

0522233

2021 CT 4765
2819

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Juvenile N

ADMINISTRATIVE	OBTS Number	Agency ORI Number FLO 5 0 2 6 0 0			Agency Name PALM BEACH GARDENS POLICE DEPARTMENT			Agency Report Number 78 - 21001336			
	Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	Weapon Seized / Type 2 1. Yes 2. No		Multiple Clearance Indicator				
	Location of Arrest (Including Name of Business) HOOD RD/CENTRAL BLVD, PBG, FL				Location of Offense (Business Name, Address) ALT A1A/HOOD RD, PBG, FL						
DEFENDANT	Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle KAUFF'S TOWING 4377 EAST AV, WEST PALM BEACH, FL				
	Name (Last, First, Middle) LEBEJKO, CARTER, FRANCIS							Alias (Name, DOB, Soc. Sec. #, Etc.)			
	Race W - White I - American Indian B - Black O - Oriental/Asian	Sex W M	Date of Birth 08/06/2001	Height 5'10	Weight 150	Eye Color BRO	Hair Color BRO	Complexion LIGHT	Build SMALL		
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TAT BOTH UPPER ARMS				Marital Status SINGLE	Religion CATHOLIC	Indication of: Alcohol Influence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N Drug Influence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Unk.					
Local Address (Street, Apt. Number) 13275 CROSSPOINTE DR			(City) PALM BEACH GARDENS	(State) FL	(Zip) 33418	Phone (561) 398-5062		Residence Type: 1. City <input type="checkbox"/> 2. County <input type="checkbox"/> 3. Florida <input checked="" type="checkbox"/> 4. Out of State <input type="checkbox"/> 2			
Permanent Address (Street, Apt. Number) 13275 CROSSPOINTE DR			(City) PALM BEACH GARDENS	(State) FL	(Zip) 33418	Phone		Address Source VERBAL			
Business Address (Name, Street)			(City)	(State)	(Zip)	Phone		Occupation			
DL Number, State L120106012860 FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) PALM BEACH GARDENS, FL		Citizenship US			
CO-DEF.	Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile			
	Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile			
JUVENILE	<input type="checkbox"/> Parent Legal Custodian <input type="checkbox"/> 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 provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2528) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)						School Attended		Grade			
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> 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. Barbiturate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other
	Charge Description DRIVING UNDER THE INFLUENCE		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)(A)		Violation of ORD #				
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
	Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #				
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
	Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #				
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
	Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #				
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
	Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #				
NOTICE TO APPEAR	Location (Court Room Number, Address) NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700										
	Court Date and Time Month APRIL Day 28 Year 2021 Time 1000 AM <input checked="" type="checkbox"/> 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 03/25/2021								
Signature of Defendant (or Juvenile and Parent /Custodian)						Date Signed					
ADMIN	HOLD for other Agency Name:		Signature of Arresting Officer [Signature]			Name Verification (Printed by Arrestee)					
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:		Name of Arresting Officer (Print) OFC ANDREW FLINK			I.D. # 514		(PRINT)			
	Arresting Deputy [Signature]	I.D. #	Pouch #	Transporting Officer ANDREW FLINK		ID # 514	Agency PBPGD		Witness here if subject signed with an -X- 1 OF 1		

D.U.I. PROBABLE CAUSE AFFIDAVIT

On the 25TH day of MARCH 2021 at 0245 AM PM

Subject: LEBEJKO, CARTER, FRANCIS Case Number: 21001336

Agency: PALM BEACH GARDENS POLICE DEPARTMENT Arresting Officer: OFC ANDREW FLINK 514

PERSONAL CONTACT

DRIVING PATTERN: (Actual Physical Control; Physical Evidence or Statements Putting Defendant Behind Wheel of Vehicle)

On 03/25/2021 at approximately 0242 hours, this Officer was conducting a traffic selective enforcement in the area of Alt 11A and Hood Rd, PBG, FL, when a vehicle was observed traveling at an increased rate of speed south bound, in the middle through lane. Body worn camera and in car video were used. This Officer's initial visual observation of the vehicle was approximately 70 MPH in a posted 50 MPH zone. Using RADAR Stalker DSR2X (DB001317), forward antenna (KC086606) this Officer received a steady tone and reading of 70 MPH. The RADAR calibration was last checked on 12/17/2020 and was due on 06/17/2021. Prior to this tour of duty on this date, this Officer ensured the RADAR was in working order, to confirm the accuracy of the unit. At the end of this tour of duty, this Officer did the same. This Officer received RADAR/LIDAR certification on 05/31/2008, in Cannon AFB, TX. The vehicle then made a right hand turn on to Hood Rd and proceeded west bound. This Officer observed the vehicle rapidly accelerate and using the same RADAR unit and antenna, received a steady tone and reading of 55 MPH in a posted 45 MPH zone. This Officer entered the same lane behind the vehicle, then this Officer initiated a traffic stop on the vehicle, a Honda sedan (Y04QPG/FL), on Hood Rd just west of Central Blvd, PBG, FL. This Officer made contact with the driver, identified via Florida Driver License photo, Carter Lebejko, while he was still in actual physical control of the vehicle.

OBSERVATION OF DRIVER:

Lebejko had bloodshot eyes, slurred speech, flushed red face and at times appeared to have a blank stare. This Officer was also able to detect the very strong odor of recently burnt Cannabis emanating from the vehicle and later emanating from Lebejko's person.

DRIVER STATEMENTS:

Lebejko said he was coming from Juno Beach with a girl and said he was rushing to get home. Lebejko denied smoking Cannabis, rather he said the female was smoking and he remained the designated driver.

ODORS: Burnt Cannabis

GENERAL OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Calm, compliant

CLOTHING: white tank top, black pants, white hi-top sneakers


MEDICAL/OTHER: None stated

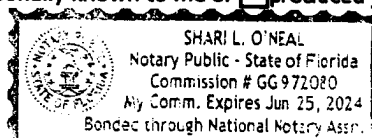
STATE OF FLORIDA
COUNTY OF PALM BEACH



SIGNATURE OF ATTESTING OFFICER

The forgoing instrument was sworn to or affirmed and subscribed before me this 25th day of March 2021 by OFC ANDREW FLINK 514 who is personally known to me or produced


Notary Public, Clerk of Court, Officer (FSS 117.10)



STAMP

D.U.I. PROBABLE CAUSE AFFIDAVIT Cont.

Subject: LEBEJKO, CARTER, FRANCIS

Case Number: 21001336

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

LEFT EYE

- Lack of Smooth Pursuit
- Distinct & Sust. Nystag. at Max. Deviation
- Onset of Nystagmus Prior to 45 Degrees

RIGHT EYE

- Lack of Smooth Pursuit
- Distinct & Sust. Nystag. at Max. Deviation
- Onset of Nystagmus Prior to 45 Degrees

Other Observations:

Lebejko had a lack of convergence in his left eye. During the exercise, Lebejko was exhibiting body tremors.

Walk and Turn

During the first set, no indicators observed, however each of his steps were slow and deliberate. During the turnaround, Lebejko stopped and asked for further instructions. During the return set of steps, Lebejko took eight steps rather than nine.

One Leg Stand

During the exercise, Lebejko raised his left foot. Lebejko first raised his right arm more than six inches from his side, then leaned to the opposite side and raised his left arm more than six inches from his side. When Lebejko leaned to the opposite side, he placed his foot down and stumbled back. Lebejko was also swaying during the exercise. Lebejko had to be told twice, to look down at his raised foot and each time he looked down, he lowered his foot slightly, ending up much lower than six inches as instructed.

Rhomberg Balance

During the exercise, Lebejko estimated the passage of 30 seconds in approximately 47 seconds. Also during this exercise, Lebejko exhibited body tremors as well as eye lid tremors in both eyes.

Finger to Nose

During the exercise Lebejko exhibited the following indicators on corresponding commands. First command of left, Lebejko used the pad of his finger. First command of right, Lebejko touched under his nose and had to be told to lower his hand. Second command of left and second command of right, Lebejko touched under his nose. During the final commands of right and left, Lebejko touched the side of his nose. Throughout the exercise, Lebejko again exhibited body tremors and eyelid tremors in both eyes.

BREATH RESULTS: 1) .000 @ 0410 2) .000 @ 0413 urine @ 0423 - @ -

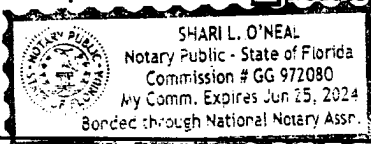
STATE OF FLORIDA
COUNTY OF PALM BEACH

[Handwritten Signature]

SIGNATURE OF ATTESTING OFFICER

The forgoing instrument was sworn to or affirmed and subscribed before me this 25th day of March 20 21 by OPC ANDREW FLINK 514 who is personally known to me or produced

[Handwritten Signature]
Notary Public, Clerk of Court, Officer (FSS 117.10)



STAMP



**PALM BEACH GARDENS POLICE DEPARTMENT
DUI TESTING FACILITY INFORMATION SHEET**



PBSO Case #: 21-048404 PBSO Zone: 3-15

Agency Case #: 21001336 Crash Case #: _____

Incident Information:

Time of Stop/Crash: 0245 Date of Incident: 03/25/2021 Day: THURSDAY

Location of Incident: ALT A1A/HOOD RD, PBG, FL

Arrest Information:

Time of Arrest: 03:03 Date of Arrest: 03/25/2021 Day: THURSDAY

Location of Arrest: HOOD RD/CENTRAL BLVD, PBG, FL

Subject's Name: LEBEJKO, CARTER, FRANCIS DOB: 08/06/2001

Race: W Sex: M Height: 5'10 Weight: 150

Arresting Officer's Name: OFC ANDREW FLINK ID#: 514

Agency: PBGPD Division: TRAFFIC UNIT

---BAT Use---

BAT Notified: Yes

Arrival Time at BAT: 0344hrs

Subject Arrest Time: 03:03

Breath Results

- 1) .000 at 0410 hrs.
- 2) .000 at 0413 hrs.
- 3) _____ at _____ hrs.
- 4) _____ at _____ hrs.

Urine Provided/Pending

Breath Test Operator: O'NEAL

TESTING FACILITY TASK REPORT

AGENCY: PBG OFC. FLINK #514

SUBJECT: LEBEJKO, CARTER F.

CASE NUMBER: 21-048404

DATE: 03-25-21

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0406 HRS

ENDING TIME: 0421 HRS

BREATH TESTS RESULTS: 1) .000 TIME 0410 A.M. P.M. 2) .000 TIME 0413 A.M. P.M.
3) TIME A.M. P.M. 4) TIME A.M. P.M.

BREATH OPERATOR: S.O'NEAL #6212

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE: CALM, COOPERATIVE, POLITE

CLOTHING: SHIRT- WHITE PANTS- BLACK & WHITE

MEDICAL CONDITIONS: NONE ALLERGIC TO SHELLFISH

MEDICATIONS: NONE

OTHER:

EYES : GLASSY

COMMENTS:

20 MIN. OBSERVATION DONE BY A/O FLINK #514
A/O REQUESTED THE BREATH TEST.
D SUBMITTED TO THE BREATH TEST.
D COMPLETED THE BREATH TEST CORRECTLY.
EXPLAINED THE BREATH RESULTS TO THE D.
A/O REQUESTED URINE ON CAMERA.
D ASKED WHAT HAPPENED IF HE SAID NO.
A/O READ THE IMPLIED CONSENT ON CAMERA.
D UNDERSTOOD THE I/C AS READ.
D DECIDED TO SUBMIT TO THE URINE REQUEST AFTER THE I/C WAS READ.
C/W READ ON CAMERA, Q&A CONDUCTED
DRE CONDUCTED

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: 80-006240 Software: 8100.27
Date of Test: 03/25/2021

Date of Last Agency Inspection: 03/12/2021

Observation Period Began: 03:44

Subject's Name: CARTER F LEBEJKO

DOB: 08/06/2001 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	04:09
	Air Blank	0.000	04:09
	Control Test	0.079	04:09
	Air Blank	0.000	04:10
	Subject Sample #1	0.000	04:10
	Air Blank	0.000	04:11
	Air Blank	0.000	04:13
	Subject Sample #2	0.000	04:13
	Air Blank	0.000	04:14
	Control Test	0.078	04:14
	Air Blank	0.000	04:15
	Diagnostics Check	OK	04:15

Cylinder Lot: 22620080A2
Exp: 10/05/2022

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 SHARI L O'NEAL, 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: 03-25-21

Sworn to (or affirmed) before me this 25 day of March, 2021

Signature of Notary Public-State of Florida

Ofc. Flink #514
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.

LABORATORY ANALYSIS REQUEST

This Form Must Be Included With the Property Receipt and Accompany the Evidence Submitted for Toxicology Analysis
PRINT LEGIBLY OR TYPE

Agency: PALM BEACH GARDENS POLICE DEPARTMENT Case #: 21001336
Officer: OFC ANDREW FLINK ID#: 514 District: _____ Division: _____ Phone #: (561) 799-4445
Email: aflink@pbgfl.com

Specimen Collected By: FLINK 514 Date: _____ Time: _____

Specimen Collected From: LEBEJKO, CARTER, FRANCIS Age: 19 Sex: M Hgt: 5'10 Wgt: 150

Specimen Type: Blood Urine Beverage Other-Describe _____

Type of Case: Traffic Accident Fatality DW/DUI Other Date: 3/25/21 Time: 0303

Was any medication administered by medical personnel prior to sample being drawn: Yes No

If yes, name of Medication(s): n/a

Subject Arrested: Yes No

Breath Test Performed? Yes No Reading: .000 .000 urine -

Tests requested: Blood Alcohol Blood Drug Screen Urine Drug Screen

NOTE: Blood Alcohol analysis is performed on all blood specimens. Requested Blood Drug Screen may not be performed based on the laboratory protocol. If you have any questions, please contact the Chemistry/Toxicology Manager at 561-688-4203.

DRE exam performed Yes No DRE Officer: Pointu Agency: PBSO

DRE Opinion: see report

Drug History and Signs of Impairment (Please list any drugs, medications, or prescriptions the subject may have taken or were in his/her possession.)

None stated

Lebejko had bloodshot eyes, slurred speech, flushed red face and at times appeared to have a blank stare. This Officer was also able to detect the very strong odor of recently burnt Cannabis emanating from the vehicle and later emanating from Lebejko's person.

Lebejko admitted, Post Miranda to smoking Cannabis around 1600 hours, approximately 10 hours prior to the traffic stop.

SUBJECT: John Doe 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? Yes

WHERE WERE YOU GOING? Home

WHAT STREET OR HIGHWAY WERE YOU ON? Main St

DIRECTION OF TRAVEL? North WHERE DID YOU START? Main St

WHAT TIME DID YOU START? 1:00 WHAT TIME IS IT NOW? 1:15

WHAT IS TODAY'S DATE? 10/10/11 WHAT DAY OF THE WEEK IS IT? Tuesday

WHAT COUNTY AND CITY ARE YOU IN NOW? Alameda

WHEN DID YOU LAST EAT? 12:30 WHAT DID YOU EAT? Food

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? Driving

HOW MUCH DO YOU WEIGH? 180 HAVE YOU BEEN DRINKING? Yes WHAT?

HOW MUCH? 2 WHERE? Home WITH WHOM? Alone

WHEN DID YOU HAVE YOUR FIRST DRINK? 1:00 AND YOUR LAST DRINK? 1:15

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? Beer

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? Yes ARE YOU UNDER THE INFLUENCE? Yes

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? No HOW MUCH? None

WHAT? None WHERE? None WHEN? None

WHAT LINE OF WORK ARE YOU IN? Teacher WHEN DID YOU LAST WORK? 10/10/11

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? No WHAT? None

ARE YOU SICK OR INJURED? No WHAT'S WRONG? None

DO YOU LIMP? No DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? No

WERE YOU IN AN ACCIDENT TODAY? No

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN? None

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? No WHO? None WHY? None

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? No WHAT? None WHEN? None

- DO YOU HAVE:
- EPILEPSY? No
 - GLASS EYE? No
 - FALSE TEETH? No
 - EAR INFECTION? No
 - INNER EAR TROUBLE? No
 - DIABETES? No

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? No

DO YOU TAKE INSULIN? No IF SO, WHEN WAS YOUR LAST INJECTION? None

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? No WHERE? AT

INTERVIEWER: [Signature]



Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>	119.0712(2)	Other: Personal information contained in a motor vehicle record	
	<input type="checkbox"/>	119.071(2)(j)	Other: MARSY'S LAW PROTECTED INFORMATION REGARDING VICTIM(S).	

REVIEW COMPLETED BY

Booking Number: 2021007188	Date: 3/25/2021
	Specialist Name/ID: M. Tooks #8557