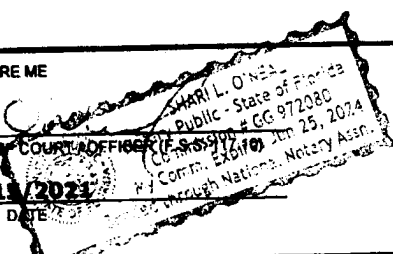
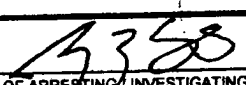


ADMINISTRATIVE	OBTS Number		ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE				
	Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 5, 4, 21-004052									
	Charge Type: Check as many as apply: <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		If Weapon Seized Enter Type UNARMED		Multiple Clearance Indicator					
	Location of Arrest (Including Name of Business)		Location of Offense (Business Name, Address)		1 E INDIANTOWN RD/N ALT A1A, JUPITER, FL 33477									
	Date of Arrest 11/15/2021	Time of Arrest 21:03	Booking Date 11/15/2021	Booking Time 21:13	Jail Date // : :	Jail Time	Location of Vehicle							
	Name (Last, First, Middle) BAILE, MARY WOOD													
	Alias:													
	Race W - White B - Black		Sex M - Male F - Female	Date of Birth 01/13/1982	Height 5'07	Weight 130	Eye Color BLUE	Hair Color BROWN	Complexion LIGHT	Build Medium				
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status M		Religion		Indication of: Alcohol Influence Drug Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>							
	Local Address (Street, Apt. Number) 131 FARMINGDALE DR, JUPITER, FL 33458		(City) JUPITER		(State) FL		(Zip) 33458		Phone		Residence Type: 1. City 2. County 3. Florida 4. Out of State 1			
Permanent Address (Street, Apt. Number) 131 FARMINGDALE DR, JUPITER, FL 33458		(City) JUPITER		(State) FL		(Zip) 33458		Phone		Address Source VERBAL				
Business Address (Name, Street) 131 FARMINGDALE DR, JUPITER, FL 33458		(City) JUPITER		(State) FL		(Zip) 33458		Phone		Occupation				
D/L Number, State B400599825130 / FL		Sec. Sec. Number		DNS Number		Place of Birth (City, State) COLUMBUS, GA,		Citizenship US						
CODED	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								
JUVENILE	<input type="checkbox"/> Parent <input type="checkbox"/> Other		Name (Last, First, Middle)		Residence Phone									
	<input type="checkbox"/> Legal Custodian		Address (Street, Apt. Number)		Business Phone									
NOTICE	Notified by: (Name)		Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT IAC 3. Incarcerated									
	Released To: (Name)		Relationship	Date	Time									
NOTICE	The above address was 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's Office (Phone 355-2526) informed of any change of address.		School Attended		Grade									
	<input type="checkbox"/> Yes, by: <input type="checkbox"/> No		Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property							
CHARGE	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. Opioid/deriv.	P. Paraphernalia/ Equipment S. Synthetic	U. Unknowns Z. Other
	Charge Description DUI - DAMAGE TO PERSON/PROPERTY		Statute Violation Number 316.193(3)(C)(1)		Violation of ORD #									
CHARGE	Drug Activity N		Amount / Unit /	Offense #	Counts 2	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number		Bond					
	Charge Description DUI - NORMAL FACULTIES IMPAIRED		Statute Violation Number 316.193(1)(A)		Violation of ORD #									
CHARGE	Drug Activity N		Amount / Unit /	Offense #	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number		Bond					
	Charge Description CITATION - REFUSE TO SIGN/ACCEPT CITATION		Statute Violation Number 318.14(3)		Violation of ORD #									
IN TAKE	Health / Apparent Physical Condition of Defendant		Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries		Explain:									
	Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health		<input checked="" type="checkbox"/> T.O.T. County Jail		PROPERTY - Received By		Released By		Released To					
NOTICE	Transported By		Date Transported // : :		Time Transported		Other							
	<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in court but must comply with instructions on Page 2.		Location (Court, Room) North County PALM BEACH GARD		Court Date and Time 12/29/2021 08:30:00		2021 NOV 16 AM 7:06							
NOTICE	I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED, 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		No Photo Available							
	HOLD for Other Agency		Signature of Arresting Officer PSS		Name Verification (Printed by Arrested)		PAGE 1 OF 1							
ADMIN	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Name of Arresting Officer (Print) MCGILLICUDDY, STEVEN		ID # 1216		Witness here if subject signed with an "X".							
	Transporting Officer S. MCGILLICUDDY		ID # 388		Agency JUPITER									

OBT Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
A D M I N I S T R A T I V E	Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 5 4 21-004052				
	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:						
D E F	Name (Last, First, Middle) BAILE, MARY WOOD					Race W	Sex F	Date of Birth 01/13/1982	
	Charge Description 316.193(3)(C)(1) DUI - DAMAGE TO PERSON/PROPERTY					Charge Description 316.193(1)(A) DUI - NORMAL FACULTIES IMPAIRED			
C H A R G E S	Charge Description 318.14(3) CITATION - REFUSE TO SIGN/ACCEPT CITATIO					Charge Description			
	Victim's Name (Last, First, Middle) State Of Florida					Race	Sex	Date of Birth	
V I C T I M	Local Address (Street, Apt. Number) (City) (State) (Zip)					Phone		Address Source	
	Business Address (Name, Street) (City) (State) (Zip)					Phone		Occupation	
<p>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.</p> <p>The Person taken into custody ...</p> <p><input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> confessed to _____ <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>15</u> day of <u>November</u>, <u>2021</u> at <u>20:41</u> (Specifically include facts constituting cause for arrest.)</p>									
P R O B A B L E	<p>On 11/15/2021 at approximately 2041 hrs, Jupiter PD received numerous reports of a rollover crash involving multiple vehicles in the area of E Indiantown Road and N Alternate A1A. Sgt Kimbark, who happened to be in the area, was the first police officer on scene. I arrived on scene and observed VEHICLE-1 (23JWW/FL) in final rest in the middle of the intersection, with its front end facing VEHICLE-2 (GNGLD/FL), which was rolled onto its side, which in turn was next to VEHICLE-3 (IJ44CG), which came to final rest just against VEHICLE-2. All drivers were out of the vehicles when I arrived. Sgt Kimbark advised me that he observed Mary Baile (OF-1) in the driver seat of VEHICLE-1 and that he had helped her exit the vehicle. I conducted a crash investigation which included speaking with Alexander Guerra (WI-1) and Donald Spath (WI-2), who both advised that VEHICLE-1, while traveling west bound on E Indiantown Road ran the steady red light at N Alternate A1A, causing VEHICLE-1 to crash into the right side of VEHICLE-2, which was northbound crossing E Indiantown Road. This rolled VEHICLE-2 onto its side, which rotated and struck VEHICLE-3. During this crash VEHICLE-1 and VEHICLE-2 were a total loss and the driver of VEHICLE-2 suffered injuries to her hand.</p>								
	<p>I made contact with Baile. I observed that she had gait ataxia. She had very slurred speech and glassy bloodshot eyes. She had a very strong odor of unknown alcoholic beverage emitting from her person. She swayed in place while I spoke to her. During my talk with her she advised me that she did not run a red light and in fact was making a turn onto Indiantown Road, but she could not tell me which direction she was traveling. Baile appeared to be intoxicated to the point that she did not even have a general sense of direction or what had occurred.</p>								
C A U S E	<p>At the conclusion of my crash investigation I advised Baile of such and advised her that I was moving into a criminal DUI investigation. I read her her Miranda rights from a prepared card. Post-Miranda she admitted to having a couple of drinks and rated herself</p>								
	<p>SWORN AND SUBSCRIBED BEFORE ME</p> <p>NOTARY PUBLIC / CLERK OF COURT / OFFICE OF S.S. MARIL O'NEAL State of Florida Commission # GG 977020 My Comm. Expires Jun 23, 2024 Bonded through National Notary Assn.</p> <p>11/15/2021 DATE</p> <p>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER 5354 MCGILLICUDDY, STEVEN (1216) NAME OF OFFICER (PLEASE PRINT)</p> <p>11/15/2021 DATE</p>								
A D M I N I S T R A T I V E	<p>PAGE 1 OF 2</p>								
	<p>COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.</p>								

SCANNED
NOV 16 2021

OETS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
A D M I N I S T R A T I V E	Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 5 4 21-004052		
	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		
O F F E N D E R P R O B A B L E C A U S E S T A T E M E N T	Name (Last, First, Middle) BAILE, MARY WOOD				Race W	Sex F	Date of Birth 01/13/1982
	<p>a "2" on a drunk scale from 1-10. I asked her to participate in field sobriety exercises and she refused. I then read her the Taylor warning and she again refused to participate in SFST's. Based on my investigation I had probable cause to believe that Baile had been in actual physical control of a vehicle while under the influence of an alcoholic beverage, chemical or controlled substance to the point that her normal faculties were impaired. I placed her under arrest at 2103 hrs. While handcuffing Baile she began to tense her arms away from me and had to be ordered to stop.</p> <p>After placing her under arrest I transported her to Jupiter Medical Center for medical clearance, arriving at the hospital at 2119 hrs. I received medical clearance and transported her to the Breath Alcohol Testing (BAT) center, arriving at 2235 hrs. I placed her under a 20 minute observation period, during which I did not observe her consume nor regurgitate anything. We then went on video with BAT Technician O'Neal (ID #6212) and I requested that Baile submit to a breath test. She refused. I read her implied consent and she again refused with a marked time of 2303 hrs. I then asked her again about drinking and she admitted to having several drinks and now being a "4" on the 1-10 scale of impairment. I then placed her in holding, where she refused to sign her DUI citation and was additionally charged with that offense. BWC.</p>						
A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT OFFICER 11/15/2021 DATE				SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  MCGILlicuddy, STEVEN (1216) NAME OF OFFICER (PLEASE PRINT) 11/15/2021 DATE		
					PAGE 2 OF 2		

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

SUBJECT: **BAILE, MARY W**

CASE NUMBER: 21-004052

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 o chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST

I am OFFICER MCGILLICUDDY of the Jupiter Police Department

If you refuse to take the test I have requested of you, your driving privilege will be suspended for a period of one (1) year for a FIRST REFUSAL, or eighteen (18) months if your driving privilege has been PREVIOUSLY SUSPENDED, or if you have been PREVIOUSLY FINED under s. 327.35215, for refusing to submit to a lawful test of your breath, urine, or blood. Additionally, if you refuse to take the test I have requested of you, and if your driving privilege has been previously suspended, or if you have been previously fined under s. 327.35215, for a refusal to submit to a lawful test of your breath, urine, or blood, you will be committing a misdemeanor, in addition to any other penalties which can be imposed by law. Refusal to submit to the test I have requested is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: ON CAMERA **BAILE, MARY W**

CONSTITUTIONAL WARNINGS

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

You have the right to remain silent and not answer any questions.

Any statement must be freely and voluntarily given.

You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.

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.

If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.

I can make no threats or promises to induce you to make a statement. This must be of your own free will.

Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: READ ON BWC **BAILE, MARY W**



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

PBSO CASE # 21-128367 PBSO ZONE 3-14

AGENCY CASE # 21-004052 CRASH CASE # _____

TIME OF STOP/CRASH 2041 DATE 11/15/2021 DAY MONDAY

SUBJECT'S NAME BAILE MARY W RACE W SEX F
LAST FIRST MID
HGT 5'7 WGT 140 DOB 1/13/1982

LOCATION E INDIANTOWN RD/N ALT A1A, JUPITER FL

ARRESTING OFFICER'S NAME & ID MCGILLICUDDY 388 AGENCY JUPITER PD

DIVISION: RP - TRF

NOTIFIED BY COMMO Yes
ARRIVAL AT FACILITY 2235
ARREST TIME 2103

BREATH RESULTS:

1)
2)
3)
4)

TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # /

TESTING FACILITY TASK REPORT

AGENCY: JPD OFC. MCGILLICUDDY #388

SUBJECT: BAILE, MARY W.

CASE NUMBER: 21-128367

DATE: 11-15-21

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 22:59 HRS

ENDING TIME: 23:05 HRS

BREATH TESTS RESULT: 1) **REFUSED** A.M. ☐ P.M. ☒ 2) ☐ TIME ☐ A.M. ☐ P.M. ☐
3) ☐ TIME ☐ A.M. ☐ P.M. ☐ 4) ☐ TIME ☐ A.M. ☐ P.M. ☐

BREATH OPERATOR: S.O'NEAL #6212

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: EMOTIONAL, CRYING, UPSET, MOODSWINGS, SARCASTIC

CLOTHING: SHIRT- WHITE PANTS- BLUE JEANS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: BLOODSHOT, GLASSY, Watery AT TIMES FROM CRYING
ODOR UNKNOWN ALCOHOLIC BEVERAGE.

COMMENTS:

20 MIN. OBSERVATION CONDUCTED BY A/O MCGILLICUDDY #388
A/O STATED ON CAMERA D WAS READ C/W ON SCENE.
A/O REQUESTED THE BREATH TEST ON CAMERA.
D WAS INDECISIVE ABOUT THE TEST, A/O READ THE IMPLIED CONSENT ON CAMERA TO THE D.
D REFUSED TO SUBMIT AFTER THE I/C WAS READ TO HER.
A/O ASKED A FEW QUESTIONS THE CONCLUDED.

TESTING FACILITY TASK REPORT

AGENCY: JPD OFC. MCGILLICUDDY #388

SUBJECT: BAILE, MARY W.

CASE NUMBER: 21-128367

DATE: 11-15-21

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 22:59 HRS

ENDING TIME: 23:05 HRS

BREATH TESTS RESULTS: 1) **REFUSED** TIME 23:03 A.M. ☐ P.M. ☒ 2) TIME A.M. ☐ P.M. ☐
3) TIME A.M. ☐ P.M. ☐ 4) TIME A.M. ☐ P.M. ☐

BREATH OPERATOR: S.O'NEAL #6212

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: EMOTIONAL, CRYING, UPSET, MOODSWINGS, SARCASTIC

CLOTHING: SHIRT- WHITE PANTS- BLUE JEANS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: BLOODSHOT, GLASSY, Watery AT TIMES FROM CRYING
ODOR UNKNOWN ALCOHOLIC BEVERAGE.

COMMENTS:

20 MIN. OBSERVATION CONDUCTED BY A/O MCGILLICUDDY #388
A/O STATED ON CAMERA D WAS READ C/W ON SCENE.
A/O REQUESTED THE BREATH TEST ON CAMERA.
D WAS INDECISIVE ABOUT THE TEST, A/O READ THE IMPLIED CONSENT ON CAMERA TO THE D.
D REFUSED TO SUBMIT AFTER THE I/C WAS READ TO HER.
A/O ASKED A FEW QUESTIONS THE CONCLUDED.

**STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST**

I, OFFICER MCGILLICUDDY, a duly certified Law Enforcement or Correctional Officer, am a
(Name of Officer reading Implied Consent Warning)

member of Jupiter Police Department, and I do swear
(Name of Law Enforcement Agency)

or affirm that on or about the 15th day of NOVEMBER, 20 21, at 2103 ☒ P.M. ☐ A.M.

DRIVER MARY W BAILE
FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL # B400-599-82-513-0, state of FLORIDA, was placed under lawful arrest for

the offense of DUI by OFFICER MCGILLICUDDY and
(Name of Arresting Officer)

issued citation # ADB9FUE.

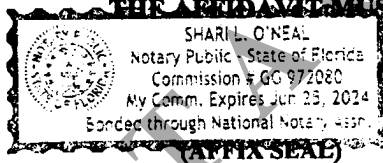
That on or about the 15TH day of NOVEMBER, 20 21, at 2303 ☒ P.M. ☐ A.M.

in Palm Beach County,

I requested that the driver submit to a **BREATH** test for the purpose of determining its alcohol content. I informed the driver that the refusal to submit to such test 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, or if he or she had been previously fined under s. 327.35215, F.S., 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, or if he or she has been previously fined under s. 327.35215, F.S., for refusal to submit to a lawful test of his or her breath, urine, or blood. Nonetheless, the driver refused to submit to the test requested.

[Signature]
Signature of Law Enforcement Officer or Correctional Officer

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



The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

The foregoing instrument was sworn and subscribed before me this _____ day of _____, 20 _____,

by Officer MCGILLICUDDY 388,
who is personally known to me or who has produced
Personally Known as identification.

Notary Public Shari O'Neal (#6212)

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, the appropriate copy of the UTC, and the probable cause affidavit.

WITNESS LIST

CASE NUMBER: 21-004052

ARRESTING OFFICER: MCGILLICUDDY

ADDRESS: 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME): _____ (WORK) (561) 746-6201

CAN TESTIFY TO: PC

NAME: SGT KIMBARK

ADDRESS: 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: WHEEL WITNESS

NAME: PFC ALBANO

ADDRESS 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: BACKUP ON STOP

NAME: GABRIELLE SLOAN

ADDRESS 58 GOLFWAY DRIVE, TEQUESTA FL

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: BEING VICTIM OF CRIME

NAME: ALEXANDER GUERRA

ADDRESS 1200 NEOGA STREET, JUPITER FL 33458

PHONE NUMBERS (HOME) 561-222-5434 (WORK) _____

CAN TESTIFY TO: WHEEL WITNESS

NAME: DONALD SPATH

ADDRESS 3083 SE JEFFERSON STREET, STUART FL 34997

PHONE NUMBERS (HOME) 772-260-9472 (WORK) _____

CAN TESTIFY TO: WHEEL WITNESS

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: _____

SCANNED
NOV 16 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: 2021028750	Date: 11/16/2021
	Specialist Name/ID: T Howard/7185