

JK 0525880 21CT15391 P* 3517


ADMINISTRATION		ARREST / NOTICE TO APPEAR Juvenile Referral Report				1. Arrest	3. Request for Warrant	1	Juvenile	N
DEFENDANT		Agency Name				Agency Report Number				
OBT Number		Agency Name				Agency Report Number				
Agency ORI Number		BOYNTON BEACH POLICE DEPT.				34- 21-040696				
Charge Type:		1. Felony		3. Misdemeanor		5. Ordinance		If Weapons Seized Enter Type		
Check as many as Apply:		2. Traffic Felony		4. Traffic Misdemeanor		6. Other		Multiple Clearance Indicator		
Location of Arrest (Including Name of Business)		1300 W Sr 804 BOYNTON BEACH, FL 33426								
Date of Arrest		Time of Arrest		Booking Date		Booking Time		Jail Date		Jail Time
9/12/2021		2:09:00 AM								Location of Vehicle
Name (Last, First Middle)		Bell, Kiel Robert								
Race		Sex		Date of Birth		Height		Weight		Eye Color
White		M		8/6/1995		6' 1"		173		Brown
Scars, Marks, Tattoos		Marital Status		Religion		Indication of: Alcohol/Influence		Yes		No
		Single		Other		Drug Influence		Unknown		
Address Information		BOYNTON BEACH, FL 33472				Phone Information		Residence Type		
H 5420 Courtney Cir								Resident		
DL Number, State		INS Number		Place of Birth		Citizenship				
C69675567, Virginia				RICHMOND, VA		United States of America				
Co-Defendant Name (Last, First Middle)		Race		Sex		Date of Birth		Detail		
Parent		Name (Last, First Middle)				Residence Phone				
Legal Custodian		Address Information				Business Phone				
Other										
Notified by:		Date		Time		Juvenile Disposition		1. Handled/Processed within Dept. and Released		2. TOT HRS/DYS
						3. Incarcerated				
Released to		Relationship		Date		Time				
The above address was provided by		defendant and/or defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 561-355-2526) informed of any change of address:				School Attended		Grade		
Yes, By: (Name)		No: (Reason)				Value of Property				
Property Crime?		Description of Property				Value of Property				
Yes										
No										
Drug Activity		S. Sell		R. Smuggle		M. Manufacture		2. Other		Drug Type
N. N/A		B. Buy		D. Deliver		Produce/ Cultivate				N. N/A
P. Possess		T. Traffic		E. Use						A. Amphetamine
										B. Barbituate
										C. Cocaine
										H. Hallucinogen
										M. Marijuana
										O. Opium/Deriv.
										P. Paraphernalia/ Equipment
										S. Synthetic
										U. Unknown
										Z. Other
Charge Description		Counts		Domestic Violence		Statute Violation Number		Violation of ORD#		
316.193(1) - DUI - UNDER INFLUENCE OF ALCOHOL OR CHEMICAL SUBSTANCE: FACULTIES IMPAIRED		1		N - No		316.193(1)A				
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond
N		N				21-040696				
Instruction No. 1		Mandatory Appearance in Court				Location (Court, Room Number, Address)		Court Time		
Instruction No. 2		You need not appear in court but must comply with instruction on reverse side				South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444		8:30:00 AM		
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)				Court Date		Date Signed		
						10/12/2021		9/12/2021		
HOLD for other Agency		Name of Arresting Officer				Name Verification (Printed by Arrestee)		(PRINT)		
Name:		Castro, Dennis				I.D. #		BU #		
Dangerous		Resisted Arrest				905				
Suicidal		Other:				I.D. #		Agency		
Intake Deputy		I.D. #				905		BOYNTON BEACH PD		
Dangle		Transporting Officer				Castro, Dennis		Witness here is subject Signed with an 'X'.		

SEP 12 4 5:13
 SCANNED
 SEP 14 2021
 FILED

Agency ORI Number FL0500300	D.U.I. PROBABLE CAUSE AFFIDAVIT		Agency Name BOYNTON BEACH POLICE DEPT.
Date of Occurrence 9/12/2021	Time of Occurrence 2:01:00 AM	Case Number 21-040696	Defendant
PERSONAL CONTACT/DRIVING PATTERN/OBSERVATION OF DRIVER			
<p>On Sunday, September 12, 2021 at approximately 0201hrs, while traveling eastbound in the 1300 block of Boynton Beach Blvd (SR 804) I observed a Gray BMW (later learned to be bearing VA tag KIELBM3) traveling westbound at a high rate of speed. This incident occurred within the City of Boynton Beach, Palm Beach County, Florida. I estimated the vehicle to be traveling 60mph in a posted 40mph speed zone. Utilizing my vehicle mounted Stalker DSR radar (DB007751, KC12791) I received a reading of 61mph. The BMW was the only vehicle directly in front of me at the time of incident. Due to the traffic infraction I completed a u-turn and proceeded behind the vehicle. I activated my emergency equipment to my fully marked patrol vehicle (4734) and initiated a traffic stop. As the vehicle came to a stop, the front right tire of vehicle struck the curb.</p> <p>I then made contact with the driver/sole occupant W/M Bell, Kiel (08/06/95). I explained the reason for the traffic stop to Bell, which he stated that he understood. While speaking with Bell I detected the odor of an unknown alcoholic beverage emanating from his breath, which intensified as he spoke. Bell's eyes were bloodshot/glassy and his speech was thick and slurred. Bell advised that he was on his way to his residence from the "AVE". Bell clarified that the "AVE" was Atlantic Ave, Delray Beach. At this point, due to the fact that I suspect Bell of operating a motor vehicle while under the influence of an alcoholic beverage, I requested Bell to exit the vehicle; which he complied. While exiting the vehicle, Bell used his door for support. While speaking with Bell at the rear of his vehicle, I reassured that he understood the reason for the traffic stop. Still, outside the vehicle, I detected the odor of the unknown alcoholic beverage emanating from Bell's breath. I explained to Bell of my observations, which he stated that he understood. Bell admitted to consuming 2-3 Bud Light beers and 1 Vodka/Red Bull drink. Bell advised that he arrived at Atlantic Ave at approximately 2100hrs and doesn't recall when he left. Bell advised that prior to heading home he dropped off two of his friends in the area of Deerfield and Boca Raton. Bell was cooperative during the the investigation. At this point, I ask requested Bell if he would be willing to submit to a series of Standardized Field Sobriety Task, which he refused. I then explained to Bell his Taylor Warnings, which he stated that he understood. I then asked Bell a second time if he would be willing to submit to the roadsides, which he refused again. As a result, Bell was placed into handcuffs (D/L and Spaced) and arrested for suspicious of DUI.</p>			
HORIZONTAL GAZE NYSTAGMUS			
<input type="checkbox"/> Left eye does not follow smoothly	<input type="checkbox"/>	Right eye does not follow smoothly	
<input type="checkbox"/> Left eye prior to 45 degrees	<input type="checkbox"/>	Right eye prior to 45 degrees	
<input type="checkbox"/> Distinct jerking in left eye at maximum deviation	<input type="checkbox"/>	Distinct jerking in right eye at maximum deviation	
<input type="checkbox"/> Vertical Nystagmus in left eye	<input type="checkbox"/>	Vertical Nystagmus in right eye	
WALK AND TURN			
REFUSED			
ONE LEG STAND			
REFUSED			
FINGER TO NOSE			
REFUSED			
ROMBERG/ALPHABET			
REFUSED			
<p>Bell was then placed into patrol vehicle (4734) and transported to the Palm Beach County BAT facility. I arrived at the facility at 0231hrs, started my 20 minutes observations at 0237hrs and completed it at 0257hrs. Upon completion I requested Bell to provide a sample of his breath to determine the alcohol content, which he refused. I then read Bell Implied Consent, which he stated that he understood. I then read Bell his Miranda Warnings, which he stated that he understood. Q&As were not completed.</p> <p>Based on the facts, Bell was charged with Driving Under the Influence pursuant with F.S.S. 316. 193.1.A. Bell was processed and later TOT PBCJ. Bell vehicle was removed from scene by Becks' Towing</p> <p>Nothing further.</p>			

NOT A CERTIFIED COPY

The foregoing instrument was sworn to, affirmed and subscribed before me, _____, Notary Public, Clerk of Court, Officer (F.S.S. 117.10) on this _____ day of _____, 2021.



_____ (Signature of Arresting Officer) 905
 _____ (Print Name of Arresting Officer)
 Date: 09/12/2021

SCANNED

SEP 12 2021



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

PBSO CASE # 21-105752 PBSO ZONE _____

AGENCY CASE # 21-040696 CRASH CASE # _____

TIME OF STOP/CRASH 0201hrs DATE 09/12/2021 DAY SUNDAY

SUBJECT'S NAME BELL KIEL ROBERT RACE WHITE SEX MALE
LAST FIRST MID

HGT 600 WGT 173 DOB 08/06/1995

LOCATION 1300 W SR 804, BOYNTON BEACH, FLORIDA, 33426

ARRESTING OFFICER'S NAME & ID CASTRO 905 AGENCY BBPD

DIVISION: _____ NOTIFIED BY COMMO Y

ARRIVAL AT FACILITY 0237HRS

ARREST TIME 0201HRS

BREATH RESULTS:

- 1)
- 2)
- 3)
- 4)

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

NOT A CERTIFIED COPY

**SCANNED
SEP 14 2021**

SUBJECT: Bell, Kiel R. CASE NUMBER: 21-040969

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) Read on Camera

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X) Read on Camera **SCANNED**
SEP 14 2021

SUBJECT: Bell, Kiel R CASE NUMBER: 21-040696

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? Re Fured

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: _____

SCANNED
SEP 14 2021

CASE #: 21-040696

DEFENDANT: BELL, KIEL ROBERT

Arresting Officer: CASTRO #905

Address: 2100 HIGH RIDGE RD, BOYNTON BEACH, FLORIDA, 33426

Phone Numbers: Home: Work: (561) 742-6100

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
SEP 14 2021

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

I, OFFICER CASTRO #905, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

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

or affirm that on or about the 12TH day of SEPTEMBER, 20 21, at 0209HRS P.M. A.M.

DRIVER KIEL ROBERT BELL
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# C69675567, state of VIRGINIA, was placed under lawful arrest for

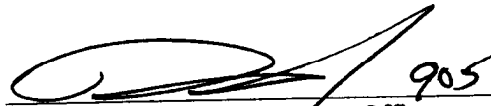
the offense of DUI by OFFICER CASTRO #905 and
(Name of Arresting Officer)

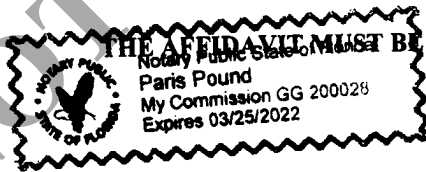
issued Citation # AE1542E

That on or about the 12TH day of SEPTEMBER, 20 21, at 0306 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



THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title _____

Date _____

The foregoing instrument was sworn and subscribed before
me this 12th day of September 20 21,

by OFFICER CASTRO #905,

who is personally known to me or who has produced
_____ as identification

Notary Public 

HSMV-BAR1001 (REV. 10/2016)

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.

SCANNED
SEP 14 2021

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

I, OFFICER CASTRO #905, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

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

or affirm that on or about the 12TH day of SEPTEMBER, 20 21, at 0209HRS P.M. A.M.

DRIVER KIEL ROBERT BELL
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# C69675567, state of VIRGINIA, was placed under lawful arrest for

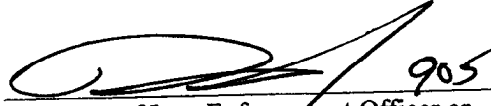
the offense of DUI by OFFICER CASTRO #905 and
(Name of Arresting Officer)

issued Citation # AE1542E

That on or about the 12TH day of SEPTEMBER, 20 21, at 0306 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 12th day of September 20 21,

by OFFICER CASTRO #905,

who is personally known to me or who has produced
_____ as identification

Notary Public 

HSMV-BAR1001 (REV. 10/2016)

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)
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 and an
appropriate copy of the UIC, and the
probable cause affidavit. **SCANNED**
SEP 14 2021

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 are glassy & bloodshot
Odor of unknown alcoholic beverage on breath

REFUSED

COMMENTS:

Arrived at center A/O started 20 minute observation period at 02:37 hrs.
Subject refused to perform breath test.
A/O read I/C and subject stated he understood I/C.
Subject refused to take test.
A/O read rights.
Subject stated he understood rights.
A/O attempted Q&A
Subject refused to answer Q&A.

REFUSED

SCANNED
SEP 14 2021



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: 2021022768	Date: 09/13/2021
	Specialist Name/ID: T Howard/7185

SCANNED
SEP 14 2021