

50-2020-CT-013362 AMB

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 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-20-118731	
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		Weapon Seized / Type 2 1. Yes 2. No NONE	
Location of Arrest (Including Name of Business) 140th Ave N & 71st PIN				Location of Offense (Business Name, Address) 140th Ave N & 71st PIN			
Date of Arrest 10/20/2020	Time of Arrest 2151	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle Priority Towing	
Name (Last, First, Middle) Ruiz-Sanchez Miguel Antonio		Alias (Name, DOB, Soc. Sec. #, Etc.)					
Race W - White - American Indian	Sex M	Date of Birth 06/05/1969	Height 5'08"	Weight 180	Eye Color brown	Hair Color black	Complexion light
Build medium				Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)			
Local Address (Street, Apt. Number) 540 Executive Center Dr Apt 206		(City) (State) (Zip) West Palm Beach FL 33401		Phone (561) 6281466		Residence Type: 1. City 2. County 3. Florida 4. Out of State 2	
Permanent Address (Street, Apt. Number)		(City) (State) (Zip)		Phone		Address Source	
Business Address (Name, Street)		(City) (State) (Zip)		Phone		Occupation	
D/L Number, State R252541692051		Soc. Sec. Number		INS Number		Place of Birth (City, State) Santa Clara, Cuba	
Citizenship yes		Co-Defendant Name (Last, First, Middle)		Race Sex Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <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"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile		Residence Phone	
Parent Legal Custodian Other:		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. Incarcerated	
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 355-2526) 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. 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)	
Violation of ORD #		Warrant / Capias Number		Bond			
Drug Activity N		Drug Type N		Amount / Unit REFUSED		Offense # 20-118731	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
Violation of ORD #		Warrant / Capias Number		Bond			
Drug Activity		Drug Type		Amount / Unit		Offense #	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
Violation of ORD #		Warrant / Capias Number		Bond			
Drug Activity		Drug Type		Amount / Unit		Offense #	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
Violation of ORD #		Warrant / Capias Number		Bond			
Drug Activity		Drug Type		Amount / Unit		Offense #	
Location (Court, Court Number, Address) CRIMINAL JUSTICE COMPLEX / 3228 GUN CLUB ROAD, WPB, FL 33406							
Court Date and Time Month November Day 19 Year 2020 Time 8:30 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 10/20/2020			
HOLD for other Agency Name:		Signature of Arresting Officer		Name Verification (Printed by Arrestee)			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:		Name of Arresting Officer (Print) D/S D. Guevara		(PRINT)			
I/State Deputy		ID #		Pouch #		PAGE	
Transporting Officer Guevara		ID # 36101		Agency PBSO		Witness here if subject signed with an "X" 1 OF 1	

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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 20 DAY OF October 2020, AT 2049 AM PM

SUBJECT: Ruiz-Sanchez Miguel Antonio CASE NUMBER: 20-118731

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S D. Guevara

PERSONAL CONTACT

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

On 10/20/2020 at approximately 2057hrs, I was called to the scene of a traffic stop at the intersection of 140th Ave N & 71st PIN, which is located in unincorporated Palm Beach County, Florida. I arrived at the scene at approximately 02122hrs. D/S Tejada #26783 relayed to me, and completed a written signed sworn supplemental Probable Cause Affidavit stating the following "While en-route to another call for service I observed an red in color Ford F150 bearing Florida Tag 234NDE eastbound on Orange Blvd. I observed the vehicle unable to maintain its lane including crossing the double yellow lines, driving at approximately 25 MPH, and nearly colliding with an oncoming traffic. The vehicle continued eastbound and veered to the right now over the white solid line near the grass area. When the vehicle approached 140th Ave N, on Orange Blvd the vehicle used its turn signal to turn northbound on a 140th Ave N but remained there without moving. When the vehicle made its right turn the same pattern of failing to maintain its lane of travel and slow speeds. I became concerned that the driver of this vehicle may be having some sort of medical condition.

I initiated a traffic stop on the red in color Ford F150 bearing Florida Tag 234NDE and came into contact with the driver and sole occupant of the vehicle. I identified the driver by his Florida Driver's License as; MIGUEL, ANTONIO, RUIZ SANCHEZ. Sanchez spoke to me and advised me he was on his way to see his brother. As Sanchez spoke to me I detected the strong smell of an unknown alcoholic beverage which intensified as he spoke. Sanchez speech was also slurred making it difficult to understand his responses. I then asked Sanchez if he had any alcoholic beverages which he stated he did not. I then noticed a case of Corona Beers on the floor between the front and back seats and more noticeable, a Styrofoam cup on the center console. I asked Sanchez what was in the cup and he said, "nothing" but handed me the cup. Inside the cup was a yellow in color liquid that emanated a strong alcoholic odor. I asked Sanchez if he had any firearms after noticing he had a CCW and with out me asking he reached for his firearm. The firearm was secured and removed from his possession for the safety of all involved.

As I walked back to my vehicle I heard Sanchez destroy and conceal the Styrofoam cup under the driver's armrest. Based on the signs of possible impairment I called for a DUI Unit to respond."

OBSERVATION OF DRIVER:

Upon making contact with the driver who was identified by his Florida Driver License Miguel Antonio Ruiz Sanchez, I immediately detected an odor of an unknown alcoholic beverage emitting from his person and face area. Sanchez speech was slurred. Sanchez's speech was slurred and slow. Sanchez's movements were slow and deliberate. Sanchez was lethargic in his movements with poor coordination. Sanchez had an unsteady gait while walking to my patrol vehicle. Sanchez was wearing a blue and gray shirt, blue jeans, and brown boots.

DRIVER'S STATEMENTS:

Sanchez made statements to D/S Tejada in spanish.

ODORS:

obvious odor of an unknown alcoholic beverage emitting from his person and face area

GENERAL OBSERVATIONS

SPEECH: slurred, slow

ATTITUDE: cooperative, emotional, argumentative

CLOTHING: blue and grey shirt, blue jeans, and brown boots.

MEDICAL/OTHER: see BAT report

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S D. Guevara

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to, affirmed and subscribed before me this 20 day of October 2020 by D/S D. Guevara

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

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



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:

Sanchez would sway roughly in a side to side front to back pattern throughout the task. Sanchez did touch the tip of the pen as directed to positively identify the point to be tracked. Sanchez was reminded to track the pen with his eyes only. Sanchez at times had difficulty keeping his head still while tracking the stimulus.

WALK & TURN:

I explained and demonstrated the instructions for the "Walk & Turn" to Sanchez which was translated by D/S Tejada, who stated that he understood. During the task, I observed Sanchez sway roughly in a side to side, front to back pattern throughout the demonstration phase. Sanchez could not maintain his balance while listening to instructions. Sanchez stepped out of the instructional stance during the demonstration to catch his balance. Sanchez started the task before being instructed to do so. Sanchez would stop walking to steady himself with pauses to regain balance. Sanchez, missed heel-to-toe steps and stepped off the line. Sanchez used his arms for balance by raising them more than six inches. Sanchez performed an improper turn. Additionally, Sanchez performed the incorrect number of steps.

ONE LEG STAND:

I explained and demonstrated the instructions for the "One Leg Stand" to Sanchez which was translated by D/S Tejada, who stated that he understood. During the task, I observed Sanchez sway roughly in a side to side, front to back pattern throughout the demonstration phase. Sanchez used his arms to balance raising them more than 6 inches from his sides. Sanchez lost balance and hopped to regain balance. Sanchez failed to count out loud on the first attempt. Sanchez did not look at his foot when performing the task. Sanchez put his foot down to regain balance numerous times before the 30 seconds had elapsed. Sanchez put his foot down and stopped counting on his second attempt.

FINGER TO NOSE:

I explained and demonstrated the instructions for the "Finger to Nose" task to Sanchez which was translated by D/S Tejada, who stated that he understood. During the task, Sanchez's index finger did not touch the nose on 6 of 6 attempts. Sanchez used the hand other than that which was called on the last sequence. The sequence used for this task was L, R, L, R, R, L.

ROMBERG ALPHABET:

I explained and demonstrated the instructions for the "Rhomberg Alphabet" task to Sanchez which was translated by D/S Tejada, who stated that he understood. During the task, I observed Sanchez to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Sanchez started to recite the alphabet in a fast manner before being instructed to do so. Once instructed to begin he recited the alphabet in a fast manner.

BREATH TEST RESULTS: refusal

STATE OF FLORIDA
COUNTY OF PALM BEACH

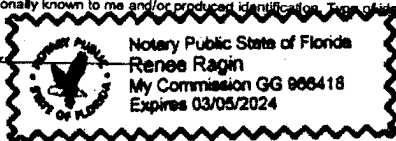
D/S D. Guevara

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 20 day of October 2020 by D/S D. Guevara

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

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



WITNESS LIST

CASE NUMBER: 20-118731

ARRESTING OFFICER: D/S D. Guevara

ADDRESS: 3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) (561) 688-3000

CAN TESTIFY TO: SEE DUI PROBABLE CAUSE AFFIDAVIT, OFFENSE REPORT, & IN-CAR VIDEO

NAME: D/S A. Tejada

ADDRESS: 3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME) _____ (WORK) 561-688-3000

CAN TESTIFY TO: wheel witness, supplemental pc

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) 0 (WORK) 0

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: _____

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY:

SUBJECT:

CASE NUMBER:

DATE:

VIDEO DVD NUMBER:

BEGINNING TIME:

ENDING TIME:

BREATH TESTS RESULTS: 1) TIME A.M. P.M. 2) TIME A.M. P.M.
3) TIME A.M. P.M. 4) TIME A.M. P.M.

BREATH OPERATOR:

MAINTENANCE TECHNICIAN:

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE:

CLOTHING:

MEDICAL CONDITIONS:

MEDICATIONS:

OTHER:

Eyes Red

Odor of unknown alcoholic beverage on breath.

COMMENTS:

Arrived at center A/O started 20 minute observation period at 22:30 hrs.

Subject refused to take breath test.

A/O read I/C, explained I/C and had subject read I/C in Spanish.
Subject stated he understood I/C.

Subject refused to take test.

A/O read rights and had subject read rights in Spanish.
Subject stated he understood rights.

No Q&A conducted.

COMMENTS CONTINUED:

NOT A CERTIFIED COPY

SUBJECT: Neil Sanchez, Ph.D. CASE NUMBER: 20-114731

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) Neil Sanchez

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) Neil Sanchez

SUBJECT: Miss. State Atty. / White A. CASE NUMBER: 20-117-1

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: _____

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

I, D/S D. Guevara, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of PBSO, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 20 day of October, 20 20, at 2151 P.M. A.M.

DRIVER Miguel Antonio Ruiz-Sanchez
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# R252541692051, state of FLORIDA, was placed under lawful arrest for
the offense of DRIVING UNDER THE INFLUENCE by D/S D. Guevara and
issued Citation # A2GCTOP (Name of Arresting Officer)

That on or about the 20 day of October, 20 20, at 2301 P.M. A.M.
in PALM BEACH County,

I requested that the driver submit to a X breath and/or 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]
Signature of Law Enforcement Officer or
Correctional Officer

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



The foregoing instrument was sworn and subscribed before me:

The foregoing instrument was sworn and subscribed before
me this 20 day of October, 20 20,
by D/S D. Guevara,

Signature of Attesting Officer

Title D/S D. Guevara

Date 10/20/2020

who is personally known to me or who has produced
PERSONALLY KNOWN LEO as identification

Notary Public [Signature]

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.



**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"/>	119.0712(2)	Other: Personal information contained in a motor vehicle record	
	<input type="checkbox"/>	119.071(2)(J)	Other: MARSY'S LAW PROTECTED INFORMATION REGARDING VICTIM(S).	

REVIEW COMPLETED BY

Booking Number: 2020024825	Date: 10/21/2020
	Specialist Name/ID: M. Tooks #8557