

0514064

20CT DDD 975NB 3325

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report			1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	Juvenile	N	
Agency ORI Number FLO 502600		Agency Name PALM BEACH GARDENS POLICE DEPARTMENT			Agency Report Number (N.T.A.'s only) 78- 20000348							
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		Weapon Seized / Type 2 1. Yes 2. No		Multiple Clearance Indicator UK		
Location of Arrest (Including Name of Business) 3360 BURNS RD, PALM BEACH GARDENS, FL 33410						Location of Offense (Business Name, Address) PGA BLVD/PROSPERITY FARM ROAD, PBG, FL 33410						
Date of Arrest 01/16/2020		Time of Arrest 21:00		Booking Date		Booking Time		Jail Date		Jail Time		
Name (Last, First, Middle) JACKSON, LAWRENCE, PAUL												
Alias (Name, DOB, Soc. Sec. #, Etc.)												
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian		Sex M	Date of Birth 11/28/1952		Height 510	Weight 152	Eye Color HAZEL	Hair Color BRO	Complexion LIGHT	Build THIN		
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE						Marital Status M		Religion UK		Indication of Alcohol Influence Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>		
Local Address (Street, Apt. Number) 11322 E TEACH RD		(City) PBG		(State) FL		(Zip) 33410		Phone (561) 758-0606		Residence Type: 1. City 3. Florida 2. County 4. Out of State 1		
Permanent Address (Street, Apt. Number) 11322 E TEACH RD		(City) PBG		(State) FL		(Zip) 33410		Phone (561) 758-0606		Address Source FL DL		
Business Address (Name, Street)		(City)		(State)		(Zip)		Phone ()		Occupation RETIRED		
DL Number, State J250535524280 FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) TRENTON, NJ		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 Legal Custodian <input type="checkbox"/> Other		Name (Last) (FIRB) (Middle)			Residence Phone							
Address (Street, Apt. Number)		(City)		(State)		(Zip)		Business Phone				
Notified by: (Name)				Date		Time		Juvenile Disposition 1. Handled/processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated				
Released To: (Name)				Relationship				Date		Time		
The above address 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 (Phone 355-2525) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)						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 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 D.U.I.		Counts 1		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 316.193(1)		Violation of ORD #				
Drug Activity N		Drug Type N	Amount / Unit NONE		Offense # 20000348		Warrant / Capias Number		Bond			
Charge Description		Counts		Domestic Violence		Statute Violation Number		Violation of ORD #				
Drug Activity		Drug Type	Amount / Unit		Offense #		Warrant / Capias Number		Bond			
Charge Description		Counts		Domestic Violence		Statute Violation Number		Violation of ORD #				
Drug Activity		Drug Type	Amount / Unit		Offense #		Warrant / Capias Number		Bond			
Charge Description		Counts		Domestic Violence		Statute Violation Number		Violation of ORD #				
Drug Activity		Drug Type	Amount / Unit		Offense #		Warrant / Capias Number		Bond			
Location (Court, Room Number, Address) NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700												
Court Date and Time Month FEB Day 19 Year 2020 Time 10:00 AM <input checked="" type="checkbox"/> PM												
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 01/16/2020		
HOLD for other Agency Name:				Signature of Arresting Officer Dean Morea #517				Name Verification (Printed by Arrestee)				
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) Ofc. Dean Morea		I.D. # #517		(PRINT)		PAGE		
Intake Deputy Spann Biv		I.D. #	Pouch #	Transporting Officer Ofc. Dean Morea		ID # #517	Agency PBGPD	Witness here if subject signed with an -X"		1 OF 1		

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 16 DAY OF JANUARY 20 20, AT 2100 AM PM

SUBJECT: JACKSON, LAWRENCE, PAUL CASE NUMBER: 20000348

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: Ofc. Dean Morea #517

PERSONAL CONTACT

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

On Thursday, 01/16/2020 at 1705 hours, I, Officer Morea #517, was dispatched to PGA BLVD/PROSPERTY FARMS RD, in the City of Palm Beach Gardens in Palm Beach County, Florida, in reference to a complaint of an Unconscious Motorist. Palm Beach Gardens Police Dispatch advised via radio the caller reported a male in a Volvo, was passed out behind the wheel of the vehicle. My department issued body worn camera was activated and subsequently uploaded and tagged accordingly.

Upon arrival in my black and white marked "Palm Beach Gardens Police" vehicle I made contact with Hali Sammis (W/F, DOB: 05/10/1992) and Brayden Holt (W/M, DOB: 07/24/1992), the complainants, who provided a sworn-oral statement advising the following: They observed a male in a blue Volvo bearing FL Tag: 082NYE who was passed out and slumped over the steering wheel in the left turn lane at the intersection of PGA BLVD/PROSPERTY FARMS RD. The complainants stated the vehicle was in "Drive". The complainants stated once they woke the male up, the male said he did not know he was driving.

Upon my arrival, I observed a Blue Volvo C30 bearing FL license plate 082NYE at the scene. The male was already being placed into the ambulance, however; was alert and conscience.

OBSERVATION OF DRIVER:

The driver was identified to me via FL DL as, Lawrence Jackson (W/M, DOB: 11/28/1952). Jackson appeared to be confused as to what was going on, had very blood shot eyes, was drowsy and had slurred speech.

DRIVER'S STATEMENTS:

Jackson stated that he was at the "Waterway Cafe" and was drinking vodka. Jackson stated he did not remember leaving the restaurant nor did he remember that he was operating a motor vehicle. Jackson kept stating during the SFST's that he couldn't even do the task if he was "sober". It should be noted that a dated receipt from Jan 16th at 4:10pm was found in Jacksons pocket from the "Waterway Cafe". The receipt showed two purchased "House Vodka on the Rocks".

ODORS:

Strong odor of alcohol

GENERAL OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Cooperative

CLOTHING: Blue T-Shirt, Khaki Shorts, Brown Shoes

MEDICAL/OTHER: Diabetes

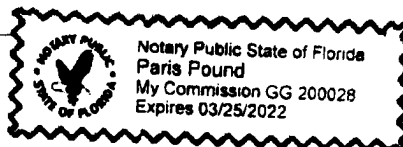
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 16th day of January 20 20 by Ofc. Dean Morea

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

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



SUBJECT: JACKSON, LAWRENCE, PAUL CASE NUMBER 20000348

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:

Moved head to follow stimulus.

WALK & TURN:

Could not keep balance while listening to instructions
Stopped walking to steady self
Missed heel-to-toe
Stepped off line
Used arms for balance
Improper Turn (did not turn around until told to do so)
Incorrect number of steps. (Counted to step 11)

ONE LEG STAND:

DID NOT PERFORM

ROMBERG ALPHABET:

Sped up the alphabet when he got to "L, M, N, O, P"

FINGER TO NOSE:

Did not keep eyes closed
Missed tip of nose numerous times
Hovered near nose until he slowly made contact

BREATH TEST RESULTS: 0.154 0.155

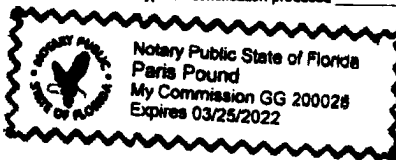
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 16th day of January 2020 by Ofc. Dean Morea

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

Notary Public, Clerk of Court, Officer (F.S. 6-117.10)



SUBJECT: JACKSON, LAWRENCE P CASE NUMBER: 20-000348

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

TESTING FACILITY TASK REPORT

AGENCY: PB6PD

SUBJECT: JACKSON, LAWRENCE P CASE NUMBER: 20-027101

DATE: 01/16/20 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 22:10 ENDING TIME: 22:28

BREATH TESTS RESULTS: 1) .154 TIME 22:14 A.M./P.M. 2) .155 TIME 22:17 A.M./P.M.

3) N/A TIME --- A.M./P.M. 4) N/A TIME --- A.M./P.M.

BREATH OPERATOR: P. POUND # 24639

MAINTENANCE TECHNICIAN: J. KARLCKE # 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: CALM, QUIET

CLOTHING: TAN SHORTS, BLUE T-SHIRT, BROWN SHOES.

MEDICAL CONDITIONS: DIABETES

MEDICATIONS: METFORMIN, LINDORAIL

OTHER: EYES

COMMENTS: ARRIVED AT CENTER A/O BEGAN THE 20
MINUTE OBSERVATION PERIOD AT 21:49 HR.

A. STATED HE GUESS HE WOULD TAKE TEST.

A. THEN STATED WHAT HAPPENS IF I
DON'T TAKE TEST.

A/O STARTED READING I/C A. INTERRUPTED A/O

WHILE HE WAS READING I/C AND SAID HE WOULD TAKE

A/O READ RIGHTS TEST.

A. STATED HE UNDERSTOOD RIGHTS

TECH. READ TEST RESULTS

A. STATED HE UNDERSTOOD TEST RESULTS.

A/O CONDUCTED OIA

A. ANSWERS QUESTIONS.

SUBJECT: JACKSON LAWRENCE P CASE NUMBER: 20-000348

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? Home

WHAT STREET OR HIGHWAY WERE YOU ON? Highway / PGA Blvd

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? From the house / walking Cafe

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

WHAT IS TODAY'S DATE? 16th WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? 1:00 WHAT DID YOU EAT? Waffles / Mandy's

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? 142 HAVE YOU BEEN DRINKING? Yes WHAT? Vodka

HOW MUCH? 2 WHERE? Walking Cafe WITH WHOM? Alone

WHEN DID YOU HAVE YOUR FIRST DRINK? Walking Cafe AND YOUR LAST DRINK? Walking Cafe

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? No more 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? Owner WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? No WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? No

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? Yes WHAT? Prozac / Coumadin WHEN? This morning

- DO YOU HAVE:
- EPILEPSY? No
 - GLASS EYE? No
 - FALSE TEETH? No
 - EAR INFECTION? No
 - INNER EAR TROUBLE? No
 - DIABETES? Yes

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? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? Yes WHERE? NS, TX

INTERVIEWER: _____



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

PBSO CASE # 20-027101 PBSO ZONE 3-13

AGENCY CASE # 20000348 CRASH CASE # _____

TIME OF STOP/CRASH _____ DATE 01/16/2020 DAY THURSDAY

SUBJECT'S NAME JACKSON LAWRENCE PAUL RACE W SEX M
LAST FIRST MID

HGT 510 WGT 152 DOB 11/28/1952

LOCATION 3360 BURNS RD, PALM BEACH GARDENS, FL 33410

ARRESTING OFFICER'S NAME & ID Ofc. Dean Morea #517 AGENCY PBPGD

DIVISION: PATROL

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 2149

ARREST TIME 2100

BREATH RESULTS:

1.	.154
2.	.155

NOT A CERTIFIED

BREATH TEST OPERATOR: 24639

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006239 Software: 8100.27
Date of Test: 01/16/2020

Date of Last Agency Inspection: 12/06/2019

Observation Period Began: 21:49

Subject's Name: LAWRENCE P JACKSON

DOB: 11/28/1952 Sex: M

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	22:13
Air Blank	0.000	22:13
Control Test	0.080	22:13
Air Blank	0.000	22:14
Subject Sample #1	0.154	22:14
Air Blank	0.000	22:15
Air Blank	0.000	22:17
Subject Sample #2	0.155	22:17
Air Blank	0.000	22:18
Control Test	0.080	22:18
Air Blank	0.000	22:19
Diagnostics Check	OK	22:19

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

State of Florida, County of PALM BEACH

Personally appeared before me the undersigned authority, who () is personally known to me or () produced _____ as identification, and who after being placed under oath, states:

I PARIS D POUND, 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: _____

Signature

Date: 01/16/20

Sworn to (or affirmed) before me this 16th day of JANUARY, 2020

Signature of Notary Public-State of Florida

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 322.2815, F.S.

WITNESS LIST

CASE NUMBER: 20000348

ARRESTING OFFICER: Ofc. Dean Morea

ADDRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410

PHONE NUMBERS (HOME): N/A (WORK) (561) 799-4445

CAN TESTIFY TO: Facts of Case

NAME: Officer Cameron Carver #471

ADDRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410

PHONE NUMBERS (HOME) N/A (WORK) (561) 799-4445

CAN TESTIFY TO: Facts of Case

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 _____

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ADDRESS _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

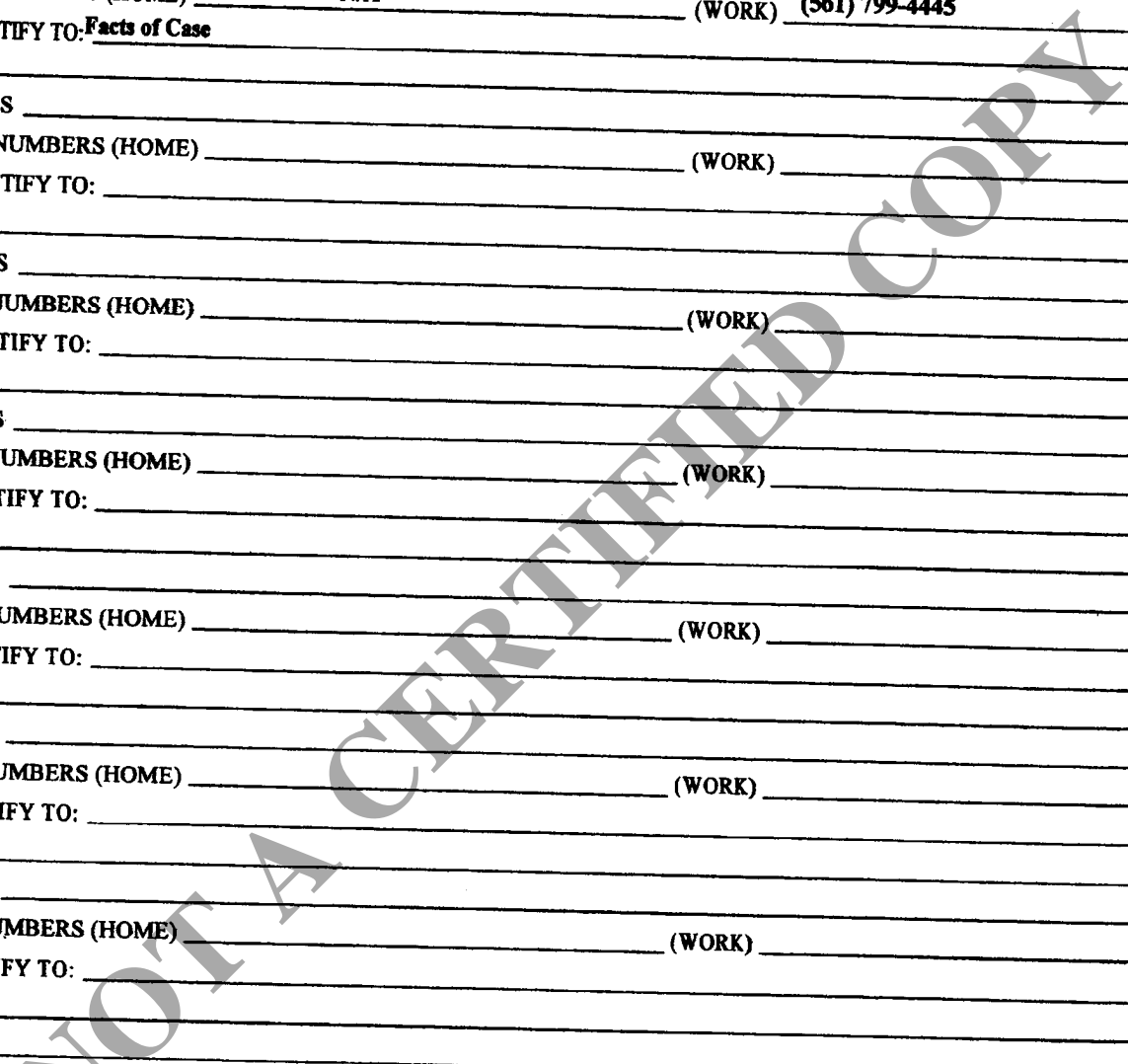
CAN TESTIFY TO: _____

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"/>	F.C. Art. 1, Sect 16	Other: Marsy's Law	
	<input type="checkbox"/>	539.003	Other: Pawn broker transaction records supplied to law enforcement officials	

REVIEW COMPLETED BY

Booking Number: 2020001916	Date: 01/17/2020
	Specialist Name/ID: VARGO/6665