

0386760 22CT-003398 AMB / 91

OBTS Number		ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile	
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06- 2022-05009							
Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Weapon Seized / Type 1. Yes 2. No		Multiple Clearance Indicator							
Location of Arrest (Including Name of Business) 200 BONNIE BLVD, PALM SPRINGS FL 33461				Location of Offense (Business Name, Address)							
Date of Arrest 03/01/2022		Time of Arrest 0834		Booking Date 03/01/2022		Booking Time		Jail Date		Jail Time	
Name (Last, First, Middle) WALTERS BLAKE MATTHEW				Alias (Name, DOB, Soc. Sec. #, Etc.)							
Race W - White (- American Indian B - Black O - Oriental/Asian		Sex M		Date of Birth 07/11/1989		Height 5 06		Weight 180		Eye Color BRO	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE		Marital Status SIN		Religion CHRI		Indication of Alcohol Influence 1. Yes 2. No		Indication of Drug Influence 1. Yes 2. No		Multiple Clearance Indicator	
Local Address (Street, Apt. Number) 2013 KENWOOD ROAD				(City) West Palm Beach FL 33409		(State) FL		(Zip) 33409		Phone (561) 255-7039	
Permanent Address (Street, Apt. Number)				(City)		(State)		(Zip)		Phone	
Business Address (Name, Street)				(City)		(State)		(Zip)		Phone	
D/L Number, State W436-073-89-251-0				Soc. Sec. Number		INS Number		Place of Birth (City, State) BOYNTON BEACH FL		Citizenship USA	
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		1. Arrested 2. At Large 3. Felony 4. Misdemeanor 5. Juvenile	
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		1. Arrested 2. At Large 3. Felony 4. Misdemeanor 5. Juvenile	
Parent Legal Custodian Other:				Address (Street, Apt. Number)		(City)		(State)		(Zip)	
Notified by: (Name)				Date		Time		Juvenile Disposition 1. Handled/processed within Dept. and Released 2. TOT HRS / DAYS 3. Incarcerated		Residence Phone	
Released To: (Name)				Relationship		Date		Time		Business Phone	
The above address provided by ☐ defendant and / or ☐ defendant's parents the child and / or parent was told to keep the Juvenile Court Clerk (Phone 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					
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	
Drug Type N. N/A A. Amphetamine				B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetics		U. Unknown Z. Other	
Charge Description DUI				Counts 1		Domestic Violence ☐ Y ☐ N		Statute Violation Number 316.193 (1) (A)		Violation of ORD #	
Drug Activity N				Drug Type N		Amount / Unit		Offense # 2022-05009		Warrant / Capias Number	
Charge Description CARELESS DRIVING Reckless				Counts 1		Domestic Violence ☐ Y ☐ N		Statute Violation Number 316.192 (1) A		Violation of ORD #	
Drug Activity N				Drug Type N		Amount / Unit		Offense # 2022-05009		Warrant / Capias Number	
Charge Description				Counts		Domestic Violence ☐ Y ☐ N		Statute Violation Number		Violation of ORD #	
Drug Activity				Drug Type		Amount / Unit		Offense #		Warrant / Capias Number	
Charge Description				Counts		Domestic Violence ☐ Y ☐ N		Statute Violation Number		Violation of ORD #	
Drug Activity				Drug Type		Amount / Unit		Offense #		Warrant / Capias Number	
Charge Description				Counts		Domestic Violence ☐ Y ☐ N		Statute Violation Number		Violation of ORD #	
Drug Activity				Drug Type		Amount / Unit		Offense #		Warrant / Capias Number	
Location (Court Room Number, Address) 3228 GUNCLUB ROAD, WEST PALM BEACH FL 33406											
Court Date and Time Month MARCH Day 31ST Year 2022 Time 0830 AM ☒ PM											
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 03/01/2022							
HOLD for other Agency Name:				Signature of Arresting Officer X		Date Signed		Name Verification (Printed by Arrestee)			
☐ Dangerous ☐ Seditious ☐ Other:				Name of Arresting Officer (Print) Trf. R. Ortega #172		I.D. # #6467		(PRINT)			
Agency Deputy TRF. R. ORTEGA				ID # 172		Agency PSPD		Witness here if subject signed with an "X"			
DISTRIBUTION: WHITE - COURT COPY				GREEN - STATE ATTORNEY		YELLOW - AGENCY		PINK - AGENCY		GOLD - DEFENDANT (N.T.A.'s ONLY)	

SEARCHED
MAR 02 2022

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 1st DAY OF MARCH 20 22 AT 0751 ☒ AM ☐ PM
SUBJECT: WALTERS BLAKE MATTHEW CASE NUMBER: 2022-05009

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Trf. R. Ortega #172
Palm Springs PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)
On the above date and time, I responded to the 200 Block of Bonnie Blvd, in Palm Springs Florida, in reference to a Motor Vehicle Crash Vs. (2) Palm Trees \$2,500.00. Upon my arrival, I was advised by Sgt. Fequiere #115, Ofc. Perez #106 and Ofc. Rowe #162 that Mr. Blake M. Walters, who was the driver of a 1997 Gold Jeep S.U.V. had been involved in a single motor vehicle crash Vs. a couple of Palm Trees that were located about a block away from where Blake's vehicle had come to a stop. Ofc. Perez #106 advised me that P.B.C.F.R. #39 had responded to make sure Blake did not suffer any injuries. Ofc. Perez #106 conducted a recorded statement on P.B.C.F.R. employee Mr. Anthony LC Alma. Anthony advised that upon his arrival, Blake was found behind the wheel of the vehicle (physical control). The door was open and his leg was hanging out of the driver's door. Anthony advised that Blake was confused and disoriented. Anthony advised that Blake had Blood residue on his hands. Anthony advised that Blake refused medical attention. P.B.C.F.R. run number was #22026426. While on scene, I asked Blake if he was involved on a motor vehicle crash and he stated "Yes". Blake was confused about what he had struck during the crash. I advised Blake that I was concluding my Crash Investigation and that I was going to conduct a D.U.I. investigation. Post Miranda, Blake stated to me that he was driving home after dropping his friend off at his residence. I asked Blake if he had been drinking and he advised me that he had consumed (1) Miller Gold Beer, I asked Blake if he was willing to submit to a series of roadblocks tasks to determine if he was ok and Blake refused. I informed Blake that if he refused, it could be used against him in court. Blake refused again. Blake was handcuffed double-locked and checked for tightness and he was arrested for D.U.I. at this time. Blake was transported to the B.A.T. Center. While at the B.A.T. Blake refused to provide a breath sample. Implied Consent was read to him and he refused again.

OBSERVATION OF DRIVER:

He appeared confused and disoriented. His eyes were Bloodshot Red and Glossy. I smelled a very strong smell of an unknown alcoholic beverage emanating from his breath.

DRIVER'S STATEMENTS:

The driver advised that he had consumed a (1) Miller Gold can. The driver advised that he was on his way home after dropping his friend off. The driver advised that he was involved in a motor vehicle crash. Blake advised that he was the driver of the vehicle. Upon my arrival, he was sitting in the driver seat of the vehicle.

ODORS:

Strong odor of an unknown alcoholic beverage. Post Miranda, Blake advised he had consumed (1) Miller gold Beer.

GENERAL OBSERVATIONS

SPEECH: slurred, Low and Raspy, mumbled, sturred.

ATTITUDE: Good Attitude

CLOTHING: Dirty

MEDICAL/OTHER: None

STATE OF FLORIDA
COUNTY OF PALM BEACH

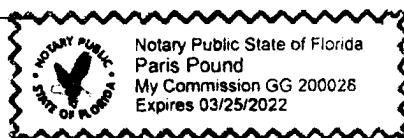
Trf. R. Ortega #172

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to, affirmed and subscribed before me this 1st day of March 2022 by Trf. R. Ortega #172

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

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



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SUBJECT WALTERS BLAKE CASE NUMBER 2022-05009

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:

WALK & TURN:

REFUSED.

ONE LEG STAND:

REFUSED.

FINGER TO NOSE:

REFUSED.

ROMBERG ALPHABET:

REFUSED.

BREATH TEST RESULTS:

STATE OF FLORIDA
COUNTY OF PALM BEACH

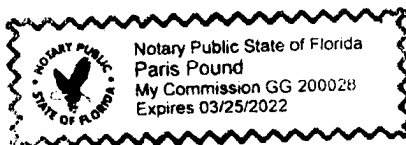
Trf. R. Ortega #172

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 1st day of March, 2022 by Trf. R. Ortega #172

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

Notary Public, Clerk of Court, Officer (E.S.S. 117.10)



SCANNED
MAR 02 2022

2022-05009

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH AND/OR URINE TEST

I, **Trf. R. Ortega #172**, a duly certified Law Enforcement Officer or Correctional Officer,
 (Name of Officer reading Implied Consent Warning)

am a member of **PALM SPRINGS POLICE**, and I do swear
 (Name of law enforcement agency)

or affirm that on or about the **1ST** day of **MARCH**, 20 **22**, at **0834** ☐ P.M. ☒ A.M.

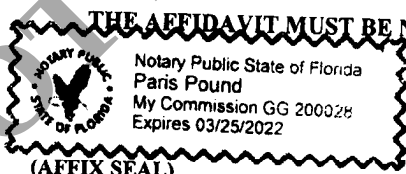
DRIVER **BLAKE** **MATTHEW** **WALTERS**
 (Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# **W436-073-89-251-0**, state of **FLORIDA**, was placed under lawful arrest for
 the offense of **DUI** by **Trf. R. Ortega #172** and
 issued Citation # _____ (Name of Arresting Officer)

That on or about the **1ST** day of **MARCH**, 20 **22**, at **0917** ☐ P.M. ☒ A.M.
 in **PALM BEACH** County,

I requested that the driver submit to a ☒ breath and/or ☐ urine test to determine his or her blood alcohol 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 one (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



(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before

me this **1st** day of **March**, 20 **22**,

by **Trf. R. Ortega #172**,

who is personally known to me or who has produced
Law Enforcement Officer as identification

Notary Public _____

HSMV-BAR 1001 (REV. 10/2016)

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)
 The foregoing instrument was sworn and subscribed before me:

 Signature of Attesting Officer

Title _____

Date _____

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.

SCANNED
MAR 02 2022

TESTING FACILITY TASK REPORT

AGENCY: PSPD

SUBJECT: WALTERS, BLAKE M

CASE NUMBER: 22-041447

DATE: Mar 1, 2022

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 09:14

ENDING TIME: 09:19

BREATH TESTS RESULTS: 1) R TIME 09:17 A.M. ☒ P.M. ☐ 2) N/A TIME N/A A.M. ☐ P.M. ☒
3) N/A TIME N/A A.M. ☐ P.M. ☐ 4) N/A TIME N/A A.M. ☐ P.M. ☐

BREATH OPERATOR: P.POUND #24639

MAINTENANCE TECHNICIAN: J. KARLECKE# 6467

TESTING OFFICER'S OBSERVATIONS

REFUSED

SPEECH: SLURRED

ATTITUDE: CALM, QUIET

CLOTHING: TAN SHORTS, BLACK / WHITE T- SHIRT, WHITE SNEAKERS

MEDICAL CONDITIONS: HEADACHE

MEDICATIONS: NONE

OTHER:

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 08:52 HRS.

SUBJECT: REFUSED TO TAKE TEST

A/O: READ I/C

SUBJECT: STATED HE UNDERSTOOD I/C AND REFUSED TO TAKE TEST

A/O: STATED RIGHTS WERE ON SCENE

A/O: ATTEMPTED Q&A

SUBJECT: REFUSED QUESTIONS

REFUSED

SCANNED
MAR 02 2022



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

PBSO CASE # 22-041447 PBSO ZONE 1-13
AGENCY CASE # 2022-05009 CRASH CASE # _____
TIME OF STOP (CRASH) 0751 DATE 3/1/22 DAY Tuesday
SUBJECT'S NAME Blake Matthew Walker RACE W SEX M
HGT 504 WGT 180 DOB 7/11/89
LOCATION 200 Bonnie Blvd
ARRESTING OFFICER'S NAME & ID TRF. R. Ortega AGENCY PSPD
DIVISION: Traffic # 172
NOTIFIED BY COMMO 0751
ARRIVAL AT FACILITY 0853
Arrest Time 0834
BREATH RESULTS:
1. _____
2. **REFUSED**
3. _____
4. _____
TESTING OFFICER'S ID 24639

SCANNED
MAR 02 2022

WITNESS LIST

CASE NUMBER: **2022-05009**

ARRESTING OFFICER: **Trf. R. Ortega #172**

ADDRESS: **230 CYPRESS LANE, PALM SPRINGS FL 33461**

PHONE NUMBERS (HOME): **561-968-8243**

(WORK)

CAN TESTIFY TO: **FACTS**

NAME: **OFC. T. PEREZ #106**

ADDRESS: **230 CYPRESS LANE, PALM SPRINGS FL 33461**

PHONE NUMBERS (HOME) **561-968-8243**

(WORK)

CAN TESTIFY TO: **FACTS**

NAME: **SGT. FEQUIERE #115**

ADDRESS **230 CYPRESS LANE, PALM SPRINGS FL 33461**

PHONE NUMBERS (HOME) **561-968-8243**

(WORK)

CAN TESTIFY TO: **FACTS**

NAME: **OFC. R. ROWE**

ADDRESS **230 CYPRESS LANE**

PHONE NUMBERS (HOME) **561 968-8243**

(WORK) 0

CAN TESTIFY TO: **FACTS**

NAME: **ANTHONY LC ALMA**

ADDRESS **405 PIKE ROAD, WEST PALM BEACH FL 33411**

PHONE NUMBERS (HOME) **561735-2093**

(WORK)

CAN TESTIFY TO: **FACTS**

NAME:

ADDRESS

PHONE NUMBERS (HOME)

(WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME)

(WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME)

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CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME)

(WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME)

(WORK)

CAN TESTIFY TO:

SCANNED

MAR 02 2022

SUBJECT: WALKER, JAMES L 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) _____

SCANNED

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SUBJECT: WHITE, ALAN 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: _____

SCANNED
MAR 02 2022



**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: 2022005544

Date: 3/2/2022

Specialist Name/ID: Chantel Daniels/30347

SCANNED
MAR 02 2022