

0524536 50-2021-CT.01429-ANB 94

AD M I N I S T R A T I O N	OBTS Number		ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		JUVENILE		1			
	Agency ORI Number 0500700		Agency Name Riviera Beach Police Department		Agency Report Number (N.T.A.'s only) 8 4 21-04984											
	Charge Type Check as many <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		If Weapon Seized		Enter Type Not Applicable/none		Multiple Clearance Indicator		1			
	Location of Arrest (Including Name of Business) 100 W BLUE HERON BLVD, RIVIERA BEACH, FL				Location of Offense (Business Name, Address) 100 W BLUE HERON BLVD, RIVIERA BEACH, FL 33404											
	Date of Arrest 07/11/2021		Time of Arrest 02:32		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle			
	Name (Last, First, Middle) CLIFTON, DAVID BURTON				Alias:				Alias (Name, DOB, Soc. Sec. #, Etc.)							
	Race W - White B - Black O - Oriental/Asian		Sex M		Date of Birth 07/06/1963		Height 6'01		Weight 200		Eye Color BROWN		Hair Color GRAY		Complexion LIGHT	
	Build MEDIUM		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Mental Status D		Religion		Indication of: Alcohol Influence Drug Influence		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>					
	Local Address (Street, Apt. Number) 550 OKEECHOBEE BLVD 512, WEST PALM BEACH, FL 33401		(City) WEST PALM BEACH		(State) FL		(Zip) 33401		Phone (434) 962-0918		Residence Type 1. City 2. County 3. Florida 4. Out of State		2			
	Permanent Address (Street, Apt. Number) 550 OKEECHOBEE BLVD 512, WEST PALM BEACH, FL 33401		(City) WEST PALM BEACH		(State) FL		(Zip) 33401		Phone (434) 962-0918		Address Source SELF					
Business Address (Name, Street) 550 OKEECHOBEE BLVD 512, WEST PALM BEACH, FL 33401		(City) WEST PALM BEACH		(State) FL		(Zip) 33401		Phone (434) 962-0918		Occupation IT Software						
D/L Number, State C413162632460 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) GERMANY, Germany		Citizenship US								
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <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"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor		<input type="checkbox"/> 5. Juvenile				
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian		Name (Last, First, Middle)		Relationship		Residence Phone		Business Phone								
Address (Street, Apt. Number)		(City)		(State)		(Zip)										
Notified by (Name)		Date		Time		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released		2. TOT JAC 3. Incarcerated								
Released To (Name)		Relationship		Date		Time										
The above address was 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's Office (Phone 355-2526) informed of any change of address.		Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property										
1. Possess S. Sell T. Traffic		R. Snuggle E. Use		K. Display/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other		A. Narcotic N. Marijuana A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Opium		
P. Possess		T. Traffic		E. Use		K. Display/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other		A. Narcotic N. Marijuana A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin		
H. Hallucinogen M. Marijuana O. Opium/Opium		S. Sell T. Traffic		R. Snuggle E. Use		K. Display/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other		A. Narcotic N. Marijuana A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin		
U. Unknown Z. Other		S. Sell T. Traffic		R. Snuggle E. Use		K. Display/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other		A. Narcotic N. Marijuana A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin		
Charge Description DUI		Statute Violation Number 316.193(DA)		Violation of ORD #												
Drug Activity N		Drug Type N		Amount / Unit /		Offense # 21-04984		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond		
Charge Description		Statute Violation Number		Violation of ORD #												
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond		
Charge Description		Statute Violation Number		Violation of ORD #												
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond		
Health / Apparent Physical Condition of Defendant		Any knowledge of the following <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries		Explain												
Check which applies <input type="checkbox"/> Released OR <input type="checkbox"/> Posted Bond		<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health		PROPERTY - Received By		Released By		Released To								
Transported By		Date Transported		Time Transported		Other										
INSTRUCTION NO. 1 - Mandatory appearance in court INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.		Location (Court, Room) North County PALM BEACH GARD		Court Date and Time 09/12/2021 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 Bennett J. J.		Name Verification (Printed by Arrestee) (PRINT)												
<input type="checkbox"/> Dangerous <input type="checkbox"/> Subsidial		<input type="checkbox"/> Restated Arrest <input type="checkbox"/> Other		ID # 6797												
Intake Deputy Dung 691		Pouch #		ID # 6797		Agency RBM		Witness here if subject signed with an "X"								

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P.L.O. ☐ DEFENDANT

J. Bennett 6797

D.U.I. PROBABLE CAUSE AFFIDAVIT

On the 11th day of July 2021 at 01:48 ☒ AM ☐ PM

Subject: Clifton, David, Burton Case Number: 21-04984

Agency: Riviera Beach Police Department Arresting Officer: J. Bennett 6797

PERSONAL CONTACT

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

I, Officer Bennett observed a blue in color Honda Civic bearing Florida specialty tag IFK542 traveling west bound in the 100 block of East Blue Heron Boulevard, Riviera Beach, Florida. The vehicle was traveling without its front headlights activated and its tail lights were not lit. The vehicle came to a stop in the 10 Block of East Blue Heron Boulevard. The driver, David Clifton (W/M DOB 07-06-1963) was observed in control of the vehicle.

OBSERVATION OF DRIVER:

I, Officer Bennett, observed Mr. Clifton with a smell of unknown alcoholic beverage emitting from his breath. Mr. Clifton was asked initially for his drivers license and registration which seemed to confused Mr. Clifton as he continually apologized while searching for the documents. Mr. Clifton's eyes were glossy at the time of the traffic stop.

DRIVER STATEMENTS:

The driver continuously apologized and stated that he had been drinking. Mr. Clifton advised that he had (4) four drinks prior to driving.

ODORS: Smell of an unknown alcoholic beverage emitting from his breath.

GENERAL OBSERVATIONS

SPEECH: Normal

ATTITUDE: Apologetic

CLOTHING: Normal

MEDICAL/OTHER: Glasses

STATE OF FLORIDA
COUNTY OF PALM BEACH


SIGNATURE OF ATTESTING OFFICER

The forgoing instrument was sworn to or affirmed and subscribed before me this 11th day of July 2021 by J. Bennett 6797 who is ☐ personally known to me or ☐ produced


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



D.U.I. PROBABLE CAUSE AFFIDAVIT Cont.

Subject: Clifton, David, Burton

Case Number: 21-04984

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:

Mr. Clifton was repeatedly asked to keep his head still during the test which he had difficulties during the task.

Walk and Turn

During the walk and turn, Mr. Clifton attempted to start the test prior to being told to do so. During the test Mr. Clifton stepped off the line on his first and eighth step. Mr. Clifton also failed to place his next foot in front of the prior foot several times. During the test Mr. Clifton's counting failed to coincide with the number step he was taking and had to use his arms to balance. Mr. Clifton ended on the wrong foot after miss counting his steps.

One Leg Stand

During the One Leg Stand Mr. Clifton started the task by lifting his right foot and balancing on his left foot. During this task he used his arms to balance and placed his right foot down after approximately 3 seconds. Mr. Clifton then started the next task with his right foot planted while lifting his left leg. Mr. Clifton used his arms to balance and placed his left foot down after approximately 3 seconds.

Rhomberg

Mr. Clifton advised that he was more comfortable with counting than the alphabet. Mr. Clifton performed this task without issue.

Finger to Nose

The Finger to Nose Test was performed in the following order Right, Left, Right, Left, Left, Right, Left. Mr. Clifton attempted to start the test before told to do so several times. On the first right Mr. Clifton used his whole hand to touch his nose and repeated the right hand when the instruction to use just his finger tip was repeated. On the next left instruction Mr. Clifton failed to keep his head tilted backwards. Mr. Clifton repeatedly failed to return his hand from his nose to the outstretched position and had to be reminded.

BREATH RESULTS: 1) .212 @ 0320 2) .216 @ 0323 3) _____ @ _____ 4) _____ @ _____

STATE OF FLORIDA
COUNTY OF PALM BEACH


SIGNATURE OF ATTESTING OFFICER

The foregoing instrument was sworn to or affirmed and subscribed before me this 11th day of July 20 21 by
J. Bennett 6797 who is ☐ personally known to me or ☐ produced _____


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



JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

STAMP



Riviera Beach Police Department
DUI TESTING FACILITY INFORMATION SHEET

PBSO Case #: 21-084608 PBSO Zone: 3-15

Agency Case #: 21-04984 Crash Case #: _____

Incident Information:

Time of Stop/Crash: 01:48 Date of Incident: 07/11/2021 Day: Sunday

Location of Incident: 100 East Blue Heron Boulevard, Riviera Beach, FL 33404

Arrest Information:

Time of Arrest: 02:21 Date of Arrest: 07/11/2021 Day: Sunday

Location of Arrest: 100 East Blue Heron Boulevard, Riviera Beach, FL 33404

Subject's Name: (L) Clifton, (F) David, (M) Burton

DOB: 07-06-1963 Race: W Sex: M Height: 6'1" Weight: 200

Arresting Officer's Name: J. Bennett ID#: 6797

Agency: RBPD Division: Police

Breath Results

- 1) 0.212 at 03:20 hrs.
- 2) 0.216 at 03:23 hrs.
- 3) N/A at N/A hrs.
- 4) N/A at N/A hrs.

---BAT Use---

BAT Notified: ✓

Arrival Time at BAT: 02:41

Subject Arrest Time: 02:21

Breath Test Operator: Pound 24639

SUBJECT: CLIFTON, DAVID 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) David on Camera

SUBJECT: CLIFTON DAVID B 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? IN

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? W WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? 7-11 WHAT DAY OF THE WEEK IS IT? Sunday

WHAT COUNTY AND CITY ARE YOU IN NOW? AL

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? YES WHAT? BEER

HOW MUCH? 1 WHERE? _____ WITH WHOM? AC

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? YES

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? YES WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? YES DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? YES

WERE YOU IN AN ACCIDENT TODAY? YES

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? YES WHAT? _____ WHEN? _____

DO YOU HAVE:

EPILEPSY?	_____
GLASS EYE?	<u>NO</u>
FALSE TEETH?	_____
EAR INFECTION?	_____
INNER EAR TROUBLE?	_____
DIABETES?	_____

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

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? YES WHERE? Virginia

INTERVIEWER: V. L. Smith 1747

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

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: 07/11/2021

Date of Last Agency Inspection: 06/11/2021

Observation Period Began: 02:41

Subject's Name: DAVID B CLIFTON

DOB: 07/06/1963 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	03:18
	Air Blank	0.000	03:18
	Control Test	0.080	03:19
	Air Blank	0.000	03:19
	Subject Sample #1	0.212	03:20
	Air Blank	0.000	03:20
	Air Blank	0.000	03:22
	Subject Sample #2	0.216	03:23
	Air Blank	0.000	03:23
	Control Test	0.079	03:24
	Air Blank	0.000	03:24
	Diagnostics Check	OK	03:24

Cylinder Lot: 02021080A1
Exp: 03/05/2023

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 PARIS D POUND, 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: 07/11/21
Signature

Sworn to (or affirmed) before me this 11th day of July, 2021

Signature of Notary Public-State of Florida OFF. J. BENNETT
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.

TESTING FACILITY TASK REPORT

AGENCY: RBPB

SUBJECT: CLIFTON, DAVID B

CASE NUMBER: 21-08

DATE: Jul 11, 2021

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 03:15

ENDING TIME: 03:30

BREATH TESTS RESULTS: 1) .212 TIME 03:20 A.M. ☒ P.M. ☐ 2) .216 TIME 03:23 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

SPEECH: SLURRED

ATTITUDE: CALM, QUIET

CLOTHING: GRAY PANTS, GRAY T-SHIRT, BLACK / WHITE SNEAKERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

SUBJECT: STATED HE HAD 5 BEERS IN Q&A

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 02:41 HRS.

SUBJECT: AGREED TO TAKE TEST

A/O: READ RIGHTS

SUBJECT: STATED HE UNDERSTOOD RIGHTS

TECH: READ TEST RESULTS

SUBJECT: STATED HE UNDERSTOOD TEST RESULTS

A/O: CONDUCTED Q&A

SUBJECT: ANSWER QUESTIONS

Riviera Beach Police Department
DUI PACKET RECOMMENDATION AND ATTACHED DOCUMENTS

Case Number:
21-04984

Sentencing Recommendation:

Additional Comments:

☐ Filing Packet Information Form

☐ Recommendation and Attached Documents Form

☒ Arrest/Notice to Appear

☐ Agency Probable Cause Affidavit

☒ DUI Probable Cause Affidavit

☒ DUI Witness List

☒ Testing Facility Information Sheet

☒ Testing Facility Task Report

☒ Photograph of DL / DAVID Printout

☒ Breath Alcohol Test Affidavit

☐ Refusal Form

☐ FDLE Blood Withdrawal Certification Form

☒ Implied Consent / Miranda Warnings Form

☒ Question and Answer Sheet

☒ Prisoner Property Receipt

Additional Items:

Attached Citations

DUI Citation(s):

1) AEIRK6E
2)
3)
4)
5)
6)

UTC Citations:

1) AEIRK7E
2)
3)
4)
5)
6)

Tracking Citations:

1)
2)
3)
4)
5)
6)



**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: 2021017106	Date: 7/11/2021
	Specialist Name/ID: Mathew Meek 33849