

88 CT 6076

ARREST / NOTICE TO APPEAR

1. Arrest
2. N.T.A.
3. Request for Warrant
4. Request for Copies

1

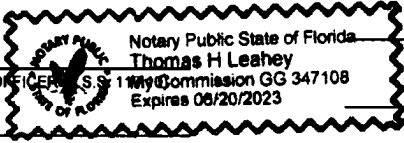
JUVENILE

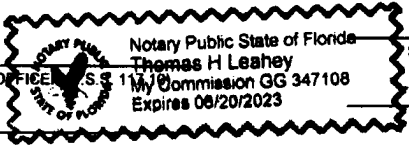
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AD MIN IS TR A TION	ORIS Number	Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 5, 4 22-001553		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Copies		1	JUVENILE	N
D E F E N D A N T	Charge Type: ☐ 1. Felony ☐ 2. Traffic Misdemeanor ☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		If Weapon Seized Enter Type UNARMED		Multiple Clearance Indicator							
	Location of Arrest (Including Name of Business) UNIVERSITY BLVD/S CENTRAL BLVD					Location of Offense (Business Name, Address) 899 UNIVERSITY BLVD/S CENTRAL BLVD, JUPITER, FL						
	Date of Arrest 04/15/2022	Time of Arrest 21:24	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle					
	Name (Last, First, Middle) SCHUTZMAN, MICHAEL S											
C O D E F	Alias (Name, DOB, Soc. Sec. #, Etc.) Alias: SCHUTZMAN, MICHAEL S											
	Race W - White B - Black O - Oriental/Asian W	Sex M	Date of Birth 09/29/1975	Height 5'08	Weight 175	Eye Color BLUE	Hair Color BROWN	Complexion LIGHT	Build Medium			
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)					Marital Status S	Religion JEWISH	Indication of Alcohol Influence Drug Influence Yes ☐ No ☐ Unk. ☐				
	Local Address (Street, Apt. Number) 353 SALINAS DR, PALM BEACH GARDENS, FL 33410					(City) (954) 493-3950		Phone (954) 493-3950		Residence Type: 1. City 2. County 3. Florida 4. Out of State 1		
	Permanent Address (Street, Apt. Number) 353 SALINAS DR, PALM BEACH GARDENS, FL 33410					(City) (954) 493-3950		Phone (954) 493-3950		Address Source VERBAL		
	Business Address (Name, Street) (City) (State) (Zip)					Phone (954) 493-3950		Occupation				
	D/L Number, State S325557753490 / FL		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) BROOKLYN, NY,		Citizenship US			
	Co-Defendant Name (Last, First, Middle) [REDACTED]					Race	Sex	Date of Birth		☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile ☐ 2. At Large ☐ 4. Misdemeanor		
	Co-Defendant Name (Last, First, Middle) [REDACTED]					Race	Sex	Date of Birth		☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile ☐ 2. At Large ☐ 4. Misdemeanor		
	J U V E N I L E	☐ Parent ☐ Other ☐ Legal Custodian Name (Last, First, Middle) [REDACTED]										
Address (Street, Apt. Number) (City) (State) (Zip)												
Notified by: (Name) [REDACTED]												
Released To: (Name) [REDACTED]												
Relationship [REDACTED]												
Date [REDACTED]												
Time [REDACTED]												
JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated												
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.												
Property Crime? ☐ Yes ☒ No												
C O D E	Description of Property [REDACTED]											
	Value of Property [REDACTED]											
	Drug Activity N. N/A P. Possess S. Sell B. Buy 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 DUI - BAC/BRAC OVER .15 -OR- MINOR IN VEHICLE											
	Statute Violation Number 316.193(4)											
	Violation of ORD #											
	Bond											
	Charge Description [REDACTED]											
	Statute Violation Number [REDACTED]											
Violation of ORD #												
I N T A K E	Health / Apparent Physical Condition of Defendant [REDACTED]											
	Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries Explain: [REDACTED]											
	Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health											
	PROPERTY - Received By [REDACTED]											
	Released By [REDACTED]											
	Released To [REDACTED]											
	Transported By [REDACTED]											
	Date Transported [REDACTED]											
	Time Transported [REDACTED]											
	Other [REDACTED]											
N O T I C E T O A P P E A R	☒ 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 05/18/2022 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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.											
	Signature of Defendant (or Juvenile and Parent/Custodian) [REDACTED]											
	Date Signed [REDACTED]											
	HOLD for Other Agency [REDACTED]											
	Signature of Arresting Officer [REDACTED]											
	Name Verification (Printed by Arrestee) [REDACTED]											
	(PRINT) [REDACTED]											
Name of Arresting Officer (Print) NOBLE, RILEY												
I.D. # 1226												
Intake Deputy [REDACTED]												
I.D. # [REDACTED]												
Pouch # [REDACTED]												
Transporting Officer NOBLE, RILEY												
I.D. # [REDACTED]												
Agency 355 JPO												
Witness here if subject signed with an "X"												

CS30924

2651

OETS 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	Agency ORI Number FL 0501700	Agency Name JUPITER POLICE DEPARTMENT	Agency Report Number 5 4 22-001553							
C H A R G E S	Charge Type: Check as many as apply. ☐ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other			Special Notes:						
D E F	Name (Last, First, Middle) SCHUTZMAN, MICHAEL S			Alias		Race W	Sex M	Date of Birth 09/29/1975		
C H A R G E S	Charge Description 316.193(4) DUI - BAC/BRAC OVER .15 -OR- MINOR IN VEHICLE			Charge Description						
	Charge Description			Charge Description						
V I C T I M	Victim's Name (Last, First, Middle) State Of Florida			Race		Sex	Date of Birth			
C A U S E	Local Address (Street, Apt. Number) (City) (State) (Zip)			Phone		Address Source				
	Business Address (Name, Street) (City) (State) (Zip)			Phone		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 . . . ☐ committed the below acts in my presence. ☐ confessed to _____ admitting to the below facts. ☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the <u>15</u> day of <u>April</u>, <u>2022</u> at <u>23:43</u> (Specifically include facts constituting cause for arrest.) On Friday April 15th, 2022 at approximately 2040 hours I responded to the area of University Blvd and S Central Blvd in reference to a single vehicle crash. Upon arrival, I made contact with a witness on scene, Nancy Fetherlin (W/F 2/19/1957), who gave a sworn statement of the following: Fetherlin advised that she was walking eastbound on University Blvd at the above intersection when she heard the loud revving of a vehicle and saw a gray convertible mustang with no headlights on traveling at a high-rate of speed directly towards her. She stated the vehicle swerved out of the way and crashed directly into the median. Fetherlin advised the W/M driver, who was later identified as the registered owner of the vehicle, Michael Schutzman (W/M 09/29/1975), got out of the vehicle and watched him stumble around and start to collect broken pieces of his car. Fetherlin stated the male was wearing tan cargo shorts, baseball jersey, and baseball hat, which matched Schutzmans exact clothing description. OFC. Singer advised me he completed the traffic crash investigation prior to my arrival. I then approached the driver who was standing next to his damaged mustang (FL Tag#L8GUH). Upon initial contact with Schutzman, I could smell the strong odor of an unknown alcoholic beverage emanating from his breath that amplified as he spoke. I also observed he had red blood-shot glassy eyes and slurred speech. I advised Schutzman that was going to be changing hats and conducting a criminal DUI investigation. I then read him Miranda Warnings from a pre-printed card to which he advised he understood. Based on the aforementioned events, I requested that Schutzman submit to Standardized Field Sobriety Tasks to which he initially declined. I then read Schutzman his Taylor Warnings from a department issued card. He then advised he understood and consented to the Field Sobriety Tasks. The following are a summation of the SFSTs.										
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 <u>04/16/2022</u> DATE			SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  NOBLE, RILEY (1226) NAME OF OFFICER (PLEASE PRINT) <u>04/15/2022</u> DATE						

OBT'S Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Copies		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 22-001553							
Charge Type: Check as many as apply. ☐ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☒ 4. Traffic Misdemeanor ☐ 2. Traffic Felony ☐ 6. Other								Special Notes		
Name (Last, First, Middle) SCHUTZMAN, MICHAEL S								Race W	Sex M	Date of Birth 09/29/1975
HORIZONTAL GAZE NYSTAGMUS -No resting nystagmus in either eye -Both eyes tracked together equally -Lack of smooth pursuit in both eyes -Distinct and sustained nystagmus at maximum deviation in both eyes -Onset of nystagmus prior to 45 degrees in both eyes -No vertical nystagmus in either eye 6 of 6 clues WALK&TURN -Started task early -Failed to maintain balance -Used arms for balance -Missed heel to toe -Stopped while walking -Improper turn -Stepped off the line 7 of 8 clues ONE-LEG STAND -Put foot down -Used arms for balance -Swaying 3 of 4 clues FINGER TO NOSE 1L -Pad to side nose 2R -Pad right-bottom nose 3L -Pad to left-side nose 4R -Pad right-side 5R- Pad right-side nose 6L -Pad left-side nose -did not bring hand down multiple times ROMBERG ALPHABET -Incorrectly Reciting -Does not keep eyes closed -swaying Based on my investigation, observations, and totality of circumstances, I have probable cause to believe that Michael Schutzman was in actual physical control of a vehicle while under the influence of an alcoholic beverage, chemical, or controlled substance, to the point where his normal faculties were impaired, contrary to F.S 316.193. I placed										
SWORN AND SUBSCRIBED BEFORE ME <i>T. Leashy</i> NOTARY PUBLIC / CLERK OF COURT / OFFICIAL <i>04/16/2022</i> DATE  <i>[Signature]</i> 345 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER NOBLE, RILEY (1226) NAME OF OFFICER (PLEASE PRINT) 04/15/2022 DATE										
								PAGE 2 OF 3		

COURT

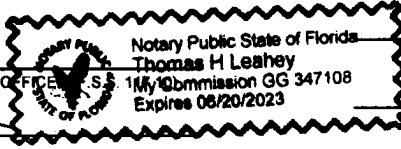
STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

OBS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
ADMINISTRATIVE	Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 5 4 22-001553		
	Charge Type: Check as many as apply. ☐ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other				Special Notes:		
DEFENDANT	Name (Last, First, Middle) SCHUTZMAN, MICHAEL S				Race W	Sex M	Date of Birth 09/29/1975
	Alias						
him into handcuffs which were double-locked and checked for proper spacing per department policy at 2124 hours. I then transported Schutzman to the Jupiter Medical center for medical clearance subsequently transported him to the Palm Beach County Breath Alcohol Testing center, arriving at 2235 hours. I placed Schutzman under a 20 minute observation period, during which he neither consumed nor regurgitated anything. We then went on video with BAT technician Leahey#19183. I requested that Schutzman provide a breath sample. He agreed and provided two breath samples of .147 and .154. Post Miranda, he stated that he had been drinking at Roger Dean Stadium and only had 2-3 beers. I placed Schutzman in holding while all necessary paperwork was completed and subsequently booked him into the Palm Beach County Jail. He was given a criminal court date of 05/18/2022, 0830 hours. The above incident was captured on BWC. This narrative is a summary of the events and not purported to be verbatim.							
NOT A CERTIFIED COPY							
ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT / OFFICE OF NOTARY PUBLIC 04/16/2022 DATE				SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  NOBLE, RILEY (1226) NAME OF OFFICER (PLEASE PRINT) 04/15/2022 DATE		
					PAGE 3 OF 3		

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.



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

PBSO CASE # 22-057476 PBSO ZONE 3-14
AGENCY CASE # 22001553 CRASH CASE # 22001553
TIME OF STOP/CRASH 8:40pm DATE 04/15/2022 DAY Friday
SUBJECT'S NAME SCHUTZMAN MICHAEL S S RACE W SEX M
HGT 5'7 WGT 175 DOB 09/29/1975

LOCATION UNIVERSITY BLVD/S CENTRAL BLVD

ARRESTING OFFICER'S NAME & ID OFC. Noble #349 AGENCY Jupiter PD

DIVISION: _____

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 2235

ARREST TIME 2124

BREATH RESULTS:

1)	.154
2)	.147
3)	N/A
4)	N/A

TESTING OFFICER'S ID 19183 PBSO VIDEOTAPE # N/A

**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: 80-006029 Software: 8100.27
Date of Test: 04/15/2022

Date of Last Agency Inspection: 03/25/2022
Observation Period Began: 22:35
Subject's Name: MICHAEL S SCHUTZMAN

DOB: 09/29/1975 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	22:59
	Air Blank	0.000	22:59
	Control Test	0.080	23:00
	Air Blank	0.000	23:00
	Subject Sample #1	0.154	23:01
	Air Blank	0.000	23:01
	Air Blank	0.000	23:03
	Subject Sample #2	0.147	23:04
	Air Blank	0.000	23:05
	Control Test	0.081	23:05
	Air Blank	0.000	23:05
	Diagnostics Check	OK	23:06

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 THOMAS H LEAHEY, 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: 04/15/22

Sworn to (or affirmed) before me this 15 day of April, 2022

OMV 349
Signature of Notary Public-State of Florida

OR R Noble # 349
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.

TESTING FACILITY TASK REPORT

AGENCY: JPD

SUBJECT: Schutzman, Michael S

CASE NUMBER: 22-057476

DATE: Apr 15, 2022

VIDEO DVD NUMBER: n/a

BEGINNING TIME: 2257

ENDING TIME: 2312

BREATH TESTS RESULTS: 1) .154 TIME 2301 A.M. ☐ P.M. ☒ 2) .147 TIME 2304 A.M. ☐ P.M. ☒
3) n/a TIME 0 A.M. ☐ P.M. ☐ 4) n/a TIME 0 A.M. ☐ P.M. ☐

BREATH OPERATOR: Thomas H Leahey #19183

MAINTENANCE TECHNICIAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: slurred,

ATTITUDE: crying, upset, talkative

CLOTHING: khaki shorts, blue t-shirt, black slip ons

MEDICAL CONDITIONS: none

MEDICATIONS: none

OTHER:

eyes were glassy & bloodshot
odor of unknown alcoholic beverage on breath
subject stated he drank 2 local brew beers - Q&A

COMMENTS:

arrived at center A/O conducted 20 observation period at 2235 hrs

subject agreed to perform breath test

subject completed breath test

A/O read rights & subject understood rights

tech read breath test results & subject understood breath test results

A/O conducted Q&A

subject answered questions

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 OFC. Noble** of the **Jupiter Police Department**

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: **Read on Camea** **SCHUTZMAN , MICHAEL S**

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 Camera** **SCHUTZMAN , MICHAEL S**

WITNESS LIST

CASE NUMBER: 22001553

ARRESTING OFFICER: OFC. Noble

ADDRESS: 210 Military Trl. Jupiter, FL 33458

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

CAN TESTIFY TO: PC

NAME: OFC. Singer

ADDRESS: 210 Military Trl. Jupiter, FL 33458

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

CAN TESTIFY TO: PC

NAME: OFC. RAZZANO

ADDRESS 210 Military Trl. Jupiter, FL 33458

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

CAN TESTIFY TO: BACK-UP OFFICER

NAME: Nancy Fetherlin W/F 2/19/1957

ADDRESS 4223 DIAMOND SO. VERO BEACH, FL 32967

PHONE NUMBERS (HOME) 772-532-8781 (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: _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____



**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:	

REVIEW COMPLETED BY

Booking Number: 2022009931

Date: 4/16/2022

Specialist Name/ID: Chantel Daniels/30347