

50-2020-CT-015960-AMB

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-20-134503	
Charge Type: Check as many as apply		1. Felony <input type="checkbox"/>		3. Misdemeanor <input type="checkbox"/>		5. Ordinance <input type="checkbox"/>	
		2. Traffic Felony <input type="checkbox"/>		4. Traffic Misdemeanor <input checked="" type="checkbox"/>		8. Other <input type="checkbox"/>	
Location of Arrest (Including Name of Business) 6th Ave South/Grove St, Lake Worth Beach FL				Location of Offense (Business Name, Address) 6th Ave South/Grove St, Lake Worth Beach FL			
Date of Arrest 12/07/2020		Time of Arrest 0046		Booking Date		Booking Time	

Name (Last, First, Middle) Luskin, Julie, Lynn				Alias (Name, DOB, Soc. Sec. #, Etc.) Steve's Towing			
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex W		Date of Birth 4/13/1974		Height 5'10	
		Weight 140		Eye Color Hazel		Hair Color Br	
		Complexion Med		Build Sm		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) none	

Local Address (Street, Apt. Number) 167 Lake Monterey Cir, Boynton Beach, FL 33426		City Boynton Beach		State FL		Zip 33426	
Permanent Address (Street, Apt. Number)		City		State		Zip	
Business Address (Name, Street)		City		State		Zip	
D/L Number, State L250432746330, FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) Hollywood FL	
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:		Name (Last)		(First)		(Middle)	
Address (Street, Apt. Number)		City		State		Zip	
Notified by: (Name)		Date		Time		Residence Phone	
Released To: (Name)		Relationship		Date		Time	

The above address provided by <input type="checkbox"/> defendant and/or <input type="checkbox"/> defendant's parents. This child and/or parent was told to keep the Juvenile Court Clerk (Phone 355-2528) informed of any change of address.		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 Driving Under the Influence		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 316.193(1)b		Violation of ORD #		Warrant / Capias Number		Bond									
Drug Activity N		Drug Type N		Amount / Unit		Offense # 20-134503		Warrant / Capias Number		Bond											

Location (Court, Room Number, Address) Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600	
Court Date and Time Month 1 Day 7 Year 21 Time 8:30 AM <input checked="" type="checkbox"/> PM <input type="checkbox"/>	
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) <i>Julie Luskin</i>	
Date Signed 12/07/2020	

HOLD for other Agency Name:		Signature of Arresting Officer <i>[Signature]</i>		Name Verification (Printed by Arrestee)	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		(PRINT) DEC 8 AM 3:08	
Intake Deputy I.D. #		Pouch #		Name of Arresting Officer (Print) Cpl. A. Soloway / 8586 I.D. # 8586	
Transporting Officer A. SOLOWAY 8586		ID #		Agency PBSO	
DISTRIBUTION: WHITE - COURT COPY		GREEN - STATE ATTORNEY		YELLOW - AGENCY	
PINK - AGENCY		GOLD - DEFENDANT (N.T.A.'s ONLY)		PAGE 1 OF 1	

035 7131

741

PROBABLE CAUSE AFFIDAVIT

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

1 Juvenile N

OBTS Number Agency ORI Number FLO 500000 Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE Agency Report Number 06-20134503

Charge Type: 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other

Name (Last, First, Middle) Lusk, Julie, Lynn Alias Race W Sex F Date of Birth 4/13/1974

Charge Description D.U.I. 316.193(1a)

Victim's Name (Last, First, Middle) Local Address (Street, Apt. Number) (City) (State) (zip) Phone Business Address (Name, Street) (City) (State) (zip) Phone Occupation

The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The Person taken into custody [X] committed the below acts in my presence. [] was observed by _____ who told that he/she saw the arrested person commit the below acts. [] confessed to _____ admitting to the below facts. [] was found to have committed the below acts, resulting from my (described) investigation. On the 7th day of December 2020 at 11:35 [] A.M. [X] P.M. (Specifically include facts constituting cause for arrest.)

On 12/7/2020 at approximately 2335 hours while driving westbound on 6th Avenue South, approaching Grove St., en route to a call for service, I observed a black 2016 Kia Sorento, bearing FL tag number WCB257, sitting idle in the intersection of 6th Avenue South and Grove St., facing eastbound, blocking the flow of traffic with all the windows fogged up.

As I drove passed the vehicle, I illuminated the interior of the vehicle with my patrol vehicle's spotlight and observed the driver, later identified as Julie Lynn Lusk, sleeping in the driver's seat with her head hanging forward. I did a U-turn and pulled behind the vehicle to conduct a welfare check of the occupants of the vehicle. I knocked on the window and woke Julie up and observed her with blood shot watery eyes. Julie rolled down her window and I asked if she needed any medical attention and also asked for her driver's license and vehicle documentation at which time she attempted to give me her Capital One credit card multiple times. I asked Julie if she knew where she was and she stated "in Boynton Beach where I live". As Julie was talking her speech was slurred and I can smell the odor of an unknown alcoholic beverage on her breath.

Due to my observations of Julie and her signs of impairment with the slurred speech, blood shot, glossy, and watery eyes, and smell of an unknown alcoholic beverage on her breath I requested a DUI Unit to conduct an assessment. This affidavit is for supplemental purposes only.

Julie was wearing a lime green shirt, white shorts, and black flip flops. Julie Lynn Lusk was identified by her State of Florida driver's license, L250432746330.

STATE OF FLORIDA COUNTY OF PALM BEACH Jason Murphy (Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 7 day of December 2020 by Jason Murphy (Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification. Type of identification produced KLEINE LEO)

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

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 7 DAY OF December 20 20, AT 2335 AM PM

SUBJECT: Luskin, Julie, Lynn CASE NUMBER: 20-134503

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Cpl. A. Soloway 8586

PERSONAL CONTACT

DRIVING PATTERN: Actual physical control (physical evidence or statements putting def. behind wheel of vehicle)

I responded to assist DS Murphy #36187 with a possible impaired driver. Upon my arrival he advised me:

On 12/7/2020 at approximately 2335 hours while driving westbound on 6th Avenue South, approaching Grove St., en route to a call for service, I observed a black 2016 Kia Sorento, bearing FL tag number WCB257, sitting idle in the intersection of 6th Avenue South and Grove St., facing eastbound, blocking the flow of traffic with all the windows fogged up.

As I drove passed the vehicle, I illuminated the interior of the vehicle with my patrol vehicle's spotlight and observed the driver, later identified as Julie Lynn Luskin, sleeping in the driver's seat with her head hanging forward. I did a U-turn and pulled behind the vehicle to conduct a welfare check of the occupants of the vehicle. I knocked on the window and woke Julie up and observed her with blood shot watery eyes. Julie rolled down her window and I asked if she needed any medical attention and also asked for her driver's license and vehicle documentation at which time she attempted to give me her Capital One credit card multiple times. I asked Julie if she knew where she was and she stated "in Boynton Beach where I live". As Julie was talking her speech was slurred and I can smell the odor of an unknown alcoholic beverage on her breath.

OBSERVATION OF DRIVER:

Upon my arrival the defendant was sitting in the driver's seat of her vehicle. Her eyes were red and glassy. There was an odor of an unknown alcoholic beverage coming from within the vehicle. This odor intensified as the defendant spoke.

DRIVER'S STATEMENTS:

The defendant said she was coming from Boynton and going to Boynton. She said she was just driving around. She denied having any medical conditions or physical abnormalities. She said we were on Lake Worth Road heading northbound. Note, Lake Worth Road is an east/west roadway and we were on 6th Ave South. She said the approximate time was 10pm, it was actually 12:20am.

ODORS:

There was an odor of an unknown alcoholic beverage coming from within the vehicle. This odor intensified as the defendant spoke.

GENERAL OBSERVATIONS

SPEECH:

ATTITUDE: demanding

CLOTHING: flip flops, short, long shirt

MEDICAL/OTHER: stated none

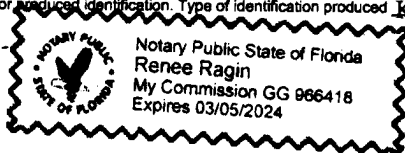
STATE OF FLORIDA
COUNTY OF PALM BEACH

Cpl. A. Soloway 8586
Signature of Arresting/Investigative Officer

This foregoing instrument was sworn to or affirmed and subscribed before me this 8 day of December 20 20 by Cpl. A. Soloway 8586

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

Renee Ragin (#16877)
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



SUBJECT: Loskin, Julie L. CASE NUMBER: 20-134503

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) Read on Camera

SUBJECT: Lusk, Julie L CASE NUMBER: 20-134503

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? Yes

WHERE WERE YOU GOING? Walmart

WHAT STREET OR HIGHWAY WERE YOU ON? 1st Street

DIRECTION OF TRAVEL? E WHERE DID YOU START? 1st Street

WHAT TIME DID YOU START? 12:00 WHAT TIME IS IT NOW? 12:00

WHAT IS TODAY'S DATE? 12-1 WHAT DAY OF THE WEEK IS IT? Monday

WHAT COUNTY AND CITY ARE YOU IN NOW? San Diego

WHEN DID YOU LAST EAT? 11:00 WHAT DID YOU EAT? Food

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? Nothing

HOW MUCH DO YOU WEIGH? 140 HAVE YOU BEEN DRINKING? Yes WHAT? Vodka

HOW MUCH? 2 WHERE? Home WITH WHOM? Alone

WHEN DID YOU HAVE YOUR FIRST DRINK? 11:00 AND YOUR LAST DRINK? 12:00

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? Shot

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? No ARE YOU UNDER THE INFLUENCE? No

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? No HOW MUCH? None

WHAT? None WHERE? None WHEN? None

WHAT LINE OF WORK ARE YOU IN? None WHEN DID YOU LAST WORK? 1st

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? No WHAT? None

ARE YOU SICK OR INJURED? No WHAT'S WRONG? None

DO YOU LIMP? No DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? No

WERE YOU IN AN ACCIDENT TODAY? No

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN? None

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? No WHO? None WHY? None

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? No WHAT? None WHEN? None

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? No

DO YOU TAKE INSULIN? No IF SO, WHEN WAS YOUR LAST INJECTION? None

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? No WHERE? None

INTERVIEWER: _____

SUBJECT: Luskin, Julie, Lynn

CASE NUMBER 20-134503

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

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

Other Observations:

Defendant was swaying during this task.

WALK & TURN:

The defendant was unable to maintain her balance during the instructions. She stepped off the line several times. She missed heel to toe several times. She took 14 steps up the line and walked longer than the yellow tape. She took 9 steps back down the line. She was swaying during this task.

ONE LEG STAND:

The defendant was swaying during this task. She put her foot down before 30 seconds elapsed and did not attempt to continue the task. She did not count out loud.

FINGER TO NOSE:

The defendant did not return her arm to her side on all attempts. She touched under her eye on attempts 2 and 4. She touched the side of her nose on attempts 5 and 6.

ROMBERG ALPHABET:

The defendant was swaying during this task. She correctly recited the alphabet.

BREATH TEST RESULTS:

1) .237	2) .234	3)	4)
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STATE OF FLORIDA
COUNTY OF PALM BEACH

Cpl. A. Soloway 8586

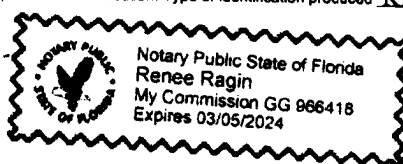
Signature of Arresting/Investigative Officer

The foregoing instrument was sworn to or affirmed and subscribed before me this 8 day of December 2020 by Cpl. A. Soloway 8586

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

Renee Ragin (#16877)

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



**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: 12/08/2020

Date of Last Agency Inspection: 11/13/2020
Observation Period Began: 01:06
Subject's Name: JULIE L LUSKIN

DOB: 04/13/1974 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	01:31
	Air Blank	0.000	01:32
	Control Test	0.081	01:32
	Air Blank	0.000	01:32
	Subject Sample #1	0.237	01:33
	Air Blank	0.000	01:34
	Air Blank	0.000	01:35
	Subject Sample #2	0.234	01:36
	Air Blank	0.000	01:37
	Control Test	0.080	01:37
	Air Blank	0.000	01:38
	Diagnostics Check	OK	01:38

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: *Rag* Date: 12/08/20
Signature

Sworn to (or affirmed) before me this 08 day of Dec., 2020

Signature of Notary Public-State of Florida *[Signature]* Printed Name of Notary Public-State of Florida Cpl. A. Soloway # 8586

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.

WITNESS LIST

CASE NUMBER: 20-134503

ARRESTING OFFICER: Cpl. A. Soloway 8586

ADDRESS: PBSO

PHONE NUMBERS (HOME): _____ (WORK) 561 386 9001

CAN TESTIFY TO: DUI INVESTIGATION

NAME: DS Murphy #36187

ADDRESS: PBSO

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: Stopping DS

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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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

TESTING FACILITY TASK REPORT

AGENCY:

SUBJECT: CASE NUMBER:

DATE: VIDEO DVD NUMBER:

BEGINNING TIME: 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 TECHNICIAN:

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE:

CLOTHING:

MEDICAL CONDITIONS:

MEDICATIONS:

OTHER:

Eyes red
Odor of unknown alcoholic beverage on breath.
Subject stated she had 2 glasses of vodka in Q&A.

COMMENTS:

Arrived at center A/O started 20 minute observation period at 01:06 hrs.
Subject agreed to take breath test.
A/O read rights.
Subject stated she understood rights.
Tech read breath test results.
Subject stated she understood test results.
A/O conducted Q&A.
Subject answered questions.



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"/>	119.0712 (2)	Other: Personal information contained in a motor vehicle record	
	<input type="checkbox"/>	119.071(2)(j)	Other: MARSY'S LAW PROTECTED INFORMATION REGARDING VICTIM(S).	

REVIEW COMPLETED BY

Booking Number: 2020028638	Date: 12/8/2020
	Specialist Name/ID: M. Tooks #8557