0535549 50-2022-CT-017929ANB 3782

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number:

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias: **1** | Juvenile: **N**

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number
FLO 5 0 2 6 0 0	PALM BEACH GARDENS POLICE DEPARTMENT	78 - 22-005084

ChargeType: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Weapon Seized / Type (1. Yes 2. No): 2 2 | Multiple Clearance Indicator: UK

Location of Arrest (Including Name of Business): Alister Blvd/Northlake Blvd, Palm Beach Gardens, FL

Location of Offense (Business Name, Address): Alister Blvd/Northlake Blvd, Palm Beach Gardens, FL

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
10/25/2022	05:51					KAUFF'S TOWING AND RECOVERY 4701 EAST AVENUE, WPB, FL 33407

DEFENDANT

Name (Last, First, Middle): Boscarello, Alicia, Daniela
Alias (Name, DOB, Soc. Sec. #, Etc.):

Race (W - White I - American Indian B - Black O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	01/07/1971	502	113	BRO	BRO	MED	SMALL

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description): ROSE TATOO ON RIGHT WRIST
Marital Status: Divorced | Religion: UNK | Indication of: Alcohol Influence: Y ☒ | Drug Influence: N ☒

	Address	City	State	Zip	Phone
Local Address (Street, Apt. Number)	815 8TH LN	PBG	FL	33418	(631) 522-9708
Permanent Address (Street, Apt. Number)	815 8TH LN	PBG	FL	33418	
Business Address (Name, Street)					

Residence Type (1. City 2. County 3. Florida 4. Out of State): 1
Address Source: FL DL
Occupation: CARETAKER

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
B264004715070 FL	[redacted]		ARGENTINA	ARGENTINA

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth		
				☐ 1. Arrested ☐ 2. At Large	☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
				☐ 1. Arrested ☐ 2. At Large	☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Legal Custodian ☐ 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 ☐ defendant and / or ☐ 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. ☐ Yes, by: (Name) ☐ No: (Reason)
School Attended | Grade
Property Crime? ☐ Yes ☐ No | Description of Property | Value of Property

CODE

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

(1)

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
~~316.193(4)~~ DUI BAC over .15	1	☐Y ☒N	~~D.U.I-BAC OVER .15~~ 316.193(4)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Caplas Number	Bond
N	N	N/A	22-005084		O R

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Caplas Number	Bond

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Caplas Number	Bond

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Caplas Number	Bond

NOTICE TO APPEAR

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 NOVEMBER Day 30 Year 2022 Time 10:00 AM ☒ 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): [signature] | Date Signed: 10/25/2022

ADMIN

HOLD for other Agency Name:
Signature of Arresting Officer: [signature]
Name Verification (Printed by Arrestee): (PRINT)
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:
Name of Arresting Officer (Print): MOREA | I.D. #: 517
Intake Deputy: [signature] | I.D. # | Pouch #
Transporting Officer: MOREA | ID #: 517 | Agency: PBGPD
Witness here if subject signed with an "X"
PAGE 1 OF 1

D.U.I. PROBABLE CAUSE AFFIDAVIT

On the 25 day of October 2022 at 1651 ☐ AM ☑ PM

Subject: Boscarello, Alicia, Daniela Case Number: 22-005084

Agency: PALM BEACH GARDENS POLICE DEPARTMENT Arresting Officer: MOREA 517

PERSONAL CONTACT

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

Major Guillen #296 observed a black Kia utility bearing FL Tag:GMQH11 traveling westbound on Northlake Blvd driving erratically. Major Guillen observed the vehicle almost strike two other vehicles and initiated a traffic stop on this vehicle. The final location of the stop was located at Alister Blvd/Northlake Blvd, PBG, FL. Major Guillen made contact with the driver and sole occupant of the vehicle later identified via FL driver's license as, Alicia Boscarello (W/F, DOB: 01/07/1971).

OBSERVATION OF DRIVER:

Officer Zimandy #505 arrived on scene and called me to the scene to conduct a DUI investigation. Upon my arrival, I observed Boscarello outside of the vehicle with Ofc. Zimandy. Boscarello was crying.

DRIVER STATEMENTS:

Boscarello spontaneously stated numerous times that she had "fucked up" and that she drank alcohol and to just arrest her now.

ODORS: strong odor of alcohol emanating from breath

GENERAL OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: CRYING, MOODY (SWITCHED BETWEEN BEING COOPERATIVE AND AGGRESSIVE)

CLOTHING: JEANS, SANDALS, T-SHIRT

MEDICAL/OTHER: N/A

STATE OF FLORIDA
COUNTY OF PALM BEACH

SIGNATURE OF ATTESTING OFFICER

The forgoing instrument was sworn to or affirmed and subscribed before me this _____ day of _____ 20_____ by MOREA 517 who is ☐ personally known to me or ☐ produced _____.

Notary Public, Clerk of Court, Officer (FSS 117.1

PARIS POUND
MY COMMISSION # HH 202650
EXPIRES: March 25, 2026
Bonded Thru Notary Public Underwriters

STAMP

D.U.I. PROBABLE CAUSE AFFIDAVIT Cont.

Subject: **Boscarello, Alicia, Daniela** Case Number: **22-005084**

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

LEFT EYE	*RIGHT EYE*
☑ Lack of Smooth Pursuit	☑ Lack of Smooth Pursuit
☑ Distinct & Sust. Nystag. at Max. Deviation	☑ Distinct & Sust. Nystag. at Max. Deviation
☑ Onset of Nystagmus Prior to 45 Degrees	☑ Onset of Nystagmus Prior to 45 Degrees

Other Observations:

MOVED HEAD TO FOLLOW STIMULUS

Walk and Turn

-Unable to maintain balance during instruction phase.
-Started prior to being told.
-Missed heel-to-toe.
-Stepped off the line.
-Used arms for balance.
-Improper turn.
-Incorrect number of steps.
-Talked during task

One Leg Stand

-Swayed.
-Used arms for balance.
-Did not look at foot
-Lost Balance
-Talked during task
-Began taking steps forward

Rhomberg

-Swayed.
-Did not keep eyes closed.
-Talked during task
-Improperly Recited: A-B-C-D-E-F-G-H-I-J-K-I-L-J-K-L-M-N-O-P-Q-R-S-T-U-R-S-T-U-V-W-X-Y-Z

Finger to Nose

-Touched Lip
-Used wrong hand
-Swaying
-Talked during task

BREATH RESULTS: 1) 0.198 @ _____ **2)** 0.205 @ _____ **3)** _____ @ _____ **4)** _____ @ _____

STATE OF FLORIDA
COUNTY OF PALM BEACH

SIGNATURE OF ATTESTING OFFICER

The forgoing instrument was sworn to or affirmed and subscribed before me this _____ day of _____ 20_____ by MORA 517 who is ☐ personally known to me or ☐ produced _____.

Notary Public, Clerk of Court, Officer (FSS

PARIS POUND
MY COMMISSION # HH 202850
EXPIRES: March 25, 2026
Bonded Thru Notary Public Underwriters

STAMP

PALM BEACH GARDENS POLICE DEPARTMENT
DUI TESTING FACILITY INFORMATION SHEET

PBSO Case #: 22 122719 PBSO Zone: 3-13

Agency Case #: 22-005084 Crash Case #:

Incident Information:

Time of Stop/Crash: 1651 Date of Incident: 10/25/2022 Day: Tuesday

Location of Incident: Alister Blvd/Northlake Blvd, Palm Beach Gardens, FL

Arrest Information:

Time of Arrest. 1751 Date of Arrest: 10/25/2022 Day: Tuesday

Location of Arrest: Alister Blvd/Northlake Blvd, Palm Beach Gardens, FL

Subject's Name: (L) Boscarello, (F) Alicia, (M) Daniela

DOB: 01/07/1971 Race: W Sex: F Height: 502 Weight: 113 Hair BRO Eye BRO

Address: 815 8TH LN PBG FL 33418 Phone: (631) 522-9708

Arresting Officer's Name: MOREA, DEAN ID#: 517

Agency: PBGPD Division: Road Patrol

Breath Results

1) VNM, 193 at 19:10 hrs.
2) .198 at 19:13 hrs.
3) .205 at 19:17 hrs.
4) N/A at N/A hrs.

---BAT Use---

BAT Notified: YES
Arrival Time at BAT: 1835
Subject Arrest Time: 1751

Breath Test Operator: MADELIN GONZALEZ
PBSO

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006238 Software: 8100.27
Date of Test: 10/25/2022

Date of Last Agency Inspection: 10/21/2022
Observation Period Began: 18:35
Subject's Name: ALICIA D BOSCARELLO DOB: 01/07/1971 Sex: F

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	19:05
Air Blank	0.000	19:05
Control Test	0.079	19:06
Air Blank	0.000	19:07
Subject Sample #1	VNM*	19:10
Air Blank	0.000	19:10
Air Blank	0.000	19:12
Subject Sample #2	0.198	19:13
Air Blank	0.000	19:14
Air Blank	0.000	19:16
Subject Sample #3	0.205	19:17
Air Blank	0.000	19:18
Control Test	0.076	19:18
Air Blank	0.000	19:19
Diagnostics Check	OK	19:19

*Volume Not Met (0.193 - Breath Sample Not Reliable to Determine Breath Alcohol Level)

Cylinder Lot: 29821080A4
Exp: 12/05/2023

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 MADELIN GONZALEZ, 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: 10/25/22
Signature

Sworn to (or affirmed) before me this 25th day of October, 2022

_____ OFC. D. MOREA
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

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

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

TESTING FACILITY TASK REPORT

AGENCY: PBG

SUBJECT: BOSCARELLO , ALICIA D

CASE NUMBER: 22-122719

DATE: Oct 25, 2022

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 19:00

ENDING TIME: 19:28

BREATH TESTS RESULTS: 1) .VNM TIME 19:10 A.M.☐ P.M.☒ 2) .198 TIME 19:13 A.M.☐ P.M.☒

3) .205 TIME 19:17 A.M.☐ P.M.☐ 4) N/A TIME N/A A.M.☐ P.M.☐

BREATH OPERATOR: M. GONZALEZ #40577

MAINTENANCE TECHNICAN: J. KARLECKE# 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: CRYING, TALKATIVE

CLOTHING: BLUE JEAN PANTS, GREY SHIRT, WHITE SANDALS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

1. VNM .193

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 18:35 HRS.

SUBJECT: REFUSED TO TAKE TEST

A/O: READ I/C
SUBJECT: STATED SHE UNDERSTOOD I/C AND AGREED TO TAKE TEST
SUBJECT REFUSED TO FOLLOW TECH INSTRUCTIONS KEPT BLOWING AND STOPPING INSTRUMENT
READ .VNM

A/O: READ RIGHTS
SUBJECT: STATED SHE UNDERSTOOD RIGHTS.

TECH: READ TEST RESULTS
SUBJECT: STATED SHE UNDERSTOOD TEST RESULTS.

A/O: CONDUCTED Q & A
SUBJECT: ANSWERED QUESTIONS

DUI WITNESS LIST

22-005084

Arresting Officer: MOREA 517 Email: _____
Agency Address: 10500 N Military Trail, Palm Beach Gardens, FL 33410 Phone: (561) 799-4445
Can Testify To: Facts of Case

Backup Officers: OFC. ZIMANDY
Agency Address: 10500 N Military Trail, Palm Beach Gardens, FL 33410 Phone: (561) 799-4445
Can Testify To: SFST'S

Crash Investigator: _____ Email: _____
Agency Address: _____ Phone: _____

Breathalyzer Technician: _____ ID: _____ Agency: PBSO

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

Name: MAJOR. GUILLEN #296 Involvement: _____
Address: 10500 N MILITARY TRL, PBG, FL Phone: (561) 799-4445
Can Testify To: TRAFFIC STOP/DRIVING PATTERN ☑ 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

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 determining 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 refuse to take the test I have requested of you, your driving privilege will be suspended for a period of one (1) year for a FIRST REFUSAL, or eighteen (18) months if your driving privilege has been PREVIOUSLY SUSPENDED, or if you have been PREVIOUSLY FINED under s. 327.35215, for refusing to submit to a lawful test of your breath, urine, or blood. Additionally, if you refuse to take the test I have requested of you, and if your driving privilege has been previously suspended, or if you have been previously fined under s. 327.35215, for a refusal to submit to a lawful test of your ***breath, urine*** or blood, you will be committing a misdemeanor, in addition to any other penalties which can be imposed by law.

Refusal to submit to the test I have requested is admissible into evidence in any criminal proceeding.

Do you understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO

NOTE: IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER'S LICENSE (CDL), READ THE FOLLOWING,

If you are a Commercial Driver License (CDL) holder or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privilege for a period of one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from holding a CDL or operating a CMV.

Do you understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO

SUBJECTS SIGNATURE: (X)_____ READ ON CAMERA

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X)_____ READ ON CAMERA

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: _____

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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2022027979	**Date:** 10/26/2022
	Specialist Name/ID: Pinkneya/7796