

21CT6730AMR

ARREST / NOTICE TO APPEAR
Juvenile Referral Report1. Arrest
2. N.T.A.
3. Request for Warrant
4. Request for Capias

1

Juvenile

N

OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-21058281	
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 <input checked="" type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No N/A		Multiple Clearance Indicator 01			
Location of Arrest (Including Name of Business) STATE ROAD 7 / ALDI WAY ROYAL PALM BEACH, FL, 33411				Location of Offense (Business Name, Address) STATE ROAD 7 / ALDI WAY, ROYAL PALM BEACH, FL, 33411			
Date of Arrest 04/22/2021	Time of Arrest 23:26	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle PRIORITY TOWING	
Name (Last, First, Middle) Del Portillo, Eduardo,				Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian W	Sex M	Date of Birth 11/23/1966	Height 5'8	Weight 230	Eye Color BRN	Hair Color BALD	Complexion MED
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status Married		Religion	
Local Address (Street, Apt. Number) 1765 Ripley Run, Wellington, FL, 33414				Phone (561) 308-2835		Residence Type: 1. City 2. County 3. Florida 4. Out of State 2	
Permanent Address (Street, Apt. Number)				Phone		Address Source FL DL	
Business Address (Name, Street)				Phone		Occupation TILE INSTALLATION	
DL Number, State D416200664230, FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) ELIZABETH, NJ	
Citizenship YES							
Co-Defendant Name (Last, First, Middle)				Race		Sex	
Co-Defendant Name (Last, First, Middle)				Race		Sex	
Parent Legal Custodian 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 366-2526) 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	
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 DUI		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 316.193(4)	
Drug Activity N		Drug Type N		Amount / Unit		Offense # 21058281	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
Drug Activity		Drug Type		Amount / Unit		Offense #	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
Drug Activity		Drug Type		Amount / Unit		Offense #	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
Drug Activity		Drug Type		Amount / Unit		Offense #	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
Drug Activity		Drug Type		Amount / Unit		Offense #	
Location (Court, Room Number, Address) 3228 GUN CLUB RD WEST PALM BEACH FL 33406							
Court Date and Time Month 5 Day 20 Year 2021 Time 0830 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. 04/22/2021 Signature of Defendant (or Juvenile and Parent/Custodian) _____ Date Signed _____							
HOLD for other Agency Name:		Signature of Arresting Officer		Name Verification (Printed by Arrestee)			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:		Name of Arresting Officer (Print) INV G. LYNCH 8568		I.D. # 8568		(PRINT)	
Intake Deputy		I.D. #		Pouch #		Agency PBSO	
Transporting Officer INV G. LYNCH 8568		I.D. # 8568		Agency PBSO		Witness here if subject signed with an "X"	
DISTRIBUTION: WHITE - COURT COPY		GREEN - STATE ATTORNEY		YELLOW - AGENCY		PINK - AGENCY	
GOLD - DEFENDANT (N.T.A.'s ONLY)							

OBT Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Copies		1	Juvenile
ADMIN	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 06- 21-058281			
	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		Special Notes:						
DEF	Name (Last, First, Middle) Del Portillo Eduardo			Alias		Race H	Sex M	Date of Birth 11/23/1966	
CHARGES									
VICTIM	Victim's Name (Last, First, Middle) SOF						Race	Sex	Date of Birth
	Local Address (Street, Apt. Number) (City) (State) (zip) Phone						Address Source		
	Business Address (Name, Street) (City) (State) (zip) Phone						Occupation		
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. The Person taken into custody <input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation. On the 22ND day of APRIL 20 21 at 10:35 <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)									
*****Supplemental P/C***** <p>On 4/22/21 at approximately 2235 hours, I stopped a vehicle (Black Dodge Ram FL tag QRZ U54) for traveling 90mph in a 45mph zone. I was in my unmarked PBSO patrol vehicle at the intersection of Belvedere Rd and SR 7, when the Dodge Ram attempted to bait me into racing his vehicle. The Dodge Ram took off at a high rate of speed when the light turned green. I was traveling 90mph as the vehicle continued to pull away. For no apparent reason, the vehicle slammed on the brakes and got into the left hand turn lane at Aldi Way. I activated my lights and siren and the vehicle pulled over. The driver, identified by his Florida driver's license as Eduardo Del Portillo, was asked for his license, registration, and proof of insurance. Del Portillo attempted 5-6 times to turn his interior lights of his vehicle on and could not press the button to the turn the light on. Del Portillo had glassy eyes and was unable to find any information. Del Portillo's speech was very slurred and he was not making much sense at to why he was driving over 90mph and trying to race another vehicle. Del Portillo kept stating that he was just going to Papi Chullos restaurant to drop off his friend. Del Portillo had driven well past the restaurant that he stated he was traveling to. Del Portillo took over five minutes to finally produce his driver's license and stated over ten times that he just bought his truck and could not find his insurance. At this time, PBSO DUI unit D/S Lynch 8568 was called to the scene to conduct a DUI investigation.</p>									
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH Agt. <u>[Signature]</u> (ID #) <u>[Redacted]</u> (Signature of Arresting/Investigative Officer)								
	The foregoing instrument was sworn to or affirmed and subscribed before me on the <u>22nd</u> day of <u>April</u> 20 <u>21</u> by Agt. <u>[Redacted]</u> (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced KNOWN DEPUTY SHERIFF								
	<u>Inw. Lynch 8568</u> Notary Public, Clerk of Court, Officer (F.S.S. 117.10)								
	<div style="text-align: right;">PAGE 1 OF 1</div>								

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 22 DAY OF APR 20 21, AT 22:34 AM PM

SUBJECT: Del Portillo, Eduardo, CASE NUMBER: 21058281

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV G. LYNCH 8568

PERSONAL CONTACT

DRIVING PATTERN: Actual physical control (physical evidence or statements putting def. behind wheel of vehicle)

On 4/22/21 I responded to State Road 7/ Aldi Way, in Palm Beach County, in reference to a traffic stop, with a possibly impaired driver. Upon my arrival I met with Agent [REDACTED] who conducted the stop. Agent [REDACTED] advised that while on routine patrol he observed a black Ram pick-up, bearing FL tag QRZU54 stopped next to him, on State Road 7, at a red traffic light, at Belvedere Rd. When the light turned green the truck accelerated rapidly. Agent [REDACTED] paced the truck and was traveling at approximately 90mph in the posted 45mph zone, with the truck still pulling away from his vehicle. The truck then suddenly braked and turned onto Aldi Way. Agent [REDACTED] conducted a traffic stop and made contact with the driver, Eduardo Del-Portillo. Agent [REDACTED] observed Eduardo's eyes to be glassy. Eduardo attempted to turn on the interior light of the truck several times, but was unable to do so. Eduardo's speech was slurred.

OBSERVATION OF DRIVER:

I met with Eduardo, who was seated in the driver seat of the truck. I immediately observed Eduardo's eyes to be bloodshot and glassy. Eduardo's speech was slurred and there was an odor of an unknown alcoholic beverage coming from the truck. I had Eduardo exit the truck and stand in front of my patrol car. While exiting Eduardo braced himself on the door for balance. Eduardo exhibited a sway while standing still and there was an odor of an unknown alcoholic beverage coming from his breath, which got stronger when he spoke. Eduardo advised that he had 2 tequila drinks approximately 2 hours prior. Based on my observations and Eduardo's admission to drinking I asked him to perform standard field sobriety tasks.

DRIVER'S STATEMENTS:

Eduardo advised that he had 2 tequila drinks approximately 2 hours prior.

ODORS:

ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM SUBJECT'S BREATH.

GENERAL OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Calm/ Cooperative

CLOTHING:

MEDICAL/OTHER: NONE

STATE OF FLORIDA
COUNTY OF PALM BEACH

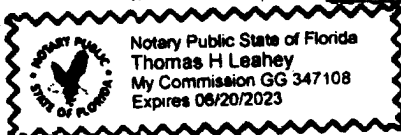
INV G. LYNCH 8568
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 23 day of APR 20 21 by INV G. LYNCH 8568

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

Thomas Leahey (#19183)

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



SUBJECT: Del Portillo, Eduardo,

CASE NUMBER 21058281

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:

Eduardo was asked to stand with his feet together and place his hands by his sides. Eduardo was asked to focus on the stimulus and follow it with his eyes. Eduardo was told not to move his head to assist in following the stimulus. I observed a lack of smooth pursuit in both of Eduardo's eyes and distinct and sustained nystagmus at maximum deviation. I observed onset of nystagmus prior to 45 degrees. I observed vertical nystagmus in both of Eduardo's eyes. Eduardo had to be reminded to follow the stimulus and not to move his head, multiple times.

WALK & TURN:

I utilized yellow duct tape to make a straight and level, free of debris, that Eduardo advised he could see. Eduardo elected to remove his sandals for the task. I explained and demonstrated the task to Eduardo. During the instructions Eduardo was unable to maintain the instructional stance, stepping out of the position several times. Eduardo then stated that the sandals were horrible, and I reminded him that he was not wearing them. After completing the instructions Eduardo advised he understood and had no questions. During the task Eduardo missed heel-to-toe steps several times and stepped off the line, multiple times. Eduardo used his arms for balance and paused to regain his balance. Eduardo did not turn as instructed and stumbled.

ONE LEG STAND:

I explained and demonstrated the task to Eduardo. After completing the instructions Eduardo advised he understood and had no questions. During the task Eduardo exhibited a sway and used his arms for balance. Eduardo put his foot down, multiple times, prior to 30 seconds elapsing.

FINGER TO NOSE:

I explained and demonstrated the task to Eduardo. During the instructions Eduardo stated the task was hard. Eduardo then began practicing the task and stated it was not that difficult. After completing the instructions Eduardo advised he understood. During the task Eduardo missed the tip of his nose, several times. Eduardo failed to return his hand to his side after touching his nose. Eduardo failed to keep his head tilted back and eyes closed. Throughout the task Eduardo exhibited a sway.

ROMBERG ALPHABET:

Prior to beginning Eduardo confirmed he knew the entire alphabet, in order, without issue. I explained and demonstrated the task to Eduardo. After completing the instructions Eduardo advised he understood. During the task Eduardo exhibited a sway. Eduardo failed to correctly recite the alphabet, making multiple errors. Eduardo then stated that he messed up on reciting the alphabet and began to recite it standing normally. Eduardo again made multiple errors. Eduardo stated that he had recited the alphabet perfectly that time.

BREATH TEST RESULTS: 1) .174 2) .175 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV G. LYNCH 8568

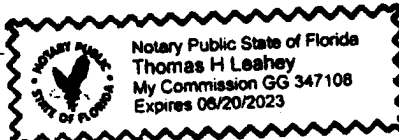
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 23 day of APR 2021 by INV G. LYNCH 8568

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

Thomas Leahey (#19183)

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





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

PBSO CASE # 21058281

PBSO ZONE 9-31

AGENCY CASE # _____

CRASH CASE # _____

TIME OF STOP/CRASH 22:34

DATE 04/22/2021

DAY Thursday

SUBJECT'S NAME Del Portillo, Eduardo,

RACE W

SEX M

HGT 5'8

WGT 230

DOB 11/23/1966

LOCATION STATE ROAD 7/ ALDI WAY ROYAL PALM BEACH, FL, 33411

ARRESTING OFFICER'S NAME & ID INV G. LYNCH 8568 (8568)

AGENCY Palm Beach County Sheriff's Office

DIVISION: VCD/DUI

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 00:10

ARREST TIME 23:26

BREATH RESULTS:

1)	.174
2)	.175
3)	N/A
4)	N/A

TESTING OFFICER'S ID 19183

PBSO VIDEOTAPE # N/A

WITNESS LIST

CASE NUMBER: 21058281

ARRESTING OFFICER: INV G. LYNCH 8568

ADDRESS: HQ

PHONE NUMBERS (HOME): _____ (WORK) 561 688 3000

CAN TESTIFY TO: FACTS OF CASE

NAME: Agent [REDACTED]

ADDRESS: DIST. 9

PHONE NUMBERS (HOME) 0 (WORK) 561 688 3000

CAN TESTIFY TO: TRAFFIC STOP

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) 0

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: _____

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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: _____

TESTING FACILITY TASK REPORT

AGENCY:

SUBJECT:

DATE:

BEGINNING TIME:

CASE NUMBER:

VIDEO DVD NUMBER:

ENDING TIME:

BREATH TESTS RESULTS: 1) TIME A.M. ☒ P.M. ☐ 2) TIME A.M. ☒ P.M. ☐

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

BREATH OPERATOR:

MAINTENANCE TECHNICIAN:

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE:

CLOTHING:

MEDICAL CONDITIONS:

MEDICATIONS:

OTHER:

eyes are glassy & bloodshot
odor of unknown alcoholic beverage on breath

COMMENTS:

arrived at center A/O conducted 20 minute observation period at 0010 hrs

subject agreed to perform breath test

A/O read rights & subject understood rights

tech read breath test results & subject understood breath test results

A/O attempted Q&A

subject declined to answer questions

**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: 80-006027 Software: 8100.27
Date of Test: 04/23/2021

Date of Last Agency Inspection: 04/09/2021

Observation Period Began: 00:10

Subject's Name: EDUARDO DEL PORTILLO

DOB: 11/23/1966 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		00:34
Air Blank	0.000	00:34
Control Test	0.080	00:35
Air Blank	0.000	00:35
Subject Sample #1	0.174	00:36
Air Blank	0.000	00:37
Air Blank	0.000	00:39
Subject Sample #2	0.175	00:39
Air Blank	0.000	00:40
Control Test	0.079	00:40
Air Blank	0.000	00:40
Diagnostics Check OK		00:41

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 THOMAS H LEANEY, 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: T. Leaney

Signature

Date: 04/23/21

Sworn to (or affirmed) before me this 23 day of April, 2021

Signature of Notary Public-State of Florida

Inv G Lynch #8568
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.



**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 checked="" type="checkbox"/>	119.071(4)(c)	Undercover personnel.	3-4,8-9,14
	<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"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2021009815	Date: 4/23/21
	Specialist Name/ID: A. Pinkney/7796