

22CT 17228

ARREST / NOTICE TO APPEAR

OBTS Number			1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
Agency ORI Number 0502600	Agency Name Palm Beach Gardens Police Department	Agency Report Number (N.T.A.'s only) 7 8 22-003655				
Charge Type: Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other	If Weapon Seized		Enter Type UNARMED		Multiple Clearance Indicator	
Location of Arrest (Including Name of Business) 3900 KYOTO GARDENS DR, PALM BEACH GARDENS, FL 33410			Location of Offense (Business Name, Address) 10000 ALT AIA, PALM BEACH GARDENS, FL 33410			
Date of Arrest 07/28/2022	Booking Date 07-29-22	Booking Time 4:55	Jail Date	Jail Time	Location of Vehicle 2400 E 1st St, WPB	
Name (Last, First, Middle) SOUHIL, FOUAD			Alias (Name, DOB, Soc. Sec. #, Etc.) Alias:			
Race W - White B - Black O - Oriental/Asian W	Sex M	Date of Birth 04/09/1975	Height 5'10	Weight 160	Eye Color BROWN	Hair Color BROWN
Sears, Marks, Tattoos, Unique Physical Features (Location, Type, Description)			Marital Status S	Religion	Indication of: Alcohol Influence ☐ Yes ☒ No ☐ Unk. ☐ Drug Influence ☐ Yes ☒ No ☐ Unk. ☐	
Local Address (Street, Apt. Number) 5850 GOLDEN EAGLE CIR, PALM BEACH GARDENS, FL 33418			Phone (561) 232-9379		Residence Type: 1. City 3. Florida 2. County 4. Out of State 1	
Permanent Address (Street, Apt. Number) 5850 GOLDEN EAGLE CIR, PALM BEACH GARDENS, FL 33418			Phone (561) 232-9379		Address Source DEFENDANT	
Business Address (Name, Street) AVACADO CANTENA, DTAG			Phone		Occupation	
D/L Number, State S400240751290 / FL	Soc. Sec. Number	INS Number	Place of Birth (City, State) MARRACASH, Morocco		Citizenship US	
Co-Defendant Name (Last, First, Middle)			Race	Sex	Date of Birth	☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile
Co-Defendant Name (Last, First, Middle)			Race	Sex	Date of Birth	☐ 2. At Large ☐ 4. Misdemeanor ☐ 5. Juvenile
☐ Parent ☐ Other: _____ Name (Last, First, Middle)			Residence Phone			
☐ Legal Custodian			Business Phone			
Address (Street, Apt. Number)			(City)	(State)	(Zip)	
Notified by: (Name)			Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 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 355-2526) informed of any change of address.			School Attended		Grade	
☐ Yes, by: _____ ☐ No: _____			Property Crime? ☐ Yes ☒ No		Description of Property	
Drug Activity N. N/A P. Possess			S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Disperse/ Distribute	M. Manufacture Produce/ Cultivate
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 DUI - NORMAL FACULTIES IMPAIRED			Statute Violation Number 316.193(1)(A)		Violation of ORD #	
Drug Activity	Drug Type N	Amount / Unit	Offense #	Counts 1	Domestic Violence ☐ Y ☒ N	Warrant / Capias Number
Charge Description			Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence ☐ Y ☐ N	Warrant / Capias Number
Charge Description			Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence ☐ Y ☐ N	Warrant / Capias Number
Health / Apparent Physical Condition of Defendant			Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries			
Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail			PROPERTY - Received By		Released By	
☐ Posted Bond ☐ South County Mental Health			Released To			
Transported By			Date Transported	Time Transported	Other	
☒ INSTRUCTION NO. 1 - Mandatory appearance in court ☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.			Location (Court, Room) North County PALM BEACH GARD			
			Court Date and Time 08/31/2022 10:00:00			
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.			Photo Available			
Signature of Defendant (or Juvenile and Parent/Custodian)			Date Signed			
HOLD for Other Agency			Name of Arresting Officer (Print) FLINK, A. S.		I.D. # 514	
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other			Transporting Officer Hinson		I.D. # 546	
Intake Agency			Agency		Witness here if subject signed with an "X".	

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P.I.O. ☐ DEFENDANT

J# 0533374 P# 3228 Hinson # 546

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE	
ADMINISTRATIVE	Agency ORI Number		Agency Name		Agency Report Number					
	FL FL0502600		Palm Beach Gardens Police Department		7 8 22-003655					
DEFENSE	Charge Type: ☐ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other									
	Special Notes:									
CHARGES	Name (Last, First, Middle)							Race	Sex	Date of Birth
	SOUHIL, FOUAD							W	M	04/09/1975
VICTIM	Charge Description							Charge Description		
	316.193(1)(A) DUI - NORMAL FACULTIES IMPAIRED									
STATE OF FLORIDA	Victim's Name (Last, First, Middle)							Race	Sex	Date of Birth
	State Of Florida									
PROMISE	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. ☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. ☐ confessed to _____ admitting to the below facts. ☐ was found to have committed the below acts, resulting from my (described) investigation. On the <u>28</u> day of <u>July</u>, <u>2022</u> at <u>03:38</u> (Specifically include facts constituting cause for arrest.) On 07/28/2022 at approximately 0221 hours, this Officer was conducting speed enforcement in the area of the 10000-block of Alt A1A, PBG, FL, when a vehicle was observed traveling at an increased rate of speed north bound in the inside through lane. Body worn camera and in car video were used in the investigation. This Officer's initial visual estimation of the vehicle, was approximately 65 MPH in a posted 45 MPH zone. Using RADAR Stalker DSR2X (DB001317), front antenna (KC086606) this Officer received a steady tone and reading of 65 MPH. The RADAR calibration was last checked on 05/09/2022 and was due on 11/09/2022. Prior to this tour of duty on this date, this Officer ensured the RADAR was in working order, to confirm the accuracy of the unit. At the end of this tour of duty, this Officer did the same. This Officer received RADAR/LIDAR certification on 05/31/2008, in Cannon AFB, NM. This Officer entered the same lane as the vehicle, a GMC utility vehicle (Z38GUG/FL) and observed same drifting within its lane. This Officer activated overhead red and blue lights to initiate a traffic stop on Alt A1A just north of Lake Victoria Gardens Av. The vehicle continued north bound, before making a right-hand turn and stopping in the middle of the outside through lane on Kyoto Gardens Dr just east of Alt A1A, PBG, FL. This Officer made contact with the driver and sole occupant, identified via Florida Driver License photo, Fouad Souhil (OF), while he was still in actual physical control of same. Souhil had watery eyes, low heavy eyelids, thick slurred speech and the obvious odor of an unknown alcoholic beverage emanating from his breath at conversational distance. Souhil said he was on his way from work at "Cantina" and indicated toward Downtown at The Gardens, which was directly north of our present location. This Officer was able to determine this was Avocado Cantina, which closed at 2200 hours on this night. Souhil then said "I went out" "to have a drink with friends". Souhil further admitted to consuming two drinks on this night. Souhil had difficulty locating his documents ultimately producing a vehicle service paperwork as his										
SWORN AND SUBSCRIBED BEFORE ME OSCAR KIM #290 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 07/28/2022 DATE SIGNATURE OF ARRESTING / INVESTIGATING OFFICER FLINK, ANDREW S (514) NAME OF OFFICER (PLEASE PRINT) 07/28/2022 DATE										

OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
Agency ORI Number FL FL0502600		Agency Name Palm Beach Gardens Police Department		Agency Report Number 7 8 22-003655			
Charge Type: Check as many as apply.		☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Special Notes:			
Name (Last, First, Middle) SOUHIL, FOUAD				Race W	Sex M	Date of Birth 04/09/1975	

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registration.

Based on this Officer's observations, Souhil was asked to exit the vehicle to participate in Standardized Field Sobriety Exercises, to which he complied. While walking to the rear of his vehicle, Souhil placed his left hand on the vehicle to assist with balance and walking. Souhil said he did not have any medical conditions which would affect the exercises performed.

The first exercise conducted, was the Horizontal Gaze Nystagmus. The stimulus used was a Stylus Streamlight with an illuminated red tip. This Officer observed a lack of smooth pursuit in both eyes and sustained involuntary jerking in both eyes at maximum deviation. Souhil also had the onset of Nystagmus prior to 45 degrees in both eyes. This Officer had to keep reminding Souhil to properly follow the stimulus, as he would move his head and/or not follow the stimulus from side to side.

The second exercise conducted, was the Walk and Turn. The line used was a strip of yellow tape placed upon the pavement by this Officer. Souhil had difficulty getting into and remaining in the starting position. Souhil would lose his balance and step out of the starting position and also started the exercise twice prior to being told to do so. During the first set of steps, Souhil missed heel-to-toe four times and stepped off the line one time. Souhil took eight steps rather than nine. Souhil then paused and conducted an improper turnaround by way of pivoting on both feet. After turning around, Souhil stumbled to his right, off the line. During the return set of steps, on the first step, Souhil crossed his foot over and stumbled, missing the line. Souhil then continued, missing heel-to-toe seven times and taking eight steps rather than nine.

The third exercise conducted, was the One-Leg Stand. During the exercise, Souhil raised his left foot. Souhil bent his left knee and was not looking down. When told to straighten his leg, Souhil looked down and lost his balance, dropping his foot to the pavement twice. The exercise was then started again, with Souhil again raising his left foot. During the second attempt, Souhil swayed and dropped his foot to the ground three times. After placing his foot down the third time, Souhil stumbled backward toward Ofc Lovett 523. This Officer terminated the exercise, due to a safety concern for Souhil.

Based on this Officer's observations, Souhil was placed under arrest at 0236 hours. On the roadside, this Officer requested Souhil provide a breath sample for the purpose of determining its alcohol content, to which he refused. This Officer read Florida Implied Consent to Souhil, via Florida DOT Cards, to which he acknowledged and again refused at 0245 hours. It should be noted, Souhil has a prior DUI Conviction on 03/19/2014 in this county.

Based on the results of the investigation and the totality of the circumstances present,

SWORN AND SUBSCRIBED BEFORE ME _____ NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 07/28/2022 DATE	 _____ SIGNATURE OF ARRESTING / INVESTIGATING OFFICER FLINK, ANDREW S (514) NAME OF OFFICER (PLEASE PRINT) 07/28/2022 DATE
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2 OF 3

COURT

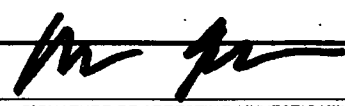
STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

A D M I N I S T R A T I V E	OBT Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
	Agency ORI Number		Agency Name		Agency Report Number					
	FL FL0502600		Palm Beach Gardens Police Department		7 8 22-003655					
	Charge Type: Check as many as apply.		☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Special Notes:					
D E F	Name (Last, First, Middle)				Alias		Race	Sex	Date of Birth	
	SOUHIL, FOUAD						W	M	04/09/1975	
this Officer has probable cause to prove Fouad Souhil operated a motor vehicle, in the state of Florida, while under the influence to the extent his normal faculties were impaired, in violation of FSS 316.193(1) (A).										
P R O B A B L E C A U S E S T A T E M E N T	NOT A CERTIFIED COPY									
	SWORN AND SUBSCRIBED BEFORE ME:  GESARK, KIM NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)					 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER				
	07/28/2022 DATE					FLINK, ANDREW S (514) NAME OF OFFICER (PLEASE PRINT)				
						07/28/2022 DATE				
PAGE 3 OF 3										

COURT

STATE ATTORNEY

CENTRAL RECORDS

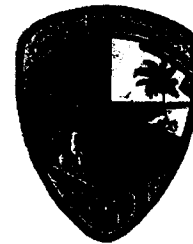
JAIL

CRIME ANALYSIS

P. I. O.



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



PBSO Case #: _____ PBSO Zone: 3-13

Agency Case #: 22003655 Crash Case #: _____

Incident Information:

Time of Stop/Crash: 0221 Date of Incident: 07/28/2022 Day: THURSDAY

Location of Incident: 10000-BLK ALT A1A, PBG, FL, 33410

Arrest Information:

Time of Arrest: 02:36 Date of Arrest: 07/28/2022 Day: THURSDAY

Location of Arrest: 3900-BLK KYOTO GARDENS AV, PBG, FL, 33410

Subject's Name: (L) SOUHIL, (F) FOUAD, (M) _____

DOB: 04/09/1975 Race: W Sex: M Height: 5'10 Weight: 160 Hair BRO Eye BRO

Address: 5850 GOLDEN EAGLE CIR, PBG, FL Phone: _____

Arresting Officer's Name: A. FLINK ID#: 514

Agency: PBGPD Division: TRAFFIC UNIT

Breath Results

- 1) _____ at _____ hrs.
- 2) _____ at _____ hrs.
- 3) _____ at _____ hrs.
- 4) _____ at _____ hrs.

---BAT Use---

BAT Notified:	<u>NO</u>
Arrival Time at BAT:	<u>N/a</u>
Subject Arrest Time:	<u>02:36</u>

Breath Test Operator: _____

PBSO

**STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST**

I, **A. FLINK**, a duly certified Law Enforcement or Correctional Officer, am a
(Name of Officer reading Implied Consent Warning)

member of **PALM BEACH GARDENS POLICE DEPARTMENT**, and I do swear
(Name of Law Enforcement Agency)

or affirm that on or about the **28th** day of **JULY**, 20**22**, at **0236** ☐ P.M. ☒ A.M.

DRIVER **FOUAD** **SOUHIL**
FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL # **S400240751290**, state of **FL**, was placed under lawful arrest for

the offense of **DRIVING UNDER THE INFLUENCE** by **A. FLINK** and
(Name of Arresting Officer)

issued citation # **AGESOAE**.

That on or about the **28TH** day of **JULY**, 20**22**, at **0245** ☐ P.M. ☒ A.M.

in **PALM BEACH** County,

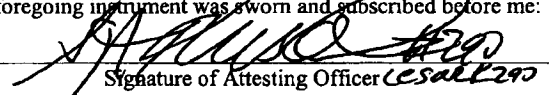
I requested that the driver submit to a **BREATH** test for the purpose of determining its alcohol content. I informed the driver that the refusal to submit to such test would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended, or if he or she had been previously fined under s. 327.35215, F.S., for refusing to submit to a breath, urine, or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended, or if he or she has been previously fined under s. 327.35215, F.S., for refusal to submit to a lawful test of his or her breath, urine, or blood. Nonetheless, the driver refused to submit to the test requested.



Signature of Law Enforcement Officer or Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (s. 117.10, F.S.)

The foregoing instrument was sworn and subscribed before me:


Signature of Attesting Officer **esalv220**

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me
this **28TH** day of **JULY**, 20**22**,
by **A. FLINK**, who is
personally known to me or who has produced

_____ as identification.
Notary Public _____

Title **SERGEANT**

Date **07/28/22**

Note: Mail or hand deliver to the designated Bureau of Administrative Reviews office, Department of Highway Safety and Motor Vehicles, with the driver's license, the appropriate copy of the UTC, and the probable cause affidavit.

SUBJECT: Souhail, Fouad 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 OFF FLINK of the PBGRD

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) Not Read on camera

SUBJECT: South, Found 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, OF 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: OFC FLINK 514



**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: 2022019417

Date: 7/28/2022

Specialist Name/ID: Chantel Daniels/30347