

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

Request for Warrant 1 Juvenile N
4. Request for Capias

OBTS Number	Agency ORI Number FLO 5 0 2 6 0 0		Agency Name PALM BEACH GARDENS POLICE DEPARTMENT		Agency Report Number 78 - 21004083	
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input type="checkbox"/> 2. Traffic Felony	<input checked="" type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance	<input type="checkbox"/> 6. Other
Location of Arrest (Including Name of Business) PGA Blvd/ Kew Gardens Ave.				Location of Offense (Business Name, Address) 3200-Block PGA Blvd. PBG, FL		
Date of Arrest 09/18/2021	Time of Arrest 01:59	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle 4701 East Ave. WPB, FL

Name (Last, First, Middle) Panchal, Vatsal Ketan,				Alias (Name, DOB, Soc. Sec. #, Etc.)				
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex M	Date of Birth 07/11/1996	Height 5'07"	Weight 120	Eye Color Brown	Hair Color Brown	Complexion Light	Build Medium
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) None				Marital Status Single	Religion NONE	Indication of: Alcohol Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/> Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>		
Local Address (Street, Apt. Number) 2813 Grande Pkwy Apt 202		(City) Palm Beach Gardens	(State) FL	(Zip) 33410	Phone (754) 317-5918		Residence Type: 1. City 2. County 3. Florida 4. Out of State 1	
Permanent Address (Street, Apt. Number) 2813 Grande Pkwy Apt 202		(City) Palm Beach Gardens	(State) FL	(Zip) 33410	Phone		Address Source FL DL	
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone		Occupation Mechanical Engineer	
D/L Number, State P524860962510 FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) India		Citizenship

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
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
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other:	Name (Last) (First) (Middle)		Residence Phone					
Address (Street, Apt. Number)		(City)	(State)	(Zip)	Business Phone			
Notified by: (Name)		Date	Time	Juvenile Disposition 1. Handled/ processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated				
Released To: (Name)		Relationship		Date	Time			

The above address provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address.			School Attended	Grade
<input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)				
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No	Description of Property	Value of Property		

Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine	B. Barbiturate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other
Charge Description DUI - Breath Above .08		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)(C)		Violation of ORD #				
Drug Activity N/A	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				

Location (Court Room Number, Address) NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700					
Court Date and Time Month October Day 20 Year 2021 Time 10:00 AM <input checked="" type="checkbox"/> PM					
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED					
Signature of Defendant (or Juvenile and Parent /Custodian)				Date Signed 09/18/2021	

HOLD for other Agency Name:		Signature of Arresting Officer James Lovett		Name Verification (Printed by Arrestee) SEP 18 AM 4:12	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:	Name of Arresting Officer (Print) James Lovett		(PRINT)	
Intake Deputy Dunbar	I.D. #	Pouch #	Transporting Officer James Lovett	ID # 523	Agency PBGPD
Witness here if subject signed with an -X-				1 OF 1	

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

0.526010 2898

D.U.I. PROBABLE CAUSE AFFIDAVIT

On the 18 day of September 2021 at 01:48 AM PM

Subject: Panchal, Vatsal Ketan, Case Number: 21004083

Agency: PALM BEACH GARDENS POLICE DEPARTMENT Arresting Officer: James Lovett 523

PERSONAL CONTACT

DRIVING PATTERN: (Actual Physical Control; Physical Evidence or Statements Putting Defendant Behind Wheel of Vehicle)

While performing traffic enforcement on the 3200 Block of PGA Blvd. I observed a vehicle travelling eastbound at an accelerated rate of speed. My initial estimate of the vehicle's speed was 60mph in a 45mph zone. Utilizing my department issued Scout Radar (SHD-04613) I received a steady tone and a reading of 65mph. I maintained visual contact on the vehicle and identified it as a silver Acura bearing FL tag NGUW29. I then initiated a traffic stop on the vehicle.

OBSERVATION OF DRIVER:

I made contact with the driver and sole occupant of the vehicle Vatsal Panchal, identified by his FL driver's license. When I initially approached the vehicle, I stood at the driver's window for an elongated amount of time, approximately 20 seconds, with my flashlight shining in the vehicle, and Panchal remained seated with the window shut. Panchal looked in my direction twice and still did not open the window. I tapped on the window to gain his attention and was successful. During my contact with Panchal, I observed his eyes to be glassy and blood shot and his speech to be slurred.

DRIVER STATEMENTS:

Panchal stated he "thought he was going 50" when I asked if he saw me standing at his window. Panchal stated he was coming from Clematis Street in West Palm Beach, FL. On Clematis St. he attended a bar named "Roxy's." He stated at Roxy's he had one (1) IPA beer.

ODORS: No odor detected

GENERAL OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Compliant and respectful

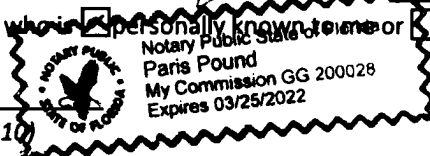
CLOTHING: Casual

MEDICAL/OTHER: None

STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was sworn to or affirmed and subscribed before me this 18 day of September 20 21 by James Lovett 523 who is personally known to me or produced

Notary Public, Clerk of Court, Officer (FSS 117.10)



SIGNATURE OF ATTESTING OFFICER

STAMP

D.U.I. PROBABLE CAUSE AFFIDAVIT Cont.

Subject: Panchal, Vatsal Ketan,

Case Number: 21004083

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

LEFT EYE

- Lack of Smooth Pursuit
- Distinct & Sust. Nystag. at Max. Deviation
- Onset of Nystagmus Prior to 45 Degrees

RIGHT EYE

- Lack of Smooth Pursuit
- Distinct & Sust. Nystag. at Max. Deviation
- Onset of Nystagmus Prior to 45 Degrees

Other Observations:

Panchal had a observed a 2-3 inch orbital sway during the task.

Walk and Turn

Panchal stated he understood all instructions. Panchal had trouble assuming the instruction position. He then could not maintain the position twice while I gave instructions. On his first sequence of steps, he paused on every step, took 13 steps, and missed heel to toe on step 3 and 13. He then stopped and looked at me and I reminded him of the second sequence. On his second sequence of steps he did not assume the position properly, took 12 steps and on step 6 he stepped off the line and missed heel to toe.

One Leg Stand

Panchal stated he understood all instructions. During the task, Panchal put his foot down, swayed, hopped, and used his arms for balance.

[Empty box for additional observations]

[Empty box for additional observations]

BREATH RESULTS: 1) .129 @ 0251 2) .124 @ 0254 3) _____ @ _____ 4) _____ @ _____

STATE OF FLORIDA
COUNTY OF PALM BEACH

[Signature]
SIGNATURE OF ATTESTING OFFICER

The forgoing instrument was sworn to or affirmed and subscribed before me this 18 day of September 2021 by James Lovett 523 _____ produced _____

[Signature]
Notary Public, Clerk of Court, Officer (FSS 117.10)



SUBJECT: _____ 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

SUBJECT: _____ 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) _____



**PALM BEACH GARDENS POLICE DEPARTMENT
DUI TESTING FACILITY INFORMATION SHEET**



PBSO Case #: 21-107857

PBSO Zone: 3-15

Agency Case #: 21004083

Crash Case #: _____

Incident Information:

Time of Stop/Crash: 01:48 Date of Incident: 09/18/2021 Day: Saturday

Location of Incident: 3200 Block PGA Blvd. PBG, FL 33410

Arrest Information:

Time of Arrest: 01:59 Date of Arrest: 09/18/2021 Day: Saturday

Location of Arrest: PGA Blvd/ Kew Gardens Ave.

Subject's Name: Panchal, Vatsal, Ketan DOB: 07/11/1996

Race: W Sex: M Height: 5'07" Weight: 120

Arresting Officer's Name: James Lovett

ID#: 523

Agency: PBGPD

Division: Road Patrol

Breath Results

- 1) .129 at 02:51 hrs.
- 2) .124 at 02:54 hrs.
- 3) N/A at N/A hrs.
- 4) N/A at N/A hrs.

---BAT Use---

BAT Notified: Yes

Arrival Time at BAT: 02:24

Subject Arrest Time: 01:59

Breath Test Operator: 24639

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: 80-006477 Software: 8100.27
Date of Test: 09/18/2021

Date of Last Agency Inspection: 09/10/2021
Observation Period Began: 02:24
Subject's Name: VATSAL K PANCHAL DOB: 07/11/1986 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	02:49
	Air Blank	0.000	02:49
	Control Test	0.080	02:50
	Air Blank	0.000	02:50
	Subject Sample #1	0.129	02:51
	Air Blank	0.000	02:52
	Air Blank	0.000	02:53
	Subject Sample #2	0.124	02:54
	Air Blank	0.000	02:55
	Control Test	0.079	02:55
	Air Blank	0.000	02:56
	Diagnostics Check	OK	02:56

Cylinder Lot: 02021080A1
Exp: 03/05/2023

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 PARIS D POUND, 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: _____ Date: 09/18/21
Signature

Sworn to (or affirmed) before me this 18th day of September, 2021
Signature of Notary Public-State of Florida _____ Printed Name of Notary Public-State of Florida OFF. J. LOUETT

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.

DUI WITNESS LIST

21004083

Arresting Officer: James Lovett 523 Email: JLovett@PBGFL.com
Agency Address: 10500 N. Military Trl. PBG, FL, 33410 Phone: (561) 799-4445
Can Testify To: Facts of Case

Backup Officers: Ofc. Jason Hennessy #409 Ofc. Matt Komara #511
Agency Address: 10500 N. Military Trl. PBG, FL 33410 Phone: (561) 799-4445
Can Testify To: Investigation

Crash Investigator: Email:
Agency Address: Phone:

Breathalyzer Technician: Pound ID: 24639 Agency: PBSO

DRE: ID# Agency Case #:
Agency Address: Phone: Email:

Name: Involvement:
Address: Phone:
Can Testify To: Wheel Witness

Name: Involvement:
Address: Phone:
Can Testify To: Wheel Witness

Name: Involvement:
Address: Phone:
Can Testify To: Wheel Witness

Name: Involvement:
Address: Phone:
Can Testify To: Wheel Witness

Name: Involvement:
Address: Phone:
Can Testify To: Wheel Witness

Name: Involvement:
Address: Phone:
Can Testify To: Wheel Witness

TESTING FACILITY TASK REPORT

AGENCY: PBG

SUBJECT: PANCHAL, VATSAL K

DATE: Sep 18, 2021

BEGINNING TIME: 02:47

CASE NUMBER: 21-107857

VIDEO DVD NUMBER: N/A

ENDING TIME: 03:02

BREATH TESTS RESULTS: 1) .129 TIME 02:51 A.M. P.M. 2) .124 TIME 02:54 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: P.POUND #24639

MAINTENANCE TECHNICIAN: J. KARLECKE# 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: ACCENT

ATTITUDE: CALM, QUIET

CLOTHING: BLUE JEANS , BLUE SHIRT , WHITE SNEAKERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: GLASSY AND BLOODSHOT

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 02:24 HRS.

SUBJECT: AGREED TO TAKE TEST

A/O: READ RIGHTS

SUBJECT: STATED HE UNDERSTOOD RIGHTS

TECH: READ TEST RESULTS

SUBJECT: STATED HE UNDERSTOOD TEST RESULTS

A/O: CONDUCTED Q&A

SUBJECT: ANSWER QUESTIONS



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)
I/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: 2021023320	Date: 9/18/2021
	Specialist Name/ID: M. Tooks #8557