

22CT16497 SB

☐ Marsy's Law CVI FL. Const. Art. I § 16(b)☐ Check if Supplement is AttachedARREST / NOTICE TO APPEAR
Juvenile Referral Report1. Arrest 3. Request for Warrant
2. N.T.A. 4. Request for Capias

1

Juvenile ☒ N

OBTs Number		Agency ORI Number FL 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 0 6 1-22-114411	
Charge Type: Check as many as apply		1. Felony ☐ 2. Traffic Felony		3. Misdemeanor ☒ 4. Traffic Misdemeanor		5. Ordinance ☐ 6. Other	
Location of Arrest (Including Name of Business) 113 Barcelona Dr, Royal Palm Beach, FL 33411		Location of Offense (Business Name, Address) 113 Barcelona Dr, Royal Palm Beach, FL 33411		Date of Arrest 10/01/2022		Time of Arrest 01:52	
Booking Date 10/01/2022		Booking Time 01:52		Jail Date		Jail Time	
Name (Last, First, Middle) Barrow, Debra, Ann		Alias (Name, DOB, Soc. Sec. #, Etc.)		Date of Birth 4/17/1986		Sex F	
Race W - White B - Black O - Oriental/Asian W		Height 5'03		Weight 120		Eye Color blue	
Hair Color blonde		Complexion light		Build light		Multiple Clearance Indicator 0 1	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) none		Marital Status Single		Religion NONE		Indication of: Alcohol Influence Drug Influence Y N Unk ☐ ☐ ☐	
Local Address (Street, Apt. Number) 246 Las Palmas St, Royal Palm Beach, FL 33411		(City) Royal Palm Beach		(State) FL		(Zip) 33411	
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)	
Business Address (Name, Street)		(City)		(State)		(Zip)	
D/L Number, State B600161866370, FL		Soc. S.		INS Number		Place of Birth (City, State) West Palm Beach, FL	
Citizenship US		Co-Defendant (Last, First, Middle)		Race		Sex	
Date of Birth		☐ 1. Arrested ☐ 2. At Large		☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile			
Co-Defendant (Last, First, Middle)		Race		Sex		Date of Birth	
☐ 1. Arrested ☐ 2. At Large		☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. 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 was provided by ☐ defendant and / or ☐ defendant's parents. The child and / or parent was told to keep the Juvenile Court Clerk's Office (Phone (561) 355-6511) informed of any change of address. ☐ Yes, by: (Name) ☐ No (Reason)		School Attended		Grade			
Property Crime? ☐ Yes ☐ 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. Synthetic		U. Unknown Z. Other			
Charge Description Driving Under the Influence (enhanced)		Counts 1		Domestic Violence ☐ Y ☐ N		Statute Violation Number 316.193(4)	
Drug Activity N		Drug Type N		Amount / Unit		Offense # 22-114411	
Warrant / Capias Number		Bond					
Charge Description		Counts		Domestic Violence ☐ Y ☐ N		Statute Violation Number	
Drug Activity N		Drug Type N		Amount / Unit		Offense #	
Warrant / Capias Number		Bond					
Charge Description		Counts		Domestic Violence ☐ Y ☐ N		Statute Violation Number	
Drug Activity N		Drug Type N		Amount / Unit		Offense #	
Warrant / Capias Number		Bond					
Charge Description		Counts		Domestic Violence ☐ Y ☐ N		Statute Violation Number	
Drug Activity N		Drug Type N		Amount / Unit		Offense #	
Warrant / Capias Number		Bond					
Location (Court, Room Number, Address) South County Courthouse, Courtroom #1, 200 W. Atlantic Ave., Delray Beach, FL 33444 - Ph: (561) 355-2996							
Court Date and Time Month October Day 27 Year 2022 Time 08:30 A.M. ☒ P.M.							
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 10/01/2022			
HOLD for other agency		Signature of Arresting Officer X		Name Verification (Printed by Arrestee) Debra Barrow			
☐ Dangerous ☐ Suicidal		☐ Resisted Arrest ☐ Other		Name of Arresting Officer (Print) Inv. POINTU P.		I.D. # 16032	
Intake Deputy V. 10268		I.D. #		Pouch #		Transporting Officer Inv. POINTU P.	
I.D. #		Agency PBSO		Witness here if subject signed with an "X"		PAGE 1 OF	

0336923

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OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	N
ADMIN	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06- 22-114411				
	Charge Type: Check as many as apply.		☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Special Notes:				
CHARGES	Name (Last, First, Middle) Barrow Debra Ann		Alias		Race W		Sex F		Date of Birth 04/17/1986
	DUI								
VICTIM	Victim's Name (Last, First, Middle)		Race		Sex		Date of Birth		
	Local Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone		Address Source	
	Business Address (Name, Street)		(City)	(State)	(Zip)	Phone		Occupation	
The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The Person taken into custody ☐ committed the below acts in my presence. ☐ confessed to _____ admitting to the below facts. ☐ was observed by _____ who told that he/she saw the arrested person commit the below acts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the <u>1ST</u> day of <u>OCTOBER</u>, 20<u>22</u> at <u>0100</u> ☒ A.M. ☐ P.M. (Specifically include facts constituting cause for arrest.)									
☐ Marsy's Law CVI FL. Const. Art.1 § 16(b) *****SUPPLEMENTAL PROBABLE CAUSE***** On the above date and time while assigned to the PBSO Street Crimes Unit I observed a blue Kia Sportage bearing FI Tag# Y15XTT driving westbound on Okeechobee Blvd approaching Ponce De Leon street in Royal Palm Beach, FL 33411. While the vehicle was traveling westbound on Okeechobee Blvd I noticed it strike the curb with the right front passenger tire multiple times before turning right to head northbound on Ponce De Leon St. When the vehicle turned north, I noticed that the front passenger tire was completely flat and pieces of the tire were coming apart as she drove. I initiated the traffic stop using my red and blue emergency lights an siren where the vehicle came to a complete stop in front of 114 Barcelona Dr. I made a passenger side approach where I made contact with driver and sole occupant of the vehicle as Debra Barrow W/F 04/17/1986 and explained my reason for the stop. Immediately upon making contact with Barrow, I noticed that her eyes were bloodshot and watery, her speech was slurred, and she had an extremely difficult time responding to me, taking several seconds to answer a simple question. I then asked Barrow if she knew that her front passenger tire was destroyed to which she stated that she did but she continued to drive. Barrow stated that she'd not had anything to drink tonight and that she was coming home from working on Palm Beach Island "doing flowers." At this time, due to the cues given by Barrow, I believe that she may be under the influence of some sort of alcoholic beverage therefore I called DUI Investigator Pointu #16032 to complete a DUI investigation. This ends my involvement in this case.									
STATE OF FLORIDA COUNTY OF PALM BEACH Agt. _____ (Signature) (ID #) _____ The foregoing instrument was sworn to or affirmed and subscribed before me this <u>1ST</u> day of <u>OCTOBER</u>, 20<u>22</u> by Agt. _____ (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>KNOWN</u> Agent <u>inv Pointu 16032</u> Notary Public, Clerk of Court, Officer (F.S.S. 117.10)									

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 1st DAY OF October 20 22, AT 00:40 AM PM

SUBJECT: Barrow, Debra, Ann CASE NUMBER: 22-114411

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. POINTU P.

PERSONAL CONTACT

DRIVING PATTERN: Actual physical control (physical evidence or statements putting def. behind wheel of vehicle)

Agt. [REDACTED] observed a blue Kia Sportage bearing Florida tag Y15XTT driving westbound on Okeechobee Blvd, approaching Ponce De Leon St, in Royal Palm Beach, Palm Beach County, Florida. The vehicle stroke the curb with the front right tire. The front passenger tire was flat and pieces of the tire were coming apart. The driver and only occupant of the vehicle was identified by her Florida driver license as Debra Barrow. Barrow was also the registered owner of the Kia.

OBSERVATION OF DRIVER:

Barrow was very drowsy. Her speech was slurred and slow. Her eyes were glassy and bloodshot. An obvious odor of unknown alcoholic beverage was coming from her breath. Once asked to exit her vehicle she was very unsteady on her feet.

DRIVER'S STATEMENTS:

Barrow said she had dinner with friends in West Palm Beach and was driving home. She denied having been drinking.

Once at the BAT she said she only had two glasses of wine.

ODORS:

An obvious odor of unknown alcoholic beverage that become stronger when she talked.

GENERAL OBSERVATIONS

SPEECH: Slow, low, slurred

ATTITUDE: Unable to focus.

CLOTHING: green dress, brown heel shoes

MEDICAL/OTHER: Low blood pressure

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. POINTU P.
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 1st day of October 20 22 by Inv. POINTU P.

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

Renee Ragin (#16877)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)



SUBJECT: Barrow, Debra, Ann

CASE NUMBER 22-114411

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:

Pupils round and equal. No resting nystagmus. Equal tracking. Onset of HGN before 30 degrees. VGN present. LOC present. Swayed during the task. Unable to keep her feet together. Moved her head.

WALK & TURN:

Barrow was unable to maintain the instructional stance. Once asked to start she did not walk heel to toe. She stepped off the line multiple times. She took an improper number of steps and started counting out loud but then stopped. She did not turn as instructed and rotated on her toes instead.

ONE LEG STAND:

Barrow raised her left leg but did not extend it fully. She put her foot down back to the ground almost immediately before attempting again. She put her foot down multiple times. She swayed, used her arms to balance and did not count out loud.

FINGER TO NOSE:

Barrow opened her eyes and tilted her head forward. She swayed and widened her stance. She used the pad of her finger on all tasks. She touched the right side of the bridge of her nose on task 4, the bridge of her nose on task 3 and 5.

ROMBERG ALPHABET:

Barrow after being told not sing the alphabet sang it instead. She swayed in all directions, opened her eyes and tilted her head forward. For the Romberg balance, she stopped the 30 seconds counts at approximately 32 seconds. She swayed more than 3 inches in all direction and widened her stance.

BREATH TEST RESULTS: 0.298 0.266 0.278

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. POINTU P.

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 1st day of October 2022 by Inv. POINTU P.

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

Renee Ragin (#16877)

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



WITNESS LIST

CASE NUMBER: 22-114411

ARRESTING OFFICER: Inv. POINTU P.

ADDRESS: Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) (561) 688 3000

CAN TESTIFY TO: DUI Investigation, see PC

NAME: Agent [REDACTED]

ADDRESS: Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

PHONE NUMBERS (HOME) 0 (WORK) (561) 688 3000

CAN TESTIFY TO: wheel witness, driving pattern. See supplemental PC.

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) 0 (WORK) 0

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: _____

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 _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

**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: 80-006240 Software: 8100.27
Date of Test: 10/01/2022

Date of Last Agency Inspection: 09/16/2022

Observation Period Began: 02:20

Subject's Name: DEBRA A BARROW

DOB: 04/17/1986 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	02:44
	Air Blank	0.000	02:44
	Control Test	0.081	02:45
	Air Blank	0.000	02:45
	Subject Sample #1	0.298	02:46
	Air Blank	0.000	02:46
	Air Blank	0.000	02:48
	Subject Sample #2	0.264	02:49
	Air Blank	0.000	02:49
	Air Blank	0.000	02:51
	Subject Sample #3	0.278	02:52
	Air Blank	0.000	02:53
	Control Test	0.080	02:53
	Air Blank	0.000	02:53
	Diagnostics Check	OK	02:53

Cylinder Lot: 08622080A1

Exp: 06/05/2024

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 RENEE M RAGIN, 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: Ree Date: 10/01/22
Signature

Sworn to (or affirmed) before me this 01 day of Oct., 2022

Signature of Notary Public-State of Florida

Inv. P. Pointe # 16032
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: PBSO

SUBJECT: Barrow, Debra A.

CASE NUMBER: 22-114411

DATE: Oct 1, 2022

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 02:42

ENDING TIME: 02:56

BREATH TESTS RESULTS: 1) .298 TIME 02:46 A.M. ☒ P.M. ☐ 2) .264 TIME 02:49 A.M. ☒ P.M. ☐
3) .278 TIME 02:52 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, mumbled

ATTITUDE: Rude, talkative, crying, mood swings,

CLOTHING: Green dress with flowers, NO shoes

MEDICAL CONDITIONS: Low blood pressure

MEDICATIONS: None

OTHER:

Eyes are glassy & bloodshot
Odor of unknown alcoholic beverage on breath
Slow & unsteady on feet

COMMENTS:

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

Subject agreed to perform breath test.

A/O read rights.

Subject stated she understood rights.

Tech read breath test results.

Subject stated she understood breath test results.

A/O attempted Q&A.

Subject refused to answer Q&A.

SUBJECT:

Barro, Debra H.

CASE NUMBER:

12-114411

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) _____

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) _____

WHITE: STATE ATTY.

YELLOW: DHSMV

PINK: CENTRAL RECORDS

GOLD: JAIL

SUBJECT: Barrow, Debra H. CASE NUMBER: 22-114411

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



**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.	3-4,7
	☐	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

Date: 10/01/2022

Specialist Name/ID: C. Smith/39657

Booking Number: 2022025629