

21CT 4472
ARREST / NOTICE TO APPEAR

1. Arrest (No Warrant) 3. Request for Warrant
2. N.T.A. 4. Request for Capias
5. Juvenile Referral
1 JUVENILE

OBTS Number	Agency ORI Number 0500200	Agency Name Boca Raton Police Department	Agency Report Number (N.T.A.'s only) 3, 2 2021-003354
Charge Type: Check as many as apply	Enter Type: None/not Applicable		
Location of Arrest (Including Name of Business) 6699 JOG RD, 6699 JOG RD, BOCA RATON, FL 33496		Location of Offense (Business Name, Address) 6699 JOG RD, BOCA RATON, FL 33496	
Date of Arrest 03/19/2021	Time of Arrest 03:05	Booking Date 03/19/2021	Booking Time 03:45
Name (Last, First, Middle) ALSPACH, CHEYENNE ROBERT		Jail Date 03/19/2021	Jail Time 03:45

Race W - White B - Black O - Oriental/Asian W	Sex M	Date of Birth 12/04/1968	Height 6'00	Weight 192	Eye Color BROWN	Hair Color GRAY	Complexion LIGHT	Build Medium
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT UR ARM / CELTIC KNOT; TATT UL ARM / LION AND FLAG;				Marital Status M	Religion CATHOLIC	Indication of: Alcohol Intoxication: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/> Drug Influence: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>		
Local Address (Street, Apt. Number) 21583 REDBAY RD, BOCA RATON, FL 33433		Permanent Address (Street, Apt. Number) 21583 REDBAY RD, BOCA RATON, FL 33433		Business Address (Name, Street) SELF,		Occupation It Consultant		
DL Number, State A421116684440 / FL	Soc. Sec. Number	INS Number	Place of Birth (City, State) FORT LAUDERDALE, FL	Citizenship US				

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____	Name (Last, First, Middle)			
<input type="checkbox"/> Legal Custodian	Address (Street, Apt. Number) (City) (State) (Zip)			
Notified by: (Name)	Date	Time	Residence Phone	
Released To: (Name)	Relationship	Date	Time	Business Phone

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 355-2526) informed of any change of address.

Yes, by: _____ No

Property Crime? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Description of Property VEHICLE	Value of Property \$2,500
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Charge Description DUI- PROPERTY DAMAGE	State Violation Number 316.193(3C1)	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit
	N	
Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
		Warrant / Capias Number

Health / Apparent Physical Condition of Defendant FAIR	Any knowledge of the following: Explain: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformation <input type="checkbox"/> Injuries
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail	PROPERTY - Received By J. CASAS 818
Transported By	Released By J. CASAS 818
	Released To TOT CJ

<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court	Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444
<input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.	Court Date and Time 04/19/2021 08:30:00
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 J. CASAS	Name Verification (Print) SCANNED 7:28
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest	Name of Arresting Officer (Print) CASAS, J.	(PRINT) MAR 20 2021
<input type="checkbox"/> Suicidal <input type="checkbox"/> Other	ID # 818	PAGE 1 OF 1
Initial Deputy Wing 1080	Transporting Officer J. CASAS	Agency 818 BRPD
ID #	Pouch #	Witness here if subject signed with an "X".

JH 0522116

P# 3971

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

Agency ORI Number: FL 0500200, Agency Name: BOCA RATON POLICE DEPARTMENT, Agency Report Number: 3 | 2 | 2021-003354

Name (Last, First, Middle): ALSPACH, CHEYENNE ROBERT, Race: W, Sex: M, Date of Birth: 12/04/1968

Charge Description: 316.193(3C1) DUI- PROPERTY DAMAGE

Victim's Name (Last, First, Middle): STATE OF FLORIDA, Local Address (Street, Apt. Number): 100 NW 2ND AVE, BOCA RATON, FL 33432

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. On the 19 day of March, 2021 at 03:05

On 3/19/2021, at approximately 0220 hours, I responded to 6699 Jog Rd as a back-up unit for a traffic crash. Upon arrival, I observed a red 2019 Ford F-150 truck with major damage to the front and a black 2003 Honda CRV SUV with major damage to the rear. Officer Leyva conducted the crash investigation and determined that the Ford rear-ended the Honda while it was stopped at a red light. (See FLHSMV Crash #24098294 for further information regarding the crash) As Officer Leyva was conducting her investigation, I observed the registered owner of the Ford, Cheyenne Alspach, sitting in the driver's seat of the Ford. I also observed that Alspach had red glassy eyes, slowed movements, and slurred speech. I then made contact with the driver of the Honda, Charmantine Joseph, who stated that she witnessed Alspach exit the Ford from the driver's seat to speak with her following the crash. Charmantine said that Alspach was the sole occupant of the vehicle and described him as a middle-aged white male with gray hair wearing a gray shirt and shorts. Charmantine provided a sworn witness statement which was captured on my BWD. Her son, Bryant Joseph, served as a Creole-English translator. Upon Officer Leyva completing her investigation, she informed Alspach that the crash investigation was complete, and I informed him that I would be conducting a criminal DUI investigation. Alspach stated that he understood. I then informed Alspach of his constitutional (Miranda) warnings and he advised he understood those too. I asked Alspach where he was coming from and he stated he was on his way home from a bar. Alspach later confessed to consuming 4 Guinness beers at O'Brian's Pub located at 51 SE 1st Ave in Boca Raton. According to Alspach, he was headed home to his residence which was found to be located in the area of Jog Rd and W Palmetto Park Rd, however, it should be noted that he was traveling northbound on Jog Rd away his residence. When

SWORN AND SUBSCRIBED BEFORE ME, NOTARY PUBLIC / CLERK OF COURT, SHARI L. O'NEAL, Notary Public - State of Florida, Commission # CG 972080, 03/19/2021, SIGNATURE OF ARRESTING / INVESTIGATING OFFICER: CASAS, JAVIER (818), MAR 20 2021, NAME OF OFFICER (PLEASE PRINT), 03/19/2021, DATE

OBTS Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Captives	1	JUVENILE
Agency ORI Number FL 0500200	Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2021-003354			
Charge Type: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		Special Notes:			

Name (Last, First, Middle) ALSPACH, CHEYENNE ROBERT	Alias	Race W	Sex M	Date of Birth 12/04/1968
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asked what direction he was traveling, Alspach stated "South" but pointed north. Alspach also stated he did not know what road he had been traveling on.

I then asked Alspach if he was sick or injured and he stated he was not. He also stated he did not have any physical defects or injuries, did not limp, and felt comfortable walking in his flip-flops. I asked Alspach if he was taking any medication and he advised he takes blood pressure medication but said it does not affect his ability to walk, stand, or balance. Alspach also claimed he was not diabetic or epileptic and did not have anything wrong with his eyes that is not corrected by glasses or contacts. Lastly, I asked Alspach if he was willing to participate in Standardized Field Sobriety Exercises and he agreed to participate.

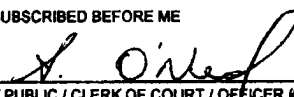
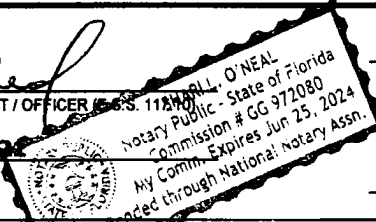

The first exercise was Horizontal Gaze Nystagmus. I administered the instructions and Alspach stated that he understood. Alspach moved his head side to side during the exercise and had to be reminded to follow the stimulus with his eyes and only his eyes. Alspach also swayed in a circular motion and even fell out of position while the exercise was being conducted.

The second exercise was the Walk and Turn. I administered the instructions and demonstrated how the exercise should be completed. I noticed that Alspach had some difficulty getting into the starting position and staying in it. Once the instructions were completed, Alspach stated that he understood. Alspach began the exercise prior to being instructed to begin, used his arms for balance, fell off the line several times, missed heel to toe on almost every step, and made an improper turn.

The third exercise was the One-Leg Stand. I administered the instructions and demonstrated how it should be completed. Alspach stated he understood. Alspach swayed in a circular motion, used his arms for balance, and put his foot down several times during the exercise.

The fourth exercise was the Finger to Nose. I confirmed that Alspach knew his left from his right by asking him to show me his left hand and then his right hand. I then administered the instructions. The pattern was L-R-L-R-R-L.
 L - Missed tip of his nose and held his finger on his nose.
 R - Held his finger on his nose.
 L - Missed tip of his nose and held his finger on his nose.
 R - Missed tip of his nose and held his finger on his nose.
 R - Missed tip of his nose and held his finger on his nose.
 L - Held his finger on his nose.

The final exercise was the modified romberg balance test. I asked Alspach if he felt comfortable estimating the passage of 30 seconds and he stated he did. I demonstrated the passage of 30 seconds using a stop watch. The instructions were administered, and

SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT / OFFICER 03/19/2021 DATE		 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER CASAS, JAVIER (818) NAME OF OFFICER (PLEASE PRINT) 03/19/2021 DATE
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PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1 JUVENILE

OBTS Number		
Agency ORI Number FL 0500200	Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2021-003354

Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance
	<input type="checkbox"/> 2. Traffic Felony	<input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other

Name (Last, First, Middle) ALSPACH, CHEYENNE ROBERT	Alias	Race W	Sex M	Date of Birth 12/04/1968
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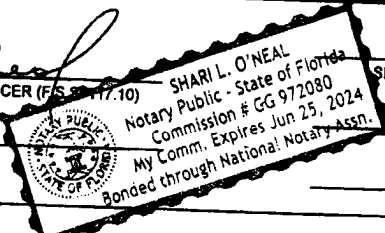
the exercise was conducted. Alspach estimated the passage of 30 seconds in 39 seconds. He also swayed in a circular motion while the completing the exercise.

Based on the totality of the circumstances, I found probable cause to believe that, at the time of the crash, Alspach was operating a motor vehicle within the state while under the influence alcohol or controlled chemical substances. Alspach was placed under arrest for DUI per F.S.S 316.193(3c1).

Alspach was transported to the Palm Beach County Sheriff's Office DUI Testing Facility where Breath Operator Ragin (#16877) completed the BAT room procedures. Alspach was asked to provide a sample of his breath for the purpose of determining the alcohol content and he agreed to submit. Alspach provided 3 breath samples of .230, .202, and 2.18. Alspach was then advised of his constitutional warnings and stated he understood. Alspach refused to participate in the Q&A portion of the interview. See DUI Influence Report for further.

Alspach was then transported to Wellington Regional Hospital for medical clearance and later turned over to PBSO and Palm Beach County Jail.

NOT A CERTIFIED COPY

SWORN AND SUBSCRIBED BEFORE ME		
<i>S. O'Neal</i> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)	<i>J. Casas</i> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER	SCANNED
03/19/2021 DATE	CASAS, JAVIER (818) NAME OF OFFICER (PLEASE PRINT)	MAR 20 2021
	03/19/2021 DATE	PAGE 3 OF 3

SUBJECT: Alspach, Cheyenne R. CASE NUMBER: 21-3354

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.

SCANNED

MAR 20 2021

SUSPECT'S SIGNATURE: (X) Reed on Camera

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

SUBJECT: Alspach, Cheyenne R. CASE NUMBER: 21-3354

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? _____

SCANNED
MAR 20 2021

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: J. CASAS 818

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: 80-006029 Software: 8100.27
Date of Test: 03/19/2021

Date of Last Agency Inspection: 03/12/2021
Observation Period Began: 03:45
Subject's Name: ALSPACH R CHEYENNE
DOB: 12/04/1968 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	04:10
	Control Test	0.080	04:10
	Air Blank	0.000	04:11
	Subject Sample #1	0.230	04:12
	Air Blank	0.000	04:13
	Air Blank	0.000	04:14
	Subject Sample #2	0.202	04:15
	Air Blank	0.000	04:15
	Air Blank	0.000	04:17
	Subject Sample #3	0.218	04:18
	Air Blank	0.000	04:18
	Control Test	0.077	04:19
	Air Blank	0.000	04:19
	Diagnostics Check	OK	04:19

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: 03/19/21
Signature

Sworn to (or affirmed) before me this 19 day of March, 2021

[Signature] Signature of Notary Public-State of Florida
Ofc. J. Casas # 818 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.

SCANNED

TESTING FACILITY TASK REPORT

AGENCY: BRPD
SUBJECT: Alspach, Cheyenne R.
CASE NUMBER: 21-046400
DATE: Mar 19, 2021
VIDEO DVD NUMBER: N/A
BEGINNING TIME: 04:07
ENDING TIME: 04:21

BREATH TESTS RESULTS: 1) .230 TIME 04:12 A.M. P.M. 2) .202 TIME 04:15 A.M. P.M.
3) .218 TIME 04:18 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, cooperative
CLOTHING: Tan shorts, gray t-shirt, dark brown flip-flops
MEDICAL CONDITIONS: High blood presser
MEDICATIONS: Not sure

OTHER:

Eyes are red
odor of unknown alcoholic beverage on breath

COMMENTS:

Arrived at center A/O started 20 minute observation period at 03:45 hrs.
Subject agreed to perform breath test.
A/O read rights.
Subject stated he understood rights.
Tech read breath test results.
Subject stated he understood breath test results.
A/O attempted Q&A
Subject refused to answer Q&A

SCANNED
MAR 20 2021



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

PBSO CASE # 21-046400 PBSO ZONE 7-11

AGENCY CASE # 32-2021-003354 CRASH CASE # 24098294

TIME OF STOP/CRASH 0158 DATE 03/19/2021 DAY _____

SUBJECT'S NAME ALSPACH CHEYENNE R RACE W SEX M
LAST FIRST MID

HGT 6'00" WGT 192 DOB 12/04/1968

LOCATION 6699 JOG RD, BOCA RATON, FL, 33496

ARRESTING OFFICER'S NAME & ID J. CASAS 818 AGENCY BRPD

DIVISION: SPEC. SERV. - DUI NOTIFIED BY COMMO YES

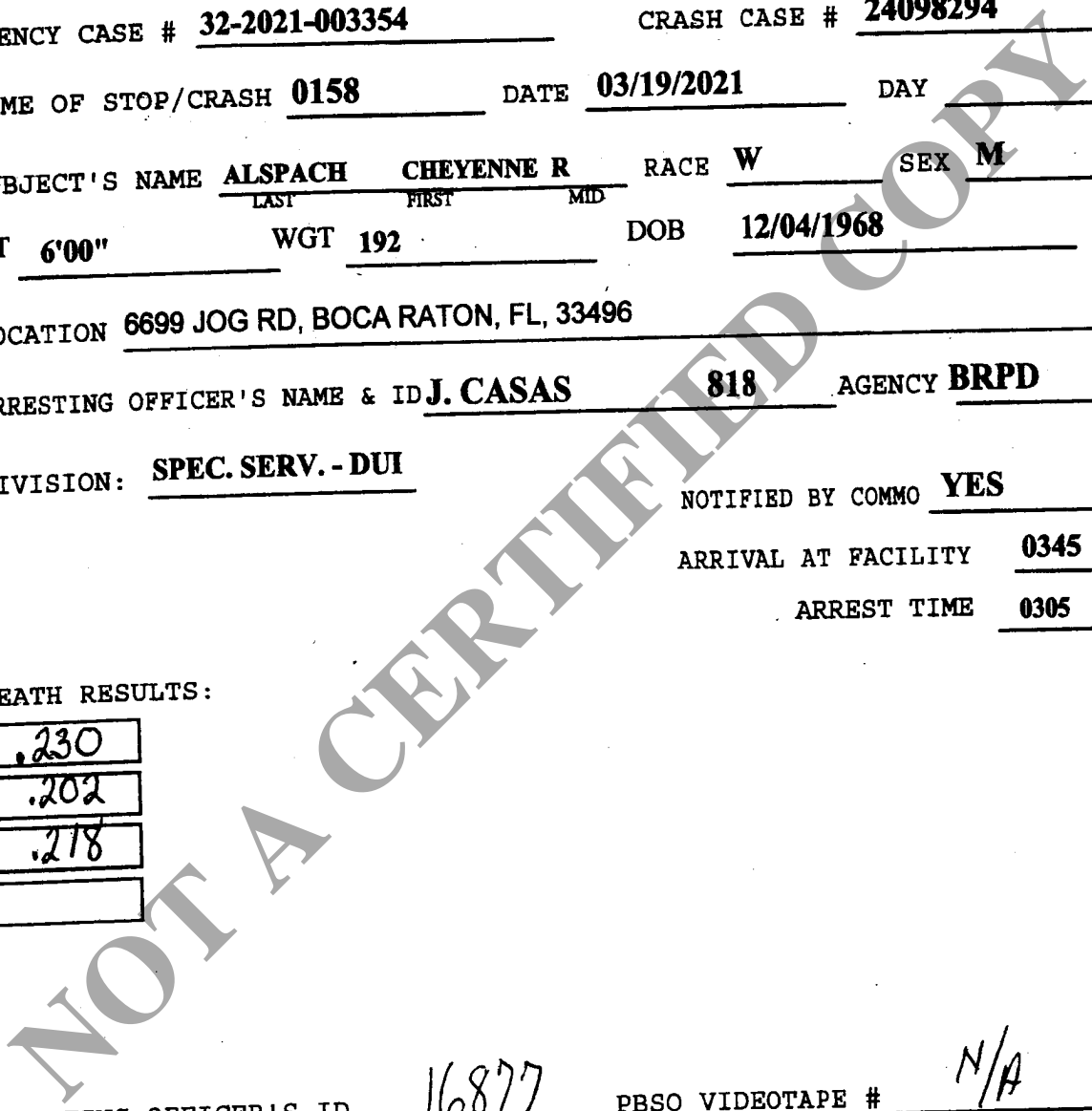
ARRIVAL AT FACILITY 0345

ARREST TIME 0305

BREATH RESULTS:

- 1) .230
- 2) .202
- 3) .218
- 4)

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



SCANNED
MAR 20 2021



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	<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"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2021006698	Date: 3/20/21
	Specialist Name/ID: A. Pinkney/7796

SCANNED
 MAR 20 2021