Transporting Officer: L.Nalerio — I.D. #: 982 — Agency: BBPD

Witness here is subject Signed with an "X"

OCT 0 8 2020

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 8th **DAY OF** October **2020 AT** 03:10 ☒ **A.M** ☐ **P.M.**

CASE #: 20-049953 **DEFENDANT:** Cascio, Andrew, Joseph

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATION OF DRIVER:

On 10/08/2020 at approximately 0310 hours BBPD received a call in regards to a male passed out in a vehicle in the area of SE 12TH AVE AND SE 1ST ST. Upon arrival I observed a White Volkswagen Jetta bearing FL tag 109QLQ. The Jetta was occupied by a white male who was slumped behind the wheel on the driver seat of the vehicle. The vehicle was facing west just east of the train tracks. I exited my vehicle and approached the driver side door to conduct a welfare check of the driver. I observed w/m later identified as Andrew Cascio in the driver seat with the vehicle turned on and placed in park. Cascio was passed out behind the wheel and appeared to be sleeping. He was breathing but unconscious. I knocked on the window multiple times which woke Cascio up. First speaking to Cascio he said that he was just sleeping. Cascio advised that he was not in need of medical attention.

When I asked Cascio for his drivers license, he handed me his cellphone. Cascio kept looking around and then handed me a tissue, thinking that it was his license. I asked Cascio to step out of the vehicle to speak with me. Cascio was unsteady on his feet. Cascio's eyes were bloodshot and when he spoke, I could smell alcohol. The smell intensified every time he spoke. I asked Cascio where he was coming from and he advised that he was at a friends house. I asked Cascio if he had been drinking alcohol and he told me that he had three shots of Berben. Cascio was having a hard time balancing himself.

I started an investigation of Cascio possibly being under the influence while operating a motor vehicle. Cascio was asked if he recently had any disabilities or injuries which he replied that he had a broken left arm years ago. Cascio told me that nothing was bothering him and that he did not have any vision problems or issues with his eyes. Cascio was asked if he would submit to a series of Standard Field Sobriety Tasks (SFST's) which he advised that he would.

The first exercise was the Horizontal Gaze Nystagmus. The task was demonstrated and Cascio advised that he understood it. Cascio was placed in the starting position of standing up straight with feet together and arms by his side and to keep his head still. Cascio swayed front to back during the exercise. Cascio would lose balance and separate his feet. Cascio had a lack of smooth pursuit in both eyes, distinct and sustained Nystagmus at maximum deviation in both eyes, and onset of Nystagmus prior to 45 degrees in both eyes. Vertical Gaze Nystagmus was not present during the exercise.

HORIZONTAL GAZE NYSTAGMUS:

- ☒ Left eye does not follow smoothly
- ☐ Left eye prior to 45 degrees
- ☒ Distinct jerking in left eye at maximum deviation
- ☐ Vertical Nystagmus in left eye
- ☒ Right eye does not follow smoothly
- ☐ Right eye prior to 45 degrees
- ☒ Distinct jerking in right eye at maximum deviation
- ☐ Vertical Nystagmus in right eye

WALK AND TURN:

The second exercise was the Walk and Turn. The task was demonstrated and Cascio advised that he understood it. Cascio struggled to maintain balance while in the ready position. Cascio lost balance and was unable to stay in the ready position while explaining the task. Cascio walked more than nine steps and did not count the steps out loud. When returning, Cascio did not conduct a proper turn and walked backwards in the reverse position and not how explained and shown. Cascio was unable to keep feet heel to toe while conducting steps. Cascio stepped off the line multiple times while conducting the exercise. Cascio used his arms for balance.

ONE LEG STAND:
The third exercise was the One Leg Stand. The task was demonstrated and Cascio advised that he understood it. Cascio Swayed side to side during the exercise. Cascio was lost balance during the exercise and was had trouble balancing himself in the ready position. Cascio used his arms for balance. Cascio lost balance and hopped up and down in line. Cascio did not count like instructed. Cascio was unable to complete the exercise.

FINGER TO NOSE:
The fourth exercise was the finger to nose. The task was demonstrated and Cascio advised that he understood it. Cascio did not want to finish the exercise.

ROMBERG/ALPHABET:

The following instrument was sworn to before me this 8t day of October 2020

By: Nalerio

Notary Public State of Florida
Renee Ragin
My Commission GG 986418
Expires 03/05/2024

Notary/Police Officer (F.S.S. 117.10) Signature of Arresting Officer

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

PBSO CASE # 20-114483 PBSO ZONE 6-51

AGENCY CASE # 20-049953 CRASH CASE #

TIME OF STOP/CRASH 0310 DATE 10-8-20 DAY Thursday

SUBJECT'S NAME Cascio, Andrew RACE W SEX M

HGT 5'9 WGT 190 DOB 3-24-89

LOCATION SE 12th Ave, SE 1st St, Boynton Beach

ARRESTING OFFICER'S NAME & ID Nalerio 982 AGENCY BBPD

DIVISION: Patrol

NOTIFIED BY COMMO Y

ARRIVAL AT FACILITY 03:51

Arrest Time 03:35

BREATH RESULTS:

1.
2. REFUSED
3.
4.

TESTING OFFICER'S ID 16877

SUBJECT: Cassio, Andrew J. 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) _____

SUBJECT: [illegible], Andrew J. 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: _____

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: 80-006239 Software: 8100.27
Date of Test: 10/08/2020

Date of Last Agency Inspection: 09/18/2020
Observation Period Began: 03:51
Subject's Name: ANDREW J CASCIO DOB: 03/24/1989 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	04:17
Air Blank	0.000	04:18
Control Test	0.078	04:18
Air Blank	0.000	04:18
Subject Sample #1	REF*	04:21
Air Blank	0.000	04:22
Control Test	0.079	04:22
Air Blank	0.000	04:23
Diagnostics Check	OK	04:23

*Subject Test Refused

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 RENEE 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: _____ Date: 10/08/20
Signature

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

_____ Ofc. L. Nalerio # 982
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.

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

STATE OF FLORIDA

DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES

AFFIDAVIT OF REFUSAL TO SUBMIT TO

BREATH AND/OR URINE TEST

I, Ofc. LUIS NALERIO (Person reading Implied Consent Warning), a duly certified Law Enforcement Officer or Correctional Officer, am a member of Boynton Beach Police Department (Name of enforcement agency), and I do swear or affirm that on or about the EIGHTH day of October, 2020, at 3:56 AM

DRIVER (Type or Print) ANDREW (FIRST) JOSEPH (MIDDLE OR MAIDEN) CASCIO (LAST),

DL # C200010891040, state of FL, was placed under lawful arrest for the offense of DUI by Ofc. LUIS NALERIO (Name of Arresting Officer) and issued Citation # AC861JE.

That on or about the EIGHTH day of October, 2020, at 4:20 AM in Palm Beach County,

I requested that the driver submit to a ☑ breath and/or ☐ urine test to determine his or her blood alchohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) would result in the suspension of his or her driving privilege for a period of (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended for refusing to submit to a breath, urine, or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.

Signature of Law Enforcement Officer or Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)

Notary Public State of Florida Renee Ragin My Commission GG 966418 Expires 03/05/2024 (NOTARY SEAL)

The foregoing instrument was sworn and subscribed before me this 08 day of Oct, 2020 by L. Nalerio who is personally known to me or who has produced Known as identification.

Notary Public

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title Police Officer

Date 10-8-20

Note: Mail or hand deliver to the designated Bureau of Administrative Reviews office, Department of Highway Safety and Motor Vehicles, with the driver's license, the appropriate copy of the UTC and the probable cause affidavit.

HSMV-BAR1001 (REV. 10/2016)

TESTING FACILITY TASK REPORT

AGENCY: BBPD

SUBJECT: Cascio, Andrew J.

CASE NUMBER: 20-114483

DATE: Oct 8, 2020

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 04:12

ENDING TIME: 04:24

BREATH TESTS RESULTS: 1) Refusal TIME 04:21 A.M. ☒ P.M. ☐ 2) N/A TIME ——— 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 TECHNICAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Quiet, stubborn, moody

CLOTHING: Red shorts, black t-shirt, black flip-flops

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER:

Eyes bloodshot
Odor of unknown alcoholic beverage on breath.

REFUSED

COMMENTS:

Arrived at center A/O started 20 minute observation period at 03:51 hrs.

Subject refused to answer format questions and would not answer if he would take the test.

A/O read I/C and subject acknowledged he understood I/C.

Subject agreed to take test.

Subject refused to follow tech instructions and refused to blow to get tone started.

A/O called refusal

A/O read rights.
Subject refused to answer if he understood understood his rights.

REFUSED

A/O attempted Q&A.
Subject refuse to answer questions.

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	☐	119.0712 (2)	Other: Personal information contained in a motor vehicle record	
	☐	119.071(2)(J)	Other: MARSY'S LAW PROTECTED INFORMATION REGARDING VICTIM(S).	

REVIEW COMPLETED BY

Booking Number: 2020023742	**Date:** 10/8/2020
	Specialist Name/ID: M. Tooks #8557