

PALM BEACH COUNTY SHERIFF'S OFFICE BOOKING FACE SHEET



NAME
LAGOS, JEANINE

JACKET # 0520012
BOOKING # 2020028361
PAGE: 1 OF 1

20CT 15833 SB

ALIAS NAMES OVER 8 NAMES:

INCARCERATION DATE/TIME
12/04/2020 06:08:47

BOOKING LOCATION
MDC INTAKE

PRISONER TYPE
LOCAL CHARGES

BOOKING BY
33574

DOB
04/22/1993

RACE/SEX
W/F

HAIR COLOR
BRO

EYE COLOR
HAZ

AGE AT BOOKING
27

HEIGHT
5 FT 06 IN

WEIGHT
125

SSN
YES



ADDRESS
4296 NW 5 DR

CITY
DEERFIELD BEACH

STATE ZIP CODE
FL 33442

COUNTRY OF ORIGIN
USA

ID #
20201204019

NCIC

AFIS
2020028361

DOC #

ALIEN #

INCIDENT #
20-015759

OBTS #
5002356218

CASE #

ARREST ADDRESS
BARWICK RD/ SABAL LAKES RD

CITY
DELRAY BEACH

STATE ZIP CODE
FL 12345

ARREST DATE
12/04/2020

ARREST TIME
01:20

BOOKING DATE
12/04/2020

BOOKING TIME
09:17

WARRANT #

COURT DIVISION
D

CURRENT BOND
\$0.00

IN CUSTODY BOOKING

ARRESTING OFFICER
WINDSOR, NICHOLAS

ARRESTING AGENCY
40-DELRAY BEACH

TRANSPORT OFFICER
WINDSOR

TRANSPORT AGENCY
40-DELRAY BEACH

CASE TYPE
TRAFFIC MISDEMEANOR

HOLDS
NO

NOTE

CASE FLAG
OWN RECOG

STATUTE	COUNT	DESCRIPTION
316.193 1A (MS)	1	DUI-UNLAW BLD ALCH - DUI INFLUENCE OF ALCOHOL OR DRUGS

VOFC	BOND TYPE	CURRENT BOND
<input type="checkbox"/>	O.R.	\$0.00

NOT A CERTIFIED COPY

SCANNED
DEC 05 2020

Handwritten initials

0520012

20CT5833

3067

ARREST / NOTICE TO APPEAR

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

OBTS Number	Agency ORI Number 0500400	Agency Name Delray Beach Police Department	Agency Report Number (N.T.A.'s only) 410 20-015759
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		Multiple Clearance Indicator 1

Location of Arrest (Including Name of Business) BARWICK RD/SABAL LAKES RD DRB, FL		Location of Offense (Business Name, Address) 13099 BARWICK RD/SABAL LAKES RD, DELRAY BEACH, FL	
Date of Arrest 12/04/2020	Time of Arrest 01:20	Booking Date 12/04/2020	Booking Time 01:30
Jail Date 12/04/2020	Jail Time 05:09	Location of Vehicle 13099 BARWICK RD/SABAL	

Name (Last, First, Middle) LAGOS, JEANINE		Alias:		Alias (Name, DOB, Soc. Sec. #, Etc.)	
Race W. White B. Black	Sex F	Date of Birth 04/22/1993	Height 5'06	Weight 125	Eye Color HAZEL
Hair Color BROWN	Complexion FAIR	Build SMALL	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		
Local Address (Street, Apt. Number) 4296 NW 5 DR, DEEFIELD BEACH, FL 33442		Phone (561) 808-3074		Residence Type: 1. City 3. Florida 2. County 4. Out of State 3	
Permanent Address (Street, Apt. Number) 4296 NW 5 DR, DEEFIELD BEACH, FL 33442		Phone (561) 808-3074		Address Source FL DL	
Business Address (Name, Street)		Phone		Occupation	
D/L Number, State L220420936420 / FL	Soc. Sec. Number	INS Number	Place of Birth (City, State) ATLANTA, GA, United	Citizenship US	

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	Name (Last, First, Middle)	Residence Phone
Address (Street, Apt. Number)	(City) (State) (Zip)	Business Phone
Notified by: (Name)	Date	Time
Released To: (Name)	Relationship	Date
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.		Grade
<input type="checkbox"/> Yes, by:	<input type="checkbox"/> No:	Value of Property

Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Disperse/ 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 Description DRIVING WHILE UNDER INFLUENCE	Statute Violation Number 316.193(DA)	Violation of ORD #
Drug Activity N	Drug Type	Amount / Unit
Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Warrant / Capias Number	Bond	

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
Check which apply: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond	<input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> South County Mental Health
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) South County 200 W Atlantic Ave Delray Beach, FL 33444	No Photo Available
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.	Court Date and Time 12/29/2020 08:30:00	
Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed

HOLD for Other Agency	Signature of Arresting Officer	Name Verification (Printed by Arrestee)
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other	(PRINT)
Intake Date	I.D. # WINDSOR, NICHOLAS 1029	Agency DBPD
Pouch #	Transporting Officer WINDSOR 1029	Witness here if subject signed with an "X"

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 4TH DAY OF DECEMBER 2020 AT 0042 AM PM
SUBJECT: LAGOS, JEANINE CASE NUMBER: DBPD #20-15759
AGENCY: DELRAY BEACH PD ARRESTING OFFICER: WINDSOR #1029

PERSONAL CONTACT

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

The following occurred in the City of Delray Beach, County of Palm Beach, FL.
On 12/04/20 at 0042hrs I observed a silver 2015 Toyota Corolla traveling north in the 200 block of N. Swinton Ave. I was traveling south on N. Swinton Ave. and passed the Toyota. The Toyota was driving on the double yellow line. After the Toyota passed my marked Delray Beach Police patrol vehicle, I observed the Toyota cross the double yellow line and travel north in the southbound travel lane of N. Swinton Ave. I turned around and followed the Toyota. The Toyota turned left (west) onto Lake Ida Rd. and began traveling at a high rate of speed. I continued to follow the Toyota west on Lake Ida Rd. and was able to pace the speed of the Toyota at 68mph in the 3700 block of Lake Ida Rd. The posted speed limit on Lake Ida Rd. is 35mph. I attempted to conduct a traffic stop in the 4000 block of Lake Ida Rd. by activating my emergency lights and siren of my patrol vehicle. The Toyota did not stop and made a right turn (north) onto Barwick Rd. The Toyota continued traveling north for 1/2 mile failing to stop for my emergency lights and siren. The Toyota came to final stop at the intersection of Barwick Rd. and Sabal Lakes Rd. I met with the white female driver who was sitting in the driver seat of the Toyota. I identified the white female driver by her FL DL as Jeanine Lagos. Lagos was the only person inside the Toyota. The Toyota's engine was running and the vehicle key was in the ignition. Lagos stated she started driving at an unidentified friend's residence in Delray Beach, FL. and was on her way to Walmart (3200 Old Boynton Road, Boynton Beach, FL 33436) when she got pulled over.

OBSERVATION OF DRIVER:

When I approached Lagos, I immediately smelled a strong odor of an unknown alcoholic beverage coming from Lagos. Lagos' eyes were red and had a glassy appearance. Lagos' speech was slurred and thick. Lagos had a slow response to questions. Lagos went through mood swings from upset/crying to laughing to becoming angry after arrest. After Lagos exited the Toyota to perform roadsides, I still smelled the odor of an unknown alcoholic beverage coming from Lagos. During transport to the PBCJ BAT, Lagos cried and wanted me to take her home instead of arresting her. While sitting in the observation chair at the PBCJ BAT, Lagos fell out of the chair onto the floor. Lagos did not suffer any visible injuries from falling out of the chair. While in the holding cell at the PBCJ BAT, Lagos had to placed in handcuffs for her safety due to her hitting the cell door with her arms and hands.

DRIVER'S STATEMENTS:

I asked Lagos if she knew why she was pulled over and she replied because of a stop sign. Lagos stated she knew her rights for the stop sign and she did nothing wrong. Lagos denied consuming any alcoholic beverages, prescription medications and over the counter medications prior to driving. Lagos stated her eyes were red and glassy because she wore contact lenses. Lagos stated she did not know she was traveling 68mph and continue to talk about a stop sign. During the entire time I followed the Toyota there were no intersections with stop signs that we traveled pass. Lagos stated she did nothing wrong and wanted to go home to play Animal Crossing. During roadsides Lagos stated she was nervous because she did not want to do bad because she recently did yoga. Lagos denied feeling any effects of alcohol.

ODORS:

Lagos had a strong odor of an unknown alcoholic beverage coming from her person.

GENERAL OBSERVATIONS

SPEECH: Slurred and Thick

ATTITUDE: Initially Cooperative and Later Became Upset Having Several Mood Swings.

CLOTHING: Black Long Sleeve Shirt, Multi Color Pants with Multi Color Shoes

MEDICAL/OTHER: Anxiety With No Medications

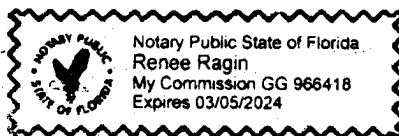
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 4th day of December 2020 by Ofc. Windsor #1029

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

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



SCANNED
DEC 05 2020

SUBJECT: LAGOS, JEANINE

CASE NUMBER _____

DBPD #20-15759

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:

Lagos did not follow the stimulus light with her eyes and had to be instructed to do so several times. Lagos swayed while standing still.

WALK & TURN:

Lagos swayed while standing still. Lagos did not stay in the instructional phase position as instructed. Lagos had difficulty maintaining her balance. Lagos did not count out loud while taking steps. Lagos took more than nine steps on each series of steps. Lagos did not turn around as instructed. Lagos used her arms for balance. Lagos stepped off of the line several times.

ONE LEG STAND:

Lagos swayed while standing still. Lagos did not count as instructed. Lagos initially lifted her left leg off the ground and extended her leg behind her. I had to instruct Lagos to lift her leg straight out in front of her. Lagos used her arms for balance. Lagos hopped around during the roadside.

FINGER TO NOSE:

Lagos swayed while standing still. Lagos did not touch the tip of her nose on either attempt. Lagos did not keep her eyes closed as instructed. Lagos did not keep her head tilted back as instructed.

ROMBERG ALPHABET:

Lagos swayed while standing still. Lagos stated she knew the English Alphabet. Lagos stopped reciting at the letter "H" and began speaking in another language. Lagos then stated she knew the Spanish Alphabet. I asked Lagos if she was more comfortable with numbers instead of the alphabet and she replied numbers. Lagos stated she could only count to 30 to 40. I instructed Lagos to count 1 to 30. Lagos recited 1-20 correctly but repeated the number "20" several times before reciting the rest of the numbers. Lagos did not keep her eyes closed or head tilted backward as instructed.

BREATH TEST RESULTS: 1) .217 2) .202 3) 4)

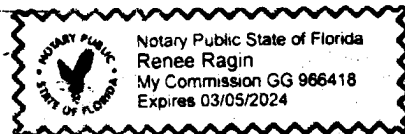
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigation Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 4th day of December 2020 by Ofc. Windsor #1029

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

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



SCANNED
DEC 05 2020

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 TECHNICAN:

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE:

CLOTHING:

MEDICAL CONDITIONS:

MEDICATIONS:

OTHER:

Eyes bloodshot
Odor of unknown alcoholic beverage on breath.

COMMENTS:

Arrived at center A/O started 20 minute observation period at 01:51 hrs.
Subject agreed to take breath test.
Tech read breath test results.
Subject stated she understood test results.
A/O read rights.
Subject stated she understood rights.
A/O attempted Q&A.
Subject refuse to answer questions.

SCANNED
DEC 05 2020



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

PBSO CASE # 20-133179 PBSO ZONE 4-11

AGENCY CASE # 20-15759 CRASH CASE # N/A

TIME OF STOP/CRASH 0042 DATE 12/04/20 DAY FRIDAY

SUBJECT'S NAME LAGOS, JEANINE RACE W SEX F

HGT 5'06" WGT 125 DOB 04/22/93

LOCATION BARWICK RD/SABAL LAKES RD, DELRAY BEACH, FL

ARRESTING OFFICER'S NAME & ID WINDSOR #1029 AGENCY DELRAY BEACH PD

DIVISION: TRAFFIC

NOTIFIED BY COMMO YES

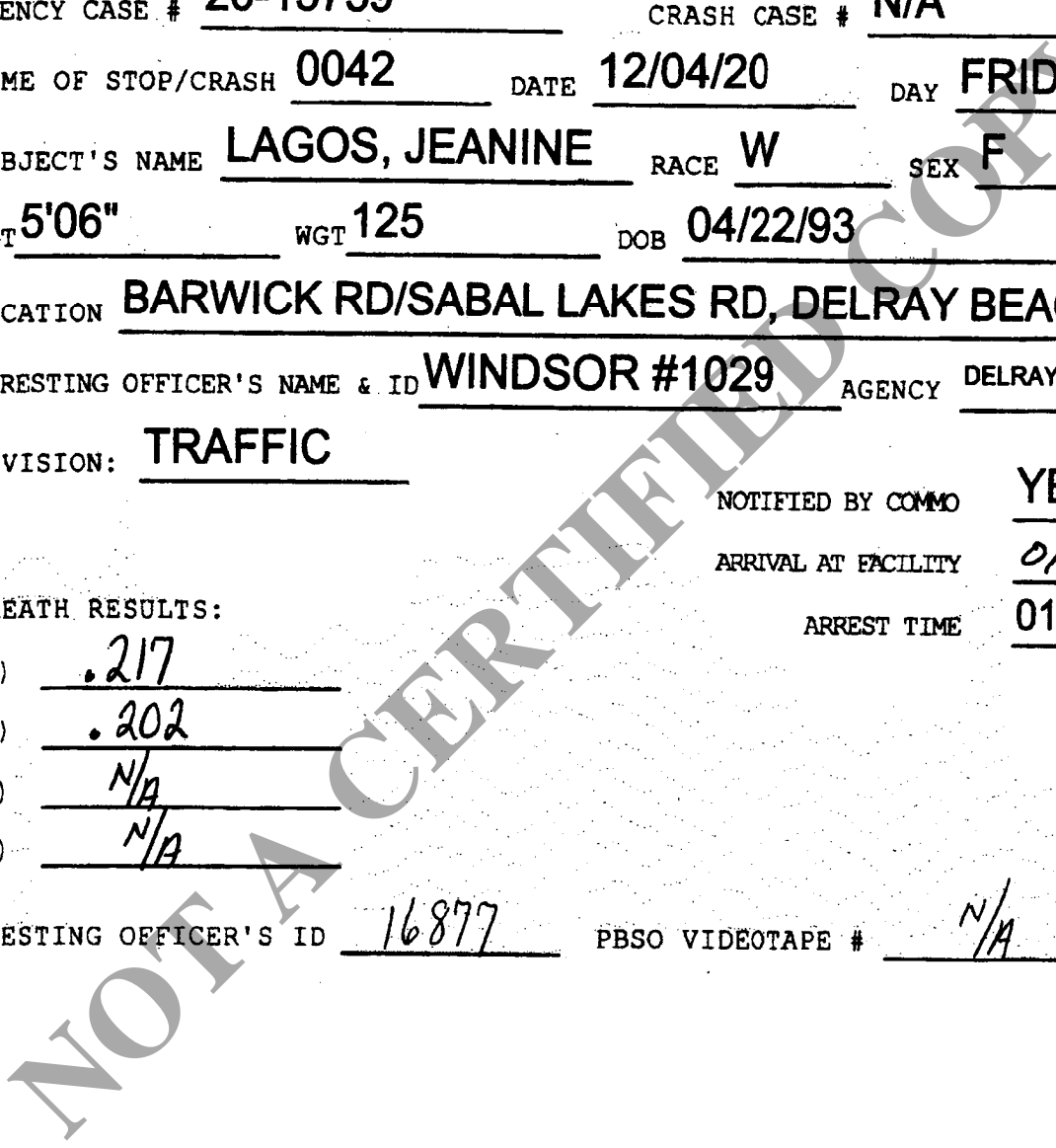
ARRIVAL AT FACILITY 0151

ARREST TIME 0120

BREATH RESULTS:

- 1) .217
- 2) .202
- 3) N/A
- 4) N/A

TESTING OFFICER'S ID 16877 PBSO VIDEOTAPE # N/A



SCANNED
DEC 05 2020

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: 80-006240 Software: 8100.27
Date of Test: 12/04/2020

Date of Last Agency Inspection: 11/13/2020
Observation Period Began: 01:51
Subject's Name: JEANINE LAGOS

DOB: 04/22/1993 Sex: F

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	02:18
	Air Blank	0.000	02:19
	Control Test	0.080	02:19
	Air Blank	0.000	02:20
	Subject Sample #1	0.217	02:20
	Air Blank	0.000	02:21
	Air Blank	0.000	02:23
	Subject Sample #2	0.202	02:23
	Air Blank	0.000	02:24
	Control Test	0.080	02:24
	Air Blank	0.000	02:25
	Diagnostics Check	OK	02:25

Cylinder Lot: 14020080A1
Exp: 07/05/2022

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 RENEE M RAGIN, 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: 12/04/20
signature

Sworn to (or affirmed) before me this 04 day of Dec., 2020
Signature of Notary Public-State of Florida Ofc. N. Windsor #1029
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.

SCANNED
DEC 05 2020

SUBJECT: _____ CASE NUMBER: 100-1-159

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: MC [Signature]

SCANNED
DEC 05 2020

SUBJECT: _____

CASE NUMBER: _____

D-PTD 1-1-19

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) _____

SCANNED
DEC 05 2020



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 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: 2020028361	Date: 12/05/2020
	Specialist Name/ID: AM/31562

SCANNED
DEC 05 2020