

20CT1966 NB

ARREST / NOTICE TO APPEAR

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

1

JUVENILE

A D M I N I S T R A T I O N	OBTS Number		Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 514 20-000503		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Citation 1		JUVENILE							
	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		Multiple Clearance Indicator 1													
	Location of Arrest (Including Name of Business) 6752 W INDIANTOWN RD JUPITER, FL 33458						Location of Offense (Business Name, Address) 6752 W INDIANTOWN RD, JUPITER, FL 33458											
	Date of Arrest 02/03/2020		Time of Arrest 02:14		Booking Date 02/03/2020		Booking Time 02:24		Jail Date		Jail Time		Location of Vehicle					
	Name (Last, First, Middle) O CONNOR, JASON THOMAS																	
	Alias:																	
	Race W - White B - Black O - Oriental/Asian W		Sex M		Date of Birth 07/13/1978		Height 6'01		Weight 170		Eye Color HAZEL		Hair Color BROWN		Complexion LIGHT		Build Medium	
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Married Status S		Religion CHRISTIAN		Indication of Alcohol Influence Yes <input type="checkbox"/> No <input type="checkbox"/>		Drug Influence Yes <input type="checkbox"/> No <input type="checkbox"/>		Unit <input type="checkbox"/>			
	Local Address (Street, Apt. Number) 8194 SE COUNTRY ESTATES WAY, JUPITER, FL 33458				(City) JUPITER		(State) FL		(Zip) 33458		Phone (863) 697-8723		Residence Type: 1. City 3. Florida 2. County 4. Out of State 2		Address Source FL DL			
	Permanent Address (Street, Apt. Number) 8194 SE COUNTRY ESTATES WAY, JUPITER, FL 33458				(City) JUPITER		(State) FL		(Zip) 33458		Phone (863) 697-8723		Address Source FL DL		Occupation			
Business Address (Name, Street) 8194 SE COUNTRY ESTATES WAY, JUPITER, FL 33458				(City) JUPITER		(State) FL		(Zip) 33458		Phone (863) 697-8723		Address Source FL DL		Occupation				
DL Number, State 0256438782530 / FL		Sec. Sec. Number [REDACTED]		INS Number [REDACTED]		Place of Birth (City, State) DES MOINES, IA		Citizenship US										
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile		<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor								
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile		<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor								
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ Name (Last, First, Middle) _____ Residence Phone _____ <input type="checkbox"/> Legal Custodian _____ Address (Street, Apt. Number) _____ (City) _____ (State) _____ (Zip) _____ Business Phone _____ Notified by: (Name) _____ Date _____ Time _____ JUVENILE DISPOSITION 1. Held/Processed within Department and Released 2. TOT IAC 3. Incarcerated Released To: (Name) _____ Relationship _____ Date _____ Time _____ 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. _____ School Attended _____ Grade _____ Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Description of Property _____ Value of Property _____ Drug Activity: N. N/A, P. Possess, S. Sell, 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, E. Heroin, H. Hallucinogen, M. Marijuana, O. Opium/Deriv., P. Paraphernalia/Equipment, S. Synthetic, U. Unknown, Z. Other																		
Charge Description DUI - BAC/BRAC OVER .15 - OR - MINOR IN VEHICLE		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Citation Number 316.193(4)		Violation of ORD #						
Charge Description		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Citation Number		Violation of ORD #						
Charge Description		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Citation Number		Violation of ORD #						
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 type="checkbox"/> T.O.T. County Jail				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) North County PALM BEACH GARD										
								Court Date and Time 03/04/2020 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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.																		
Signature of Defendant (or Juvenile and Parent/Custodian) [Signature] Date Signed _____																		
ROSD for Other Agency				Signature of Arresting Officer [Signature] 383				Name Verification (Printed by Arrestee) FEB 03 4 13										
<input type="checkbox"/> Dangerous <input type="checkbox"/> Restricted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other				Name of Arrestee (Print) YOCHUM, CRAIG				ID # 1185										
Transporting Officer [Signature]				POACH #		ID # 383		Agency JPD		Witness here if subject signed with an "X".								

FEB 03 2020 0229759

3560

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

Agency ORI Number FL 0501700	Agency Name JUPITER POLICE DEPARTMENT	Agency Report Number 5 4 20-000503
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:
Name (Last, First, Middle) O CONNOR, JASON THOMAS		Alias Race W Sex M Date of Birth 07/13/1978
Charge Description 316.193(4) DUI - BAC/BRAC OVER .15 -OR- MINOR IN VEHICLE		Charge Description
Victim's Name (Last, First, Middle) State Of Florida		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.</p> <p>The Person taken into custody... <input checked="" 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.</p> <p>On the <u>3</u> day of <u>February</u>, <u>2020</u> at <u>02:14</u> (Specifically include facts constituting cause for arrest.)</p> <p>On 02/03/2020 at approximately 0209 hours, I was completing a traffic stop in the parking lot of 6752 W Indiantown Rd. (Comfort Inn) in the Town of Jupiter, Palm Beach County, FL. At the time, I was standing outside my unmarked Jupiter Police Department patrol vehicle (vehicle 1916), I was wearing a JPD uniform clearly identifying myself as a Jupiter Police Officer, and I was wearing my department-issued Axon body camera.</p> <p>I was advised by a security officer for the hotel that an individual I was on a prior call with, Jason O Connor (w/m; 07/13/1978), had entered his vehicle in the parking lot on the east side of the building. I first made contact with O Connor in the rear of the Fairfield Inn parking lot (6748 W Indiantown Rd.) at 2224 hours on 02/02/2020. O Connor was originally called in as a drunk pedestrian, who had wandered into the Fairfield hotel lobby, causing a disturbance. During my first contact with O Connor, he was heavily slurring his speech, had bloodshot/glassy eyes, had the strong odor of an unknown alcoholic beverage on his breath which intensified as he spoke, was rambling incoherently, and could barely stand up on his own. It was determined during that call that O Connor had a hotel room at the Comfort Inn (room 201) and I assisted him to his room due to his extreme level of intoxication. While walking to his room, O Connor remotely lowered the tailgate of a gray 2017 Ford pickup truck bearing FL tag # IUGY47. The truck was parked on the west side of the Comfort Inn, facing east. See JPD incident # 20-034038.</p> <p>I drove from the west side of the Comfort Inn parking lot to the east side of the parking lot, where O Connor's vehicle was parked. As I neared the east side of the parking lot, I could see O Connor sitting in the driver seat of his vehicle and the headlights were on. Officer Anderson, who was also on scene, pulled to the rear of the truck and I pulled in front of the truck. I positioned my patrol vehicle in a manner that O Connor could not move from his parking space. I blocked O Connor in because I easily identified him while nearing his vehicle and there was no feasible way that O</p>		
SWORN AND SUBSCRIBED BEFORE ME NOTARY PUBLIC / CLERK OF COURT DATE <u>02/03/2020</u>	Notary Public State of Florida Thomas H Leahy My Commission GG 347108 Expires 06/20/2023	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER YOCHEM, CRAIG (1185) NAME OF OFFICER (PLEASE PRINT) DATE <u>02/03/2020</u>

SCANNED

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

OSIS Number	Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 5 4 20-000503
Charge Type: Check as many as apply.					Special Notes:
<input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other					

Name (Last, First, Middle) O CONNOR, JASON THOMAS	Race W	Sex M	Date of Birth 07/13/1978
---	------------------	-----------------	------------------------------------

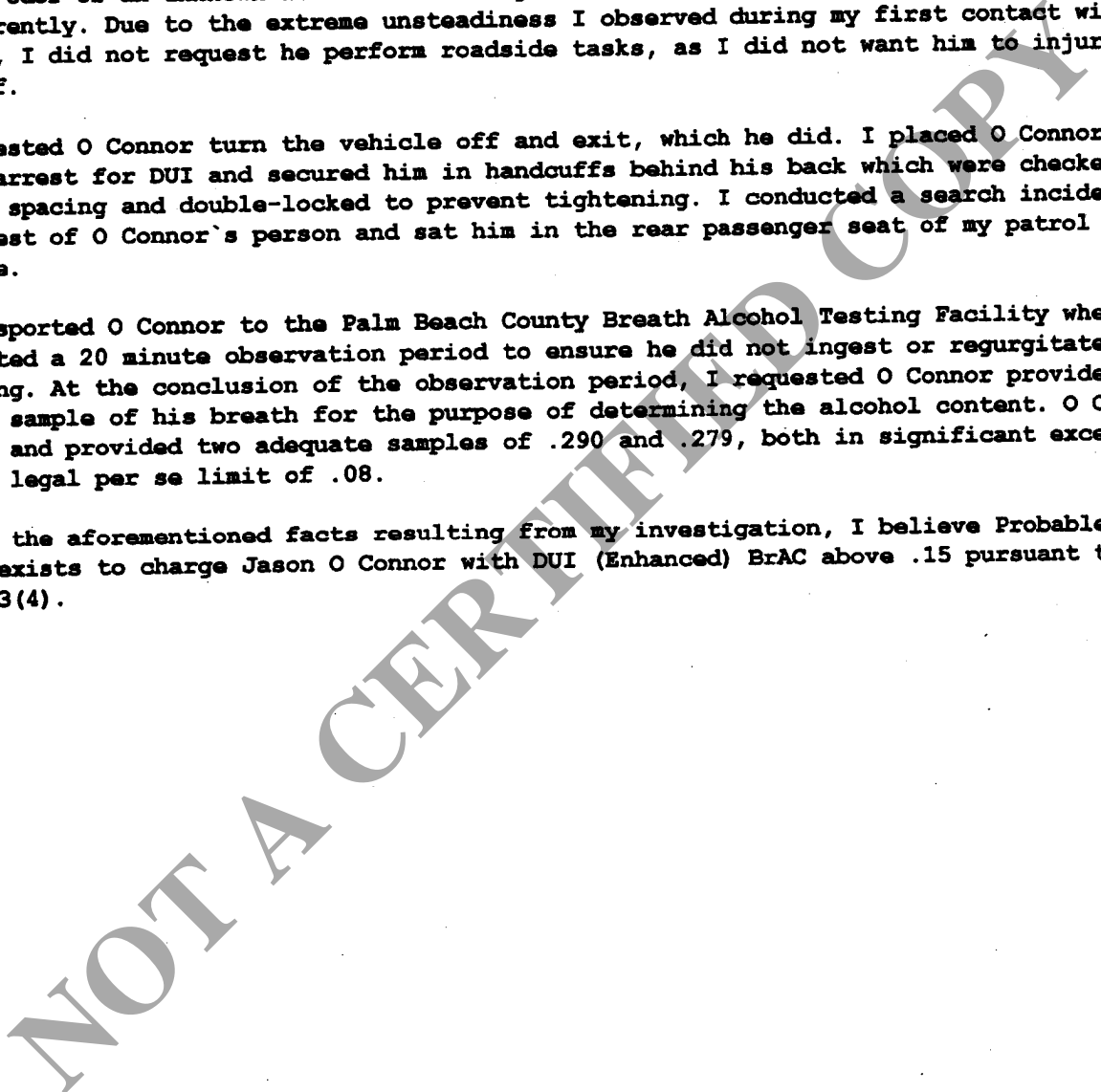
Connor had become sober in the four hours that had elapsed since my first contact with him.

When I exited my patrol vehicle, I observed O Connor's truck was running. I made contact with O Connor and observed he still had bloodshot/glassy eyes, slurred speech, and the strong odor of an unknown alcoholic beverage on his breath. O Connor continued to ramble incoherently. Due to the extreme unsteadiness I observed during my first contact with O Connor, I did not request he perform roadside tasks, as I did not want him to injure himself.

I requested O Connor turn the vehicle off and exit, which he did. I placed O Connor under arrest for DUI and secured him in handcuffs behind his back which were checked for proper spacing and double-locked to prevent tightening. I conducted a search incident to arrest of O Connor's person and sat him in the rear passenger seat of my patrol vehicle.

I transported O Connor to the Palm Beach County Breath Alcohol Testing Facility where I conducted a 20 minute observation period to ensure he did not ingest or regurgitate anything. At the conclusion of the observation period, I requested O Connor provide a lawful sample of his breath for the purpose of determining the alcohol content. O Connor agreed and provided two adequate samples of .290 and .279, both in significant excess of the legal per se limit of .08.

Due to the aforementioned facts resulting from my investigation, I believe Probable Cause exists to charge Jason O Connor with DUI (Enhanced) BrAC above .15 pursuant to FSS 316.193(4).



SWORN AND SUBSCRIBED BEFORE ME NOTARY PUBLIC / CLERK OF COURT / OFFICER OF THE STATE OF FLORIDA Commission GG 347108 Expires 08/20/2023 02/03/2020 DATE	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER YOCUM, CRAIG (1185) NAME OF OFFICER (PLEASE PRINT) 02/03/2020 DATE	PAGE 2 of 2
---	---	-----------------------

**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: 80-006239 Software: 8100.27
Date of Test: 02/03/2020

Date of Last Agency Inspection: 01/17/2020
Observation Period Began: 02:45
Subject's Name: JASON T O CONNOR

DOB: 07/13/1978 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	03:09
	Air Blank	0.000	03:10
	Control Test	0.081	03:10
	Air Blank	0.000	03:11
	Subject Sample #1	0.290	03:11
	Air Blank	0.000	03:12
	Air Blank	0.000	03:14
	Subject Sample #2	0.279	03:14
	Air Blank	0.000	03:15
	Control Test	0.080	03:15
	Air Blank	0.000	03:16
	Diagnostics Check	OK	03:16

Cylinder Lot: 17919080A1
Exp: 08/05/2021

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 LEAHEY, 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. Leahy Date: 02/03/2020
Signature

Sworn to (or affirmed) before me this 03rd day of February, 2020

Signature of Notary Public-State of Florida: [Signature] 383 Printed Name of Notary Public-State of Florida: Ofc C Yochum #383

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.

SCANNED
FEB 03 2020



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

PBSO CASE # 20-033509 PBSO ZONE 3-16

AGENCY CASE # 20-000503 CRASH CASE # _____

TIME OF STOP/CRASH 0209 DATE 02/03/2020 DAY Monday

SUBJECT'S NAME O Connor Jason T RACE W SEX M
LAST FIRST MID

HGT 6'01" WGT 170 DOB 07/13/1978

LOCATION 6752 W Indiantown Rd. Jupiter, FL 33458

ARRESTING OFFICER'S NAME & ID Craig Yochum #383 AGENCY Jupiter PD

DIVISION: Road Patrol

NOTIFIED BY COMMO Yes
 ARRIVAL AT FACILITY 0245
 ARREST TIME 0214

BREATH RESULTS:

- 1) .290
- 2) .279
- 3) N/A
- 4) N/A

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

Jason T

CASE NUMBER: 70-9003

QUESTIONS AND ANSWERS

YOU MAY STOP ASKING THE POLICE OFFICERS WITH THESE RIGHTS IN MIND, YOU MAY ANSWER ONLY THE QUESTIONS YOU WANT TO ANSWER AS YOU LIKE

WERE YOU DRIVING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT?

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 DID YOU EAT?

WHAT DID YOU DRINK THE LAST THREE HOURS?

HAVE YOU BEEN DRINKING? WHAT?

WHERE? WITH WHOM?

AND YOUR LAST DRINK?

CAN YOU FEEL ANY PAIN OR SWELLING?

ARE YOU UNDER THE INFLUENCE OF ANY DRUGS?

HAVE YOU BEEN IN ANY ACCIDENTS?

WHEN DID YOU LAST HAVE AN ACCIDENT?

WHAT WAS IT?

WHAT'S BEEN GOING ON?

DID YOU RECEIVE A BLOW ON THE HEAD RECENTLY?

WHEN DID YOU LAST HAVE AN ACCIDENT?

WHAT WAS IT?

ARE YOU TAKING ANY MEDICATIONS? WHO? WHY?

WHAT?

DO YOU WEAR CONTACT LENSES THAT ARE NOT CORRECTED?

DO YOU TAKE ANY MEDICATIONS? WHAT WAS YOUR LAST INJECTION?

HAVE YOU BEEN IN ANY OTHER ACCIDENTS?

DO YOU WEAR CONTACT LENSES THAT ARE NOT CORRECTED?

DO YOU TAKE ANY MEDICATIONS? WHAT WAS YOUR LAST INJECTION?

HAVE YOU BEEN IN ANY OTHER ACCIDENTS?

DO YOU WEAR CONTACT LENSES THAT ARE NOT CORRECTED?

DO YOU TAKE ANY MEDICATIONS? WHAT WAS YOUR LAST INJECTION?

HAVE YOU BEEN IN ANY OTHER ACCIDENTS?

TESTING FACILITY TASK REPORT

AGENCY: _____

SUBJECT: Alcohol - Don Julio

CASE NUMBER: 20-0230

DATE: 08/20/00

VIDEO TAPE NUMBER: 10

STARTING TIME: 02:07

ENDING TIME: 02:11

TESTING RESULTS: 0.290 TIME: 02:11 AM/PM

BREATH OPERATOR: T. Leary # 19183

MAINTENANCE TECHNICIAN: J. Kulecho # 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: slurred, thick

ATTITUDE: talkative, belligerent, rambling

CLOTHING: gray shorts, blue/white 1/2 shirt, gray t-shirt

HAIR: gray

SCARS: none

OTHER: eyes glassy, bloodshot

odor of alcohol on breath, alcoholic beverage on table

A stated he had a drink of Don Julio - testing

COMMENTS: arrived at center. A/O contacted for breath

observing subject at 02:05 hrs.

Agreed to perform breath test.

Technician breath test results. A stated he understood breath test results.

Alcohol test results 0.290

Alcohol test results 0.290

SCANNED

FEB 03 2001

WITNESS LIST

CASE NUMBER: 20-000503

ARRESTING OFFICER: Craig Yochum

ADDRESS: 210 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME): _____ (WORK) (561) 746-6201

CAN TESTIFY TO: PC

NAME: Officer Kelly Anderson

ADDRESS: 210 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME) _____ (WORK) (561) 746-6201

CAN TESTIFY TO: On scene

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: _____

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: _____

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
FEB 23 2023



Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
I/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: 2020003757	Date: 2/3/2020
	Specialist Name/ID: B Evans / 23649

SCANNED

FEB 03 2020