JH 051931 4 20CT-13768 2862

ARREST / NOTICE TO APPEAR

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias | 1 | JUVENILE

ADMINISTRATION

OBTS Number:

Agency ORI Number: 0500700

Agency Name: Riviera Beach Police Department

Agency Report Number (N.T.A.'s only): 8 | 4 | 20-07974

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

If Weapon Seized, Enter Type: Not Applicable/none

Multiple Clearance Indicator: 1

Location of Arrest (Including Name of Business): 4128 W BLUE HERON BLVD

Location of Offense (Business Name, Address): 4128 W BLUE HERON BLVD, RIVIERA BEACH, FL 33404

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
10/28/2020	01:15	10/28/2020	01:25			

DEFENDANT

Name (Last, First, Middle): HARTE, MICHAEL D

Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:

Race (W - White, I - American Indian, B - Black, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	11/24/1961	6'02	270	BLUE	BROWN	FAIR	HEAVY

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description):

Marital Status: S | Religion: NONE | Indication of Alcohol Influence / Drug Influence: Yes ☒ No ☐ Unk. ☐

Local Address (Street, Apt. Number) (City) (State) (Zip): 5762 OKEECHOBEE BLVD 500, WEST PALM BEACH, FL 33417 | Phone: (772) 266-0054 | Residence Type: 1. City 2. County 3. Florida 4. Out of State | 4

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 5762 OKEECHOBEE BLVD 500, WEST PALM BEACH, FL 33417 | Phone: (772) 266-0054 | Address Source: DEFENDANT

Business Address (Name, Street) (City) (State) (Zip): | Phone: | Occupation:

D/L Number, State: H630544614240 / FL | [redacted] | INS Number: | Place of Birth (City, State): BENNINGTON, VT, | Citizenship: US

CO-DEF

Co-Defendant Name (Last, First, Middle): | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

Co-Defendant Name (Last, First, Middle): | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Other: ☐ Legal Custodian | 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 Department and Released 2. TOT JAC 3. Incarcerated

Released To: (Name) | Relationship | Date | Time

The above address was provided by ☐ defendant and/or ☐ defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.

☐ Yes, by: ☐ No:

School Attended | Grade

Property Crime? ☐ Yes ☒ No | Description of Property | Value of Property

CODE

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

Charge Description: DUI - DRIVING WHILE UNDER INFLUENCE (MISDEMEANOR) | Statute Violation Number: 316.193(1)(A) | Violation of ORD #:

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/	20-07974	1	☐ Y ☒ N		

CHARGE

Charge Description: | Statute Violation Number: | Violation of ORD #:

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

CHARGE

Charge Description: | Statute Violation Number: | Violation of ORD #:

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant: | Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries

Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By | Released By | Released To

Transported By | Date Transported: / / | Time Transported: : | Other

NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court

☐ 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: 11/25/2020 08:30:00

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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian) | Date Signed

No Photo Available

ADMIN

HOLD for Other Agency | Signature of Arresting Officer | Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Name of Arresting Officer (Print): CHARELUS, O. J. | I.D. #: 6809

Intake Deputy: SPANN | I.D. #: 8101 | Pouch # | Transporting Officer: OFC.CHARELUS | I.D. #: 6809 | Agency: RBPD

Witness here if subject signed with an "X".

PAGE 1 OF 1

NOT A CERTIFIED COPY

SCANNED OCT 28 2020

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 28th DAY OF October 20 20, AT 12:35 ☑AM ☐PM

SUBJECT: Michael Harte CASE NUMBER: 20-07974

AGENCY: RPBD ARRESTING OFFICER: Ofc. O Charelus #6809

PERSONAL CONTACT

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

At approximately 12:35am, Capt. T. Smith #4151 observed a white Nissan Versa parked stationary on the access road of 4128 W Blue Heron Blvd with its high beams on. Capt. T. Smith attempted to gain the drivers attention which was met with negative results. Capt. T.Smith pulled up next to the vehicle and observed the driver to be slouched over the steering wheel of the vehicle. Capt. T.Smith initiated a traffic stop on the vehicle. Capt. T. Smith made contact with the driver later identified by FL DL to be Michael Harte (11/24/1961 W/M). When asked to step out, Michael stumbled getting out of the vehicle.

OBSERVATION OF DRIVER:

Prior to making contact with Michael, Officer Charelus observed Michael leaning on the back of his vehicle for balance. He was asked to step away from the vehicle but later returned to lean on the vehicle.

Officer Charelus made contact with Michael and immediately smelled the odor of an unknown alcoholic beverage coming from his breath. Michael appeared to be confused, dazed, and was continuously swaying from left to right. Michael was slurred of speech and appeared to forget what was said to him when he was being asked basic questions. Michael had red glassy bloodshot eyes with constricted pupils. Michael appeared to be disorientated and unable to stand straight at times throughout the investigation.

DRIVER'S STATEMENTS:

When asked his name, Michael stated "My Har" and then corrected himself. Michael stated he had no medical issues and did not take any medications. Michael was asked where he was coming from and he advised he was just going home. Michael stated he had a couple beers but forgot when he last drank them.

ODORS:

Strong odor of an unknown alcoholic beverage coming from his breath and person.

GENERAL OBSERVATIONS

SPEECH: Slurred, mumbled, rambling

ATTITUDE: Cooperative, calm, groggy, spaced, frustrated

CLOTHING: Disheveled

MEDICAL/OTHER: No medical issues.

STATE OF FLORIDA
COUNTY OF PALM BEACH

Charelus #6809
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 28th day of October 20 2020 by Ofc. O. Charelus

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

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

Notary Public State of Florida
Renee Ragin
My Commission GG 966418
Expires 03/05/2024

SCANNED
OCT 28 2020

NOT A CERTIFIED COPY

SUBJECT: Michael Harte **CASE NUMBER** 20-07974

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- [x] RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Michael had to be told multiple times to follow the stimulus with his eyes and his eyes only. Michael was

WALK & TURN:

During the Walk & Turn instructional stage, Michael was unable to stay in position in order to complete the task. Officer Charelus repeated the instructions multiple times and also demonstrated. Michael stepped off the line in the instructional phase and also started the task prior to being told to. It was determined

ONE LEG STAND:

During the One Leg Stand, Michael swayed during the initial exercise. He put his foot down multiple times prior to the end of the task.

FINGER TO NOSE:

During the Finger To Nose, Michael had to be reminded of the instructions multiple times. Michael was unable to keep his eyes closed during the task. Michael for got to put his arms back down on all 6 commands of L/R.

ROMBERG ALPHABET:

Michael did not keep his left eye closed.

NOT A CERTIFIED COPY

SCANNED
OCT 28 2020

BREATH TEST RESULTS: 1) 0.208 2) 0.208 3) 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 28th day of October 20 20 by Ofc. O. Charelus

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

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

Notary Public State of Florida
Renee Ragin
My Commission GG 966418
Expires 03/05/2024

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

PBSO CASE # 20-121050 PBSO ZONE 3-23

AGENCY CASE # 20-07974 CRASH CASE # _____

TIME OF STOP/CRASH 00:35hrs DATE 10/28/2020 DAY Wednesday

SUBJECT'S NAME Michael Harte RACE W SEX M

HGT 6'2" WGT 270 DOB 11/24/1961

LOCATION 4128 W Blue Heron Blvd

ARRESTING OFFICER'S NAME & ID Ofc. O.Charelus #6809 AGENCY RPBD

DIVISION: _____

NOTIFIED BY COMMO Y

ARRIVAL AT FACILITY 01:35

ARREST TIME 0115hrs

BREATH RESULTS:

1) .208
2) .208
3) N/A
4) N/A

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

NOT A CERTIFIED COPY

SCANNED
OCT 28 2020

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: 80-006477 Software: 8100.27
Date of Test: 10/28/2020

Date of Last Agency Inspection: 10/16/2020
Observation Period Began: 01:35
Subject's Name: MICHAEL D HARTE DOB: 11/24/1961 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	02:00
Air Blank	0.000	02:00
Control Test	0.079	02:01
Air Blank	0.000	02:01
Subject Sample #1	0.208	02:02
Air Blank	0.000	02:02
Air Blank	0.000	02:04
Subject Sample #2	0.208	02:05
Air Blank	0.000	02:06
Control Test	0.079	02:06
Air Blank	0.000	02:07
Diagnostics Check	OK	02:07

Cylinder Lot: 14020080A1
Exp: 07/05/2022

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 RENEE M RAGIN, 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: _____ Date: 10/28/20
Signature

Sworn to (or affirmed) before me this 28 day of Oct., 2020

Signature of Notary Public-State of Florida | Ofc. O. Charelus #6809
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.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

NOT A CERTIFIED COPY

SCANNED
OCT 28 2020

TESTING FACILITY TASK REPORT

AGENCY: RBPD

SUBJECT: Harte, Michael D.

CASE NUMBER: 20-121050

DATE: Oct 28, 2020

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 01:57

ENDING TIME: 02:09

BREATH TESTS RESULTS: 1) .208 TIME 02:02 A.M. ☒ P.M. ☐ 2) .208 TIME 02:05 A.M. ☒ P.M. ☐

3) N/A TIME ——— A.M. ☐ P.M. ☐ 4) N/A TIME ——— A.M. ☐ P.M. ☐

BREATH OPERATOR: R. Ragin #16877

MAINTENANCE TECHNICAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Calm, cooperative

CLOTHING: Tan pants, light blue shit, white sneakers

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER:

Eyes bloodshot
Odor of unknown alcoholic beverage on breath.

COMMENTS:

Arrived at center A/O started 20 minute observation period at 01:35 hrs.

Subject agreed to take breath test.

A/O read rights.
Subject stated he understood rights.

Tech read breath test results.
Subject stated he understood test results.

A/O attempted Q&A.
Subject refuse to answer questions.

NOT A CERTIFIED COPY

SCANNED
OCT 28 2020

WITNESS LIST

CASE NUMBER: 20-07974

ARRESTING OFFICER: Ofc.Charelus #6809

ADDRESS: 600 W Blue Heron Blvd, Riviera Beach, FL 33404

PHONE NUMBERS (HOME): 561-727-4897 (WORK) 561-315-3541

CAN TESTIFY TO: DUI Investigation

NAME: Capt. TSmith #4151

ADDRESS: 600 W Blue Heron Blvd, Riviera Beach, FL 33404

PHONE NUMBERS (HOME) 561-845-4123 (WORK)

CAN TESTIFY TO: Traffic Stop/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:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NOT A CERTIFIED COPY

SCANNED
OCT 28 2020

SUBJECT: Harte, Michael D. CASE NUMBER: 20-07974

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) Refused on Camera

SCANNED OCT 28 2020

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

PBSO #0129B REV. 06/11

NOT A CERTIFIED COPY

SUBJECT: Harte, Michael D. CASE NUMBER: 20-07974

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? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

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

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

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

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

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

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

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

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

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

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

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

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE:
- EPILEPSY? _____
- GLASS EYE? _____
- FALSE TEETH? _____
- EAR INFECTION? _____
- INNER EAR TROUBLE? _____
- DIABETES? _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: _____

SCANNED
OCT 28 20

NOT A CERTIFIED COPY

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

PBSO #0129C REV. 9/93

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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

NOT A CERTIFIED COPY

REVIEW COMPLETED BY

Booking Number: 2020025383	**Date:** 10/28/2020/
	Specialist Name/ID: C. Anastasi/#21908

SCANNED
OCT 28 2020