

21 CT 5326

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-21051518	
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 type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 2 1. Yes 2. No N/A		Multiple Clearance Indicator			
Location of Arrest (Including Name of Business) GATEWAY BLVD / SW 23RD ST. BOYNTON BEACH, FL 33436				Location of Offense (Business Name, Address) GATWAY BLVD / SW 23RD ST. BOYNTON BEACH, FL 33436			
Date of Arrest 04/02/2021	Time of Arrest 21:53	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle GARDENS TOWING	
Name (Last, First, Middle) SEITTER JAMES M		Sex M		Date of Birth 05/26/1961		Height 6'00	
Race W		Weight 200		Eye Color BLUE		Hair Color GRAY	
Complexion MED		Build LARGE		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) SCARS NECK, BACK AND ARMS		Marital Status Married	
Local Address (Street, Apt. Number) 3604 EDGAR AVE		(City) BOYNTON BEACH, FL 33436		(State) FL		(Zip) 33436	
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)	
Business Address (Name, Street)		(City)		(State)		(Zip)	
DL Number, State S-360-453-61-186-0		Soc. Sec. Number		INS Number		Place of Birth (City, State) NEW JERSEY	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
Parent Legal Custodian Other:		Residence Phone		Business Phone		Address (Street, Apt. Number)	
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	
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 355-2528) 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 D.U.I.		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 316.193 (1)(A)	
Drug Activity U		Drug Type U		Amount / Unit		Offense # 21051518	
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 #	

NOTICE TO APPEAR
Location (Court Room Number, Address)
PALM BEACH COUNTY CRIMINAL JUSTICE COMPLEX - 3228 GUN CLUB RD WEST PALM BEACH FL, 33406

Court Date and Time
Month **APRIL** Day **29th** Year **2021** Time **08:30** AM 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

Signature of Defendant (or Juvenile and Parent /Custodian) _____ Date Signed **04/02/2021**

HOLD for other Agency Name: _____ Signature of Arresting Officer: **Inv. Clisson J.** I.D. # **24091** Name Verification (Printed by Arrestee) _____ (PRINT)

Dangerous Resisted Arrest Suicidal Other: _____ Transporting Officer: **Inv. Clisson J.** ID # **24091** Agency **PBSO** Witness here if subject signed with an _____

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A. ONLY)

PAGE 1 of 1

0522405

APR 03 2021

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 2nd DAY OF April 20 21, AT 20:08 AM PM

SUBJECT: SEITTER JAMES M CASE NUMBER: 21051518

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. Cisson J.

PERSONAL CONTACT

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

Upon arrival, I observed a white Chevy Silverado stopped along the curb in front of a black Ford Explorer. The Explorer had damage to the driver side front bumper. The other driver Hernandez witnessed the driver of the white Chevy Silverado in the vehicle at the time of accident. The victim Artemio Hernandez completed a sworn written statement to his observations. He said that he was in his vehicle when the Defendant James Seitter backed his vehicle into his. He said that Seitter then drove away and he followed him. The two of them turned into a gas station and stopped. Hernandez said that he observed Seitter exit the driver side of the vehicle and he was alone, the sole occupant of the vehicle. He said that Seitter was wearing a white shirt and dark jeans.

OBSERVATION OF DRIVER:

I observed that Seitter was wearing a white shirt and black jeans with brown shoes. I observed Seitter's eyes were red and glassy. I observed his speech was slow had a slight slur. I asked Seitter to speak with me in front of my vehicle, he agreed. I then explained to him I was done assisting CSA Foster with the crash investigation and now I would be conducting a criminal investigation. I read him his Miranda Warnings to which he said he understood. I asked him if he would perform field sobriety tasks and he agreed.

DRIVER'S STATEMENTS:

I asked if the driver had been drinking or used any drugs, he said he had two beers. Later he said he only had one beer. He said he had two bad knees and bad back and neck issues. I asked if he worked today, he said yes he loaded a wood chipper. He said that he does it everyday. He said he wears glasses for reading and was not wearing contacts. He said he takes medications for blood pressure. Seitter was repetitive by telling me he was drinking with his bother and he only lives 3 blocks from his house.

ODORS:

Obvious odor of an unknown alcoholic beverage

GENERAL OBSERVATIONS

SPEECH: slurred, thick

ATTITUDE: calm, compliant, angry, aggressive, mood swings

CLOTHING: work clothes, dirty, dish

MEDICAL/OTHER: Blood pressure medications

STATE OF FLORIDA
COUNTY OF PALM BEACH

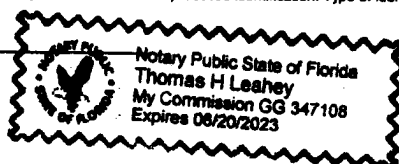
Inv. Cisson J.

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 2nd day of April 20 21 by Inv. Cisson J.

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

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



SCANNED
APR 03 2021

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:

While standing stationary Seitter swayed in a circular pattern, side to side and front to back. I had to remind him to not move his head and follow the stimulus with his eyes only. He would stop following the stimulus and stare past me and i would remind him to follow the stimulus multiple times.

HAND COORDINATION:

The task was explained and demonstrated. During the Demonstration Seitter did not maintain the position and began to soon, multiple times. Once the demonstration was complete, Seitter stated he understood the instructions. Seitter was instructed to begin the task, he began walking while rotating his fists front to back and counting 1, 2, 3, 4. He put his hands down by his side and then started the task over and over. He did not put his hands back to his chest. He did this three times and said he was done. The task was not completed properly.

PALM PAT:

The task was explained and demonstrated. Seitter stated he understood the instructions. During the task, Seitter rotated both hands and clapped instead of rotating one hand and speeding up as instructed.

FINGER TO NOSE:

The task was explained and demonstrated. During the instructions Seitter started too soon by tilting his head back and began closing eyes. He also began raising his finger to his nose without being instructed. During the task, I observed he failed to return arms to side, used that sides of finger and not the tip. Seitter opened his eyes during the task and on the third command of right he began to lift his left hand and then corrected himself.

ROMBERG ALPHABET:

I explained and demonstrated the task, Seitter stated he understood the instructions. I instructed Seitter to start the task as explained. During the task, I observed Seitter swayed. During the recite of the alphabet, Seitter missed and said multiple letters in the wrong places. He did not recite the alphabet in the correct order.

BREATH TEST RESULTS: Refused Refused Refused Refused

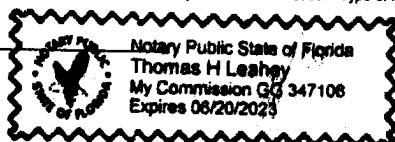
STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. Cisson J.
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 2nd day of April 2021 by Inv. Cisson J.

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

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



SCANNED
APR 03 2021

WITNESS LIST

CASE NUMBER: 21051518

ARRESTING OFFICER: Inv. Cisson J.

ADDRESS: 3228 GUN CLUB RD WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) 561-688-3600

CAN TESTIFY TO: FACTS OF CASE AND INVESTIGATING SUCH CASE

NAME: CSA Foster

ADDRESS: 3228 GUN CLUB RD WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME) facts (WORK) 561-688-3000

CAN TESTIFY TO: FACTS OF CASE

NAME: Artemio Hernandez

ADDRESS 1802 NW 21st Ter, Boynton Beach, FL 33436

PHONE NUMBERS (HOME) 561 767 2031 (WORK) _____

CAN TESTIFY TO: Witness

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) 0 (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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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: _____

SCANNED
APR 03 2021

TESTING FACILITY TASK REPORT

AGENCY:

SUBJECT:

DATE:

BEGINNING TIME:

CASE NUMBER:

VIDEO DVD NUMBER:

ENDING TIME:

BREATH TESTS RESULTS: 1) R TIME A.M. P.M. 2) n/a TIME A.M. P.M.

3) n/a TIME A.M. P.M. 4) n/a TIME A.M. P.M.

BREATH OPERATOR:

MAINTENANCE TECHNICAN:

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE:

CLOTHING:

MEDICAL CONDITIONS:

MEDICATIONS:

OTHER:

eyes are glassy & bloodshot
odor of unknown alcoholic beverage on breath
subject stated I had a couple of beers with my brother - observation period

REFUSED

COMMENTS:

arrived at center A/O conducted 20 minute observation period at 2205 hrs

subject refused to perform breath test

A/O read I/C & subject understood I/C

subject refused to perform breath test

A/O read rights on scene

A/O did not conduct Q&A

subject invoked right to counsel

REFUSED

SCANNED
APR 03 2021

SUBJECT: Seitter, James M

CASE NUMBER: 21 051518

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 IVT Cissin #24091 of the PBSO

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) Read on camera

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) Read on camera

SCANNED
APR 03 2021

SUBJECT: Spitter, James M CASE NUMBER: 21 05 1518

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: _____

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

I, Investigator JACKIE CISSON, a duly certified Law Enforcement Officer or Correctional Officer,
(Person reading Implied Consent Warning)
am a member of Palm Beach County Sheriffs Office, and I do swear

(Name of enforcement agency)
or affirm that on or about the SECOND day of April, 2021, at 9:53 PM

DRIVER JAMES MICHAEL SEITTER
(Type or Print) FIRST MIDDLE OR MAIDEN LAST


DL # S360453611860, state of FL, was placed under lawful arrest for

the offense of DUI by Investigator JACKIE CISSON and
(Name of Arresting Officer)

issued Citation # AEA7EHE

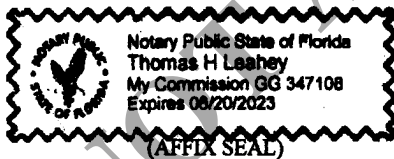
That on or about the SECOND day of April, 2021, at 10:31 PM
in Palm Beach County,

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 (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 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 this 03 day of April, 2021
by JAV J CISSON #
who is personally known to me or who has produced
EVAN as identification.
Notary Public T. Leahy

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title _____

Date _____

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.



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

PBSO CASE # 21051518 PBSO ZONE 6-32

AGENCY CASE # _____ CRASH CASE # _____

TIME OF STOP/CRASH 20:08 DATE 04/02/2021 DAY _____

SUBJECT'S NAME SEITTER JAMES M RACE W SEX M
LAST FIRST MID

HGT 6'00 WGT 200 DOB 05/26/1961

LOCATION GATEWAY BLVD / SW 23RD ST. BOYNTON BEACH, FL 33436

ARRESTING OFFICER'S NAME & ID D/S CISSON 24091 AGENCY Palm Beach County Sheriff's Office

DIVISION: VCD/DUI

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 2205

ARREST TIME 21:53

BREATH RESULTS:

REFUSED

3.
4.

TESTING OFFICER'S ID 19183 PBSO VIDEOTAPE # N/A

SCANNED
APR 03 2021



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"/>	Other:		
	<input type="checkbox"/>	Other:		

REVIEW COMPLETED BY

Booking Number: 2021007998	Date: 4/03/21
	Specialist Name/ID: J. Beck/9007

SCANNED
 APR 03 2021