

0517757
Arrest Report

50-2020-CT-009166-AMB 253

FLORIDA HIGHWAY PATROL
 P.O. BOX 540007, GREENACRES, FL 33454

Report Date / Time 7/31/2020 01:22 AM	Report Number FHP99ARR797612	Case Number/Cad Number FHPL20OFF041514 / LWRC20CAD111472	Reporting Officer Name MASTERSON, MONIQUE
Originating Agency ORI	Occur Date Time Range 07/31/2020 00:13:32 -	Jurisdiction	Clearance

FILED
 JUL 31 2020
 CIRCUIT & COUNTY COURTS
 (CRIMINAL DIV.)

Location of Occurrence

County PALM BEACH	Location Type PUBLIC PLACE	Location Description INTERSTATE 95 (SR9)
Street Number SR 882 (FORREST HILL BLVD)	Street	Apt/Lot/Bldg WEST PALM BEACH
City WEST PALM BEACH	State FL	Zip Code 33405

Defendant

First Name NICOLE	Middle Name	Last Name MINELLO	Suffix	Race WHITE	Sex FEMALE	Height 507	Weight 150	Hair BLO	Eyes GRN
MNI #	SSN	Date of Birth 04/12/1982	Age 38	ID Type E	Drivers License or other ID M540620826320	State FL	OCA / Agency ID		
Place of Birth:	ORLANDO FL USA								
Address	* RESIDENCE / 6647 ADRIATIC WAY, , FL 33413 /								

Arrest

Arrest Date/Time 7/31/2020 12:49:53 AM	Arrest Location Type PUBLIC PLACE	Arrest Location Description INTERSTATE 95
Street Number SR 882 (FORREST HILL BLVD)	Street	Apt/Lot/Bldg
County PALM BEACH	City WEST PALM BEACH	State FL
		Zip Code 33405

Charge : S

Counts 1	Charge 316.193.1a	Bond Amount \$0.00	<input type="checkbox"/> No Bond
Charge Degree S	Charge Level MISDEMEANOR	General Offense Code DUI-UNLAW BLD ALCH	
Charge Description DUI INFLUENCE OF ALCOHOL OR DRUGS			

Bond Set by Court

Bond Amount	<input type="checkbox"/> No Bond	JUL 31 AM 4:05
Bond Type(s)		

Probable Cause
 On July 31, 2020 Friday, I Trooper Monique Masterson (4467) was dispatched to a sick call at approximately 12:16AM southbound on Interstate 95 (State Road 9) at State Road 882 (Forrest Hill Boulevard) on the outside shoulder.

DS COLLINS 7622

MASTERSON, MONIQUE
 TPR 4467

Report Date / Time 7/31/2020 01:22 AM	Report Number FHP99ARR797612	Case Number/Cad Number FHPL20OFF041514 / LWRC20CAD111472	Reporting Officer Name MASTERSON, MONIQUE
Originating Agency ORI	Occur Date Time Range 07/31/2020 00:13:32 -	Jurisdiction	Clearance

Our dispatch (LWRCC) advised the driver of the vehicle was incoherent and was asleep behind the steering wheel. Fire rescue arrived on scene prior to my arrival. Fire rescue advised the driver refused all medical attention and had vomit on her pants and there was vomit on the driver side floor. I arrived on scene at approximately 12:26AM.

I observed a white vehicle on the outside shoulder. I observed there to be only the driver in the vehicle. The driver of the vehicle was identified by her Florida Driver License M540620826320 (NICOLE MINELLO). I asked Ms. Minello if she was feeling okay. Ms. Minello stated she felt fine. I immediately detected the obvious odor of an alcoholic beverage omitting from Ms. Minello direction. I noticed Ms. Minello eyes to be red and water with a flushed face. I asked Ms. Minello why she was asleep on the side of the highway. Ms. Minello stated she pulled over to the side of the road because she "felt sick and drunk". I asked Ms. Minello to repeat why she was asleep to make sure she was not mistaken. Ms. Minello repeated that she felt drunk and did not want to drive while drunk. I asked Ms. Minello for the keys to the vehicle. I watched Ms. Minello take the keys out of the vehicle's ignition and hand them to me. I placed the vehicle on the roof of the vehicle. I asked Ms. Minello if the vehicle was operational and not disabled. Ms. Minello stated the vehicle works and shes only on the side of the road because she felt sick and had someone coming to pick her up.

I told Ms. Minello to exit the vehicle. Ms. Minello exited the vehicle in high heel shoes. Ms. Minello has vomit on her black pants and on the sleeves of her long sleeve white shirt. I asked Ms. Minello if what was on her pants was vomit. Ms. Minello was confused that I asked and said it was not vomit. Ms. Minello slurred her words as she spoke to me. Ms. Minello stumbled out of the vehicle as she exited. Before leaving the vehicle I asked Ms. Minello if she wanted to where flats or sneakers that were in her vehicle. Ms. Minello stated she was fine in her high heels. I walked Ms. Minello to the front of my vehicle. Ms. Minello stumbled toward my vehicle. I could still smell the obvious odor of an alcoholic beverage omitting from Ms. Minello breath at the front of my vehicle I notified Ms. Minello that I was conducting a DUI investigation due to the indicators I observed from my initial interaction with her. I asked Ms. Minello if she wanted to participate in voluntary

Report Date / Time 7/31/2020 01:22 AM	Report Number FHP99ARR797612	Case Number/Cad Number FHPL20OFF041514 / LWRC20CAD111472	Reporting Officer Name MASTERSON, MONIQUE
Originating Agency ORI	Occur Date Time Range 07/31/2020 00:13:32 -	Jurisdiction	Clearance

Field Sobriety Exercises (SFST). Ms. Minello agreed to perform SFST. Ms. Minello took her high heels off for all the exercise.

INDICATORS:

- 1) The obvious odor of an alcoholic beverage omitting from Ms. Minello breath.
- 2) Red and water eyes
- 3) Slurred Speech
- 4) Stumbling and lack of balance
- 5) Confusion
- 6) Repeated questions
- 7) Mood swings

The first exercise was the Horizontal Gaze Nystagmus. Ms. Minello was placed in the starting position of standing up straight with feet together and arms by her side. I instructed Ms. Minello to keep her head and body still during the entirety of the first exercise. I explained to Ms. Minello that I would move my pen from side to side and for her to move her eyes only. I asked Ms. Minello if she understood the instructions. Ms. Minello stated that she understood. Ms. Minello swayed during the exercise. Ms. Minello had a lack of smooth pursuit in both eyes, distinct and sustained Nystagmus at maximum deviation in both eyes, and onset of Nystagmus prior to 45 degrees in both eyes. Vertical Gaze Nystagmus was tested. Vertical Nystagmus was not present in Ms. Minello eyes. Ms. Minello moved her head multiple times during the exercise. Ms. Minello would anticipate the movement of the pen and not follow the pen. I asked Ms. Minello if she wanted to do the exercise without her glasses and she stated no.

The second exercise was the Walk and Turn. I instructed and demonstrated Ms. Minello to place her left foot on the parking line followed by her right foot in front of her left foot touching heel to toe. I explained and demonstrated to Ms. Minello that her arms are to stay by her side and not to raise at any point during this exercise. I instructed and demonstrated Ms. Minello to stay in that position (the starting position) while I give the rest of the instruction to the test. I specifically instructed Ms. Minello to not begin the exercise until told to do so. I explained and demonstrated to Ms. Minello, when I tell her to begin that her first step will be with

Report Date / Time 7/31/2020 01:22 AM	Report Number FHP99ARR797612	Case Number/Cad Number FHPL20OFF041514 / LWRC20CAD111472	Reporting Officer Name MASTERSON, MONIQUE
Originating Agency ORI	Occur Date Time Range 07/31/2020 00:13:32 -	Jurisdiction	Clearance

her left foot. I instructed and demonstrated to Ms. Minello that she will take nine heels to toe steps and to count out loud what number step she was on while looking at her step. I instructed and demonstrated the turn portion of the exercise that comes after the ninth step. I explained to Ms. Minello the turn will consist of her keeping her lead foot on the ground and pivoting off it with a series of small steps using her other foot. I asked Ms. Minello if she understood the instructions throughout giving the instructions. Ms. Minello stated she did understand the instructions. Before instructing the exercise I asked Ms. Minello if she could imagine a straight line to walk on or if she preferred a real physical line to walk on. Ms. Minello stated she could imagine a line. Ms. Minello failed to stay in the ready position during the period of instruction. Ms. Minello performed an improper turn. Ms. Minello used her arms for balance. Ms. Minello did not walk heel to toe. Ms. Minello stopped during the exercise.

The third exercise was the One Leg Stand. I instructed and demonstrated Ms. Minello to stand with feet together and arms by her side; the same as the first exercise. I specifically informed Ms. Minello to not begin the exercise until told to do so. I explained and demonstrated to Ms. Minello that she will pick up any leg of choice and raise it above the ground approximately six inches and to look at her foot until told to place her foot back on the ground. I instructed Ms. Minello to count out loud the seconds that pass by while her foot is raised above the ground. I informed Ms. Minello to not place her foot on the ground unless she felt they were going to fall. I asked Ms. Minello if she understood the instructions throughout giving the instructions. Ms. Minello stated she understood. Ms. Minello lost balance by using arms. Ms. Minello had a noticeable sway during the exercise. During the exercise Ms. Minello hopped to keep from putting her foot down. Ms. Minello failed to keep her foot six inches from the ground. Ms. Minello put her foot down on the ground multiple times. Ms. Minello almost fell during the exercise

Clues:

- 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

Walk and turn

Report Date / Time 7/31/2020 01:22 AM	Report Number FHP99ARR797612	Case Number/Cad Number FHPL20OFF041514 / LWRC20CAD111472	Reporting Officer Name MASTERSON, MONIQUE
Originating Agency ORI	Occur Date Time Range 07/31/2020 00:13:32 -	Jurisdiction	Clearance

- Started the exercise prior to being instructed to start
- failed to stay in the ready position during the period of instruction
- performed an improper turn
- used his arms for balance
- stopped during the exercise
- Failed to perform heel to toe
- One leg stand
- Sways while balancing
- Hopped
- Put foot down
- used arms for balance

Based on the initial indicators that I observed during the welfare check and the clues that I observed during the SFST exercises, I placed Ms. Minello under arrest for DUI (Florida Statute 316.193.1A) at 12:49 AM on 7/31/2020. I conducted a thorough search of Ms. Minello and placed her in my patrol vehicle. I transported Ms. Minello to the Breath and Alcoholic Testing Facility (BAT). At the BAT Ms. Minello underwent a 20 minute observation. Ms. Minello gave 2 breath samples. Ms. Minello blew a .171 and .175.

Ms. Minello was walked over to the main jail and released custody to PBSO main jail. All above events occurred in the county of Palm Beach. Microphone to record the audio of this investigation was synced up to the patrol vehicle FHP1540. The actual video recording of the investigation was recorded with the patrol vehicle FHP1388.

Jail Booking Facility

Booking Date/Time 9/10/2020 1:50 pm	Booking County PALM BEACH	Booking Facility PALM BEACH COUNTY CORRECTIONS	Booking Facility Phone (561) 688-4400
Booking Facility Location 3228 GUN CLUB ROAD WEST PALM BEACH, FLORIDA 33406		Booking Number	
Booking Comments			

Court

Court County PALM BEACH	Court Location 3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406
----------------------------	--


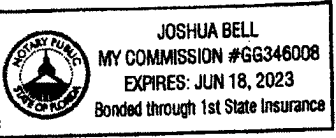
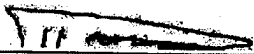
Report Date / Time 7/31/2020 01:22 AM	Report Number FHP99ARR797612	Case Number/Cad Number FHPL20OFF041514 / LWRC20CAD111472	Reporting Officer Name MASTERSON, MONIQUE
Originating Agency ORI	Occur Date Time Range 07/31/2020 00:13:32 -	Jurisdiction	Clearance

Court CRIMINAL JUSTICE COMPLEX	Court Phone 561-355-2994	Court Appearance Date / Time 07/30/2020 8:30AM	Court Fine
Comments			

Officer Name Rank / ID #	Involvement On Report / Reporting Role	Officer Agency Org/Unit
MASTERSON, MONIQUE TPR 4467	REPORTING OFFICER	FLORIDA HIGHWAY PATROL FHPLILWRCCPALM BEACHISR804 JSOF SR702

The undersigned certifies and swears that he/she has just and reasonable grounds to believe that the above named Defendant, committed violation(s), of law, on the below date(s) and time(s), as listed in the probable cause associated with this report:

Reporting Officer

Officer Name MASTERSON, MONIQUE	Office Rank TPR	Officer ID No 4467	Sworn and subscribed before me, the undersigned authority This the <u>31</u> day of <u>July</u> , <u>2020</u> DEPUTY OF THE COURT, NOTARY OR LAW ENFORCEMENT
Officer Agency FLORIDA HIGHWAY PATROL			 
Officer Signature 			

No Bill / Petition
 Issue Warrant
 Prosecution Approved

Signature of Assistant State Attorney _____ Date _____

NOT A CERTIFICATE



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

PBSO CASE # 20-092630 PBSO ZONE 1-11

AGENCY CASE # FHPL20OFF041514 CRASH CASE # _____

TIME OF STOP/CRASH 0013 DATE 07/31/20 DAY FRIDAY

SUBJECT'S NAME NICOLE MINELLO RACE W SEX F

HGT 5'7 WGT 150 DOB 04/12/1982

LOCATION SOUTHBOUND I95 AT SR882 FORREST HILL BLVD

ARRESTING OFFICER'S NAME & ID TPR. MONIQUE MASTERSON #4467 AGENCY FHP-L

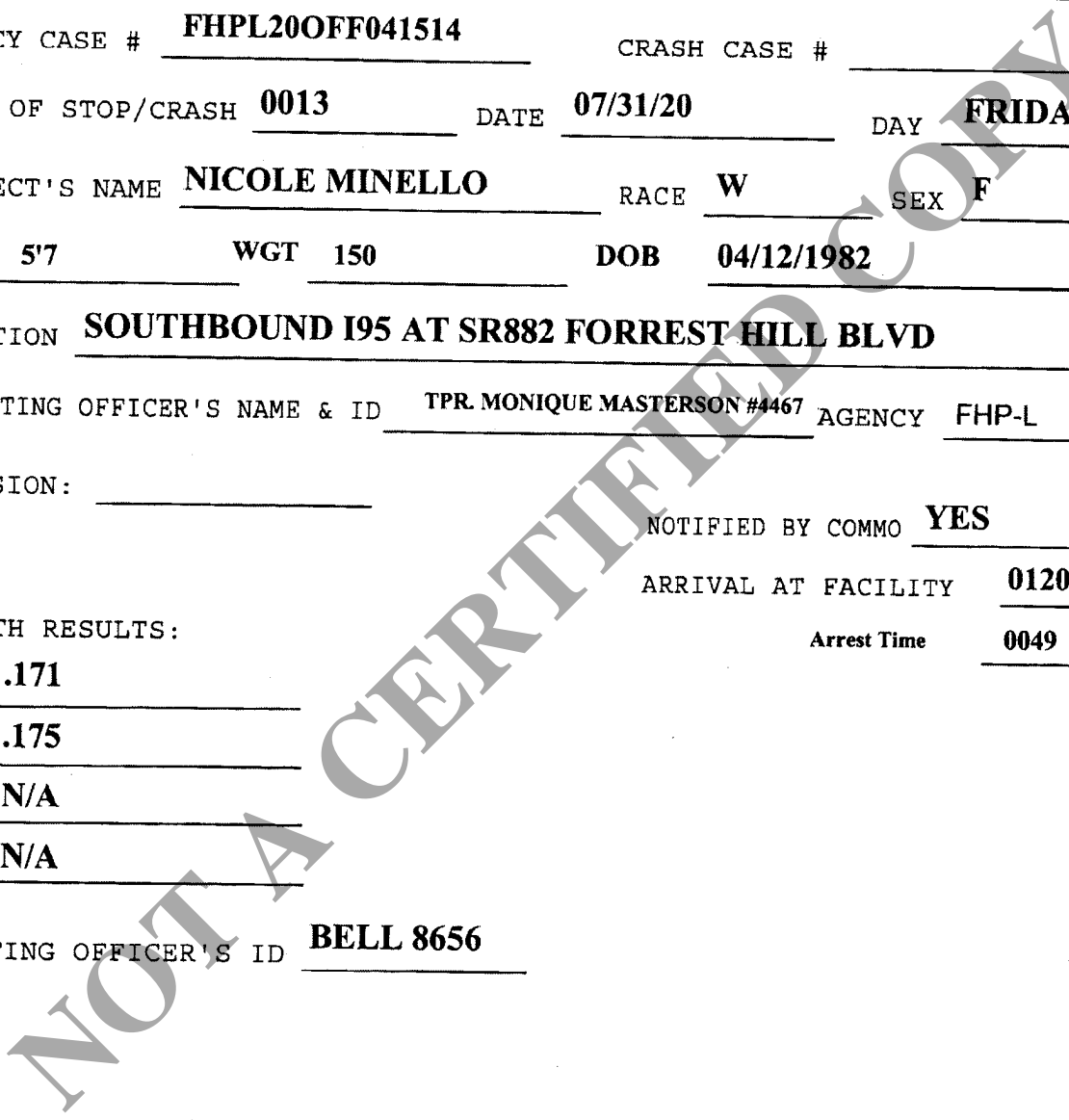
DIVISION: _____ NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0120

BREATH RESULTS: Arrest Time 0049

- 1. .171
- 2. .175
- 3. N/A
- 4. N/A

TESTING OFFICER'S ID BELL 8656



TESTING FACILITY TASK REPORT

AGENCY: FHP-L

SUBJECT: MINELLO, NICOLE ASHLEY

CASE NUMBER: 20-092630

DATE: Jul 31, 2020

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0146

ENDING TIME: 0207

BREATH TESTS RESULTS: 1) .171 TIME 0152 A.M. P.M. 2) .175 TIME 0156 A.M. P.M.
3) N/A TIME XX A.M. P.M. 4) N/A TIME XX A.M. P.M.

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: QUIET, EMOTIONAL, CRYING

CLOTHING: WHITE LONG SLEEVE SHIRT, BLACK PANTS, LEOPARD PRINT HEELS

MEDICAL CONDITIONS: THYROID

MEDICATIONS: NEURONTIN, XVOLIANO

OTHER:

EYES: GLASSY, WATERY

ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

SUBJECT STATED SHE DRANK 1 GLASS OF WINE (Q AND A)

COMMENTS:

ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0120 HOURS

SUBJECT STATED SHE WOULD TAKE BREATH TEST

AFTER REPEATED INSTRUCTIONS BREATH TEST WAS COMPLETED

TECH READ BREATH TEST RESULTS

SUBJECT STATED SHE UNDERSTOOD BREATH TEST RESULTS

A/O READ RIGHTS

SUBJECT STATED SHE UNDERSTOOD HER RIGHTS

A/O CONDUCTED Q AND A

SUBJECT ANSWERED QUESTIONS

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: 80-006238 Software: 8100.27
Date of Test: 07/31/2020

Date of Last Agency Inspection: 07/17/2020
Observation Period Began: 01:20
Subject's Name: NICOLE A MINELLO DOB: 04/12/1982 Sex: F

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	01:50
	Air Blank	0.000	01:50
	Control Test	0.079	01:51
	Air Blank	0.000	01:51
	Subject Sample #1	0.171	01:52
	Air Blank	0.000	01:53
	Air Blank	0.000	01:55
	Subject Sample #2	0.175	01:56
	Air Blank	0.000	01:56
	Control Test	0.078	01:57
	Air Blank	0.000	01:57
	Diagnostics Check	OK	01:57

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 JOSHUA J BELL, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____

Signature

Date: 07/31/20

Sworn to (or affirmed) before me this 31 day of July, 2020

Signature of Notary Public-State of Florida

Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

SUBJECT: M. NEW, Nicole

CASE NUMBER: _____

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content. OR

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances. OR

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence of chemical or controlled substances.

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

I am _____ 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) Read on camera

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

SUBJECT: Mineo, Nicole CASE NUMBER: _____

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? NO

WHERE WERE YOU GOING? N/A

WHAT STREET OR HIGHWAY WERE YOU ON? I 95

DIRECTION OF TRAVEL NORTH WHERE DID YOU START? DELAWARE TOYOTA

WHAT TIME DID YOU START? 9:45 PM WHAT TIME IS IT NOW? 1:00 AM

WHAT IS TODAY'S DATE? 7/31/20 WHAT DAY OF THE WEEK IS IT? FRIDAY

WHAT COUNTY AND CITY ARE YOU IN NOW? PALM BEACH

WHEN DID YOU LAST EAT? 9:00 PM WHAT DID YOU EAT? QUEPASA

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? SITTING IN HANDCUFFS

HOW MUCH DO YOU WEIGH? 165 POUNDS HAVE YOU BEEN DRINKING? YES WHAT? WINE

HOW MUCH? GLASS WHERE? DEALER SHOP WITH WHOM? MANAGERS

WHEN DID YOU HAVE YOUR FIRST DRINK? 8:00 PM AND YOUR LAST DRINK? 9:30 PM

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? MOUTH

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? NO ARE YOU UNDER THE INFLUENCE? NO

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? NO HOW MUCH? N/A

WHAT? N/A WHERE? N/A WHEN? N/A

WHAT LINE OF WORK ARE YOU IN? CAR SALES WHEN DID YOU LAST WORK? LAST NIGHT

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? NO WHAT? N/A

ARE YOU SICK OR INJURED? NO WHAT'S WRONG? N/A

DO YOU LIMP? NO DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? NO

WERE YOU IN AN ACCIDENT TODAY? NO

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? NO WHEN? N/A

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? NO WHO? N/A WHY? N/A

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? YES WHAT? NERONTIN WHEN? MORNINGS

DO YOU HAVE: NO

EPILEPSY? NO

GLASS EYE? NO

FALSE TEETH? NO

EAR INFECTION? NO

INNER EAR TROUBLE? NO

DIABETES? NO

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? NO

DO YOU TAKE INSULIN? NO IF SO, WHEN WAS YOUR LAST INJECTION? N/A

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? NO WHERE? N/A

INTERVIEWER: TPR. M. Masterson #4467

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



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: 2020018180	Date: 7/31/2020
	Specialist Name/ID: Gammage/5660