

0536214

22CT19675 SB

2037

ARREST / NOTICE TO APPEAR

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

1

JUVENILE

AD M I N I S T R A T I O N	Agency ORI Number 0500400		Agency Name Delray Beach Police Department		Agency Report Number (N.T.A.'s only) 4, 0 22-014990	
	Charge Type: Check on warr: <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized		Multiple Charges Indicator 1	
	Location of Arrest (Including Name of Business) 1299 W ATLANTIC AVE/1-95		Location of Offense (Business Name, Address) 1299 W ATLANTIC AVE/1-95, DELRAY BEACH, FL 33444			
	Date of Arrest 11/24/2022	Time of Arrest 01:46	Booking Date 11/24/2022	Booking Time 01:56	Jail Date 11/24/2022	Jail Time 01:53
	Name (Last, First, Middle) MCCOY, CHLOE MICHELLE		Alias (Name, DOB, Soc. Sec. #, Etc.) WEST WAY TOWING			
	Race W - White 1 - American Indian B - Black 2 - Oriental/Asian Sec. W F Date of Birth 05/05/1983 Height 5'03 Weight 180 Eye Color BROWN Hair Color BLACK Complexion LIGHT Build M		Marital Status U Religion		Indication of Alcohol Influence Yes <input type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>	
	Local Address (Street, Apt. Number) 2600 NW 6TH CT, BOYNTON BEACH, FL 33426		Phone (919) 491-6607		Residence Type 1. City 3. Florida 2. County 4. Out of State	
	Permanent Address (Street, Apt. Number) 2600 NW 6TH CT, BOYNTON BEACH, FL 33426		Phone (919) 491-6607		Address Source	
	Business Address (Name, Street) 2600 NW 6TH CT, BOYNTON BEACH, FL 33426		Phone		Occupation	
	DL Number, State M200113836650 / FL		Sec. Sec. Number		Place of Birth (City, State) DURHAM NC Citizenship US	
Co-Defendant Name (Last, First, Middle)		Race		Sex		
Co-Defendant Name (Last, First, Middle)		Race		Sex		
Parent <input type="checkbox"/> Other <input type="checkbox"/> Name (Last, First, Middle)		Date of Birth		Sex		
Legal Custodian <input type="checkbox"/>		Date of Birth		Sex		
Address (Street, Apt. Number)		City		State		
Address (Street, Apt. Number)		City		State		
Notified by: (Name)		Date		Time		
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		
Property Owner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property		
Drug Activity s. Sell R. Struggle K. Dispense/ M. Manufacture/ Z. Other N. N/A B. Buy D. Deliver Produce/ Cultivate P. Possess T. Traffic E. Use		Drug Type N. N/A B. Barbiturate C. Cocaine E. Heroin A. Amphetamine		H. Hallucinogen P. Paraphernalia/ U. Unknown M. Marijuana Equipment B. Synthetic O. Opium/Deriv. S. Synthetic		
Charge Description DUI BLOOD ALCOHOL .08 OR MORE PER 100ML		Statute Violation Number 316.193(1)(b) (1A)		Violation of ORD #		
Drug Activity		Drug Type		Amount / Unit		
Drug Activity		Drug Type		Amount / Unit		
Drug Activity		Drug Type		Amount / Unit		
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				
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		
Transported By		Date Transported		Time Transported		
<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 12/19/2022 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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.		No Photo Available				
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"/> Restricted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Name of Arresting Officer (Print) LEONARDI, KAILEY ID # 1227		(PRINT)		
Inmate Deputy SPANN G101 ID #		Transporting Officer LEONARDI ID # 1227 Agency DBPD		Witness here if subject signed with an "X".		

No Photo Available

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 23 DAY OF NOVEMBER 20 2022 AT 2333 PM

SUBJECT: CHLOE MCCOY CASE NUMBER: 22-014990

AGENCY: DELRAY BEACH POLICE DEPARTMENT ARRESTING OFFICER: LEONARDI 1227

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

AT APPROXIMATELY 22:55 AN UNKNOWN COMPLAINTANT CALLED TO REPORT A DRIVER SWERVING IN AND OUT OF LANES AND ALMOST STRIKING THE MEDIAN OF THE ROADWAY. OFFICER GREEN OBSERVED THE VEHICLE DRIVING EAST BOUND ON ATLANTIC AVE AND CONDUCTED A TRAFFIC STOP.

OBSERVATION OF DRIVER:

I OBSERVED THE DEFENDANT UNABLE TO MAINTAIN HER BALANCE AND APPEARED TO BE INTOXICATED. THE DEFENDANT APPEARED TO BE UNDER THE INFLUENCE OF AN UNKNOWN ALCOHOL SUBSTANCE. THE DEFENDANT HAD SLURED SPEECH, HAD THE ODOR OF ALCOHOL EMINATING FROM HER BREATH, RED GLOSSY EYES, SLOW MOVEMENT, AND A FLUSH FACE. AS THE DEFENDANT EXITED THE VEHICLE TO COMPLETE ROADSIDE TASKS, SHE LOST BALANCE.

DRIVER'S STATEMENTS:

THE DEFENDANT ADMITTED THAT SHE HAD ONE BEVERAGE BEFORE GETTING BEHIND THE WHEEL TO DRIVE HOME. LATER ON AT THE BAR THE DRIVER ADMITTED TO HAVING FOUR TO FIVE BEERS AT PARK TAVERN LOCATED ON E ATLANTIC AVE.

ODORS:

THE DEFENDANT HAD AN UNKNOWN ODOR OF ALCOHOL COMING FROM HER BREATH.

GENERAL OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: CRYING, FIDGETY

CLOTHING: BLACK SHIRT, BLUE PANTS, BLACK FLIP FLOPS

MEDICAL/OTHER: NONE

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)
The foregoing instrument was sworn to or affirmed and subscribed before me this 23 day of NOVEMBER 202022 by OFFICER LEONARDI

(Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification. Type of identification produced)

SUBJECT: CHLOE MCCOY

CASE NUMBER 22-014990

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:

NONE

WALK & TURN:

THE DEFENDANT STATED THAT SHE UNDERSTOOD MY INSTRUCTIONS. I OBSERVED THE DEFENDANT START THE TASK BEFORE I TOLD HER TO DO SO. WHEN THE DEFENDANT WAS COMPLETING THE TASK, I OBSERVED THAT SHE COULD NOT MAINTAIN HER BALANCE AND STEPPED OFF OF THE LINE NUMEROUS TIMES.

ONE LEG STAND:

THE DEFENDANT STATED THAT SHE UNDERSTOOD MY INSTRUCTIONS HOWEVER, DURING THE INSTRUCTION PERIOD THE DEFENDANT ASKED IF SHE NEEDED TO PUT HER FOOT FORWARD OR BACKWARD TWO DIFFERENT TIMES AFTER BEING GIVEN CLEAR INSTRUCTIONS ON HOW TO COMPLETE THE TASK.

FINGER TO NOSE:

THE DEFENDANT STATED THAT SHE UNDERSTOOD MY INSTRUCTIONS. DURING THIS TASK THE DEFENDANT COULD BE OBSERVED SWAYING AND NOT MAINTAINING BALANCE AND NOT TILTING HER HEAD BACK LIKE SHE WAS INSTRUCTED TO DO SO.

ROMBERG ALPHABET:

THE DEFENDANT STATED THAT SHE UNDERSTOOD MY INSTRUCTIONS. DURING THIS TASK OFFICERS ON SCENE AND I ASKED WHAT THE DEFENDANTS HIGHEST LEVEL OF EDUCATION WAS TO WHICH SHE STATED, "A MASTER'S DEGREE". WHEN ASKING THE DEFENDANT TO COUNT FROM THIRTY TO FIFTY WHILE HER EYES WERE CLOSED WITH HER HANDS AT HER SIDE WITH HER FEET TOGETHER, SHE CONTINUED TO COUNT UP UNTIL SEVENTY WHEN I HAD TO STOP HER.

BREATH TEST RESULTS:

1) .188	2) .194	3)	4)
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STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this _____ day of _____ 20____ by _____

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced _____

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

SUBJECT: McCoy, Chloe M

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 NO Do you still refuse to submit to this test? YES 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 NO Do you still refuse to submit to this test? YES 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: McCoy, Chloe M 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? Yes

WHERE WERE YOU GOING? Home

WHAT STREET OR HIGHWAY WERE YOU ON? Atlantic

DIRECTION OF TRAVEL? N WHERE DID YOU START? N Atlantic

WHAT TIME DID YOU START? N/A WHAT TIME IS IT NOW? 1230

WHAT IS TODAY'S DATE? 11/23/2022 WHAT DAY OF THE WEEK IS IT? Thursday

WHAT COUNTY AND CITY ARE YOU IN NOW? Palm Beach, West Palm

WHEN DID YOU LAST EAT? 1700 WHAT DID YOU EAT? chicken

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? Park Tavern

HOW MUCH DO YOU WEIGH? 175 HAVE YOU BEEN DRINKING? Yes WHAT? Beer

HOW MUCH? 4-5 WHERE? Park Tavern WITH WHOM? Friends

WHEN DID YOU HAVE YOUR FIRST DRINK? 1300 AND YOUR LAST DRINK? 2000

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? slowly

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? Yes ARE YOU UNDER THE INFLUENCE? _____

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? NO HOW MUCH? N/A

WHAT? N/A WHERE? N/A WHEN? N/A

WHAT LINE OF WORK ARE YOU IN? Athletic Trainer WHEN DID YOU LAST WORK? 11/23/2022

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? NO WHAT? N/A

ARE YOU SICK OR INJURED? NO WHAT'S WRONG? N/A

DO YOU LIMP? NO DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? NO

WERE YOU IN AN ACCIDENT TODAY? NO

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? NO WHEN? N/A

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? NO WHO? N/A WHY? N/A

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? NO WHAT? N/A WHEN? _____

DO YOU HAVE:

- EPILEPSY? NO
- GLASS EYE? NO
- FALSE TEETH? NO
- EAR INFECTION? NO
- INNER EAR TROUBLE? NO
- DIABETES? NO

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? NO

DO YOU TAKE INSULIN? NO IF SO, WHEN WAS YOUR LAST INJECTION? N/A

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? Yes WHERE? North/South Carolina

INTERVIEWER: Legnardi, Kailey

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: 11/24/2022

Date of Last Agency Inspection: 11/18/2022
Observation Period Began: 23:53
Subject's Name: CHLOE M MCCOY

DOB: 05/05/1983 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	00:19
	Air Blank	0.000	00:20
	Control Test	0.080	00:20
	Air Blank	0.000	00:21
	Subject Sample #1	0.188	00:22
	Air Blank	0.000	00:22
	Air Blank	0.000	00:24
	Subject Sample #2	0.194	00:24
	Air Blank	0.000	00:25
	Control Test	0.078	00:25
	Air Blank	0.000	00:26
	Diagnostics Check	OK	00:26

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 THOMAS H LEAHEY, 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: 11/24/2022
Signature

Sworn to (or affirmed) before me this 24 day of November, 2022
[Signature] OK K Leonardi #1227
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.

TESTING FACILITY TASK REPORT

AGENCY: DBPD

SUBJECT: McCoy, Chloe M

CASE NUMBER: 22-132593

DATE: Nov 24, 2022

VIDEO DVD NUMBER: n/a

BEGINNING TIME: 0015

ENDING TIME: 0034

BREATH TESTS RESULTS: 1) .188 TIME 0022 A.M. P.M. 2) .194 TIME 0024 A.M. P.M.

3) n/a TIME 0 A.M. P.M. 4) n/a TIME 0 A.M. P.M.

BREATH OPERATOR: Thomas H Leahey #19183

MAINTENANCE TECHNICAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: thick

ATTITUDE: crying, upset, fidgety

CLOTHING: blue jeans, black shirt, black sandals

MEDICAL CONDITIONS: none

MEDICATIONS: none

OTHER:

eyes were glassy & bloodshot
odor of unknown alcoholic beverage on breath
subject stated she drank 4-5 beers @ home & Park Tavern - Q&A

COMMENTS:

arrived at center A/O conducted 20 observation period at 2353 hrs
subject refused to perform breath test - I don't know what to do
A/O read I/C & subject understood I/C
subject agreed to perform breath test
subject completed breath test
A/O read rights & subject understood rights
A/O conducted Q&A
subject answered questions

WITNESS LIST

CASE NUMBER: 22014990

ARRESTING OFFICER: LEONARDI 1227

ADDRESS: 300 W ATLANTIC AVE

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

CAN TESTIFY TO: DUI

NAME: GREEN

ADDRESS: 300 W ATLANTIC AVE

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

CAN TESTIFY TO: DUI

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: _____

NAME: _____

ADDRESS _____

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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: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NOT A CERTIFIED COPY



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

PBSO CASE # 22-132593 PBSO ZONE 4-11
AGENCY CASE # Delray Beach PD CRASH CASE # 22-014990
TIME OF STOP/CRASH wreckless DATE 1/23/2022 DAY 23. wednesday
SUBJECT'S NAME McCoy, Chloe RACE white SEX Female
HGT 5'03 WGT _____ DOB 05/05/1983
LOCATION W Atlantic Ave/I-95
ARRESTING OFFICER'S NAME & ID Leonardi, 1227 AGENCY DBPD
DIVISION: Patrol NOTIFIED BY COMMO Yes
ARRIVAL AT FACILITY 2353
BREATH RESULTS: Arrest Time 2333
1. .188
2. .194
3. n/A
4. n/A
TESTING OFFICER'S ID 19183

NOT A CERTIFIED



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"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2022030410	Date: 11/24/2022
	Specialist Name/ID: Chantel Daniels/30347