Agency ORI Number   Agency Name   Agency Name   Agency Name   Agency Report Number (N.T.A. 's only)	multiple carance diseasor							
N   O501700   Jupiter Police Department   S   4   22-002367	earance dicasor							
Charge Type:	earance dicasor							
Location of Arrest (Including Name of Business)   Location of Offense (Business Name, Address)	Sithes 11							
Date of Arrest   Time of Arrest   Booking Date   Booking Time   Jail Date   Jail Time   Location of Vebicle	514911							
Name (Last, First, Middle)  PERUGINI, ANDREA HUSAKOVA  Race W - White 1 - American Iodian W F 11/11/1973 5'06 120 BLUE B - Bluck D - Operal/Asian W F 11/11/1973 5'06 120 BLUE  Marital Status   Religion   Indication of St	514911							
Race W-White I-American Iodian B-Black O-Oriental/Asian W F 11/11/1973 5'06 120 BLUE BLONDE / Complexion LIGHT  D Scars, Marks, Tatoos, Unione Physical Features (Location, Type, Description)	514911							
W. White I - American Iodian W F 11/11/1973 5'06 120 BLUE BLONDE / LIGHT  D Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description)  Marital Status   Religion   Indication of   Status   Religion   Indication   Indication	514911							
	10 Da Unak []							
S OTHER Alcohol influence Yes No 53								
E Local Address (Street, Apr. Number) (City) (State) (Zip)  N 312 W THATCH PALM CIR 104, JUPITER, FL 33458 (772) 485-6185 (City) 485-6185 (City) 4. Opt of State								
A Permanent Address (Street, Apt. Number) (City) (State) (Zip) Phone Address Source VERBAL  312 W THATCH PALM CIR 104, JUPITER, FL 33458 (772) 485-6185								
Business Address (Name, Street) (City) (Sitte) (Zip) Phote Occupation								
D/L Number State  DNS Number Place of Birth (City, State)  P625008739110 / FL  Crizenship  US								
C Co-Defendant Name (Last, First, Middle)	5. Juvenile							
Co-Defendant Name (Last, First, Middle)  Race Sex Date of Birth	5. Juvenile							
F								
J Capel Custodian  V Address (Street, Apt. Number)  (City) State)  (State)  (Zip)  Business Phone	<del></del>							
	<del></del>							
1. Handled/Processed within 2. TOT JAC Department and Released 3. Incarcerated								
Released To: (Name)  Relationship  Date  Time								
The above address was provided by defendant and/or defendant's parents.    School Attended   School At								
1 201 444401 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	f Property							
C Drug Activity S. Sell R. Sneuggle K. Disperses/ M. Manufacture/ Z. Other Drug Type B. Barbinurate H. Hallucinogen P. Paraphernatia/ U. Unknown N. N/A B. Buy D. Deliver Distribute Produce/ N. N/A C. Cockisse M. Marijuana Equipment Z. Other								
D P. Possess T. Tradfic E. Use Cultivate A. Amphetamine E. Heroin O. Optium/Deriv. S. Synthetic C Charge Description Statute Violation Number Violation of ORD	P. Possess T. Traffic E. Use Cultivate A. Amphetamine E. Heroin O. Opium/Derv. S. Synthetic							
DUI - BAC/BRAC OVER .15 -OR- MINOR IN VEHICLE 316.193(4)								
R Drug Activity Drug Type N Amount / Unit Offense # Counts Domestic Violence Warrant / Capias Number Bond Y 128 N								
C Charge Description Statute Violation Number Violation of ORD								
R Drug Activity Drug Type Amount / Unit Offense # Counts Domestic Violence Warrant / Capias Number Band								
C Charge Description Statute Violation Number Violation of ORD	ı							
R   Drug Activity   Drug Type   Amount / Unit   Offense #   Counts   Dornestic Violence   Warrant / Capias Number   Bond   P   N								
Health / Apparent Physical Condition of Defendant  Any knowledge of the following: Mental Escape Risk Mindows Defendant  Any knowledge of the following:	e" Dinjuries							
Explain:  T Check which applies: Released O.R. Released to Parent/Guardian T.O.T. County Jail PROPERTY - Received By Released By Released Co.	<del></del>							
R   Posted Bond   South County Mental Health   F								
No INSTRUCTION NO. 1 - Mandatory appearance in court    Location (Court, Room)   North Court   North	<u>:40</u>							
INSTRUCTION NO. 1 - Mandatory appearance in court  North County PALM BEACH GARD  North County								
but must comply with instructions on Page 2. 07/20/2022 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 COMTEMPT OF COURT AND A WARRANT AVAILABLE ISSUED.  AVAILABLE OF BAY ARBEST CHARLE BE ISSUED.								
P P P P P P P P P P P P P P P P P P P	, -							
R Signature of Defendant (or Juvenile and Parent/Custodian)  Date Signed								
HOLD for Other Agency  Signature of Arresting Officer  Name Verification (Printed by Arrestee)								
M	PAGE							
Intake Deputy 1.D.   Pouch   Transporting Officer Poll   314   Ton Witness here if subject signed with an "X".	1 of 1							

A	OBTS Number	PROBABLE CAU	SE AFFIDAVIT	1. Arrest 2. N.T.A.	Request for 4. Request 1		1	JUVENILE
D M	Agency ORI Number Agency P		-	cy Report Number				
~		ITER POLICE DEPARTMEN	T 5	5 4 22-002367				
×	Check as many	3. Misdemeanor 5 Ordinance 4. Traffic Misdemeanor 6. Other		Special No	otes:			
D	Name (Last, First, Middle)	Alias		_	Race		Date of Birth	
Ē	PERUGINI, ANDREA HUSA	KOVA			W	F	11/11	/1973
CH	Charge Description		Charge Description					
AR	316.193(4) DUI - BAC/BRAC OVE	R .15 -OR- MINOR IN VEHICLE	2 P					
G E S	Charge Description		Charge Description					'
9	Victim's Name (Last, First, Middle)	——————————————————————————————————————			Race	Sex 1	Date of Birth	
v	State Of Florida					, I	Jaio 0. G. a.	
C	Local Address (Street, Apt. Number)	(City) (State)	( <b>Z</b> ip)	Phone	1 1	Addre	ess Source	
т						٦١,		
J	Business Address (Name, Street)	(City) (State)	(Zip)	Phone		Occu	petion	
	The undersigned certifies and swears that he/sh	e has just and resonable grounds to believe, and o	loes believe that the above r	named Defendant co	mmitted the	followin	g violation (	of law.
	The Person taken into custody							
	committed the below acts in my pres	ence.	observed by	that be take as	u tha area	atad sa		who told mitt the below acts.
	confessed toadmitting to the below facts.	M was fr	ound to have committed (	_ / _		•		
ı	_	<del></del>			_		icsa ibcu)	investigation.
	On the 18 day of June	2022 at 01:52	(Specifically include rac	as constituting cal	use for arr	est.)		
PROBABLE CAUSE	crash investigation and found the driver of vehicle #1, Andrea Perugini (W/F 11/11/1973) at fault. I spoke with Perugini at the driver's window and immediately detected a strong odor of an unknown alcoholic beverage emanating from her breath and inside the vehicle. Perugini was asked to exit the vehicle and was extremely uneasy on her feet and used her vehicle as leverage as she exited. Perugini was advised by Ofc. Fandrey that he had completed his traffic crash investigation and found her at fault.  I advised Perugini that I was going to be now conducting a criminal DUI investigation based on her being at fault for the crash, and showing multiple other signs of							
٩	beverage emanating from		_	-				
Ţ	to which she stated she	understood.			_			
A T	i							
E	Based on the aforementi	_						
M E	Field Sobriety Tasks to	<del>-</del> -	_		_			
N	multiple times throughout		~	_				
T	mistake and should not	•						_
1	point. She was also dem			_			_	
	questions and have each	task shown again. The	following a	ce a summa	ation	of t	the Si	FSTs.
-								
- {	HORIZONTAL GAZE NYSTAGM							_
- [	Perugini was unable to		ring this tas	sk and had	d to b	oe re	eminde	∌d
١	multiple times to follo							
	-No resting nystagmus i	n either eye						
-Z-KU>	SWORN AND SUBSCINEND BEFORE ME	JOSHUA BELL MY COMMISSION #9634600 EXPIRES: JUN 18, 2023	. SIGNATURE OF	ARRESTING / INVES	349 STIGATING	OFFICE	R	
S		OFFICE State Insuran	NORI	E, RILEY	(1226)	)		!
R	6/18/22			OF OFFICER (PLEA				[8:55
IJ	DATE	<del></del>		06/18/2022	2			PAGE
Ě	<u></u>			DATE				1 of 3

COURT STAT

_	OBTS Number		7	PROBABLE CAUSE	AFFIDAVIT		1. Arrest	3. Request	tor Woma	at [	i	
^				SUPPLEME			2. N.T.A.	4. Request			JUVENI	LE
D	Agency ORI Number	Agency Name				Agency Report					<u>.</u>	
Į,	FL 0501700			E DEPARTMENT		5 4	22-00 Special No					
ľ	Charge Type:	= -	fisdemeanor raffic Misdemeand	5. Ordinance			Special vis					
D	Name (Last, First, Middle)		Tame wildenings in	Alias				Race	Sex	Date of Birth	,	
E	PERUGINI, ANDREA H	IUSAKO	VA					W	F	11/1	1/1973	
ĺ	-Both eyes tracked	togetl	ner equal	.ly								
ı	-Lack of smooth pur	suit i	in both e	yes								
	-Distinct and susta	ined r	nystagmus	at maximum de	viation	in bot	h eyes	3				
ĺ	-Onset of nystagmus	_		-	eyes							
	-No vertical nystag	mus ir	n either	eye								
	6 of 6 clues								4			
١.	TATE OF THE OWNER OWNER OF THE OWNER OWNE									\		
	WALK&TURN Perugini began the	took k	afomo T	finished mu in	atmiatic	nn] no	mind -	. v. al (	20.	mable	. +0	
١.	maintain the starti					_						ما
	times so she would											
	proper turn and tak								/			
	-Started task early					/						
P	-Failed to maintain		ice									
R O	-Used arms for bala	ince										
B	-Missed heel to toe	•										
В		ing										
L	-Improper turn					1						
-	-Stepped off the li 7 of 8 clues	.ne			$\Delta V$							
c					<b>X</b>							
A												
s	Perugini stated she	under	stood th	is task after	being de	monstr	ated/i	instr	ucte	ed. ho	wever.	
E	began to conduct th											
s	corrected and put h											ar
Τ'	next to her for bal	ance.										
T	-Put foot down			$\lambda$								
E		nce										
M E	Swaying			) >								
N	3 of 4 clues											
ľ	FINGER TO NOSE											
	1L -Pad to side nos	· ·										
	2R -Nail right-bott		ie									
	3L -Pad to left-sid											
	4R -Pad right-side	7										
	5R- started with le		l correct	ed, Pad right-	side nose	Э						
	6L -Pad left-side n											
	-did not bring hand	down	multiple	times								
	ROMBERG ALPHABET											
	-Incorrectly Reciti	nα										
	-Does not keep eyes	_	ıd									
					$\sim$							
â	SWORN AND BUBCCHIBED BEFORE	ME	A LAND	JOSHUA BELL COMMISSION #GG346008	1/	n.	/ 3-	15				
N	11000			EXPIRES: JUN 18, 2023	SIGNATURE	OF ARREST		<u> </u>	G OFFI	CER		
<b>₹03-8-8-8</b>	NOTARY PUBLIC, CLERK OF C	OURT / OFF		iod through 1st State Insurance	N.	OBLE, RI	ri FV	(1226				
Ŕ	6/18/2	2	<u> </u>			ME OF OFF						
Ţ	DAT	TE		<u> </u>			8/2022				PAC	
E				_			DATE				.   2	OF <b>3</b>

			_								
ĺ	OBTS Number		P	ROBABLE CAUSE .		1		3. Request 4. Request			JUVENILE
٨	Access (09) Aborder		I	SUPPLEMEN		Anna, D			io: Capia	• •	
D M	Agency ORI Number	Agency Name		DED4 DT:454		Agency Report N			,		
ı	FL 0501700			DEPARTMENT	I	5 4	22-002 Special Note				
N	Charge Type: 1. Felony		Misdemeanor	5. Ordinance			Special Note	ES).			
_	as apply 2. Traffic Felony  Name (Last, First, Middle)	<b>(A)</b> 4. 1	raffic Misdemeanor	6 Other			. !	Race	Sex	Date of Birth	
Ē	PERUGINI, ANDREA H	HEARC	WA	Auto				w	F	11/11/1	073
Ή		COANC	<u> </u>							**/**/*	3/3
	-swaying										
	l										
	Based on my investi	-			_					_	1
- 1	cause to believe th		_								1
	under the influence			_							1
	point where her nor			<del>-</del>		_			- 4	-	
Ì	into handcuffs whic						_	_	7L I	. –	
	policy at 2251 hour		_	_		_					
	medical clearance.		_	_	_				IF.	_	
	breath sample. She	_			-						I
	implied consent fro	_	_	-					/		1
				ed Perugini							
Ы	Testing center, arr	_		_	_		1		nute	observ	ation
R	period, during which	n sne	neither co	onsumea nor r	egurgita	ced any	Acurud	•			
0	We then went on wid		-b Dam +b	misiss Dell#	0 <i>6</i>				41 - 4	. Damiei	
Ā	We then went on vid provide a breath sa						_			_	1
В	Post Miranda, she s	_	_	-			_				1
E	Tequesta. I placed				7	\ -					
	subsequently booked	_			. – –					_	
c	date of 07/20/2022,				X Y		9-				
٨	date of 61/20/2022, 6030 hours.										
s	The above incident was captured on BWC. This narrative is a summary of the events and										
E	not purported to be verbatim.										
s	Y										
Ŧ											
^				<b>X Y</b>							
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M E				<b>Y</b>							İ
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	<b>y</b>										
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+	A.M.A.M. A.M. A.M. A.M. A.M. A.M. A.M.			JOSHUA BELL			2				
Ö	SWORN AND SUBSTINIBED BEFORE N	ME	MY C	MMISSION #9G346008	1//	m	· 37	19			
Ņ	- Delle		Đ	PIRES: JUN 18, 2023	SIGNATURE	OF ARREST	ING / INVES	TIGATIN	G OFFIC	ER	
s	MOTARY PUBLIC / CLERK OF CO	OURT / OFF	ICER (2.5 1 19010)	Tthrough 1st State Insurance	) <sub>N</sub> ,	BLE, RI	LEY /	1226	3		
Ŕ	6/18/22	-				ME OF OFFI				<del></del>	
Ţ	DAT	E		<del></del>		06/1	8/2022				PAGE 3 OF 3
- 1				_							[ وت ∨ تي إ

COURT

STATE ATTORNEY

**CENTRAL RECORDS** 

JAIL

**CRIME ANALYSIS** 

P. I. O.



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

PBSO CA	ASE #	12-078	750	PBSO 2	ZONE	3-14	
AGENCY	CASE # _	2200	2367	CRASH	CASE #		
TIME O	F STOP/CR	22 ASH	222 DA	TE 06/17/2	2022	YAC	Friday
SUBJECT	r's name	Perugini	Andrea	H RACE	w	SEX _	F
HGT	5'4	WGT	FIRST 112	DOB	11/1	1/1973	
LOCATIO	on E Indi	antown Rd	/N Alt A1a	1			
ARRESTI	NG OFFICE	R'S NAME &	ID OFC	. Noble	349 AGEI	ACY J	Jupiter PD
DIVISIO	ON:		***************************************			-	
				NOTI	FIED BY COM	MO	Yes
				ARRI	VAL AT FAC	ILITY	0053
					ARREST	TIME	2251
BREATH F	RESULTS:					-	
2).152							
3) <b>N/A</b>							
4) N/A							

testing officer's id 8656 pbso videotape # N/A

## WITNESS LIST

	CASE NUMBER:
ARRESTING OFFICER: OFC. Noble	
ADDRESS: 210 Military Trl. Jupiter, FL 33458	
PHONE NUMBERS (HOME):	(WORK) (561) 746-6201
CAN TESTIFY TO: PC	
NAME: OFC. Fandrey	
ADDRESS: 197 Miltary Trail, Jupiter, FL, 33458	
PHONE NUMBERS (HOME)	(WORK) _ <b>561-746-6201</b>
CAN TESTIFY TO: Crash investigation	4
NAME:	
ADDRESS	
PHONE NUMBERS (HOME)	(WORK)
CAN TESTIFY TO:	( ) /
NAME:	
ADDRESS	
PHONE NUMBERS (HOME)	(WORK)
CAN TESTIFY TO:	
NAME:	XXY
ADDRESS	X
PHONE NUMBERS (HOME)	(WORK)
CAN TESTIFY TO:	<u> </u>
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ADDRESS	
PHONE NUMBERS (HOME)	(WORK)
CAN TESTIFY TO:	
NAME:	
ADDRESS	
PHONE NUMBERS (HOME)	(WORK)
CAN TESTIFY TO:	

# **TESTING FACILITY TASK REPORT**

AGE	NCY: JPD					
SUBJECT: PERUGINI, ANDREA HUSAKOVA CAS	E NUMBER: 22-078750					
DATE: Jun 18, 2022 VIDE	EO DVD NUMBER: N/A					
BEGINNING TIME: 0115 END	DING TIME: 0128					
BREATH TESTS RESULTS: 1) .156 TIME 0120 A.M.⊠ P.M.	2) .152 TIME 0124 A.M. P.M.					
3) XX TIME XX A.M. P.M.	4) XX TIME XX A.M. P.M.					
BREATH OPERATOR: JOSHUA J BELL #8656	No. of the control of					
MAINTENANCE TECHNICAN: J. KARLECKE #6467						
TESTING OFFICER'S OBSERVATIONS						
SPEECH: SLURRED						
ATTITUDE: COOPERATIVE						
CLOTHING: GREY SHIRT, WHITE PANTS, BLACK WEDGES						
MEDICAL CONDITIONS: NECK INJURY						
MEDICATIONS: MUSCLE RELAXERS						
OTHER: EYES: BLOODSHOT, GLASSY ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH						
COMMENTS: A/O ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 2	0 MINUTE OBSERVATION AT 0053 HOURS					
SUBJECT STATED SHE WOULD TAKE BREATH TEST						
BREATH TEST COMPLETED						
A/O READ RIGHTS SUBJECT STATED SHE UNDERSTOOD HER RIGHTS						
TECH READ BREATH TEST RESULTS AND EXPLAINED SUBJECT ACKNOWLEDGED SHE UNDERSTOOD BREATH TEST RESULTS						

A/O CONDUCTED Q AND A

SUBJECT ANSWERD A FEW QUESTION BEFORE ASKING FOR A LAWYER

#### 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: 80-006239 Software: 8100.27

Date of Test: 06/18/2022

Date of Last Agency Inspection: 06/03/2022

Observation Period Began: 00:53 Subject's Name: ANDREA H PERUGINI

DOB: 11/11/1973 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:	<u>Test</u> g	/210L	Time	
	Diagnostics Check O	K	01:18	
	Air Blank 0	.000	01:18	
	Control Test 0	.079	01:18	
	Air Blank 0	.000	01:19	
	Subject Sample #1 0	.156	01:20	
	Air Blank 0	.000	01:21	
	Air Blank 0	.000	01:23	
	Subject Sample #2 0	.152	01:24	
	Air Blank 0	.000	01:25	
	Control Test 0	.079	01:25	
	Air Blank 0	.000	01:25	
	Diagnostics Check O	K	01:26	

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

State of Florida, County of Ralm Beach,

Personally appeared before me the undersigned authority, who  $(\cupe{v})$  is personally known to me or  $(\cupe{v})$  produced \_\_\_\_\_\_ as identification, and who after being placed under oath, states:

I JOSHUA J BELL , 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: 06/18/12

Sworn to (or affirmed) before me this 8 day of whe , 200

Single of National Public State of Plants

Drived Name of National Public State of

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.

22002	367
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## 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 content.	•	BREATH for the purpose of dete	ermining its alcohol
I am now requesting that you chemical or controlled substa	a submit to a lawful test of your ances0	URINE for the purpose of detecti R-	ing the presence of
T		DI OOD far the sussessed of lates	41. 44. 10. 10. 1
and the presence o chemical	or controlled substances.	BLOOD for the purpose of detec	ang its alcohol content
Processing Comments			
NOTE: READ	ONLY IF THE SUBJECT DOE	ES NOT COMPLY WITH YOUR F	REQUEST
NOTE. READ	ONET IT THE SOBJECT DOI	S NOT COMIL! WITH TOOK!	REQUEST
I am Office	er OFC. Noble	of the Jupiter Police I	Department
If you fail to submit to the test period of one (1) year for a firs of a refusal to submit to a lawfu requested of you and if your dr of your breath, urine or blood, y is admissible into evidence in ar	I have requested of you, your prit refusal, or eighteen 18 months is all test of your breath, urine or blowiving privilege has been previous you will be committing a misdement of the proceeding.	vilege to operate a motor vehicle we four privilege has been previously od. Additionally, if you refuse to sully suspended for a prior refusal to seanor. Refusal to submit to the test I	rill be suspended for a suspended as a result bmit to the test I have submit to a lawful test have requested of you
	- 0 - >		
SUBJECT'S SIGNATURE:	Read on Camea	Perugini , Andrea	Н
	CONSTITUTION	AL WARNINGS	ī
I AM REQUIRED TO WARN YO	DU BEFORE YOU MAKE ANY STA	TEMENTS THAT YOU HAVE THE F	OLLOWING RIGHTS:
You have the right to rema	in silent and not answer any qu	estions.	
Any statement must be free	ly and voluntarily given.		
You have the right to the p questioning.	resence of a lawyer of your choi	ice before you make any statemen	at and during any
If you cannot afford a lawy statements and during any	er, you are entitled to the presen	nce of a court appointed lawyer be	efore you make any
If at any time during the int	erview you do not wish to answ	ver any questions, you are privileg	ged to remain silent.
I can make no threats or pro	omises to induce you to make a	statement. This must be of your o	wn free will.
Any statement can and will	be used against you in a court o	f law.	
SUSPECT'S SIGNATURE:	Read on Camera	Perugini , Andre	еа Н



#### Palm Beach County Sheriff's Office - Arrests Only

	х	Florida State Statute	Description	Page Number(s)
	П	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
tions	П	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
L/E Exemptions	П	119.071(4)(c)	Undercover personnel.	
L/E E		119.071(2)(f)	Confidential informants (CIs).	
		119.071(2)(e)	Confession.	
su	П	985.04(1)	Juvenile offender records.	
mptic		119.071(h)(i)	Assets of a crime victim.	
Public Info. Exemptions		395.3025(7)(a), 456.057(7)(a)	Medical information.	
blic In	П	394.4615(7)	Mental health information.	
2	П	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.	
	×	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	П	(viii) 394.4615(7)	Clinical records under the Baker Act.	
of 23)		(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
(Rule		(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	ם 	All property and the second se		
al Administı				
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Florida Rul				
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#### REVIEW COMPLETED BY

Booking Number: 2022015691	Date: 06/19/2022
BOOKING Number: 2022015031	Specialist Name/ID: C. Smith/39657