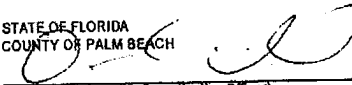
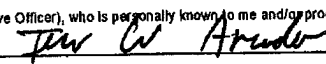


0529425 22CT 2411 MB 528

OBT 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 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number (N.T.A.'s only) 06-22-035265															
Charge Type: Check as many as apply.		<input type="checkbox"/> 1. Felony <input checked="" 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 01											
Location of Arrest (Including Name of Business) N MILITARY TRAIL AND COMMUNITY DRIVE, UNINCORPORATED/FL/334						Location of Offense (Business Name, Address) N MILITARY TRAIL AND COMMUNITY DRIVE, UNINCORPORATED/FL/334															
Date of Arrest 02/12/2022		Time of Arrest 0137		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle Garden Trailing, 1100 3rd Ave. N, Lake Worth, FL 33460, (561) 985-9272									
Name (Last, First, Middle) Crites, Lindell, Roy												Alias (Name, DOB, Soc. Sec. #, Etc.)									
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian		Sex M		Date of Birth 8/18/1975		Height 6'00		Weight 165		Eye Color bro		Hair Color brn									
Complexion med		Build med		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE		Marital Status MARRIED		Religion NONE		Indication of Alcohol Influence Drug Influence		Y <input type="checkbox"/> N <input type="checkbox"/> Unit									
Local Address (Street, Apt. Number) 4159 N Haverhill Rd Unit 1313, West Palm Beach, FL 33417						City (561)		State 307 5222		Phone		Residence Type: 1. City 2. County 3. Florida 4. Out of State 2									
Permanent Address (Street, Apt. Number)						City		State		Phone		Address Source VERBAL / FL DL									
Business Address (Name, Street)						City		State		Phone		Occupation PROFESSIONAL CLEANING									
DL Number, State C632536752988, FL				Soc. Sec. Number				MIB Number				Place of Birth (City, State) ST LOUIS, MO		Citizenship YES							
Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile									
Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile									
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other		Name (Last)				(First)		(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. Incorporated											
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 355-2528) 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 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. Synthetic		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)				Violation of ORD #							
Drug Activity N		Drug Type N		Amount / Unit		Offense # 22-035265		Warrant / Capias Number				Bond									
Charge Description						Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number				Violation of ORD #							
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number				Bond									
Charge Description						Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number				Violation of ORD #							
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number				Bond									
Charge Description						Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number				Violation of ORD #							
Drug Activity		Drug Type		Amount / Unit		Offense #		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 MARCH Day 10 Year 2022 Time 0830 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) [Signature] Date Signed 02/12/2022																					
HOLD for other Agency Name:				Signature of Arresting Officer [Signature]				Name Verification (Printed by Arrestee) SCANNED													
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Other				Name of Arresting Officer (Print) INV. W. AMADON				ID # 9440				PAGE 1									
Intake Deputy [Signature] ID # 9440 Pouch #				Transporting Officer INV. W. AMADON				ID # 9440 Agency PBSO				Witness here if subject signed 02/12/2022 OF 1									

		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		Juvenile <input type="checkbox"/>		
ADMIN	OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06-			
	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		Special Notes:	
DEEL	Name (Last, First, Middle)		Alias		Race		Sex		Date of Birth	
	Charge Description		Charge Description		Charge Description		Charge Description			
CHARGES	Victim's Name (Last, First, Middle)		Race		Sex		Date of Birth			
	Local Address (Street, Apt. Number)		(City)		(State)		(zip)		Phone	
VICTIM	Business Address (Name, Street)		(City)		(State)		(zip)		Phone	
	Address Source		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 <input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ <input type="checkbox"/> confessed to _____ <input type="checkbox"/> that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.										
On the <u>12th</u> day of <u>Feb</u> 20 <u>22</u> at <u>0033</u> <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)										
<p>On 2-12-2022 at approximately 0033 hours, I responded to Military Trl and Community Dr. West Palm Beach in reference to a possible sick or injured person slumped over the wheel.</p> <p>Upon arrival, I observed a silver Lexus SUV FL tag # JIM25 stopped on Community Dr. facing westbound. I observed a bystander knocking on the driver-side window. As I approached the vehicle I observed a white male later identified as Lindell Crites sitting in the driver seat sleeping. Fire Rescue # 24 arrived on scene (run # 22019232) and began knocking on the window.</p> <p>I reposition my vehicle in front of the Lexus to avoid the vehicle from moving forward and colliding with traffic when the driver awakes. After several attempts, Crites woke up and appeared to be confused. Fire Rescue asked Crites to lower the window several times. Crites lowered the window just a few inches down. I was able to stick my hand through the open window and unlock the vehicle.</p> <p>I immediately smell a strong odor of an alcoholic beverage emanating from the vehicle. I asked Crites if he had any medical issues, Crites stated he didn't. As Crites spoke I could smell a strong odor of an alcoholic beverage emanating from his breath. I observed Crites also had bloodshot eyes and slurred speech. Fire Rescue completed their vital checks with Crites and everything appeared to be good.</p> <p>Based on the above facts and statement I called for a DUI unit to complete a DUI investigation. See D/S Amadon report for additional information.</p>										
STATE OF FLORIDA COUNTY OF PALM BEACH  33097 (Signature of Arresting/Investigative Officer)										
ADMINISTRATIVE	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>12</u> day of <u>FEB</u> 20 <u>22</u> by <u>D/S TRINIDAD</u> (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>KNOWN LEO</u>									
	D/S AMADON 9440  Notary Public, Clerk of Court, Officer (F.S.S. 117.10)									

SCANNED PAGE 1 OF 1

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 12 DAY OF FEBRUARY 20 22, AT 0033 AM PM

SUBJECT: Crites, Lindell, Roy CASE NUMBER: 22-035265

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV. W. AMADON

PERSONAL CONTACT

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

On Saturday February 12, 2022 I responded to the intersection of North Military Trail and Community Drive, located within Unincorporated Palm Beach County Florida regarding a suspicious vehicle, with a suspected impaired driver. Upon arrival I met with D/S Trinidad #33097 who provided me with a signed, sworn written supplemental probable cause affidavit stating: "On 2-12-2022 at approximately 0033 hours, I responded to Military Trl and Community Dr. West Palm Beach in reference to a possible sick or injured person slumped over the wheel. Upon arrival, I observed a silver Lexus SUV FL tag # JIM25 stopped on Community Dr. facing westbound. I observed a bystander knocking on the driver-side window. As I approached the vehicle I observed a white male later identified as Lindell Crites sitting in the driver seat sleeping. Fire Rescue # 24 arrived on scene (run # 22019232) and began knocking on the window. I reposition my vehicle in front of the Lexus to avoid the vehicle from moving forward and colliding with traffic when the driver awakes. After several attempts, Crites woke up and appeared to be confused. Fire Rescue asked Crites to lower the window several times. Crites lowered the window just a few inches down. I was able to stick my hand through the open window and unlock the vehicle. I immediately smell a strong odor of an alcoholic beverage emanating from the vehicle. I asked Crites if he had any medical issues, Crites stated he didn't. As Crites spoke I could smell a strong odor of an alcoholic beverage emanating from his breath. I observed Crites also had bloodshot eyes and slurred speech. Fire Rescue completed their vital checks with Crites and everything appeared to be good".

OBSERVATION OF DRIVER:

I observed the defendant to be unsteady on his feet. I observed the defendant to have a noticeable orbital sway as they stood. I observed the defendant's clothing was properly worn. The defendant's eyes were red and glassy. The defendant weaved as he walked from their vehicle to the front of mine.

DRIVER'S STATEMENTS:

The defendant admitted to consuming three vodka and cranberry drinks approximately 7 hours ago.

ODORS:

I immediately detected the odor of an unknown alcoholic beverage emanating from the defendant's breath that intensified when they spoke.

GENERAL OBSERVATIONS

SPEECH: slow / slurred / soft spoken

ATTITUDE: polite / respectful /

CLOTHING: white shirt / gray shorts / black shoes

MEDICAL/OTHER: stated none

STATE OF FLORIDA
COUNTY OF PALM BEACH

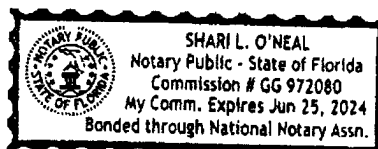
INV. W. AMADON
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of February, 20 21 by INV. W. AMADON

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

Shari O'Neal (#6212)

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



SCANNED

FEB 12 2022

SUBJECT: Crites, Lindell, Roy

CASE NUMBER 22-035265

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:

The defendant had a noticeable orbital sway during this task.

WALK & TURN:

The second task performed was the Walk and Turn. The defendant was placed into the instructional stance and told to remain in that position until I told him to move. The defendant was given instructions and a demonstration. The defendant moved from the instructional position prior to me telling him to move. The defendant missed heel to toe. The defendant stepped off the line. The defendant did not count aloud. The defendant performed an improper turn. The defendant used his arms for balance. The defendant had a noticeable orbital sway during this task.

ONE LEG STAND:

The third task performed was the One Leg Stand. The defendant was placed into the instructional stance and told to remain in that position until I told him to move. The defendant was given instructions and a demonstration. The defendant put his foot down more than three times within approximately thirty seconds. The defendant did not count aloud. The defendant swayed trying to maintain balance. The defendant had a noticeable orbital sway during this task.

FINGER TO NOSE:

The forth task performed was the Finger to Nose Task. The defendant was placed into the instructional stance and told to remain in that position until I told him to move. The defendant was given instructions and a demonstration. The defendant had to be reminded to keep his/her eyes closed. The defendant had to be reminded to keep his feet together. The defendant did not touch tip to tip as instructed. The defendant searched for his own nose with his finger. The defendant used the wrong hand. The defendant had a noticeable orbital sway during this task.

ROMBERG ALPHABET:

The fifth task performed was the Romberg Alphabet. The defendant was placed into the instructional stance and told to remain in that position until I told him to move. The defendant was given instructions and a demonstration. The defendant had to be reminded to keep his eyes closed. The defendant incorrectly recited the alphabet.

BREATH TEST RESULTS: 1) 0.117 2) 0.114 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. W. AMADON

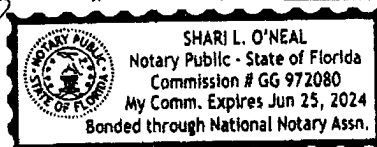
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of February, 2021 by INV. W. AMADON

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

Shari O'Neal (#6212)

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



SCANNED

FFR 12 2022

SUBJECT: ALTES, LINDELL R CASE NUMBER: 22-035265

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.

SCANNED

FEB 12 2022

SUSPECT'S SIGNATURE: (X) READ ON CAMERA



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

PBSO CASE # 22-035265 PBSO ZONE 3-21

AGENCY CASE # _____ CRASH CASE # _____

TIME OF STOP/CRASH 0033 DATE 02/12/2022 DAY Saturday

SUBJECT'S NAME Crites, Lindell, Roy RACE W SEX M

HGT 6'00 WGT 165 DOB 8/18/1975

LOCATION N MILITARY TRAIL AND COMMUNITY DRIVE, UNINCORPORATED/FL/334

ARRESTING OFFICER'S NAME & ID INV. W. AMADON (9440) AGENCY Palm Beach County Sheriff's Office

DIVISION: C.I.D. / DUI

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0152

ARREST TIME 0137

BREATH RESULTS:

1)	.117
2)	.114
3)	
4)	

TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # /

SCANNED

FEB 12 2022

TESTING FACILITY TASK REPORT

AGENCY: PBSO INV. AMADON #9440

SUBJECT: CRITES, LINDELL R. CASE NUMBER: 22-035265

DATE: 02-12-22 VIDEO DVD NUMBER: N/A

BEGINNING TIME: 02:22 HRS ENDING TIME: 02:37 HRS

BREATH TESTS RESULTS: 1) .117 TIME 02:27 A.M. ☒ P.M. ☐ 2) .114 TIME 02:30 A.M. ☒ P.M. ☐
3) TIME A.M. ☐ P.M. ☐ 4) TIME A.M. ☐ P.M. ☐

BREATH OPERATOR: S.O'NEAL #6212

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLUR, SOFT SPOKEN

ATTITUDE: CALM, QUIET, COOPERATIVE

CLOTHING: SHIRT- WHITE/ BLUE WRITING SHORTS- GREEN KHAKI

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: RED, GLASSY
ODOR OF UNKNOWN ALCOHOLIC BEVERAGE.

COMMENTS:

20 MIN. OBSERVATION DONE BY A/O AMADON #9440
A/O REQUESTED THE BREATH TEST.
D SUBMITTED TO THE BREATH REQUEST.
D COMPLETED THE TEST CORRECTLY.
C/W READ ON CAMERA.
EXPLAINED THE BREATH TEST RESULTS TO THE D.
Q&A CONDUCTED.

SCANNED

FEB 12 2022

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: 80-006478 Software: 8100.27
Date of Test: 02/12/2022

Date of Last Agency Inspection: 02/04/2022

Observation Period Began: 01:52

Subject's Name: LINDELL R CRITES

DOB: 08/18/1975 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	02:25
	Air Blank	0.000	02:26
	Control Test	0.079	02:26
	Air Blank	0.000	02:26
	Subject Sample #1	0.117	02:27
	Air Blank	0.000	02:28
	Air Blank	0.000	02:29
	Subject Sample #2	0.114	02:30
	Air Blank	0.000	02:30
	Control Test	0.079	02:31
	Air Blank	0.000	02:31
	Diagnostics Check	OK	02:31

Cylinder Lot: 19021080A2
Exp: 09/05/2023

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 SHARI L O'NEAL, 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: 02-12-22

Sworn to (or affirmed) before me this 12 day of February, 2022

Tim W Amadon

Signature of Notary Public-State of Florida

Inv. Amadon #9440

Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.



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.	2 -4
	<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: 2022004036	Date: 2/12/2022
	Specialist Name/ID: S.Evans/23872

SCANNED

FEB 12 2022