

059326

20CT13 865

1520

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMI NIST RATI ON	OBTS Number		Agency ORI Number 0500400		Agency Name Delray Beach Police Department		Agency Report Number (N.T.A.'s only) 4, 0 20-014138		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias		1 JUVENILE							
DEF END ANT	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				If Weapon Seized		Enter Type: None/not Applicable		Multiple Clearance Indicator		2							
	Location of Arrest (Including Name of Business) NE 2ND ST/NE 3RD AVE DELRAY BEACH, FL						Location of Offense (Business Name, Address) 232 NE 2ND ST/NE 3RD AVE, DELRAY BEACH, FL 33444											
	Date of Arrest 10/28/2020		Time of Arrest 20:56		Booking Date 10/28/2020		Booking Time 21:06		Jail Date 10/28/2020		Jail Time 23:30		Location of Vehicle 232 NE 2ND ST/NE 3RD AVE					
	Name (Last, First, Middle) WYNN, DAVID ELLIOTT ANIKEN																	
C O D E F	Alias: _____ Alias (Name, DOB, Soc. Sec. #, Etc.) _____																	
	Race W - White 1 - American Indian B - Black O - Oriental/Asian		Sex W M		Date of Birth 11/05/1966		Height 6'00		Weight 200		Eye Color BROWN		Hair Color BROWN		Complexion LIGHT		Build LARGE	
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status		Religion CATHOLIC		Indication of: Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Drug Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Residence Type: 1. City 3. Florida 2. At Large 4. Out of State		Address Source FL DL			
	Local Address (Street, Apt. Number) 3579 S FEDERAL HWY F, BOYNTON BEACH, FL 33435				(City) BOYNTON BEACH, FL		(State) FL		(Zip) 33435		Phone (561) 460-2777		Residence Type: 1. City 3. Florida 2. At Large 4. Out of State		Address Source FL DL			
	Permanent Address (Street, Apt. Number) 3579 S FEDERAL HWY F, BOYNTON BEACH, FL 33435				(City) BOYNTON BEACH, FL		(State) FL		(Zip) 33435		Phone (561) 460-2777		Residence Type: 1. City 3. Florida 2. At Large 4. Out of State		Address Source FL DL			
	Business Address (Name, Street) W500165664050 / FL				(City) BOYNTON BEACH, FL		(State) FL		(Zip) 33435		Phone (561) 336-0141		Residence Type: 1. City 3. Florida 2. At Large 4. Out of State		Address Source FL DL			
	D/L Number, State W500165664050 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) SANTA BARBARA, CA,		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"/> Other: _____ Name (Last, First, Middle) _____ <input type="checkbox"/> Legal Custodian _____ Address (Street, Apt. Number) _____ (City) _____ (State) _____ (Zip) _____ Notified by: (Name) _____ Date _____ Time _____ Released To: (Name) _____ Relationship _____ Date _____ Time _____ JUVENILE DISPOSITION: 1. Handled/Processed within Department and Released 2. TOT IAC 3. Incarcerated																	
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. <input type="checkbox"/> Yes, by: _____ <input type="checkbox"/> No: _____ Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Description of Property _____ Value of Property _____ School Attended _____ Grade _____																		
Drug Activity: N. N/A, S. Sell, R. Smuggle, K. Disperse/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. Synthetic, U. Unknown, Z. Other																		
Charge Description: DRIVING WHILE UNDER INFLUENCE Statute Violation Number: 316.193(1)A Violation of ORD #: _____ Drug Activity: N , Drug Type: N , Amount/Unit: / , Offense #: 1 , Counts: 1 , Domestic Violence: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N, Warrant/Capias Number: _____, Bond: _____																		
Charge Description: REFUSAL TO SUMIT TO BAL TEST Statute Violation Number: 316.1939(1)(c) Violation of ORD #: _____ Drug Activity: N , Drug Type: N , Amount/Unit: / , Offense #: 1 , 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: _____																		
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 O.R. <input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health PROPERTY - Received By: _____ Released By: _____ Released To: _____ Transported By: _____ Date Transported: _____ Time Transported: _____ Other: _____																		
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2. Location (Court, Room): South County 200 W Atlantic Ave Delray Beach, FL 33444 Court Date and Time: 11/24/2020 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: _____ Signature of Arresting Officer: _____ Name of Arresting Officer (Print): WINDSOR, NICHOLAS I.D. #: 1029 <input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other Intake Deputy: SPANN 8101 I.D. #: _____ Pouch #: _____ Transporting Officer: WINDSOR I.D. #: 1029 Agency: DBPD Name Verification (Printed by Arrestee): _____ (PRINT) PAGE: 1 OF 1 Witness here if subject signed with an "X".																		

COURT STATE ATTORNEY AGENCY CENTRAL RECORDS JAIL CRIME SCANNED DEFENDANT

OCT 29 2020

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 28th DAY OF October 20 20 AT 2022 AM PM
SUBJECT: WYNN, DAVID ELLIOTT ANIKEN CASE NUMBER: DBPD #20-14138
AGENCY: DELRAY BEACH PD ARRESTING OFFICER: WINDSOR #1029

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

The following occurred in the City of Delray Beach, County of Palm Beach, FL.
On 10/28/20 at 2022hrs an intoxicated driver was reported was made to the Delray Beach Police Department. Dispatch advised a white male driver was having difficulty walking to a vehicle. The white male driver entered a white Maserati Ghibli (FL Tag #WDEV) and drove northbound on NE 1st Ave. The Maserati traveled east through a parking lot to the rear of 105 to 131 E. Atlantic Ave. Ofc. Caceras Duque #1073 DBPD observed the Maserati exit the parking lot and travel northbound on NE 2nd Ave. Ofc. Caceras Duque followed the Maserati north to the intersection of NE 2nd St. The Maserati turned right (east) onto NE 2nd St. Ofc. Caceras Duque followed the Maserati and observed the Maserati fail to stop completely at a posted stop sign at the intersection of NE 2nd St. and NE 3rd Ave. Ofc. Caceras Duque conducted a traffic stop by activating his emergency lights on his marked Delray Beach Police patrol vehicle. Ofc. Caceras Duque met with the white male driver and identified him by his FL DL as David Elliott Aniken Wynn. Wynn was the only person inside the Maserati and was sitting in the driver seat. The Maserati's engine was running and the Maserati's key fob was inside the vehicle. I arrived on scene and met with Wynn who was sitting in the driver seat of the Maserati. I did not observe anybody else inside the vehicle. After arrest I ran a record check in D.A.V.I.D. and the record revealed Wynn had a previous DUI on 03/02/13 and has a prior refusal to submit to breath/urine/blood test on 03/02/13.

OBSERVATION OF DRIVER:

When I approached Wynn, I immediately smelled a strong odor of an unknown alcoholic beverage coming from his person. Wynn's eyes were bloodshot and had a glassy appearance. While Wynn was speaking, his speech was slurred and thick. When I asked Wynn a question, Wynn would start talking about another subject that was not related to the question I asked. Wynn was upset that he had been stopped and wanted to go home. When Wynn exited the Maserati he was unsteady under his own power. Wynn swayed while standing still. Wynn became upset after arrest was made.

DRIVER'S STATEMENTS:

Wynn stated he was on his way home when he was pulled over. Wynn confirmed that his residence was at 3579 S. Federal Hwy #F Boynton Beach, FL and stated he was only a few blocks away from home. Wynn's address was 2.2 miles away from the traffic stop scene. Wynn stated he was with his girlfriend prior to driving home. Wynn stated he consumed one martini prior to driving. Wynn stated the drink was "good drink". Wynn stated he finished consuming this drink 3hrs prior to the traffic stop then stated it was 1.5hrs prior to the traffic stop. Wynn stated he smoked Marijuana prior to driving. Wynn asked repeatedly to let him go home. Wynn stated he "knew our program" and that are questions were "loaded". I requested Wynn perform roadside tasks to dispel my suspicion that he was driving under the influence. Wynn refused to perform roadides and I advised him of Taylor Warning and Wynn stated he did not understand. Wynn then stated his lawyer will be meeting me and refused to perform the roadside tasks. Wynn was informed the reason for the traffic stop was a stop sign violation but Wynn continued to argue about the speed he was traveling across the railroad tracks. Wynn stated that I was jealous of his Maserati and his lawyers will get to know me. Wynn stated I cost him \$50,000 to \$500,000 by arresting him because I didn't care about him or his employees.

ODORS:

Wynn had a strong odor of an unknown alcoholic beverage coming from his person.

GENERAL OBSERVATIONS

SPEECH: Slurred and Thick.

ATTITUDE: Upset and Became Argumentative.

CLOTHING: Black Shirt, Blue Shorts and Black Shoes.

MEDICAL/OTHER: None Stated.

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 28th day of October 20 20 by Ofc. Windsor #1029

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

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



SCANNED
OCT 29 2020

SUBJECT: WYNN, DAVID ELLIOTT ANIKEN CASE NUMBER DBPD #20-14138

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:

Wynn refused to perform roadside tasks.

WALK & TURN:

Wynn refused to perform roadside tasks.

ONE LEG STAND:

Wynn refused to perform roadside tasks.

FINGER TO NOSE:

Wynn refused to perform roadside tasks.

ROMBERG ALPHABET:

Wynn refused to perform roadside tasks.

BREATH TEST RESULTS:

1) Refused	2)	3)	4)
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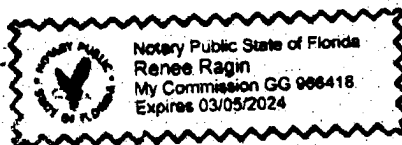
STATE OF FLORIDA
COUNTY OF PALM BEACH


(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 28th day of October, 2020 by Ofc. Windsor #1029

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


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



SCANNED
OCT 29 2020

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

I, Nicholas Windsor, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of Delray Beach Police Department, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 28th day of October, 20 20, at 2056 P.M. A.M.

DRIVER David Elliott Aniken Wynn
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# W500165664050, state of Florida, was placed under lawful arrest for

the offense of Driving Under the Influence by Ofc. Windsor #1029 and
(Name of Arresting Officer)

issued Citation # A1UR7AE

That on or about the 28th day of October, 20 20, at 2154 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]
Signature of Law Enforcement Officer or Correctional Officer



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

The foregoing instrument was sworn and subscribed before me:

(AFFIX SEAL)
The foregoing instrument was sworn and subscribed before me this 28 day of Oct, 20 20, by Ofc. Windsor, who is personally known to me or who has produced

Signature of Attesting Officer

Title _____

Date _____

[Signature] as identification
Notary Public _____

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
OCT 29 2020

WITNESS LIST

CASE NUMBER: DBPD #20-14138

ARRESTING OFFICER: OFC. WINDSOR #1029 DELRAY BEACH POLICE DEPARTMENT

ADDRESS: 300 W ATLANTIC AVE DELRAY BEACH, FL 33444

PHONE NUMBERS (HOME): _____ (WORK) 561-243-7800

CAN TESTIFY TO: DUI PC

NAME: OFC. CACERES DUQUE #1073

ADDRESS: 300 W ATLANTIC AVE DELRAY BEACH, FL 33444

PHONE NUMBERS (HOME) _____ (WORK) 561-243-7800

CAN TESTIFY TO: TRAFFIC STOP

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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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: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NOT A CERTIFIED COPY

SCANNED
OCT 29 2020



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

PBSO CASE # 20121378 PBSO ZONE 4-11

AGENCY CASE # 20-14138 CRASH CASE # N/A

TIME OF STOP/CRASH 2022 DATE 10/28/20 DAY WEDNESDAY

SUBJECT'S NAME WYNN, DAVID ELLIOTT ANIKEN RACE W SEX M

HGT 6'0" WGT 225 DOB 11/05/66

LOCATION 400 BLOCK NE 2ND ST DELRAY BEACH, FL

ARRESTING OFFICER'S NAME & ID WINDSOR #1029 AGENCY DELRAY BEACH PD

DIVISION: TRAFFIC

NOTIFIED BY COMMO YES

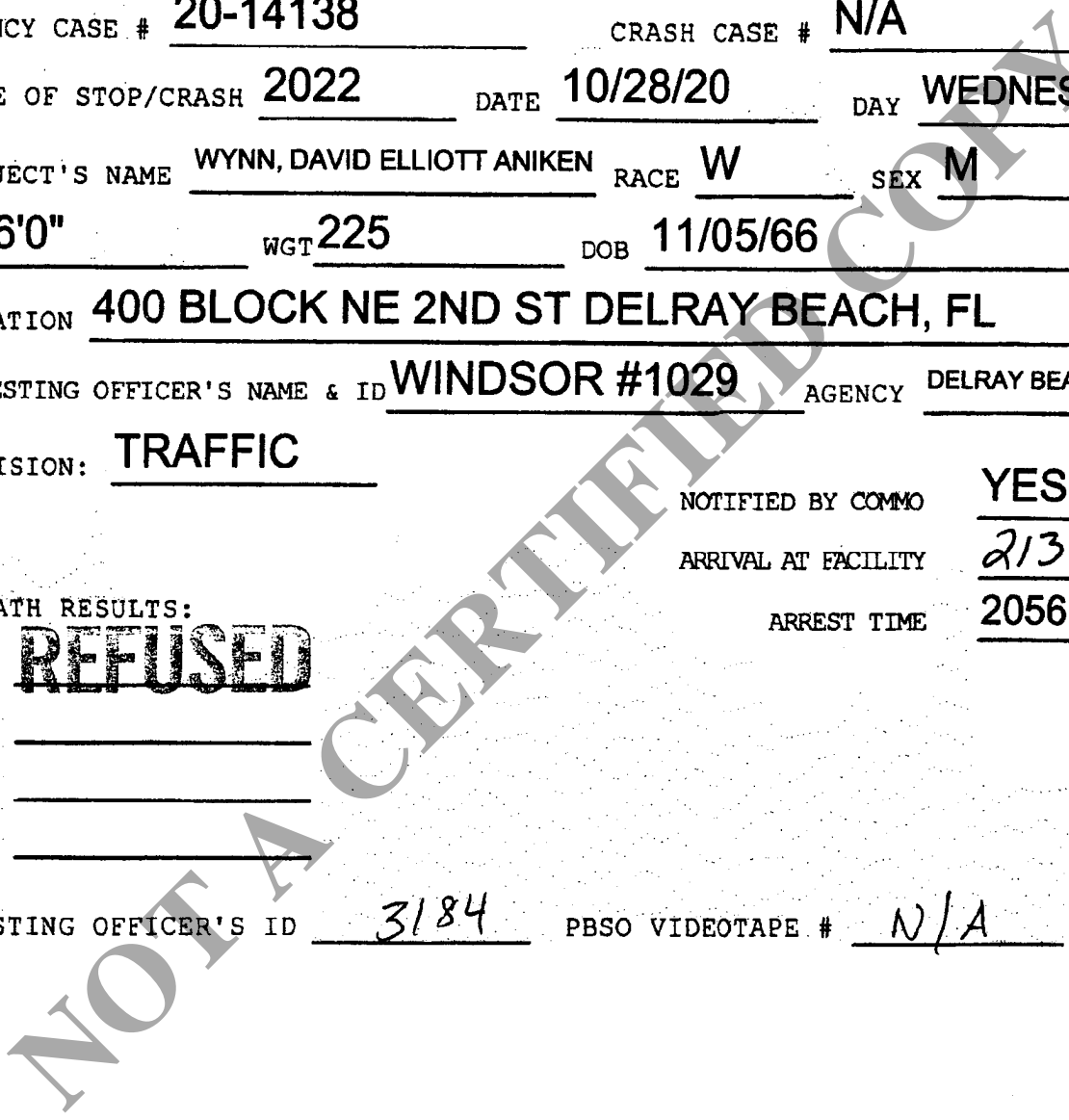
ARRIVAL AT FACILITY 2130

ARREST TIME 2056

BREATH RESULTS:

- 1) **REFUSED**
- 2) _____
- 3) _____
- 4) _____

TESTING OFFICER'S ID 3184 PBSO VIDEOTAPE # N/A



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OCT 29 2020

TESTING FACILITY TASK REPORT

AGENCY: DELRAY BEACH P.D.

SUBJECT: WYNN, DAVID ELLIOTT ANIKEN

CASE NUMBER: 20121378

DATE: 10/28/2020

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 2150

ENDING TIME: 2155

BREATH TESTS RESULTS: 1) Refused TIME 2154 A.M. P.M. 2) TIME A.M. P.M.

3) TIME A.M. P.M. 4) TIME A.M. P.M.

BREATH OPERATOR: S. Owen #3184

MAINTENANCE TECHNICIAN: J. Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE: UPSET, ANGRY, TALKATIVE

CLOTHING: BLACK SHOES, BLUE SHORTS, BLACK T-SHIRT

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

COMMENTS:

A/O AND DEFENDANT ARRIVED 2130 HOURS. A/O OBSERVED 20 MINUTES. DEFENDANT REFUSED TO GIVE INTRO QUESTIONS EXCEPT HGT AND WGT. A/O REQUESTED BREATH TEST, DEFENDANT REFUSED. A/O READ I/C, DEFENDANT UNDERSTOOD, STILL REFUSED. A/O READ C/W DEFENDANT SAID HE DIDN'T UNDERSTAND.

SCANNED

OCT 29 2020

SUBJECT: WINDSOR 1029 DBPD CASE NUMBER: 2020-1029

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? 15th St

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? 2

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
OCT 29 2020

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: WINDSOR 1029 DBPD



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"/>	119.071(3A),(3B),(1-3C)	Other: Security at the Jail..(Security of locations Housed at the jail).	
	<input type="checkbox"/>	119.071(2)(J)	Other: MARSY'S LAW PROTECTED INFORMATION REGARDING VICTIM(S).	

REVIEW COMPLETED BY

Booking Number: 2020025475	Date: 10/29/2020
	Specialist Name/ID: M. Tooks #8557

SCANNED
 OCT 29 2020