22CT7291AMB

MAY

ARREST / NOTICE TO APPEAR

O On-View 3. Request for Warrant S. Summons T. Taken into Custody

O JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500800

Agency Name: West Palm Beach Police Department

Agency Report Number (N.T.A.'s only): 9 | 4 | 2022-0006562

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

If Weapon Seized Enter Type: UNARMED

Multiple Clearance Indicator

Location of Arrest (Including Name of Business): 1 OKEECHOBEE BLVD/S FLAGLER DR, WPB, FL

Location of Offense (Business Name, Address): 1 OKEECHOBEE BLVD/S FLAGLER DR, WEST PALM BEACH,

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
05/06/2022	02:54	05/06/2022	03:04			

DEFENDANT

Name (Last, First, Middle): GUERRON, FREDDY R

Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:

Race (W - White, B - Black, I - American Indian, A - Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	12/12/1966	5'06	160	BROWN	BLACK	MEDIUM	Heavy

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description)

Marital Status | Religion

Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 125 TIFFANY CT, PALM SPRINGS, FL 33461

Home Phone

Residence Type: 1. City 3. Florida 2. County 4. Out of State

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 125 TIFFANY CT, PALM SPRINGS, FL 33461

Mobile Phone: (561) 755-2542

Address Source

Business Address (Name, Street) (City) (State) (Zip): QUEEN OF PAWNS, 1180 S MILITARY TRAIL WPB FL 33415

Work Phone: (561) 434-4149

Occupation: Representative

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
G650256664520 / FL	[redacted]		Ecuador	US

CO-DEF

Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Other: ☐ Legal Custodian

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 Department and Released 2. TOT JAC 3. Incarcerated

Released To: (Name) | Relationship | Date | Time

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:

School Attended | Grade

Property Crime? ☐ Yes ☒ No | Description of Property | Value of Property

CODE

Drug Activity: N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Dispense/ Distribute M. Manufacture/ Produce/ Cultivate Z. Other

Drug Type: N. N/A A. Amphetamine B. Barbiturate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
DUI BREATH ALCOHOL 0.08 OR MORE PER 210 L	316.193(1C)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By | Released By | Released To

Transported By | Date Transported / / | Time Transported : : | Other

NOTICE TO APPEAR

☒ 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): Criminal Justice CRIMINAL JUSTICE COMPLEX

Court Date and Time: 06/16/2022 08:30:00 3228 GUN CLUB ROAD

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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian) Date Signed

I CONSENT TO RECEIVE REMINDERS OF COURT DATE(S) AND TIMES FOR THIS CASE BY TEXT MESSAGE TO THE NUMBER IDENTIFIED HERE. I UNDERSTAND THAT STANDARD TEXT MESSAGE RATES MAY APPLY AND THAT I MAY REVOKE THIS CONSENT VIA THE TEXT MESSAGE SYSTEM IF I CHOOSE (561) 755-2542 INITIAL

No Photo Available

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Issuing Deputy I.D. # Pouch #: CT McNeal 7206

Signature of Arresting Officer I.D. #: 2263

Name of Arresting Officer (Print) I.D. #: GITTENS, THOMAS 02263

Transporting Officer I.D. # Agency: GITTENS 2263 WPBPD

Name Verification (Printed by Arrestee) (PRINT)

MAY 6 AM 3:54

Witness here if subject signed with an "X"

PAGE 1 OF 1

053407

1692

DUI PROBABLE CAUSE AFFIDAVIT

On the 6th Day of May at 0157 A.M. P.M.

Subject: Freddy Guerron Case Number: 20220006562

Agency: West Palm Beach Police Department Arresting Officer: Gittens #2263

Personal Contact

Driving Pattern Actual physical control (physical evidence putting the driver behind the wheel)

Witnesses saw Freddy's car driving southbound on Flagler Dr. before it crashed into a tree at the intersection of Flagler Dr. and Okeechobee Blvd. When I arrived on scene Freddy's vehicle was turned on its driver side leaning against a tree. Freddy was in the driver seat with the vehicle still running.

Observation of Driver

Freddy was trying to free himself from the vehicle. WPBFR were telling Freddy what to do to get him out of the vehicle however Freddy had a very hard time following direction. Once Freddy was outside the vehicle he was very unsteady while standing still and while walking. Freddy had bloodshot eyes and extremely slurred speech.

Drivers Statements:

When asked how the accident occurred, Freddy stated he had been drinking with friends and must have had too much to drink.

Odors:

There was a very strong odor of alcohol coming from Freddy.

General Observations

Speech: Extremely slurred

Attitude: Calm

Clothing: Black shirt, blue jeans, and brown shoes

Medical Problems/Medications: none

Other:

DUI PROBABLE CAUSE AFFIDAVIT

Subject: Freddy Guerron **Case Number:** 20220006562

Roadside Tasks

Horizontal Gaze Nystagmus

- ☐ Left Eye Does Not Follow Smoothly
- ☐ Left Eye Jerks at 45 Degree Angle or Less
- ☐ Distinct Jerking Left Eye at Maximum Deviation
- ☐ Right Eye Does Not Follow Smoothly
- ☐ Right Eye Jerks at 45 Degree Angle or Less
- ☐ Distinct Jerking Right Eye at Maximum Deviation

I explained to Freddy I would be checking his eyes and gave him instructions to follow my finger with his eyes and only his eyes. I held up my right index finger and told Freddy to look at the tip of my finger. I told Freddy to keep his head still. Freddy stated he understood however when I attempted to check for equal tracking, Freddy would keep his head still. I attempted multiple time to have Freddy follow directions eventually Freddy followed my instructions enough to complete the evaluation, however I constantly had to remind him to keep his head still. I told Freddy to keep his head still. I checked Freddy's eyes for equal pupil size and resting nystagmus. Freddy had equal pupil size and did not have resting nystagmus. I then told Freddy with his eyes and only his eyes only to follow the tip of my finger. I made two passes with my finger from center to maximum deviation then back to center on each eye to check Freddy's eyes for equal tracking. Freddy's eyes tracked equally. After medically qualifying Freddy I immediately started two passes on each eye from center to maximum deviation then back to center to check for lack of smooth pursuit. On all of my passes I saw nystagmus in each eye. After checking for lack of smooth pursuit I immediately started two passes on each eye to check for distinct and sustained nystagmus at maximum deviation. I moved my finger from center to maximum deviation, holding at maximum deviation for approximately eight seconds then back to center for both eyes. I saw distinct and sustained nystagmus at maximum deviation in each eye on all of my passes. I then started two passes on each eye to check for onset of nystagmus prior to 45 degrees. I saw nystagmus in each eye on all of my passes. After checking for onset of nystagmus prior to 45 degrees, I started two passes for vertical nystagmus and did not see nystagmus on either pass

Walk and Turn Task

I told Freddy was going to start my next evaluation and instructed him to stand with his feet together and his arms down by his side. I asked Freddy to put his right heel touching his left toe along a line extending straight off his left toe and to remain standing in that position until I told him to begin the evaluation. I asked Freddy if he understood those instruction and he said he did. I demonstrated the evaluation for Freddy. I told Freddy there were four things I wanted him to keep in mind while completing the evaluation. I told him to look at his feet at all times, count his steps out loud, keep his arms at his side at all times, and to not stop until he had completed the evaluation. Freddy was unable to maintain balance during the instructional stage. Freddy displayed five of the six clues (stops while walking, incorrect number of steps, steps offline, uses arms for balance, and missed heel to toe) during this evaluation. Freddy never attempted his turn as he continued to walk until I eventually had to stop him.

One Leg Stand

I told Freddy I was going to start my next evaluation. I asked Freddy to stand with his feet together and his arms down by his side and I would tell him when to begin. I told Freddy I wanted him raise either one of his feet approximately six inches off the ground, parallel to the ground and count out loud in the manner of "one thousand one, one thousand two, one thousand three" and so on until I told him to stop. I demonstrated the evaluation for him and asked if he understood the instructions. Freddy stated he understood. I told Freddy there were four things I wanted him to keep in mind while completing the evaluation. I told him to look at his raised foot at all times, count out loud in the manner I instructed him to, keep his arms at his side at all times, and to keep his foot up until I told him to stop. I told Freddy to begin and Freddy conducted the evaluation exhibiting three of the four clues (Puts foot down, uses arms for balance, sways).

Finger To Nose

I told Freddy to stand with his feet together and his hands next to his side. I asked Freddy if he knew his right from his left and he stated he did. I had Freddy extend his index fingers while making a fist. I had Freddy face his palms toward me. I told Freddy when I instructed him to, I wanted him to close his eyes and tilt his head back. I advised Freddy when I instructed him to, I would tell him either left or right. I told Freddy if I said right, I wanted him to touch the tip of his right finger to his nose and then return his hand back to his side. I told Freddy if I said left, I wanted him to touch the tip of his left finger to his nose and then return his hand back to his side. I asked Freddy if he understood, and he stated he did. While performing the evaluation, Freddy had to be reminded to put his arms back down on all commands.

Romberg Balance

I told Freddy to stand with his feet together and his hands next to his side. I asked Freddy if he knew how to count to 30 and he stated he did. I told Freddy when I instructed him to, I wanted him to close his eyes and tilt his head back. I advised Freddy when I instructed him to, I wanted him to estimate 30 seconds in his head. I told Freddy when he was finished to put his head forward and tell me he was finished. I asked Freddy if he understood, and he stated he did. While performing the evaluation Freddy counted out loud and told me he was finished after approximately fifteen seconds.

Breath Results from Instrument

1st Result 0.140 **2nd Result** 0.143 **3rd Result** (If Applicable)

State of Florida

County of Palm Beach

The Following Instrument was notorized or sworn before me this (DATE)

☐ Personally Known ☐ Produced Identification ☐ Notary Public

PARIS ROUND
MY COMMISSION # HH 202860
EXPIRES: March 26, 2026
Bonded Thru Notary Public Underwriters

2263

Notary / Clerk of Courts / Officer (FSS: 117.10) *Signature of Arresting Officer*

SUBJECT: _____ CASE NUMBER: 2011000765(2

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? _____

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: _____

SUBJECT: [illegible] CASE NUMBER: [illegible]

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 determining 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 refuse to take the test I have requested of you, your driving privilege will be suspended for a period of one (1) year for a FIRST REFUSAL, or eighteen (18) months if your driving privilege has been PREVIOUSLY SUSPENDED, or if you have been PREVIOUSLY FINED under s. 327.35215, for refusing to submit to a lawful test of your breath, urine, or blood. Additionally, if you refuse to take the test I have requested of you, and if your driving privilege has been previously suspended, or if you have been previously fined under s. 327.35215, for a refusal to submit to a lawful test of your ***breath, urine*** or blood, you will be committing a misdemeanor, in addition to any other penalties which can be imposed by law.

Refusal to submit to the test I have requested is admissible into evidence in any criminal proceeding.

Do you understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO

NOTE: IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER'S LICENSE (CDL), READ THE FOLLOWING,

If you are a Commercial Driver License (CDL) holder or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privilege for a period of one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from holding a CDL or operating a CMV.

Do you understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO

SUBJECTS 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)_____

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

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

PBSO CASE # 22-064473 PBSO ZONE 3-15

AGENCY CASE # 20220006562 CRASH CASE #

TIME OF STOP/CRASH 0052 DATE 5/6/2022 DAY Fri

SUBJECT'S NAME Freddy Guerron RACE W SEX M

HGT 5'5" WGT 180 DOB 12/12/1966

LOCATION Okeechobee Blvd / Flagler Dr

ARRESTING OFFICER'S NAME & ID Gittens #2263 AGENCY WPBPD

DIVISION:

NOTIFIED BY COMMO WALK-IN

ARRIVAL AT FACILITY 0157

Arrest Time 0132

BREATH RESULTS:

1. .140
2. .143
3. N/A
4. N/A

TESTING OFFICER'S ID 24639

TESTING FACILITY TASK REPORT

AGENCY: WPPD

SUBJECT: GUERRON, FREDDY R

CASE NUMBER: 22-064473

DATE: May 6, 2022

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 02:20

ENDING TIME: 02:31

BREATH TESTS RESULTS: 1) .140 TIME 02:25 A.M. ☒ P.M. ☐ 2) .143 TIME 02:28 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 TECHNICAN: J. KARLECKE# 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: THICK

ATTITUDE: CALM, QUIET

CLOTHING: BLUE JEANS , BLACK SHIRT , BROWN SNEAKERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: GLASSY AND BLOODSHOT

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 01:57 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: ATTEMPTED Q&A

SUBJECT: REFUSED 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: 80-006238 Software: 8100.27
Date of Test: 05/06/2022

Date of Last Agency Inspection: 04/08/2022
Observation Period Began: 01:57
Subject's Name: FREDDY R GUERRON DOB: 12/12/1966 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	02:23
Air Blank	0.000	02:23
Control Test	0.079	02:24
Air Blank	0.000	02:24
Subject Sample #1	0.140	02:25
Air Blank	0.000	02:26
Air Blank	0.000	02:27
Subject Sample #2	0.143	02:28
Air Blank	0.000	02:29
Control Test	0.078	02:29
Air Blank	0.000	02:30
Diagnostics Check	OK	02:30

Cylinder Lot: 29821080A4
Exp: 12/05/2023

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: 05/06/22
Signature

Sworn to (or affirmed) before me this 6th day of MAY, 2022

#2263
Signature of Notary Public-State of Florida

OFC. T. GITTENS
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.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2022011852	**Date:**
	Specialist Name/ID: Pinkneya/7796