

0524465

21CT11288 ASB

3447

ARREST / NOTICE TO APPEAR

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

1

JUVENILE

AD M I N I S T R A T I O N	OBT Number		Agency ORI Number 0500400		Agency Name Delray Beach Police Department		Agency Report Number (N.T.A.'s only) 4, 0 21-008242		
D E F E N D A N T	Charge Type: Check as many <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type UNARMED		Multiple Clearance Indicator 1				
	Location of Arrest (Including Name of Business) LAKE IDA RD/ROOSEVELT RD DELRAY BEACH, F				Location of Offense (Business Name, Address) 1299 LAKE IDA RD/ROOSEVELT AVE, DELRAY BEACH, FL				
	Date of Arrest 07/08/2021	Time of Arrest 01:51	Booking Date 07/08/2021	Booking Time 02:01	Jail Date 07/08/2021	Jail Time 04:20	Location of Vehicle 1299 LAKE IDA		
	Name (Last, First, Middle) TYSON, TRAVIS GLYNN				Alias (Name, DOB, Soc. Sec. #, Etc.) Alias:				
C O D E F	Race W - White I - American Indian B - Black O - Oriental/Asian W M	Sex M	Date of Birth 04/29/1993	Height 5'08	Weight 175	Eye Color BROWN	Hair Color BROWN	Complexion FAIR	
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status S	Religion NON-DENOMI	Indication of Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>		
	Local Address (Street, Apt. Number) 20 NE 9TH AVE, DEERFIELD BEACH, FL 33441				Phone (786) 374-6852		Residence Type: 1. City 3. Florida 2. County 4. Out of State 3		
	Permanent Address (Street, Apt. Number) 20 NE 9TH AVE, DEERFIELD BEACH, FL 33441				Phone (786) 374-6852		Address Source VERBAL		
J U V E N I L E	Business Address (Name, Street) 250807931490 / FL		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) MIAMI, FL, United	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		
	Name (Last, First, Middle)		Relationship		Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated		
C H A R G E	Parent <input type="checkbox"/> Other: <input type="checkbox"/> Legal Custodian <input type="checkbox"/>		Address (Street, Apt. Number)		(City)		(State) (Zip)		
	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				
C O D E	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	
	Charge Description DRIVING WHILE UNDER INFLUENCE		Statute Violation Number 316.193(1)A		Violation of ORD #				
	Drug Activity N	Drug Type N	Amount / Unit /	Offense # 21-008242	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number	Bond	
	Charge Description		Statute Violation Number		Violation of ORD #				
I N T A K E	Charge Description		Statute Violation Number		Violation of ORD #				
	Charge Description		Statute Violation Number		Violation of ORD #				
	Charge Description		Statute Violation Number		Violation of ORD #				
	Charge Description		Statute Violation Number		Violation of ORD #				
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: <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"/> Pooled Bond <input type="checkbox"/> South County Mental Health		Date Transported		Time Transported		Other		
	Transported By		Date Transported		Time Transported		Other		
A D M I N	<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 08/03/2021 08:30:00		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				
	HOLD for Other Agency		Signature of Arresting Officer		Name Verification (Printed by Arrestee)				
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Released Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Name of Arresting Officer (Print) WINDSOR, NICHOLAS		I.D. # 1029		(PRINT)		
Intake Depot [Signature] I.D. #		Pouch #		Transporting Officer WINDSOR		I.D. # 1029			
				Agency DBPD		Witness here if subject signed with an "X"			

JUL 08 2021

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 8TH DAY OF JULY 20 21, AT 0132 PM
SUBJECT: TYSON, TRAVIS GYLNN CASE NUMBER: 21-008242
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 07/08/21 at 0132hrs, I observed a blue 2011 Jeep Wrangler (FL Tag #DJSZ33) traveling northbound in the 200 block of N. Swinton Ave. I established a pace of speed for the Jeep at 47mph in a posted 25mph speed zone. I observed the Jeep make a left turn (west) onto Lake Ida Rd. While the Jeep was turning, it traveled west across the eastbound right turn, straight and left turn lanes before entering the westbound travel lane. I followed the Jeep westbound and observed the Jeep drive while occupying both westbound travel lanes at the same time. I established a pace of speed for the Jeep at 47mph in the 400 block of Lake Ida Rd. (which is a posted 35mph speed zone). I observed the Jeep switch lanes without using a turn signal in the 500 block of Lake Ida Rd. I activated my emergency lights of my marked DBPD patrol vehicle to conduct a traffic stop at Lake Ida Rd. and Roosevelt Ave. I met with the white male driver and identified him by his FL DL as Travis Gylinn Tyson. Tyson was sitting in the driver seat of the Jeep with the engine running. There was nobody else inside the Jeep. Tyson was in possession of the vehicle key.

OBSERVATION OF DRIVER:

When I met with Tyson, I smelled an odor of an unknown alcohol beverage coming from Tyson. Tyson's eyes were red and had a glassy appearance. Tyson's pupils were slightly dilated and did not change in size when exposed to changes in light. Tyson's speech was slurred and thick. Tyson was uncooperative when I requested he perform roadside tasks. Tyson did not give specific answers to my questions such as where he was coming from.

DRIVER'S STATEMENTS:

When I questioned Tyson about his driving pattern, he replied he was trying to catch up with his friend's vehicle because he did not have any lights on. Tyson stated he was on his way home in Deerfield Beach, FL, but instead tried to catch up to his friend. Tyson stated he was at F45 Fitness Gym (301 NE 1st St, Delray Beach, FL 33483) prior to driving. Tyson stated his friend is a trainer and he met him at 0100 to work out. Tyson stated he worked out in the same clothes he was wearing and stated he sweated while working out. I observed no sweat on Tyson's clothing and his shirt was completely dry. Tyson denied consuming any alcohol, prescription medications or illegal drugs including marijuana prior to driving. Tyson denied having any medical conditions or problems with his eyes that weren't corrected by glasses. I requested Tyson perform roadside tasks and he refused. I informed Tyson of Taylor Warning and he acknowledged he understood Taylor Warning. Tyson again refused to perform roadblocks and stated it will ruin his career. I asked Tyson how would performing roadblocks sober ruin his career and he stated he was attempting to become a firefighter in Broward County, FL. I had Tyson follow a stimulus light with his eyes to check for a possible head injury and his eyes were not smoothly tracking side to side but both eyes tracked equally. I asked Tyson why I smelled an odor of an unknown alcoholic beverage coming from him if he did not consume any alcohol and he replied he did not know.

ODORS:

I smelled an odor of an unknown alcoholic beverage coming from Tyson.

GENERAL OBSERVATIONS

SPEECH: Slurred and Thick

ATTITUDE: Polite and Respectful but Uncooperative by Not Performing Roadblocks

CLOTHING: Blue Shirt, Gray Shorts and Black Shoes.

MEDICAL/OTHER: None Stated.

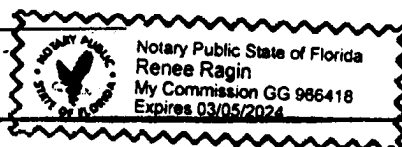
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to, signed and subscribed before me this 8th day of July 20 21 by Ofc. Windsor #1029

(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)



SUBJECT: TYSON, TRAVIS GYLNN

CASE NUMBER DBPD #21-008242

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:

TYSON REFUSED TO PERFORM ROADSIDE TASKS.

WALK & TURN:

TYSON REFUSED TO PERFORM ROADSIDE TASKS.

ONE LEG STAND:

TYSON REFUSED TO PERFORM ROADSIDE TASKS.

FINGER TO NOSE:

TYSON REFUSED TO PERFORM ROADSIDE TASKS.

ROMBERG ALPHABET:

TYSON REFUSED TO PERFORM ROADSIDE TASKS.

BREATH TEST RESULTS:

1) Refused

2)

3)

4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

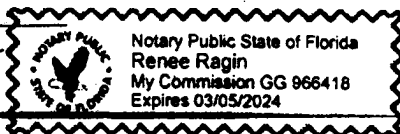
(Signature of Arresting/Investigative Officer)

The foregoing instrument was read and explained and subscribed before me this 8th day of July, 2021 by Ofc. Windsor #1029

(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.S. 117.10)



**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 8th day of July, 20 21, at 0151 ☐ P.M. ☒ A.M.

DRIVER Travis Gynn Tyson
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# T250807931490, state of Florida, was placed under lawful arrest for


the offense of Driving Under the Influence by Ofc. Windsor #1029 and
(Name of Arresting Officer)

issued Citation # AE27E0E

That on or about the 8th day of July, 20 21, at 0237 ☐ 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 this 08 day of July, 20 21,

by Ofc. Windsor,

who is personally known to me or who has produced

[Signature] as identification

Notary Public

HSMV-BAR1001 (REV. 10/2016)

The foregoing instrument was sworn and subscribed before me:

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: DBPD #21-008242

ARRESTING OFFICER: OFC. WINDSOR #1029 DBPD

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. TABARES MEDEROS #1118 DBPD

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

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

CAN TESTIFY TO: BACKUP OFFICER

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____



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

PBSO CASE # 21-083589 PBSO ZONE 4-11

AGENCY CASE # 21-008242 CRASH CASE # N/A

TIME OF STOP/CRASH 0132 DATE 07/08/21 DAY THURSDAY

SUBJECT'S NAME TYSON, TRAVIS GYLNN RACE W SEX M

HGT 5'08" WGT 175 DOB 04/29/93

LOCATION LAKE IDA RD/ROOSEVELT AVE, DELRAY BEACH, FL

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

DIVISION: CRD

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0213

BREATH RESULTS:

ARREST TIME 0151

1) _____

2) **REFUSED**

3) _____

4) _____

TESTING OFFICER'S ID 16877 PBSO VIDEOTAPE # N/A

TESTING FACILITY TASK REPORT

AGENCY: DBPD

SUBJECT: Tyson, Travis G. CASE NUMBER: 21-083589

DATE: Jul 8, 2021 VIDEO DVD NUMBER: N/A

BEGINNING TIME: 02:35 ENDING TIME: 02:38

BREATH TESTS RESULTS: 1) Refusal TIME 02:37 A.M. ☒ P.M. ☐ 2) N/A TIME _____ A.M. ☐ P.M. ☐

3) N/A TIME _____ A.M. ☐ P.M. ☐ 4) N/A TIME _____ A.M. ☐ P.M. ☐

BREATH OPERATOR: R. Ragin #16877

MAINTENANCE TECHNICIAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Calm, cooperative

CLOTHING: Gray shorts, blue t-shirt, black sneakers

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER:

Eyes are glassy & red

REFUSED

COMMENTS:

Arrived at center A/O started 20 minute observation period at 02:13 hrs.

Subject refused to perform breath test.

A/O read I/C and subject stated he understood I/C.

Subject refused to take test.

A/O read rights.

Subject stated he understood rights.

A/O attempted Q&A

Subject refused to answer Q&A.

REFUSED

SUBJECT:

Tyson, Travis G.

CASE NUMBER:

DLPTD 21-0242

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

NICHOLAS K. ANDERSON

of the

DEPT. OF PUBLIC SAFETY

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)

Travis G. Tyson

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)

Travis G. Tyson

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL

SUBJECT: Tyson, Travis G. CASE NUMBER: 21-8342
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: C.C. (141) 502 4 21 12D



**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: 2021016745

Date: 7/08/21

Specialist Name/ID: J. Beck/9007