

J: 0511295 50-2020 -00 -AMB 3728

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

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

1 Juvenile N

OBTS Number		Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number (N.T.A.'s only) <b>06-20-089354</b>			
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 1. Yes 2. No		Multiple Clearance Indicator					
Location of Arrest (Including Name of Business) <b>1218 N FEDERAL HWY LAKE WORTH FL 33460</b>				Location of Offense (Business Name, Address) <b>1218 N FEDERAL HWY LAKE WORTH FL 33460</b>					
Date of Arrest <b>07/20/2020</b>	Time of Arrest <b>1548</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle			
Name (Last, First, Middle) <b>TAYLOR GERALD RAY</b>		Alias (Name, DOB, Soc. Sec. #, Etc.)							
Race W - White I - American Indian B - Black O - Oriental/Asian <b>W</b>	Sex <b>M</b>	Date of Birth <b>12/04/1975</b>	Height <b>5'10"</b>	Weight <b>185</b>	Eye Color <b>BLU</b>	Hair Color <b>BRN</b>	Complexion <b>FAIR</b>	Build <b>MED</b>	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>RIGHT ARM KELTIC KNOT</b>				Marital Status <b>SINGLE</b>	Religion <b>CHRISTIAN</b>	Indication of Alcohol Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unl. <input type="checkbox"/>			
Local Address (Street, Apt. Number) <b>1599 S FEDERAL HWY</b>		(City) <b>BOYNTON BEACH FL 33435</b>	(State) <b>FL</b>	(Zip) <b>33435</b>	Phone <b>(954) 498-4354</b>	Residence Type: 1. City <input type="checkbox"/> 2. County <input type="checkbox"/> 3. Florida <input type="checkbox"/> 4. Out of State <input checked="" type="checkbox"/>			
Permanent Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone	Address Source <b>FCDC</b>			
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation <b>SERVICES</b>			
DL Number, State <b>T460-296-75-444-0, FL</b>		Soc. Sec. Number		INS Number	Place of Birth (City, State) <b>LOVE LOCK, NV</b>		Citizenship <b>US</b>		
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 <input type="checkbox"/> Other		Address (Street, Apt. Number)				(City)	(State)	(Zip)	
Notified by: (Name)		Date	Time	Juvenile Disposition 1. Handled/processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated		Residence Phone			
Released To: (Name)		Relationship		Date	Time	Business Phone			
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 355-2526) 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 S. Sell B. Buy P. Possess T. Traffic		R. Smuggle D. Deliver E. Use		K. Dispense/ Distribute		M. Manufacture/ Product/ 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 <b>DUI</b>		Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number <b>316.193(1)</b>		Violation of ORD #			
Drug Activity <b>N</b>	Drug Type <b>N</b>	Amount / Unit	Offense # <b>20-089354</b>	Warrant / Capias Number		Bond			
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #			
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond			
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #			
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond			
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #			
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond			
Location (Court, Court Number, Address) <b>PALM BEACH COUNTY COURTHOUSE CRIMINAL JUSTICE COMPLEX, 3228 GUN CLUB RD, WEST PALM BEACH, FL 33406 - PH: (561) 355-2996</b>									
Month <b>AUGUST</b> Day <b>10TH</b> Year <b>2020</b> Time <b>8:30</b> 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 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 <b>07/20/2020</b>			
HOLD for other Agency name:		Signature of Arresting Officer <b>X [Signature]</b>			Name Verification (Printed by Arrestee)				
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Iritate		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) <b>Cpl. Michael Gruber</b>		I.D. # <b>9721</b>		PAGE	
Transporting Officer <b>Cpl. Michael Gruber</b>		ID # <b>9721</b>		Agency <b>PBSO</b>		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)	

OBTS Number		<b>PROBABLE CAUSE AFFIDAVIT</b>		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile	N
ADMIN	Agency ORI Number <b>FLO 500000</b>	Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>	Agency Report Number <b>06-20-089354</b>					
	Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	Special Notes:			
CHARGES	Name (Last, First, Middle) <b>TAYLOR, GERALD, RAY</b>		Alias		Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>12/04/1975</b>	
	Charge Description <b>DUI</b>	316.193(1)		Charge Description				
VICTIM	Victim's Name (Last, First, Middle) <b>STATE OF FLORIDA, ,</b>		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
<p>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</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence.      <input type="checkbox"/> was observed by _____ who told _____  <input type="checkbox"/> confessed to _____      that he/she saw the arrested person commit the below acts.  <input checked="" type="checkbox"/> admitting to the below facts.      <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <b>20th</b> day of <b>August</b> 20<b>20</b> at <b>1512</b> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p>On the above date and time I was called to the area of 1218 N Federal Hwy in the City of Lake Worth located in Palm Beach County. When I arrived I met with D/S Jacobs #25508 who advised that he was dispatched at 1512 in reference to a suspicious person. D/S Jacobs was advised prior to arrival that a vehicle was following a black Cadillac bearing Florida tag# BPLW62. The caller Brandon Brown stated that the vehicle had almost rear ended him and that the driver stopped and got out and he tried to help him but he refused and got back into the vehicle and fled. The Brown said that he fled the driver was impaired and continued to follow the vehicle till it went off the road and got stuck in front of 1218 N Federal Highway. Brown completed a sworn written statement since he stayed on scene till D/S Jacobs arrived. D/S Jacobs advised that when he arrived he found the vehicle revving its engine and the front tire and spinning. D/S Jacobs observed pedestrians in the area and was in fear that the vehicle would take off and hit them. D/S Jacobs made contact with the driver and asked for him to turn off the vehicle and exit the car.</p> <p>The driver was asked for his license but he was unable to provide it and fail to provide D/S Jacobs with his name. That is why I was called to the scene to assist with identifying the driver. D/S Jacobs stated the male was the sole occupant of the vehicle during the time of the stop. When I made contact with the driver I asked him if he would provide with his name or a driver's license and he said that he already gave it to a deputy, and refuse to provide with his name. Upon checking with my Rapid ID the driver was found to Gerald Ray Taylor W/M 12/04/1975. When I went back to make contact with Gerald I observed that his face was lush and cheeks were red. I then again explained to Gerald that I would like his license if he had one that he had not provided it to anyone yet. Gerald asked to check his vehicle for it. When he did I observed that he was uneasy on his feet and swayed from side to side having trouble with his balance. Gerald was unable to find his wallet. I asked Gerald where he was coming from and he stated he was heading home. While Gerald spoke I noticed that he had a strong odor of an unknown alcoholic substance coming from his breath and was standing roughly 6 feet from him. Gerald was unable to tell me where we were located during the stop.</p> <p>After some questioning Gerald became very angry and began to lass out at me saying that's why people hate you. And I could see he was tensing up and breathing heavy. Gerald said just let me park my car and get me a ride home. I told I could not let him drive until I was sure that he was safe to do so. That's when I asked if he was willing to conduct roadside tasks, to which he replied no. I then explained his Taylor warnings that if he failed to complete the tasks that it could be used against him in court. Gerald said he understood and then I asked again if he would complete the roadside tasks and he again replied no. at this time based on the above I placed Gerald Taylor under arrest for DUI. Gerald was placed into handcuffs which were double locked and checked for proper fit. Gerald was explained that he was under arrest for DUI.</p> <p>I placed Gerald into the back of my patrol vehicle with the in car video activated. I was provided with two statements one from the original caller and one from a lady who lived at the complex. Gerald vehicle was towed on scene and I transported Gerald to the PBSO BAT for testing. While driving to the BAT there was a heavy odor of an unknown alcoholic substance inside my vehicle prior to Gerald entering. When we arrived at the BAT at 1620 I observed Gerald were he did not take anything by mouth or regurgitate. After we went on camera where I requested a sample of his breath which he provided two samples that came back .221 and .216. I then read Gerald his Miranda warnings which he stated he understood and requested to speak with his attorney and no more questioning was done at this time. Gerald was provided a DUI citation and a court date which he understood and signed for. Gerald was processed at the county jail without incident. This case is cleared by arrest.</p>								
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH		<b>Cpl. Michael Gruber</b>					
	(Signature of Arresting/Investigative Officer)							
<p>The foregoing instrument was sworn to or affirmed and subscribed before me this <b>20th</b> day of <b>AUGUST</b> 20<b>20</b> by <b>Cpl. Michael Gruber #9721</b></p> <p>(Print name of Arresting/Investigative Officer, which is personally known to me or from whom I received identification) <b>EVERLY SUE OWEN</b> Produced <b>Known</b></p> <p>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p> <p style="text-align: center;"><b>MY COMMISSION # GG 188278</b>  <b>EXPIRES: May 30, 2022</b>  <b>Bonded Thru Notary Public Underwriters</b></p>								
								PAGE OF

SUBJECT TAYLOR

GERALD

CASE NUMBER 20-089354

**ROADSIDE TASKS**

**HORIZONTAL GAZE NYSTAGMUS:**

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT                           | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT                           |
| <input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input checked="" type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES          | <input checked="" type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES          |

**Other Observations:**

**WALK & TURN:  
REFUSED**

**ONE LEG STAND:  
REFUSED**

**FINGER TO NOSE:  
REFUSED**

**ROMBERG ALPHABET:  
REFUSED**

**BREATH TEST RESULTS:     .221                     .216**

STATE OF FLORIDA  
COUNTY OF PALM BEACH

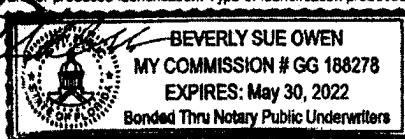
**Cpl. Michael Gruber** 

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 20th day of AUGUST 2020 by Cpl. Michael Gruber

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

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



NOT A CERTIFIED COPY

# TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: TAYLOR, GERALD RAY

CASE NUMBER: 20089354

DATE: 07/20/2020

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 1640

ENDING TIME: 1652

BREATH TESTS RESULTS: 1) .221 TIME 1646 A.M.  P.M.  2) .216 TIME 1649 A.M.  P.M.   
3) TIME A.M.  P.M.  4) TIME A.M.  P.M.

BREATH OPERATOR: S. Owen #3184

MAINTENANCE TECHNICAN: J. Karlecke #6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH: EMOTIONAL

ATTITUDE: TALKATIVE, CRYING, UPSET

CLOTHING: FLIP FLOPS, ORANGE SHORTS, BLUE/BLACK SHIRT

MEDICAL CONDITIONS:

MEDICATIONS:

OTHER:

## COMMENTS:

A/O AND DEFENDANT ARRIVED AT 1620 HRS.

A/O OBSERVED 20 MINUTES.

AO REQUESTED BREATH TEST, DEFENDANT AGREED.

NO PROBLEMS WITH TEST. WHEN TECH TOLD DEFENDANT THE RESULTS HE SAID HE WANTED TO CALL HIS ATTORNEY, DID NOT AGREE WITH THE BREATH RESULTS. A/O READ C/W DEFENDANT UNDERSTOOD AND REFUSED Q & A.

SUBJECT: Taylor, Gerald Ray CASE NUMBER: 20089354

## 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: \_\_\_\_\_

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

SUBJECT: Taylor, Gerald Ray CASE NUMBER: 20089354

## 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) Lead on Camera

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



**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 checked="" type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	6
	<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"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2020017369	Date: 07/21/2020
	Specialist Name/ID: AM/31562