0534514 22CT15220 NB 3727

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number
FLO 5 0 2 6 0 0	PALM BEACH GARDENS POLICE DEPARTMENT	78 - 22004397

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Weapon Seized / Type: 2 (1. Yes 2. No) | Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): SUNRISE DR/NORTHLAKE BLVD, PBG , FL, 33410

Location of Offense (Business Name, Address): NORTHLAKE BLVD/MACARTHUR BLVD, PBG , FL, 33410

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
09/12/2022	23:59					KAUFF'S TOWING AND RECOVERY 4701 EAST AVENUE, WPB, FL 33407

DEFENDANT

Name (Last, First, Middle): GIFFELS, KEITH, RAYMOND

Alias (Name, DOB, Soc. Sec. #, Etc.):

Race (W - White I - American Indian B - Black 0- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	07/18/1967	6'00	185	BRO	BRO	LGT	LAR

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description):

Marital Status: | Religion: | Indication of: Alcohol Influence Y ☑ N ☐ Unk. ☐ ; Drug Influence Y ☐ N ☐ Unk. ☑

Local Address (Street, Apt. Number) (City) (State) (Zip): 14035 125TH AV N, WEST PALM BEACH FL 33418

Phone: (561) 310-4979

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 14035 125TH AV N, WEST PALM BEACH FL 33418

Phone:

Address Source: VERBAL

Business Address (Name, Street) (City) (State) (Zip):

Phone:

Occupation:

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
G142516672583 FL	[redacted]		MORRISTOWN,NJ	US

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	1. Arrested 2. At Large	3. Felony 4. Misdemeanor 5. Juvenile
				☐ 1. Arrested ☐ 2. At Large	☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
				☐ 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 provided by ☐ defendant and / or ☐ defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) 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/Denv. P. Paraphernalia/ Equipment S. Synthetics U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DRIVING UNDER THE INFLUENCE OVER .08	1	☐Y ☒N	316.193(1)(C)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant I 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 I 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): NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700

Court Date and Time: Month OCTOBER Day 12 Year 2022 Time 10:00 AM ☒ PM ☐

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: 09/12/2022

ADMIN

HOLD for other Agency Name: | Signature of Arresting Officer: X [signature] 514

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Name of Arresting Officer (Print): A. FLINK | I.D. #: 514

Name Verification (Printed by Arrestee) (PRINT) SEP 12 AM 2:24

Intake Deputy: [signature] I.D. # | Pouch #

Transporting Officer: HEWITT | ID #: 544 | Agency: PBGPD

Witness here if subject signed with an -X"

PAGE 1 OF 1

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PROBABLE CAUSE AFFIDAVIT

OBTS Number:

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

JUVENILE:

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FL FL0502600	Palm Beach Gardens Police Department	7 | 8 22-004397

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
GIFFELS, KEITH RAYMOND		W	M	07/18/1967

CHARGES

Charge Description	Charge Description
316.193(1)(C) DUI - BREATH .08 OR ABOVE	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
State Of Florida			

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source

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

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable 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 committ the below acts.

☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 11 day of September, 2022 at 23:50 (Specifically include facts constituting cause for arrest.)

On 09/11/2022 at approximately 2350 hours, this Officer arrived in the area of Sunset Dr and Northlake Blvd, PBG, FL, to assist NPBPD Ofc Wright 9895 on a traffic stop which occurred in this city. Body worn camera and in car video were used.

Upon arrival, this Officer made contact with the caller, Ronney Bogner (RP) who said he observed the individual driving the stopped vehicle at Brass Ring in North Palm Beach. Bogner further stated the individual appeared drunk and was in no condition to drive a vehicle. Bogner said he attempted to prevent the individual from driving, and was unsuccessful in doing so. Bogner called dispatch and followed the vehicle, a red Ford utility (CXML39/FL) until it was stopped by Ofc Wright. This Officer spoke with Ofc Wright who said he first observed a vehicle matching the description of the original call (NPBPD 22233800) on Northlake Blvd and Alt A1A, but was unable to catch up and identify same, until Northlake Blvd and MacArthur Blvd. Ofc Wright stopped the vehicle pursuant to Navarette v. California USSC 2014.

This Officer made contact with the driver of the Ford, identified via Florida Driver License photo, Keith Giffels (OF) while he was still in actual physical control of same. Giffels had a flushed red face, low droopy eyelids, red watery eyes and slurred speech. This Officer heard Giffels tell Ofc Wright he had consumed one pitcher of beer. Giffels said he was coming from Brass Ring and he had consumed "a couple" to drink on this night.

Based on this Officer`s observations, Giffels was asked to exit the vehicle to participate in Standardized Field Sobriety Exercises, to which he complied. Giffels said he did not have any medical conditions which would affect the exercises conducted.

The first exercise conducted was the Horizontal Gaze Nystagmus. The stimulus used was a Streamlight Stylus with an illuminated red tip. This Officer observed a lack of smooth

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER

09/12/2022
DATE

PARIS POUND
MY COMMISSION # HH 202850
EXPIRES: March 25, 2026
Bonded Thru Notary Public Underwriters

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

FINK, ANDREW S (514)
NAME OF OFFICER (PLEASE PRINT)

09/12/2022
DATE

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

ADMIN

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	Agency Name	Agency Report Number
FL FL0502600	Palm Beach Gardens Police Department	7 | 8 | 22-004397

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
GIFFELS, KEITH RAYMOND		W	M	07/18/1967

PROBABLE CAUSE STATEMENT

pursuit in both eyes. Throughout the exercise, Giffels was swaying back and forth.

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. During the instructions, Giffels was swaying side-to-side. During the first set of steps, Giffels stepped his heel next to the line on his second step. Giffels raised his right arm more than six inches from his side. During the turnaround, Giffels moved his lead foot from the line and crossed his following foot over at the conclusion of the turn. During the return set of steps, Giffels paused to regain balance on the fourth step. During the fifth step, Giffels stepped off the line.

The third exercise conducted, was the One-Leg Stand. During the exercise Giffels raised his left foot. Giffels swayed during the exercise and only reached the count of "1006", when he placed his foot down a third time, thus ending the exercise early.

Based on this Officer`s observations and the totality of the circumstances, Giffels was placed under arrest at 2359 hours. During a tow inventory of the vehicle, a lawfully carried pistol was located in a black lockbox behind the driver seat. The pistol was a Sig Sauer (66B387804) (negative on wants) was taken for safekeeping and booked into evidence to be retrieved by Giffels at a later time. At PBSO BAT, this Officer requested Giffels provide a breath sample for the purpose of determining its alcohol content, to which he agreed to do so. At 0056 hours he blew .093 and at 0059 hours he blew .090.

Based on the results of the investigation, this Officer has probable cause to prove Keith Giffels operated a motor vehicle, in the state of Florida, while under the influence to the extent his normal faculties were impaired, with an unlawful breath alcohol content, in violation of FSS 316.193(1)(C).

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER

09/12/2022
DATE

PARIS POUND
MY COMMISSION # HH 20[illegible]
EXPIRES: March 25, 2026
Bonded Thru Notary Public Underwriters

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

LINK, ANDREW S (514)
NAME OF OFFICER (PLEASE PRINT)

09/12/2022
DATE

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

PALM BEACH GARDENS POLICE DEPARTMENT
DUI TESTING FACILITY INFORMATION SHEET

PBSO Case #: 22-108035 PBSO Zone: 3-13

Agency Case #: 22004397 Crash Case #: _____

Incident Information:

Time of Stop/Crash: 2349 Date of Incident: 09/12/2022 Day: SUNDAY

Location of Incident: NORTHLAKE BLVD/MACARTHUR BLVD, PBG , FL, 33410

Arrest Information:

Time of Arrest: 23:59 Date of Arrest: 09/12/2022 Day: SUNDAY

Location of Arrest: SUNRISE DR/NORTHLAKE BLVD, PBG , FL, 33410

Subject's Name: (L) GIFFELS, (F) KEITH, (M) RAYMOND

DOB: 07/18/1967 Race: W Sex: M Height: 6'00 Weight: 185 Hair BRO Eye BRO

Address: 14035 125TH AV N, WEST PALM BEACH FL 33418 Phone: (561) 310-4979

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

Agency: PBGPD Division: TRAFFIC UNIT

Breath Results

1) .093 at 00:56 hrs.
2) .090 at 00:59 hrs.
3) N/A at _____ hrs.
4) N/A at - hrs.

---BAT Use---

BAT Notified:	YES
Arrival Time at BAT:	0028
Subject Arrest Time:	23:59

Breath Test Operator: RAGIN 16877
PBSO

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SUBJECT: Giffels, Keith K 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 <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)_____

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SUBJECT: _____ 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~~? _____

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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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: 80-006029 Software: 8100.27
Date of Test: 09/12/2022

Date of Last Agency Inspection: 08/19/2022
Observation Period Began: 00:28
Subject's Name: KEITH R GIFFELS DOB: 07/18/1967 Sex: M

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	00:53
Air Blank	0.000	00:54
Control Test	0.080	00:54
Air Blank	0.000	00:55
Subject Sample #1	0.093	00:56
Air Blank	0.000	00:56
Air Blank	0.000	00:58
Subject Sample #2	0.090	00:59
Air Blank	0.000	01:00
Control Test	0.079	01:00
Air Blank	0.000	01:00
Diagnostics Check	OK	01:01

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: _____ Date: 09/12/22
Signature

Sworn to (or affirmed) before me this 12 day of Sept., 2022

_____ Ofc. A. Flink #514
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.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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TESTING FACILITY TASK REPORT

AGENCY: PBG

SUBJECT: Giffels, Keith R.

CASE NUMBER: 22-108035

DATE: Sep 12, 2022

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 00:51

ENDING TIME: 01:02

BREATH TESTS RESULTS: 1) .093 TIME 00:56 A.M. ☒ P.M. ☐ 2) .090 TIME 00:59 A.M. ☒ P.M. ☐

3) N/A TIME ---------- A.M. ☐ P.M. ☐ 4) N/A TIME ---------- A.M. ☐ P.M. ☐

BREATH OPERATOR: R. Ragin #16877

MAINTENANCE TECHNICAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Pronounced

ATTITUDE: Calm, cooperative

CLOTHING: Black shorts, blue polo shirt, black sneakers

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER:

Eyes are glassy & red

COMMENTS:

Arrived at center A/O started 20 minute observation period at 00:28 hrs.

Subject agreed to perform breath test.

A/O read rights.
Subject stated he understood rights.

Tech read breath test results.
Subject stated he understood breath test results.

NO Q&A conducted.

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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: 2022023862	**Date:** 09/12/2022
	Specialist Name/ID: T.Howard/7185