

ARREST / NOTICE TO APPEAR

20112350

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

AD M I N I S T R A T I O N	OBTS Number	Agency ORI Number 0500400	Agency Name Delray Beach Police Department	Agency Report Number (N.T.A.'s only) 4, 0 20-012952	
D E F E N D A N T	Charge Type: Check as many as apply	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 <input type="checkbox"/>	If Weapon Seized	Enter Type None/not Applicable	
	Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)			
	NE 2ND AVE/GEORGE BUSH BLVD DELRAY BEACH	799 NE 2ND AVE/GEORGE BUSH BLVD, DELRAY BEACH, FL			
	Date of Arrest 10/01/2020	Time of Arrest 21:23	Booking Date 10/01/2020	Booking Time 21:33	
			Jail Date 10/02/2020	Jail Time 00:28	
				Location of Vehicle 799 NE 2ND AVE/GEORGE	
C O D E D	Name (Last, First, Middle) EBREO, JENELL CHRISTINE				
	Alias: _____ Alias (Name, DOB, Soc. Sec. #, Etc.) _____				
	Race W - White I - American Indian B - Black O - Oriental/Asian S, Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)	Sex F	Date of Birth 05/09/1984	Height 5'04	Weight 130
	Eye Color BROWN	Hair Color BROWN	Complexion FAIR	Build SMALL	
Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	
3631 WHISPERING CYPRESS LN, BOYNTON BEACH, FL 33435				(561) 531-2580	
Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	
3631 WHISPERING CYPRESS LN, BOYNTON BEACH, FL 33435				(561) 531-2580	
Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	
				Occupation FL DL	
D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship	
E160423846690 / FL			MIDLAND, MI, United	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	Business Phone				
Address (Street, Apt. Number)	(City)	(State)	(Zip)		
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 <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.					
Property Crime? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property VEHICLE/LANDSCAPING		Value of Property \$2,000	
Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Sample D. Deliver K. Use	J. 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. Opiate/Opium	
				P. Pharmaceutical/ Equipment S. Synthetic	
				U. Unknown Z. Other	
Charge Description DRIVING WHILE UNDER INFLUENCE	Statute Violation Number 316.193(1A)	Violation of ORD #			
Drug Activity	Drug Type N	Amount / Unit	Offense #	Bond OR	
			Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
			Warrant / Capias Number		
Charge Description	Statute Violation Number	Violation of ORD #			
Drug Activity	Drug Type	Amount / Unit	Offense #	Bond	
			Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
			Warrant / Capias Number		
Charge Description	Statute Violation Number	Violation of ORD #			
Drug Activity	Drug Type	Amount / Unit	Offense #	Bond	
			Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
			Warrant / Capias Number		
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 applies: <input type="checkbox"/> Released G.E. <input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail	PROPERTY - Received By	Released By	Released To		
<input type="checkbox"/> Posted Bond <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	Location (Court, Room)				
<input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court	South County 200 W Atlantic Ave Delray Beach, FL 33444				
but must comply with instructions on Page 2.	Court Date and Time 10/29/2020 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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.					
Signature of Defendant (or Juvenile and Parent/Custodian)			Date Signed		
Signature of Arresting Officer			Name Verification (Printed by Arrestee)		
Name of Arresting Officer (Print) WINDSOR, NICHOLAS			ID.# 1029		
Transporting Officer WINDSOR			ID.# Agency 1029 DELRA		
HOLD for Other Agency			Witness here if subject signed with an "X".		
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Subject <input type="checkbox"/> Other	PAGE 1 OF 1				

0518856

3062

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 1ST DAY OF OCTOBER 2020, AT 2024 AM PM
SUBJECT: EBREO, JENELL CHRISTINE CASE NUMBER: DBPD #20-12952
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 10/01/20 at 2024hrs a motor vehicle crash was reported at the intersection of NE 2nd Ave. and George Bush Blvd. A white Porsche (FL Temp Tag #CTF7534) ran off the roadway and struck a traffic barrier and a tree located in the yard of 121 George Bush Blvd. I arrived on scene and observed a white Porsche in the grass resting against a palm tree located 60ft. off the roadway. The white female driver was sitting in the driver seat of the Porsche. There were no other people inside the Porsche. A witness provided me a sworn recorded statement and positively identified the white female wearing a blue and white dress as the driver of the Porsche. The witness observed the white female driver exit the Porsche from the driver seat after the crash occurred. I met with the white female driver and identified her by her FL DL as Jenell Christine Ebreo. I read Ebreo Miranda Warning and she acknowledged she understood. I advised Ebreo I was on scene to conduct a DUI investigation and she acknowledged she understood. Post Miranda, Ebreo stated she was the driver of the Porsche when the crash occurred. Ebreo stated she was the only person inside the Porsche when the crash occurred.

OBSERVATION OF DRIVER:

Ebreo was unsteady while standing under her own power and was leaning against the Porsche for balance. I smelled a strong odor of an unknown alcoholic beverage coming from Ebreo. Ebreo had red and glassy eyes. Ebreo's speech was slurred and she spoke rapidly. Ebreo's statements were difficult to follow because she kept bouncing from one subject to another subject without making sense. Ebreo was cooperative at first but after arrest she would not follow simple instructions (i.e. directions to walk or stand still).

DRIVER'S STATEMENTS:

Post Miranda, Ebreo stated she was the driver of the Porsche when the crash occurred. Ebreo stated she was on her way home when the crash occurred. Ebreo stated she left El Camino (15 NE 2nd Ave. Delray Beach, FL 33444) before the crash occurred. Ebreo stated she consumed three margaritas prior to driving. Ebreo stated she consumed the three margaritas within 3 hours. Ebreo stated she finished her last margarita one hour prior to driving. Ebreo stated she thought the current time was around 2300hrs and stated she felt like it was late. The current time was 2115hrs when Ebreo was asked what time she thought it was. Ebreo stated she wanted to give a breath sample at the crash scene and I informed her several times a breath sample could not be taken at the crash scene. Ebreo agreed to perform roadsides tasks.

ODORS:

I smelled a strong odor of an unknown alcoholic beverage coming from Ebreo.

GENERAL OBSERVATIONS

SPEECH: Slurred and Rapid

ATTITUDE: Initially Polite but Later Became Uncoperative.

CLOTHING: Blue / White Dress with Tan Wedges.

MEDICAL/OTHER: None Stated

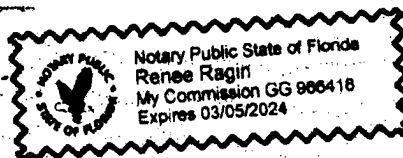
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 1st day of October 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 Knox

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



SUBJECT: EBREO, JENELL CHRISTINE CASE NUMBER DBPD #20-12952

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:

Ebreo had to be instructed several times to keep her head still during the HGN/VGN roadside. Ebreo swayed while standing still during the HGN/VGN roadside.

WALK & TURN:

Ebreo performed this roadside barefoot. Ebreo swayed while standing still. Ebreo used her arms for balance. Ebreo started to walk without being instructed to begin. Ebreo lost her balance several times while in the instructional phase position. Ebreo began with her right foot instead of her left. Ebreo did not touch heel to toe on any steps during this roadside. Ebreo used her arms for balance during the demonstration phase.

ONE LEG STAND:

Ebreo performed this roadside barefoot. Ebreo swayed while standing still. Ebreo used her arms for balance and put her foot down on the ground several times during this roadside. Ebreo did not count as instructed.

FINGER TO NOSE:

Ebreo swayed while standing still. Ebreo missed the tip of her nose and touched her top lip on several attempts.

ROMBERG ALPHABET:

Ebreo swayed while standing still. Ebreo had to be instructed to keep her eyes closed after she started the roadside. Ebreo recited the alphabet A to Z and started to sing after reciting the letter Z.

BREATH TEST RESULTS:

1) Refused	2)	3)	4)
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STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting Investigative Officer)

The foregoing instrument was sworn to, affirmed and subscribed before me this 1st day of October, 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 None

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



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

I, NICHOLAS WINDSOR, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of DELRAY BEACH POLICE DEPARTMENT, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 1ST day of OCTOBER, 20 20, at 2123 P.M. A.M.

DRIVER JENELL CHRISTINE EBREO
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# E160423846690, state of FLORIDA, was placed under lawful arrest for

the offense of DUI by OFC. WINDSOR #1029 and
(Name of Arresting Officer)

issued Citation # A1UR6YE

That on or about the 1ST day of OCTOBER, 20 20, at 2222 P.M. A.M.

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 one (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



(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before

me this 2 day of Oct, 20 20

by N. Windsor

who is personally known to me or who has produced

Renee Ragin as identification
Notary Public Renee Ragin

HSMV-BAR1001 (REV. 10/2016)

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 # 20-112530 PBSO ZONE 4-11

AGENCY CASE # 20-12952 CRASH CASE # 20-12952

TIME OF STOP/CRASH 2024 DATE 10/01/20 DAY THURSDAY

SUBJECT'S NAME EBREO, JENELL CHRISTINE RACE W SEX F

HGT 5'04" WGT 130 DOB 05/09/84

LOCATION NE 2ND AVE/GEORGE BUSH BLVD DELRAY BEACH, FL

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

DIVISION: TRAFFIC

NOTIFIED BY COMMO YES

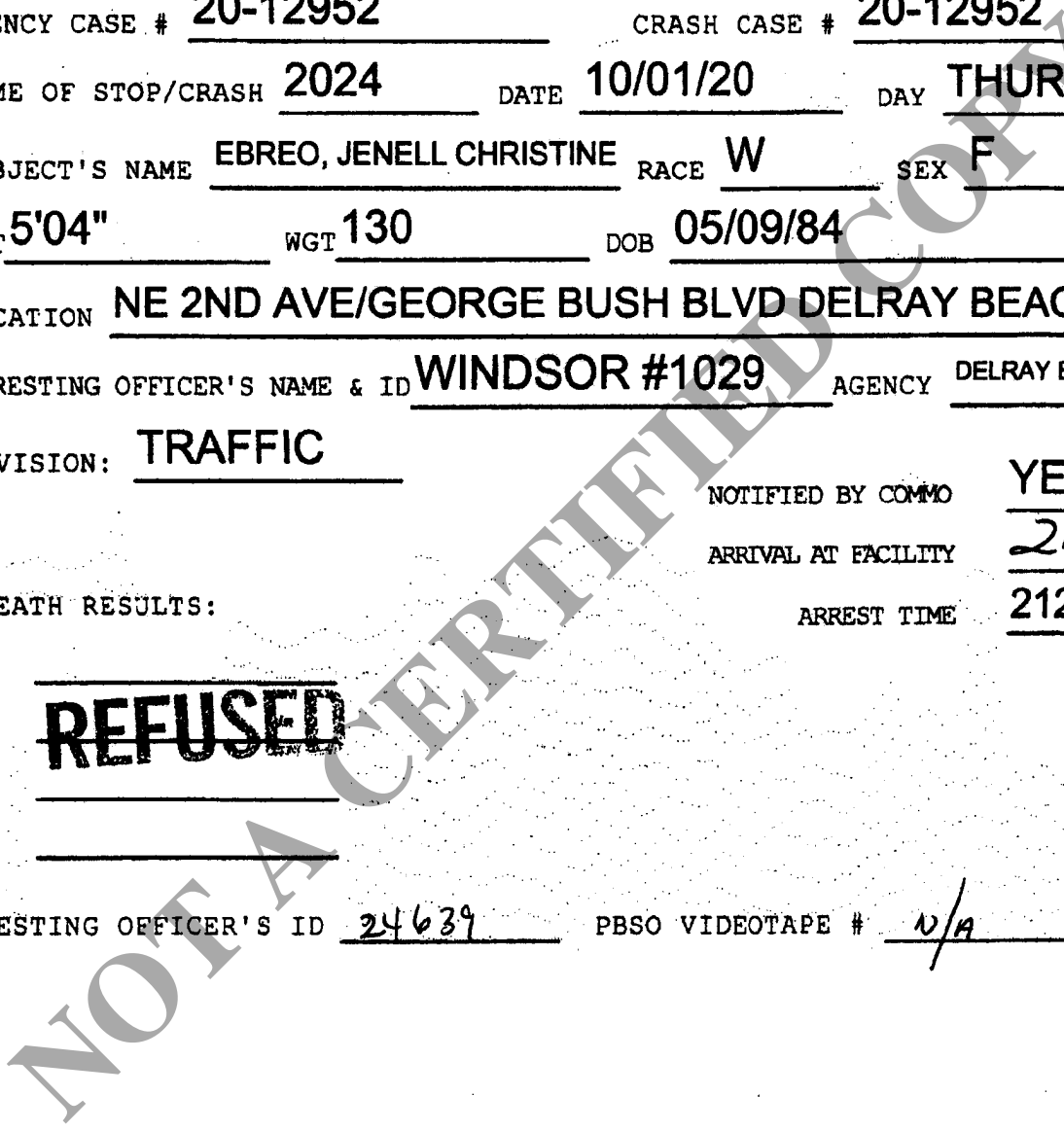
ARRIVAL AT FACILITY 2150

BREATH RESULTS:

ARREST TIME 2124

- 1) REFUSED
- 2) _____
- 3) _____
- 4) _____

TESTING OFFICER'S ID 24639 PBSO VIDEOTAPE # N/A



TESTING FACILITY TASK REPORT

AGENCY: DBPD
SUBJECT: EBREO, JENELL CHRISTINE
CASE NUMBER: 20-112530
DATE: Oct 1, 2020
VIDEO DVD NUMBER: N/A
BEGINNING TIME: 22:17
ENDING TIME: 22:25

BREATH TESTS RESULTS: 1) R TIME 22:22 A.M. P.M. 2) N/A TIME N/A 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 TECHNICIAN: J. KARLECKE# 6467

REFUSED

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED
ATTITUDE: TALKATIVE, LOUD, PROFANITY, MOOD-SWINGS
CLOTHING: BLUE/WHITE DRESS, TAN HEELS
MEDICAL CONDITIONS: NONE
MEDICATIONS: NONE

OTHER:

EYES: GLASSY AND BLOODSHOT

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 21:56 HRS.
SUBJECT: REFUSED TO TAKE TEST
A/O: READ I/C
SUBJECT: STATED SHE UNDERSTOOD I/C AND REFUSED TO TAKE TEST
A/O: READ RIGHTS
SUBJECT: STATED SHE UNDERSTOOD RIGHTS
A/O: ATTEMPTED Q&A
SUBJECT: INVOKED HER RIGHTS TO COUNSEL

REFUSED

SUBJECT: EBREO, JENELL (CASE NUMBER: DDPD 80-1952

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 NICHOLS WENDON of the DURHAM COUNTY POLICE DEPT

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) KEAU ON CAMERA

SUBJECT: EBBRO, JENELL C CASE NUMBER: DJD 11-17952

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? NO

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: OTC 11/10/52 #1029 DJD

WITNESS LIST

CASE NUMBER: DBPD #20-12952

ARRESTING OFFICER: OFC. WINDSOR #1029 DELRAY BEACH POLICE DEPARTMENT

ADDRESS: 300 W ATLANTIC AVE DELRAY BEACH, FL 33444

PHONE NUMBERS (HOME): _____ (WORK) 561-243-7800

CAN TESTIFY TO: DUI PC

NAME: C80 KOZAK #1201 DELRAY BEACH POLICE DEPARTMENT

ADDRESS: 300 W ATLANTIC AVE DELRAY BEACH, FL 33444

PHONE NUMBERS (HOME) _____ (WORK) 561-243-7800

CAN TESTIFY TO: CRASH INVESTIGATION

NAME: MICHELLE STRASSER WARDEN

ADDRESS: 11910 DUNES RD BOYNTON BEACH, FL 33436

PHONE NUMBERS (HOME) 561-445-0070 (WORK) _____

CAN TESTIFY TO: DRIVER IDENTIFICATION

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) _____

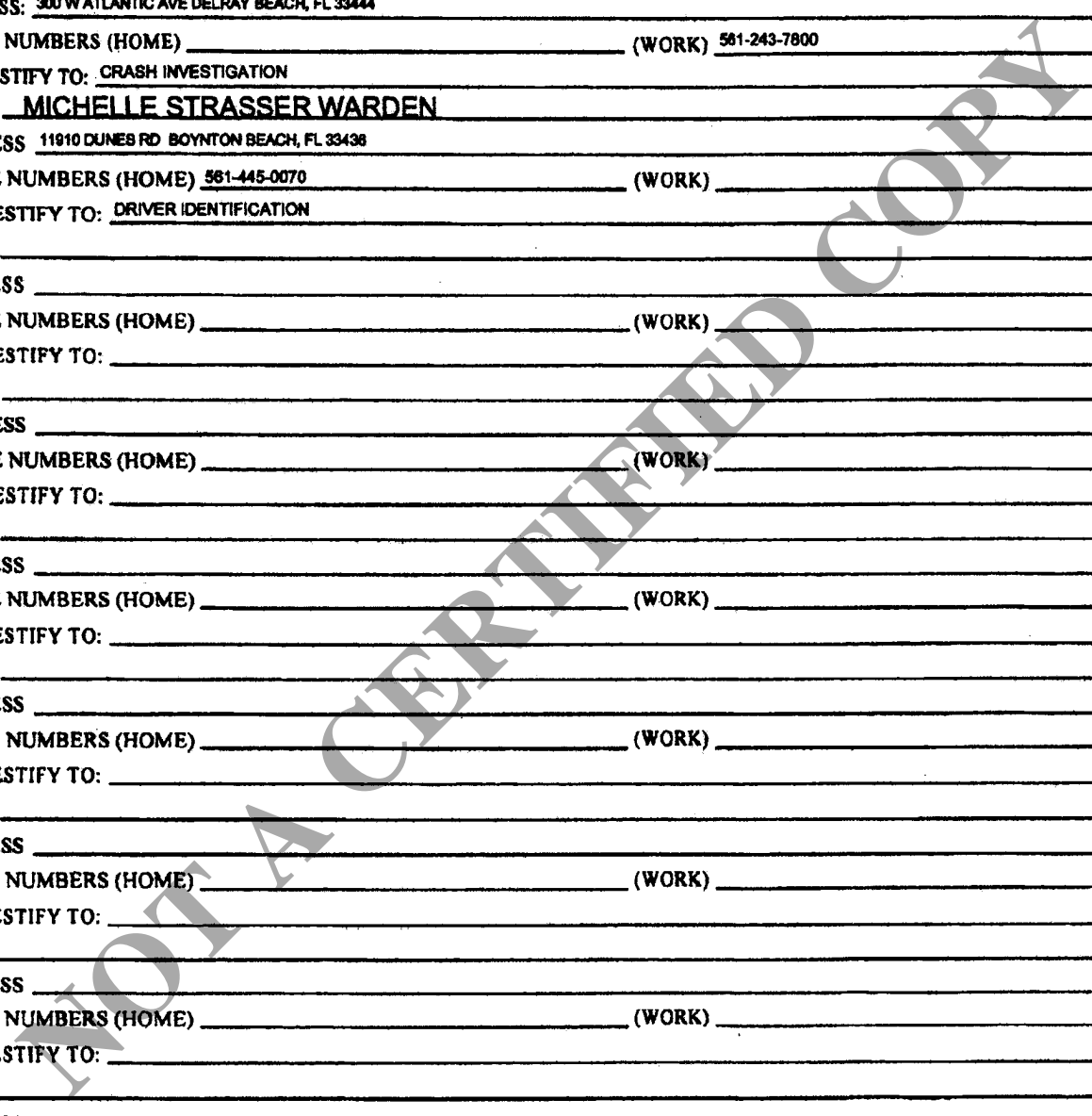
CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____





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: 2020023260	Date: 10/010/2020
	Specialist Name/ID: T Howard/7185