

0518501 3545

ARREST / NOTICE TO APPEAR

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

1

JUVENILE

OBTS Number	Agency ORI Number 0500400		Agency Name Delray Beach Police Department		Agency Report Number (N.T.A.'s only) 4,0 20-012095					
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 None/not Applicable		Multiple Clearance Indicators 1				
Location of Arrest (Including Name of Business) 2800 S FEDERAL HWY BOYNTON BEACH, FL			Location of Offense (Business Name, Address) 2700 N FEDERAL HWY, DELRAY BEACH, FL 33483							
Date of Arrest 09/11/2020	Time of Arrest 22:43	Booking Date 09/11/2020	Booking Time 22:53	Jail Date 09/12/2020	Jail Time 00:57	Location of Vehicle 2700 N FEDERAL HWY				
Name (Last, First, Middle) FITZPATRICK, RYAN GREGORY			Alias (Name, DOB, Soc. Sec. #, Etc.) Alias: WINSTON SALEM, NC US							
Race W - White B - Black	1 - American Indian O - Oriental/Asian	Sex M	Date of Birth 01/10/1980	Height 5'10	Weight 205	Eye Color BROWN	Hair Color BLACK	Complexion FAIR	Build LARGE	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)			Martial Status S	Religion CATHOLIC	Indication of: Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>					
Local Address (Street, Apt. Number) 1331 S FEDERAL HWY 107, BOYNTON BEACH, FL 33435			(City) (FL)	(State) (FL)	(Zip) 33435	Phone (813) 781-4985	Residence Type: 1. City 2. County 3. Florida 4. Out of State 2			
Permanent Address (Street, Apt. Number) 1331 S FEDERAL HWY 107, BOYNTON BEACH, FL 33435			(City) (FL)	(State) (FL)	(Zip) 33435	Phone (813) 781-4985	Address Source VERBAL			
Business Address (Name, Street) F321727800100 / FL			(City) (FL)	(State) (FL)	(Zip) (FL)	Phone	Occupation			
D/L Number, State F321727800100 / FL			INS Number		Place of Birth (City, State) WINSTON SALEM, NC	Citizenship US				
Co-Defendant Name (Last, First, Middle)			Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor				
Co-Defendant Name (Last, First, Middle)			Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor				
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ Name (Last, First, Middle)			Residence Phone							
<input type="checkbox"/> Legal Custodian			Business Phone							
Address (Street, Apt. Number) 1 OR			(City) (FL)	(State) (FL)	(Zip) (FL)					
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 <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		
Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Disperse/ 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 DRIVING WHILE UNDER INFLUENCE					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			1	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N					
Charge Description					Statute Violation Number	Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond			
					<input type="checkbox"/> Y <input type="checkbox"/> N					
Charge Description					Statute Violation Number	Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond			
					<input type="checkbox"/> Y <input type="checkbox"/> N					
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 checked="" type="checkbox"/> T.O.T. County Jail					PROPERTY - Received By		Released By		Released To	
<input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health					Date Transported		Time Transported		Other	
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) South County 200 W Atlantic Ave Delray Beach, FL 33444 Court Date and Time 10/08/2020 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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.					No Photo Available					
Signature of Defendant (or Juvenile and Parent/Custodian)					Date Signed					
HOLD for Other Agency					Signature of Arresting Officer [Signature]		Name Verification (Printed by Arrestee)			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Revoked Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other					Name of Arresting Officer (Print) WINDSOR, NICHOLAS		ID.# 1029		(PRINT)	
Intake Deputy SPANS 8101					Pouch #		Transporting Officer WINDSOR		ID.# Agency 1029 DELRA	
					Witness here if subject signed with me		SCANNED			

SEP 12 2020

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 11TH DAY OF SEPTEMBER 20 20 AT 2226 AM PM
SUBJECT: FITZPATRICK, RYAN GREGORY CASE NUMBER: DELRAY BEACH PD #20-12095
AGENCY: DELRAY BEACH PD ARRESTING OFFICER: WINDSOR #1029

PERSONAL CONTACT

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

The following occurred in the City of Delray Beach, County of Palm Beach, FL.
On 09/11/20 at 2226hrs I observed a white GMC Yukon (FL Tag #HPB5P) traveling in the northbound inside travel in the 1500 block of N. Federal Hwy. The Yukon left the travel lane and almost struck the center median curb three times. I paced the speed of the Yukon at 57mph in a posted 40mph speed zone in the 2700 block of N. Federal Hwy. in Delray Beach, FL. I conducted a traffic stop by activating my emergency lights and siren on my marked Delray Beach Police patrol vehicle. The Yukon continued northbound and eventually pulled over in the 2800 block of S. Federal Hwy. in Boynton Beach, FL. The white male driver opened the driver door and attempted to get out of the Yukon. I ordered the white male driver to remain in the Yukon and the driver complied. I met the white male driver and identified him by his FL DL as Ryan Gregory Fitzpatrick. Fitzpatrick was sitting in the driver seat of the Yukon and was the only person inside the Yukon. The Yukon's engine was running and Fitzpatrick was in possession of the Yukon's key fob. Fitzpatrick stated he was sorry several times without being asked a question. Fitzpatrick stated he left Boca Raton, FL and was driving to his residence in Boynton Beach, FL. when the stop was conducted. Fitzpatrick asked if I could cut him a break and said I could follow him home.

OBSERVATION OF DRIVER:

Fitzpatrick had a strong odor of an unknown alcoholic beverage coming from his person. Fitzpatrick had red eyes and his eyes had a glassy appearance. Fitzpatrick's speech was thick and slurred while speaking. Fitzpatrick kept repeating himself and asking me "to do the right thing and let him go home". Fitzpatrick had mood swings from being apologetic to being upset that his life was being ruined.

DRIVER'S STATEMENTS:

Fitzpatrick stated he left Boca Raton, FL and was driving to his residence in Boynton Beach, FL. when the stop was conducted. Fitzpatrick stated he consumed two drinks containing liquor but did not specify what kind of liquor was in the drinks. Fitzpatrick stated he finished his last drink 1.5hrs prior to him driving home. When questioned about if he knew why he was being stopped, Fitzpatrick stated because he was swerving and almost hit a curb. Fitzpatrick stated he was not aware he was speeding. Fitzpatrick stated he was "on our side" and he was "one of us" and later stated he was a major donor to law enforcement charities. Fitzpatrick later stated that I ruined his life and asked me if I felt good about arresting him. I requested Fitzpatrick to perform roadside tasks to dispel any suspicion I had of him driving under the influence. Fitzpatrick refused to perform the requested roadside tasks and I informed Fitzpatrick of the Taylor Warning. Fitzpatrick stated he understood the Taylor Warning and still refused to perform the roadside tasks.

ODORS:

Fitzpatrick had a strong odor of an unknown alcoholic beverage coming from his person.

GENERAL OBSERVATIONS

SPEECH: Thick and Slurred

ATTITUDE: Cooperative and Polite.

CLOTHING: Red T-Shirt and Green Shorts with Red/Green/Black Slides

MEDICAL/OTHER: None Stated

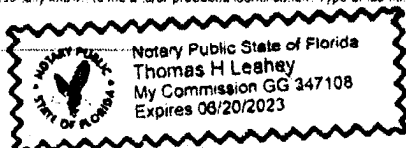
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 11th day of SEPTEMBER 20 20 by OFC. WINDSOR

(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. § 117.10)



SCANNED
SEP 12 2020

SUBJECT: FITZPATRICK, RYAN GREGORY CASE NUMBER DELRAY BEACH PD #20-12095

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:

Fitzpatrick refused to perform all roadsides.

WALK & TURN:

REFUSED

ONE LEG STAND:

REFUSED

FINGER TO NOSE:

REFUSED

ROMBERG ALPHABET:

REFUSED

BREATH TEST RESULTS: 1) Refused | 2) | 3) | 4)

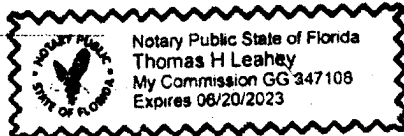
STATE OF FLORIDA
COUNTY OF PALM BEACH

[Signature]
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 11TH day of SEPTEMBER, 2020 by OFC. WINDSOR

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

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



SCANNED
SEP 12 2020

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


I, NICHOLAS WINDSOR, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)
am a member of DELRAY BEACH POLICE DEPARTMENT, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 11TH day of SEPTEMBER, 20 20, at 2243 P.M. A.M.

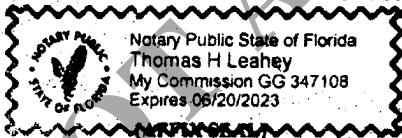
DRIVER RYAN GREGORY FITZPATRICK
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME
DL# F321727800100, state of FLORIDA, was placed under lawful arrest for
the offense of DUI FSS 316.1939(1)A by OFC. WINDSOR and
issued Citation # A1UR6PE
(Name of Arresting Officer)

That on or about the 11TH day of SEPTEMBER, 20 20, at 2344 P.M. A.M.
in PALM BEACH County.

I requested that the driver submit to a 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 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 11 day of September, 20 20,
by OFC Windsor #1029,
who is personally known to me or who has produced
Ryan as identification
Notary Public T Leahey

Signature of Attesting Officer

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: DELRAY BEACH PD #20-12095

ARRESTING OFFICER: OFC. WINDSOR #1029 DELRAY BEACH POLICE DEPARTMENT

ADDRESS: 300 W. ATLANTIC AVE. DELRAY BEACH, FL 33444

PHONE NUMBERS (HOME): _____ (WORK) 561-243-7800

CAN TESTIFY TO: TRAFFIC STOP AND DUI PC

NAME: OFC. FLOVIL #957 DELRAY BEACH POLICE DEPARTMENT

ADDRESS: 300 W ATLANTIC AVE. DELRAY BEACH, FL 33444

PHONE NUMBERS (HOME) _____ (WORK) 561-243-7800

CAN TESTIFY TO: BACKUP OFFICER AND VEHICLE TOW

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 _____

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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: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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SEP 12 2020



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

PBSO CASE # 20-106172 PBSO ZONE 4-11

AGENCY CASE # 20-12095 CRASH CASE # N/A

TIME OF STOP/CRASH 2226 DATE 09/11/20 DAY FRIDAY

SUBJECT'S NAME FITZPATRICK, RYAN GREGORY RACE W SEX M

HGT 5'10" WGT 205 DOB 01/10/80

LOCATION 2800 N FEDERAL HWY DELRAY BEACH, FL

ARRESTING OFFICER'S NAME & ID WINDSOR #1029 AGENCY DELRAY BEACH PD

DIVISION: TRAFFIC

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 2318

ARREST TIME 2243

BREATH RESULTS:

- 1) ~~REFUSED~~
- 2) _____
- 3) _____
- 4) _____

TESTING OFFICER'S ID 19183 PBSO VIDEOTAPE # ✓1A

NOT A CERTIFIED COPY

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SEP 12 2020

TESTING FACILITY TASK REPORT

AGENCY: DBPD

SUBJECT: Fitzpatrick, Ryan G

CASE NUMBER: 20-106172

DATE: 09/11/2020

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 2340

ENDING TIME: 2345

BREATH TESTS RESULTS: 1) R TIME 2344 A.M. P.M. 2) 0 TIME n/a A.M. P.M.
3) 0 TIME n/a A.M. P.M. 4) 0 TIME n/a A.M. P.M.

BREATH OPERATOR: Thomas H Leahey #19183

MAINTENANCE TECHNICAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: slurred, thick

ATTITUDE: calm, cooperative

CLOTHING: green shorts, tan t-shirt, black slip ons

MEDICAL CONDITIONS: none

MEDICATIONS: none

OTHER:

eyes are glassy & bloodshot

odor of unknown alcoholic beverage on breath

COMMENTS:

arrived at center A/O conducted 20 minute observation period at 2318 hrs.

subject refused to perform breath test

A/O read I/C & subject understood I/C - talked over officer repeatedly

subject refused to perform breath test

A/O did not read rights - A/O asked if he wanted to answer questions

subject declined to answer questions

A/O did not conduct Q&A

SCANNED
SEP 12 2020

SUBJECT: F 10 pet. sub. Ryan G CASE NUMBER: DL110 15-00015

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 Ryan G of the State of Michigan

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) Ryan G

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) Ryan G

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SEP 12 2020

SUBJECT: F. M. ... 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? _____

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: _____

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

SCANNED
SEP 12 2000



**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: 2020021580	Date: 9/12/2020
	Specialist Name/ID: B Evans / 23649

SCANNED
SEP 12 2020