

0-0448825

20CT 7543

P-3087

ARREST / NOTICE TO APPEAR

A D M I N I S T R A T I O N	OBTS Number		Agency ORI Number 0500800		Agency Name West Palm Beach Police Department		Agency Report Number (N.T.A.'s only) 9 4 2020-0009653		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias 1		JUVENILE	
	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		Location of Arrest (Including Name of Business) 2900-BLK 45TH ST, WPB, FL, 33407		Location of Offense (Business Name, Address) 2900 45TH ST BLK, WEST PALM BEACH, FL 33407		If Weapon Seized Enter Type NOT APPLICABLE		Multiple Clearance Indicator			
D E F E N D A N T	Date of Arrest 06/19/2020		Time of Arrest 23:26		Booking Date 06/19/2020		Booking Time 23:36		Jail Date		Jail Time	
	Name (Last, First, Middle) MARASA, SALVATORE		Alias:		Alias (Name, DOB, Soc. Sec. #, Etc.)		Race W - White I - American Indian B - Black O - Asian W		Sex M		Date of Birth 07/31/1964	
C O D E F	Height 5'08		Weight 187		Eye Color BROWN		Hair Color BLACK		Complexion LIGHT		Build Medium	
	Local Address (Street, Apt. Number) 2621 VILLAGE BLVD 101, WEST PALM BEACH, FL 33409		(City) WEST PALM BEACH, FL		(State) FL		(Zip) 33409		Home Phone (561) 512-2521		Indication of: Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
J U V E N I L E	Permanent Address (Street, Apt. Number) 2621 VILLAGE BLVD 101, WEST PALM BEACH, FL 33409		(City) WEST PALM BEACH, FL		(State) FL		(Zip) 33409		Mobile Phone		Residence Type: 1. City 2. County 3. Florida 4. Out of State 1	
	Business Address (Name, Street) 2621 VILLAGE BLVD 101, WEST PALM BEACH, FL 33409		(City) WEST PALM BEACH, FL		(State) FL		(Zip) 33409		Work Phone		Address Source VERBAL	
C H A R G E	DL Number, State M620780642710 / FL		Sec. Sec. Number		INS Number		Place of Birth (City, State) BROOKLYN, NY,		Citizenship US			
	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile			
N O T I C E T O A P P E A R	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile			
	Parent <input type="checkbox"/> Other: <input type="checkbox"/> Legal Custodian <input type="checkbox"/>		Name (Last, First, Middle)		Address (Street, Apt. Number)		(City)		(State)		(Zip)	
N O T I C E T O A P P E A R	Notified by: (Name)		Date		Time		JUVENILE DISPOSITION 1. Handled/Processed with Department and Released 2. TOT JAC 3. Incarcerated					
	Released To: (Name)		Relationship		Date		Time					
C H A R G E	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		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/ Product/ Cultivate		Z. Other	
C H A R G E	Charge Description DUI-DAMAGE TO PERSON/PROPERTY		Statute Violation Number 316.193(3)(C)(I)		Violation of ORD #		Drug Type N. N/A A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv.	
	Drug Activity		Drug Type N		Amount / Unit		Offense #		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
C H A R G E	Charge Description CRASH - LEAVING SCENE W/O GIVING INFO		Statute Violation Number 316.061(1)		Violation of ORD #		Drug Type N		Amount / Unit		Offense #	
	Drug Activity		Drug Type N		Amount / Unit		Offense #		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
I N T A K E	Charge Description		Statute Violation Number		Violation of ORD #		Drug Activity		Drug Type		Amount / Unit	
	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
N O T I C E T O A P P E A R	Health / Apparent Physical Condition of Defendant		Any knowledge of the following: Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries <input type="checkbox"/>		Explains:		PROPERTY - Received By		Released By		Released To	
	Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond		<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health		<input type="checkbox"/> T.O.T. County Jail		Date Transported /// : : :		Time Transported		Other JUN 20 AM 12:31	
N O T I C E T O A P P E A R	<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) Criminal Justice CRIMINAL JUSTICE COMPLEX		Court Date and Time 07/23/2020 08:30:00		3228 GUN CLUB ROAD				No Photo Available	
	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							
A D M I N I S T R A T I O N	I CONSENT TO RECEIVE REMINDERS OF COURT DATE(S) AND TIMES FOR THIS CASE BY TEXT MESSAGE TO THE NUMBER IDENTIFIED HERE. I UNDERSTAND THAT STANDARD TEXT MESSAGE RATES MAY APPLY AND THAT I MAY REVOKE THIS CONSENT VIA THE TEXT MESSAGE SYSTEM IF I CHOOSE.		(561) 512-2521		INITIAL							
	HOLD for Other Agency		Signature of Arresting Officer THOMAS, DARIEN		Name Verification (Printed by Arrestee) THOMAS, DARIEN		I.D.# 02107		(PRINT)			
A D M I N I S T R A T I O N	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Seizure <input type="checkbox"/> Other		Name of Arresting Officer (Print) THOMAS, DARIEN		I.D.# 02107		Transporting Officer D. THOMAS		I.D.# 2107		Agency WPBPD	
	Initials SAVARS BIC		I.D.#		Pouch #		Witness here if subject signed with an "X".				SCANNED PAGE 1 OF 1 JUN 20 2020	

DUI PROBABLE CAUSE AFFIDAVIT

On the 19th Day of June at 1939 A.M. P.M.
Subject: Salvatore Marasa Case Number: 2020-0009653
Agency: West Palm Beach Police Department Arresting Officer: D. Thomas #2107

Personal Contact

Driving Pattern	Actual physical control (physical evidence putting the driver behind the wheel)
<p>Received a call regarding an older gray Honda Accord with a 50-60 year old Hispanic male was traveling eastbound in the westbound lanes with the driver's side front tire missing. The gray Honda Accord struck another vehicle and continued to travel eastbound in the wrong lanes. Another caller advised dispatch a gray sedan struck their Pontiac and continued to travel eastbound in the wrong lanes. They advised the driver appeared to be intoxicated. Received an additional call from a third caller who advised the driver of a gray Honda Accord appeared to be intoxicated.</p> <p>Upon my arrival, I observed a 2008 gray Honda Accord which was stopped up against the median (facing southbound blocking the far left lane of travel) with the driver side front tire flattened and coming off the rim. The vehicle had moderate front end damage. Once making contact with the driver, I observed the vehicle was still in drive and running.</p> <p>It should be noted that a driver of one of the struck vehicles recorded the suspect vehicle driving the wrong way after striking their vehicle.</p>	

Observation of Driver
<p>Saw the driver sitting in the driver's seat with the vehicle still running and placed in drive. Driver was incoherent and had no idea where he was at the time. Driver smelled like the odor of an unknown alcoholic beverage. Driver's eyes were glossy. Driver had slurred speech, and could not complete a complete sentence. When asked to step out of the vehicle, the driver used the driver's door and vehicle for balance. Driver was unable to walk without falling. Driver was also unable to stand without swaying drastically therefore he was asked to be seated again.</p>

Drivers Statements:
<p>Driver advised he was drunk numerous times. He admitted to drinking alcohol. Admitted he should not have been driving any vehicles today.</p>

Odors:
<p>Unknown alcoholic beverage(s).</p>

General Observations

Speech: Slurred
Attitude: Confused, sad, upset, emotional.
Clothing: Short sleeve black Ed Morse Honda polo shirt, long khaki/gold tan pants, brown dress shoes.
Medical Problems/Medications: Cardiomyopathy
Other: Upon requesting a breath sample, the subject removed his false teeth/dentures, therefore a twenty minute observation was repeated.

SCANNED

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JUN 20 2020

DUI PROBABLE CAUSE AFFIDAVIT

Subject:

Salvatore Marasa

Case Number: 2020-0009653

Roadside Tasks

Horizontal Gaze Nystagmus

- | | |
|---|--|
| <input type="checkbox"/> Left Eye Does Not Follow Smoothly | <input type="checkbox"/> Right Eye Does Not Follow Smoothly |
| <input type="checkbox"/> Left Eye Jerks at 45 Degree Angle or Less | <input type="checkbox"/> Right Eye Jerks at 45 Degree Angle or Less |
| <input type="checkbox"/> Distinct Jerking Left Eye at Maximum Deviation | <input type="checkbox"/> Distinct Jerking Right Eye at Maximum Deviation |

Roadsides not conducted for the safety of the defendant due to the subject being clearly impaired beyond the ability to operate a motor vehicle.

Walk and Turn Task

N/A

One Leg Stand

N/A

Finger To Nose

N/A

Romberg Balance

N/A

Breath Results from Instrument

1st Result .260 2nd Result .257 3rd Result
If Applicable

State of Florida

County of Palm Beach

The Following Instrument was notarized or sworn before me this

Personally Known

Produced Identification

Notary Public

(DATE)

6/19/20


Notary / Clerk of Courts / Officer (FSS: 117.10)


Signature of Arresting Officer

SCANNED
JUN 20 2020

SUBJECT: Salvatore Marasa

CASE NUMBER: 2020-0009653

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 determining 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 determining its alcohol content
and/or presence of chemical or controlled substances.

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

I am D. Thomas #2107 of the West Palm Beach 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.

SUBJECTS SIGNATURE: *on video*

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 can not 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.

SUBJECTS SIGNATURE: *on video*

SCANNED

JUN 20 2020

West Palm Beach Police Department

600 Banyan Blvd
West Palm Beach, Florida 33401
(561)822-1900

Witness List:

Arresting Officer: D. Thomas #2107 **Case Number:** 2020-0009653
Address: (West Palm Beach Police Department) 600 Banyan Blvd, West Palm Beach, FL 33401
Phone Number Home: _____ **Cell:** _____ **Work:** (561)822-1900
Can Testify to: Case Facts

Witness Name: Areanna Payne **Case Number:** 2020-0009653
Address: 2517 Dunksferry Road, Apt. G202, Bensalem, PA, 19020
Phone Number Home: _____ **Cell:** 609-325-8143 **Work:** _____
Can Testify to: Crash

Witness Name: Aby Gonzales **Case Number:** 2020-0009653
Address: 727 51st Street, WPB, FL, 33401
Phone Number Home: _____ **Cell:** 561-876-6200 **Work:** _____
Can Testify to: Crash

Witness Name: Joseph Melindez **Case Number:** 2020-0009653
Address: 409 NE 13th Ave, Boynton Beach, FL, 33435
Phone Number Home: _____ **Cell:** 561-568-0508 **Work:** _____
Can Testify to: _____

Witness Name: _____ **Case Number:** 2020-0009653
Address: _____
Phone Number Home: _____ **Cell:** _____ **Work:** _____
Can Testify to: _____

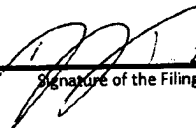
Witness Name: _____ **Case Number:** 2020-0009653
Address: _____
Phone Number Home: _____ **Cell:** _____ **Work:** _____
Can Testify to: _____

VI. Information or evidence to be supplied later:

Item(s): _____
Date will be furnished: _____
Why not supplied at filing: _____

Note: It is the responsibility of the officer filing the case to insure that the foregoing list is complete and correct

SCANNED
JUN 20 2020

 2107
Signature of the Filing Officer

06/19/2020
Date

TESTING FACILITY TASK REPORT

AGENCY: West Palm Beach P D

SUBJECT: MARASA, Salvatore

CASE NUMBER: 2020-0009653

DATE: 06/19/2020

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 2117 hrs

ENDING TIME: 2217 hrs

BREATH TESTS RESULTS: 1) .260 TIME 2204 A.M. P.M. 2) .257 TIME 2207 A.M. P.M.
3) N/A TIME N/A A.M. P.M. 4) N/A TIME N/A A.M. P.M.

BREATH OPERATOR: Sgt R. Heisser #1430

MAINTENANCE TECHNICIAN: Officer R. Secord

TESTING OFFICER'S OBSERVATIONS

SPEECH: Extremely slurred hard to understand at times

ATTITUDE: Passive, Co-operative, apologetic.

CLOTHING: goldish Brown Pants, Ed Morse Polo Shirt

MEDICAL CONDITIONS: Cardiopulmonary

MEDICATIONS: Medication for his Heart, (Not Suppost to mix with Alcohol per him)

OTHER:

I responded to the scene of the accident subject was stumbling while trying to stand on his own there was an empty vodka bottle at his feet. Officer Thomas had called me reference to the subject being extremely intoxicated and needed help. Bloodshot glassy eyes

COMMENTS:

It was clear roadsides were out the question for his safety due the subject being to intoxicated. On more then one occasion he stated he was drunk. Officer Thomas observed the def in the driver seat of the vehicle engine running vehicle in drive with his seatbelt on with the vehicle facing sw in the westbound lanes of 45th St. It was found the def had struck two separate vehicles Subject kept apologizing while at the BAT for his actions.

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 2117 HRS. (Intox 8000 Time)

Breath requested by the A/O on Video two adequate samples of his breath were requested at which point he asked if it was being recorded at which point he pulled out his front teeth, advised him we would wait another 20 minutes stated he was drunk, 2136 hrs started over. Crying about his marriage. Stated he was an asshole while seated. Upon going on video he submitted to the test upon explaining the samples he said he will pass on the test, Implied read by A/O stated he understood and choose to take the test without hesitation Prior to second sample asked what happened with the first explained the instrument obtains two samples compares for compliance and prints the results. Two samples obtained without incident and explained stated he understood.

SCANNED
JUN 20 2020

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: WEST PALM BEACH PD
Instrument Serial Number: 80-001235 Software: 8100.27
Date of Test: 06/19/2020

Date of Last Agency Inspection: 05/28/2020
Observation Period Began: 21:18
Subject's Name: SALVATORE MARASA

DOB: 07/31/1964 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	22:02
	Air Blank	0.000	22:02
	Control Test	0.080	22:03
	Air Blank	0.000	22:03
	Subject Sample #1	0.260	22:04
	Air Blank	0.000	22:04
	Air Blank	0.000	22:06
	Subject Sample #2	0.257	22:07
	Air Blank	0.000	22:08
	Control Test	0.080	22:08
	Air Blank	0.000	22:09
	Diagnostics Check	OK	22:09

Cylinder Lot: 24818080A2
Exp: 10/05/2020

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 ROBERT H HEISSER, 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: 6/19/20

Sworn to (or affirmed) before me this 19 day of JUNE, 2020

Signature of D. Thomas #2107 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: MARASA, S CASE NUMBER: 2070-9653 DT 9653

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

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-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) OW UTDEB

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.

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SUSPECT'S SIGNATURE: (X) OW UTDEB



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: 2020015163	Date: 06/20/2020
	Specialist Name/ID: T Howard/7185

SCANNED JUN 20 2020