50-2022-CT-020170ASB

☐ Marsy's Law CVI FL. Const. Art.1 § 16(b)

☐ Check if Supplement is Attached

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE

OBTS Number

Agency ORI Number: FLO 5 0 0 0 0 0 | Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE | Agency Report Number (N.T.A.'s only): 06-22-136005

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

Multiple Clearance Indicator: 0 1

Location of Arrest (including Name of Business): **Big Blue Trace / Doubletree Trail, Wellington, FL 33414**

Location of Offense (Business Name, Address): **Big Blue Trace / Doubletree Trail, Wellington, FL 33414**

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
12/04/2022	19:47	12/5/22				Priority Towing, 7153 Southern Blvd. WPB 33413, (561) 533-5573

DEFENDANT

Name (Last, First, Middle): **Maresca, Jonathan, Joseph** — Alias (Name, DOB, Soc. Sec. #, Etc.)

Race (W - White, B - Black, I - American Indian, O -Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	7/29/1987	5'09	200	brown	bald	light	medium

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): **none**

Marital Status: Divorced — Religion: SATANISM — Indication of: Alcohol Influence Y ☒ N ☐ Unk ☐; Drug Influence Y ☐ N ☐ Unk ☒

Local Address (Street, Apt. Number) (City) (State) (Zip): **2006 Cross Breeze Dr, Wellington, FL 33414** — Phone: (239) 699 0884 — Residence Type: 1. City 2. County 3. Florida 4. Out of State: 1

Permanent Address (Street, Apt. Number) (City) (State) (Zip) — Phone: ( ) — Address Source: Verbal

Business Address (Name, Street) (City) (State) (Zip) — Phone: ( ) — Occupation: Salesman

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
M620430872690, FL	[redacted]		Sonybrook, NY	US

CO-DEF

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

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

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. Synthetic — U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Driving Under the Influence with property damage and injuries	1	☐Y ☒N	316.193(3)(c)(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		22-136005		OR

CHARGE

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

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

CHARGE

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

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

CHARGE

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

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

NOTICE TO APPEAR

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 January Day 3rd Year 2023 Time 08:30 A.M. X 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

All rights reserved UCC — 12/04/2022

Signature of Defendant (or Juvenile and Parent/Custodian) — Date Signed

ADMIN

HOLD for other agency — Signature of Arresting Officer X — Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other: — Name of Arresting Officer (Print) Inv. POINTU P. — I.D. # 16032

Intake Deputy J. DUNN — I.D. # 36160 — Pouch # — Transporting Officer Inv. POINTU P. — I.D. # 16032 — Agency PBSO — Witness here if subject signed with an "X"

PAGE 1 OF 1

PBSO #0148 REV. 04/22 DISTRIBUTION: WHITE- COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

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0536452

3516

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 4th DAY OF December 20 22, AT 19:09 ✓AM PM

SUBJECT: Maresca, Jonathan, Joseph CASE NUMBER: 22-136005

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)

I responded to a crash that just occurred at the intersection of Big Blue Trace and Doubletree Trail in Wellington, Palm Beach County, Florida. Upon arrival I observed a black Ford F150 bearing Florida tag AG86NN with front end damage, stopped in the grass on the North East corner of the intersection facing northbound. The driver, Benny Matos, and front passenger, Alexander Matos, were still in the car and were attended by Alex Chatam who witnessed the crash and called 911. A red Ford F150, with front end damage, bearing Florida tag NLQS47 was stopped in the grass further South in the west side of the southbound lane. Chatam wrote in a sworn statement he observed the red Ford pickup erratically driving southbound on the northbound lane and colliding heads on with the black pickup. The driver of the red pickup was identified by his Florida driver license as Jonathan Maresca. The red Ford was registered to Paradise Grills Direct Inc. The black Ford was registered to Benny Matos. Benny and Alexander Matos were transported by Palm Beach County Fire Rescue to the Emergency Room with possible injuries. Maresca denied injury and refused transport.

OBSERVATION OF DRIVER:

Maresca had glassy and bloodshot eyes. His speech was slurred and an obvious odor of unknown alcoholic beverage was coming from his breath. He was unsteady on his feet.

DRIVER'S STATEMENTS:

Post Miranda Maresca admitted being the driver at the time of the crash. He explained he was coming from work in Pompano Beach, stopped at a market and was driving home. He admitted driving out of his lane and hitting the incoming car. He denied having been drinking today. He stated he attended the Police Academy

ODORS:

Obvious odor of unknown alcoholic beverage that become stronger when he talked.

GENERAL OBSERVATIONS

SPEECH: **Slurred, mumbled**

ATTITUDE: **Argumentative, forgetful,**

CLOTHING: **black polo shirt, gray shorts, black sneakers**

MEDICAL/OTHER: **Said he had 'inflation' in his right foot, leg, lower back and neck but was not treated for it. At the BAT he would disclose 'possibly' taking suboxone.**

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 4th day of December 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

Thomas Leahey (#19183)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

Notary Public State of Florida
Thomas H Leahey
My Commission GG 347108
Expires 08/20/2023

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SUBJECT: **Maresca, Jonathan, Joseph** CASE NUMBER 22-136005

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- [x] RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Pupils round and equal. No resting nystagmus. Equal tracking. Onset of HGN at approximately 35 degrees. VGN present. LOC present. Swayed during the task. Moved his head frequently and stopped the task multiple times. Continued after Taylor warnings.

WALK & TURN:

Maresca started walking on the line before being given the instructions. After being ordered multiple times to stop and come back, he could not maintain the instructional stance. Once asked to start, he did not walk heel to toe on every steps. He stepped off the line multiple times. He did not count out loud his steps and took an improper number of steps each way. He also did not turn the way he was instructed to.

ONE LEG STAND:

After being given the instructions and confirming understanding, he did not start the task. After two more Taylor warnings he stated he would not do the task. I asked him multiple times he did not want to do that task or any other tasks and he answered: "I understand". After multiple attempts to elicit an answer from him he still did not comply.

FINGER TO NOSE:

ROMBERG ALPHABET:

BREATH TEST RESULTS: **Refusal**

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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 4th day of December 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 known

Thomas Leahey (#19183)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

Notary Public State of Florida
Thomas H Leahey
My Commission GG 347108
Expires 06/20/2023

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

PBSO CASE # **22-136005** PBSO ZONE **8-11**

AGENCY CASE # _____ CRASH CASE # **22-136001**

TIME OF STOP/CRASH **19:09** DATE **12/04/2022** DAY **Sunday**

SUBJECT'S NAME **Maresca, Jonathan, Joseph** RACE **W** SEX **M**

HGT **5'09** WGT **200** DOB **7/29/1987**

LOCATION **Big Blue Trace / Doubletree Trail, Wellington, FL 33414**

ARRESTING OFFICER'S NAME & ID **Inv. POINTU P. (16032)** AGENCY **Palm Beach County Sheriff's Office**

DIVISION: **CID/DUI**

NOTIFIED BY COMMO **yes**

ARRIVAL AT FACILITY **20:07**

ARREST TIME **19:47**

BREATH RESULTS:

REFUSED

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TESTING OFFICER'S ID **19183** PBSO VIDEOTAPE # _____

WITNESS LIST

CASE NUMBER: **22-136005**

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: **Chatham, Alexander, James**

ADDRESS: **6567 Patricia Dr, West Palm Beach, FL 33413**

PHONE NUMBERS (HOME) **(561) 252 0453** (WORK) **()**

CAN TESTIFY TO: **Driving pattern**

NAME: **Matos, Benny, Ray**

ADDRESS **17686 Temple Blvd, Loxahatchee, FL 33470**

PHONE NUMBERS (HOME) **(201) 297 3995** (WORK) **()**

CAN TESTIFY TO: **Driving pattern**

NAME: **Matos, Alexander,**

ADDRESS **17686 Temple Blvd, Loxahatchee, FL 33470**

PHONE NUMBERS (HOME) **(561) 531 9327** (WORK) **()**

CAN TESTIFY TO: **Driving pattern**

NAME: **D/S Ramirez (#37537)**

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: **crash investigation**

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: _____

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NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: Maresca, Jonathan J

CASE NUMBER: 22-136005

DATE: Dec 4, 2022

VIDEO DVD NUMBER: n/a

BEGINNING TIME: 2041

ENDING TIME: 2047

BREATH TESTS RESULTS: 1) R TIME 2044 A.M.☐ P.M.☒ 2) n/a TIME 0 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, rapid

ATTITUDE: fidgety/uncooperative

CLOTHING: gray shorts, black polo shirt, black sneakers

MEDICAL CONDITIONS: various reasons

MEDICATIONS: Suboxone

OTHER:

eyes were glassy & bloodshot
odor of unknown alcoholic beverage on breath
subject stated all rights reserved after answering standardized questions

REFUSED

COMMENTS:

arrived at center A/O conducted 20 observation period at 2007 hrs

REFUSED

subject refused to perform breath test

A/O read I/C 2X & subject understood I/C

subject refused to perform breath test

A/O called refusal @ 2044

A/O read rights on scene & subject remembered/understand rights

A/O conducted Q&A

subject stated - choose not to answer to questions

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SUBJECT: Marrsca Jonathan J CASE NUMBER: 136005

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: _____

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SUBJECT: Marescq, Jonathan J CASE NUMBER: 136005

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

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STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST

I, Investigator P. POINTU, a duly certified Law Enforcement Officer or Correctional Officer,
(Person reading Implied Consent Warning)

am a member of Palm Beach County Sheriffs Office, and I do swear
(Name of enforcement agency)

or affirm that on or about the FOURTH day of December, 2022, at 19:47

DRIVER JONATHAN JOSEPH MARESCA,
(Type or Print) FIRST MIDDLE OR MAIDEN LAST

DL # M620430872690, state of FL, was placed under lawful arrest for

the offense of DUI by Investigator P. POINTU and
(Name of Arresting Officer)

issued Citation # AG5ZN4E.

That on or about the FOURTH day of December, 2022, at 20:44

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.)

Notary Public State of Florida
Thomas H Leahey
My Commission GG 347108
Expires 06/20/2023

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this 04 day of December, 2022 by Inv P Pointu #16032 who is personally known to me or who has produced Known as identification.

Notary Public

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title

Date

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.

****EFFECTIVE OCTOBER 1, 2021****

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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:	

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REVIEW COMPLETED BY

Booking Number: 2022031347	**Date:** 12/5/2022
	Specialist Name/ID: Chantel Daniels/30347