

502021-CT-001942-ANB

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 502600		Agency Name PALM BEACH GARDENS POLICE DEPARTMENT		Agency Report Number (N.T.A.'s only) 78- 2100550	
Charge Type: Check as many as apply.		Location of Arrest (Including Name of Business) N JOG RD/IBIZA DR, PBG, FL		Location of Offense (Business Name, Address) MIRASOL DR/N JOG RD, PBG, FL		Weapon Seized / Type 2 1. Yes 2. No	
Date of Arrest 02/06/2021		Time of Arrest 02:49		Booking Date		Booking Time	
Name (Last, First, Middle) ALBANESE, MARC,		Aliases (Name, DOB, Soc. Sec. #, Etc.)					
Race W - White I - American Indian B - Black O - Oriental/Asian W		Sex M		Date of Birth 09/11/1971		Height 6'0	
Weight 195		Eye Color BRO		Hair Color BRO		Complexion LIGHT	
Build MED		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) N/A		Marital Status MARRIED		Religion CATHOLIC	
Local Address (Street, Apt. Number) 119 ISLE VERDE WAY, PALM BEACH GARDENS, FL 33418		Phone (561) 777-5117		Indication of Alcohol Influence 1. City 2. County 3. Florida 4. Out of State 1			
Permanent Address (Street, Apt. Number) 119 ISLE VERDE WAY, PALM BEACH GARDENS, FL 33418		Phone ()		Address Source VERBAL			
Business Address (Name, Street) ()		Phone ()		Occupation ()			
D/L Number, State A415540713310 FL		Soc. Sec. Number ()		INS Number ()		Place of Birth (City, State) MEDFORD, MA	
Citizenship US		Co-Defendant Name (Last, First, Middle)		Race		Sex	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
Parent Legal Custodian Other: ()		Name (Last) (First) (Middle)		Residence Phone ()		Business Phone ()	
Address (Street, Apt. Number) ()		City (State) (Zip)		Notified by: (Name) Date Time			
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 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)(A)	
Drug Activity E		Drug Type M		Amount / Unit		Offense #	
Warrant / Capias Number		Bond					
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
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	
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	
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 MARCH Day 10 Year 2021 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 02/06/2021	
HOLD for other Agency Name:		Signature of Arresting Officer (Signature) 514		Name Verification (Printed by Arrestee) FEB 06 7:18			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) Ofc. ANDREW FLINK		I.D. # 514	
Intake Duty (Signature)		I.D. #		Pouch #		Transferring Officer ANDREW FLINK	
I.D. #		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)
5# 0148514 7# 508

SUBJECT: Albanese, Marc CASE NUMBER: _____

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? Jay Rd

DIRECTION OF TRAVEL? N WHERE DID YOU START? PBk Burrs Rd/road 115

WHAT TIME DID YOU START? 20 min ago WHAT TIME IS IT NOW? unknown

WHAT IS TODAY'S DATE? 7th or 8th Feb WHAT DAY OF THE WEEK IS IT? Friday

WHAT COUNTY AND CITY ARE YOU IN NOW? PBk FL

WHEN DID YOU LAST EAT? Early Evening WHAT DID YOU EAT? Pizza, Snacks

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

HOW MUCH DO YOU WEIGH? 195 HAVE YOU BEEN DRINKING? No 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? No

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? Medical Sales WHEN DID YOU LAST WORK? Today

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? ACL Reconstruction, low back

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

DO YOU LIMP? Sometimes 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? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? No WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? yes WHAT? See Video WHEN? _____

DO YOU HAVE:

EPILEPSY?	_____
GLASS EYE?	<u>No</u>
FALSE TEETH?	<u>Two Implants</u>
EAR INFECTION?	_____
INNER EAR TROUBLE?	<u>No</u>
DIABETES?	_____

*Ambien, Xanax
100mg of Opial
SUBOXONE, HFB MEDS.*

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? No WHERE? _____

INTERVIEWER: OFC. A. FINK #514

SUBJECT: Albanese, Marc CASE NUMBER: _____

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 Off Flink of the PSPD

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 Rietz

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

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: 02/06/2021

Date of Last Agency Inspection: 01/15/2021

Observation Period Began: 03:23

Subject's Name: MARC ALBANESE

DOB: 09/11/1971 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	03:53
	Air Blank	0.000	03:54
	Control Test	0.079	03:54
	Air Blank	0.000	03:55
	Subject Sample #1	0.000	03:55
	Air Blank	0.000	03:56
	Air Blank	0.000	03:58
	Subject Sample #2	0.000	03:58
	Air Blank	0.000	03:59
	Control Test	0.079	03:59
	Air Blank	0.000	04:00
	Diagnostics Check	OK	04:00

Cylinder Lot: 22620080A2
Exp: 10/05/2022

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 JOSHUA J BELL, 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: 2/6/21

Sworn to (or affirmed) before me this 6 day of February, 2021

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 322.2615, F.S.

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

I, Ofc. ANDREW FLINK, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of Palm Beach Gardens Police Department, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 6TH day of FEBRUARY, 20 21, at 02:49 P.M. A.M.

DRIVER MARC ALBANESE
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# A415540713310, state of FL, was placed under lawful arrest for

the offense of DRIVING UNDER THE INFLUENCE by Ofc. ANDREW FLINK and
issued Citation # A56HGQE (Name of Arresting Officer)

That on or about the 6TH day of FEBRUARY, 20 21, at 0615 P.M. A.M.

in PALM BEACH County,

I requested that the driver submit to a breath and/or X 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)



(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before

me this 6th day of February, 20 21,

by Ofc. ANDREW FLINK,

who is personally known to me or who has produced

Personally Known as identification

Notary Public [Signature]

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title

Date 2/6/21

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.

TESTING FACILITY TASK REPORT

AGENCY: PBG

SUBJECT: ALBANESE, MARC

DATE: Feb 6, 2021

BEGINNING TIME: 0351

CASE NUMBER: 21-032770

VIDEO DVD NUMBER: N/A

ENDING TIME: 0411

BREATH TESTS RESULTS: 1) .000 TIME 0355 A.M. P.M. 2) .000 TIME 0358 A.M. P.M.
3) N/A TIME XX A.M. P.M. 4) N/A TIME XX A.M. P.M.

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: COOPERATIVE, POLITE, EMOTIONAL

CLOTHING: GREY/RED JACKET, BLUE SWEAT PANTS, BLUE SHOES

MEDICAL CONDITIONS: HIGH BLOOD PRESSURE

MEDICATIONS: BLOOD PRESSURE MEDS, XANAX, AMBIEN, SUBOXONE

OTHER:

EYES: BLOODSHOT,

COMMENTS:

ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0323 HOURS

SUBJECT STATED HE WOULD TAKE BREATH TEST

TECH READ BREATH TEST RESULTS / SUBJECT STATED HE UNDERSTOOD BREATH TEST RESULTS

A/O REQUESTED A URINE SAMPLE / SUBJECT STATED HE WOULD NOT PROVIDE A URINE SAMPLE

A/O READ I.C / SUBJECT STATED HE UNDERSTOOD I.C AND REFUSED TO PROVIDE A URINE SAMPLE

A/O CALLED A REFUSAL AT 0402 HOURS / SUBJECT CHANGED HIS MIND AND STATED HE WOULD PROVIDE A URINE SAMPLE

A/O READ RIGHTS / SUBJECT STATED HE UNDERSTOOD HIS RIGHTS

A/O CONDUCTED Q AND A / SUBJECT ANSWERED Q AND A

D.R.E. EVALUATION DONE BY OFFICER S. MCGILLICUDDY JUPITER PD

SUBJECT WAS UNABLE OR UNWILLING TO PROVIDE A URINE SAMPLE / A/O CALLED A REFUSAL AT 0615HRS

REFUSED



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

PBSO CASE # 21-032770 PBSO ZONE 3-13

AGENCY CASE # 21000550 CRASH CASE # _____

TIME OF STOP/CRASH 0230 DATE 02/06/2021 DAY SATURDAY

SUBJECT'S NAME ALBANESE MARC RACE W SEX M
LAST FIRST MD

HGT 6'0 WGT 195 DOB 09/11/1971

LOCATION N JOG RD/IBIZA DR, PBG, FL

ARRESTING OFFICER'S NAME & ID Ofc. ANDREW FLINK 514 AGENCY PBGPD

DIVISION: TRAFFIC UNIT

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0323

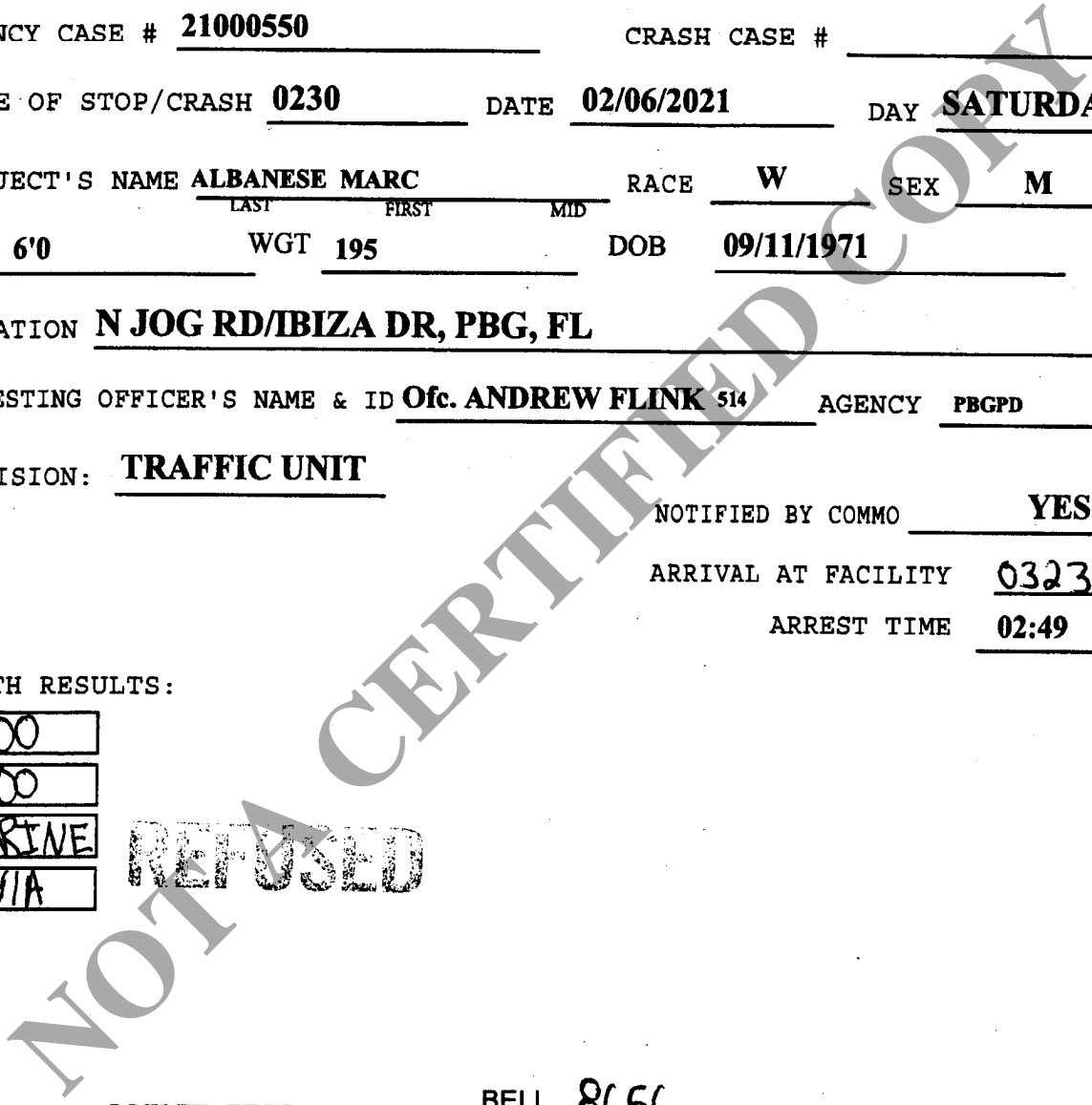
ARREST TIME 02:49

BREATH RESULTS:

- 1) .000
- 2) .000
- 3) -URINE
- 4) -MIA

REFUSED

BREATH TEST OPERATOR: BELL 8656



SUBJECT: ALBANESE, MARC,

CASE NUMBER 21000550

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:

Albanese was swaying back and forth during the exercise. Albanese had a lack of convergence in both eyes.

WALK & TURN:

During the instructions, Albanese raised his arms from his sides and started prior to being told to do so. During the first set of steps, Albanese raised his arms more than six inches from his sides and missed heel-to-toe on two steps. During the turnaround, Albanese came off the line then had to recompose himself prior to beginning the return set of steps. During the return, Albanese again raised his arms more than six inches from his sides. Albanese stepped off the line twice and missed heel-to-toe multiple times. Albanese also took eight steps rather than nine.

ONE LEG STAND:

During the exercise, Albanese raised his left foot. Albanese was swaying throughout the exercise and kept his arms raised more than six inches from his sides. Albanese placed his foot down multiple times prior to being told to do so. Albanese repeated the number "15" twice.

ROMBERG BALANCE

During the exercise, Albanese was swaying back and forth during the exercise and estimated the passage of 30 seconds in approximately 36 seconds. This Officer observed body tremors and eyelid tremors on Albanese.

ROMBERG ALPHABET:

During the exercise, Albanese expeditiously recited the alphabet, however did not skip any letters. This Officer again observed eyelid tremors and body tremors on Albanese.

BREATH TEST RESULTS: 1) .000 2) .000 3) urine 4) -

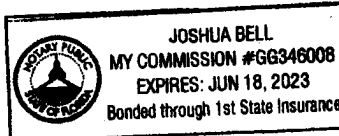
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 6th day of February 2021 by Ofc. ANDREW FLINK

(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)



D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 6TH DAY OF FEBRUARY 20 21 AT 0230 AM PM

SUBJECT: ALBANESE, MARC, CASE NUMBER: 21000550

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: Ofc. ANDREW FLINK 514
PERSONAL CONTACT

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

Ofc Butzbach 507 said he observed a vehicle, a Subaru utility (JQRJ72/FL) traveling 20 MPH over the posted speed limit, in the area of Mirasol Dr and N Jog Rd, PBG, FL. Ofc Butzbach stopped the vehicle in the area of N Jog Rd and Ibiza Dr, PBG, FL. This Officer arrived on scene and made contact with the driver and lone occupant, identified via Florida Driver License photo, Marc Albanese, while he was still in actual physical control of the vehicle.

OBSERVATION OF DRIVER:

Albanese had watery eyes, slurred speech, flushed red face, was sweating, and was very restless and talkative.

DRIVER'S STATEMENTS:

Albanese said he was coming from his mother's house on Burns Rd, because he forgot his cell phone at the location. Albanese denied consuming alcohol and/or controlled substances on this night.

ODORS:

None

GENERAL OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Compliant, upset

CLOTHING: Red/Grey sweater, blue pants, blue sneakers

MEDICAL/OTHER: Left knee surgery

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 6th day of February 2021 by Ofc. ANDREW FLINK

(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)



JOSHUA BELL
MY COMMISSION #GG348008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance



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"/>		** (viii) Clinical records under the Baker Act. §394.4615(7), Fla. Stat.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>	119.071 (3)(A), 119.071 (3)(B)(1-3C)	Other: Security at the Jail..(Security of locations Housed at the jail)..	
	<input type="checkbox"/>	119.071(2)(j)	Other: MARSY'S LAW PROTECTED INFORMATION REGARDING VICTIM(S).	

REVIEW COMPLETED BY

Booking Number: 2021003074	Date: 2/7/2021
	Specialist Name/ID: M. Tooks #8557