50-2022-CT-020996ASB

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
	0502000	Lantana Police Department	6 4 22-005690

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: 1

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
2100 W LANTANA RD/ I95, ~~2100 W LANTANA RD/INTERSTATE~~ W	2100 W LANTANA RD/INTERSTATE 95, LANTANA, FL 33462

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
12/18/2022	22:07	12/18/2022	22:57	12/18/2022	00:08	PB AUTO DISPOSAL

DEFENDANT

Name (Last, First, Middle): PASSOS, NATHAN JORDAN

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

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	12/04/1987	5'09	180	BROWN	BROWN	LIGHT	Medium

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description)

Marital Status: S

Religion: CHRISTIAN

Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. Drug Influence

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State
165 FARNHAM G 165, DEERFIELD BEACH, FL 33442				(904) 517-3789	1

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
165 FARNHAM G 165, DEERFIELD BEACH, FL 33442				(904) 517-3789	VERBAL

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
P220630874440 / FL	[redacted]		BOYNTON BEACH, FL W	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
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	
				☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Other: ☐ Legal Custodian

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 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.

☐ Yes, by: ☐ No:

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. Disperses/ 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	Statute Violation Number	Violation of ORD #
DUI-DRIVING UNDER THE INFLUENCE	316.193(1)(a)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant: TIRED

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries

Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By	Released By	Released To
VIANUEVA	VIANUEVA	PBCJ

Transported By	Date Transported	Time Transported	Other
VIANUEVA	12/18/2022	22:10	

NOTICE TO APPEAR

☒ 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): 200 W Atlantic Ave,

Court Date and Time: 01/19/2023 08:30:00

I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

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

2022 DEC 19 AM 7:24

No Photo Available

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Intake Deputy I.D. # Pouch #

Signature of Arresting Officer 929

Name of Arresting Officer (Print): VIANUEVA, BRANDON V I.D. # 929

Transporting Officer: VIANUEVA I.D. # 929 Agency LANTA

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X".

NOT A CERTIFIED COPY

0536797

331

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 18 DAY OF December 20 22, AT 2135 AM / PM

SUBJECT: Nathan Jordan Passos CASE NUMBER: 22-005690

AGENCY: Lantana Police ARRESTING OFFICER: B.Vianueva 929

PERSONAL CONTACT

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

Passos was observed by Palm Beach Fire Rescue personnel behind the wheel of his vehicle upon their arrival. I spoke with Passos who stated post marinda that he was the sole occupant and driver of his vehicle.

OBSERVATION OF DRIVER:

Upon making contact with Passos, his speech was slurred and he had difficulty gathering his thoughts. While speaking with Passos he had trouble pronouncing certian words and had to slow down while speaking to pronounce them.

DRIVER'S STATEMENTS:

Post Miranda Warning, Passos stated that he consumed two Corona beers at 12oz each within the past hour. Passos stated that he was the sole occupant of his vehicle and driving when he met with emergency services. Passos stated that he was not involved in an accident. After being told he was involved in an accident, he stated he did not know what happened

ODORS:

N/A

GENERAL OBSERVATIONS

SPEECH: slurred

ATTITUDE: calm and relaxed

CLOTHING: black t-shirt, brown shorts, black shoes

MEDICAL / OTHER:

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting / Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 19 day of December 20 22 by Ofc. Vianueva

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

Notary Public, Clerk of Court, Officer (F.S.S 1 17.10)

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

NOT A CERTIFIED COPY

SUBJECT: Nathan Jordan Passos **CASE NUMBER:** 22-005690

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS :

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

Other Observations:
Passos advised he understood directions multiple times throughout the tasks but did not follow many of them.

WALK & TURN:

Passos advised he understood the directions but failed to keep his heel to his toe while listening to directions. When told to start, Passos immediately raised his hands for balance and did not keep them at his side. Passos failed to maintain his balance while walking on the line throughout the exercise. Passos failed to maintain his feet on the line while performing the task. Passos did not complete a correct turn. When returning to the starting point, Passos incorrectly counted his steps.

ONE LEG STAND:

Passos failed to raise his foot off of the floor 6 inches when performing the task. Passos kept his raised foot on the floor for most of the task to keep his balance. Passos was instructed to count until being told to stop and advised he understood the directions. Passos stopped counting at six (6) and advised he was done.

FINGER TO NOSE :

Task not completed.

ROMBERG / ALPHABET :

Task not completed.

BREATH TEST RESULTS : .201 and .206

NOT A CERTIFIED COPY

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting / Investigative Officer)

The foregoing instrument was notarized or sworn before me this 19 day of December 20 22 by ofc. v. arueva

who is personally known to me and/or produced identification. Type of identification produced Known LEO

Notary Public, Clerk of Court, Officer F.S.S. 117-10

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

WITNESS LIST

CASE NUMBER: 22-005690

ARRESTING OFFICER Ofc. Vianueva (ID 929)
ADDRESS 901 N 8th Street Lantana FL
PHONE NUMBERS (HOME) _____ (WORK) 561-540-5701
CAN TESTIFY TO: PC Affidavit

NAME: Sgt. Oquist (ID 793)
ADDRESS 901 N 8th Street Lantana FL
PHONE NUMBERS (HOME) _____ (WORK) 561-540-5701
CAN TESTIFY TO: PC Affiadvit

NAME: _____
ADDRESS _____
PHONE NUMBERS (HOME) _____ (WORK) _____
CAN TESTIFY TO: _____

NAME: _____
ADDRESS _____
PHONE NUMBERS (HOME) _____ (WORK) _____
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CAN TESTIFY TO: _____

NAME: _____
ADDRESS _____
PHONE NUMBERS (HOME) _____ (WORK) _____
CAN TESTIFY TO: _____

NOT A CERTIFIED COPY

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006238 Software: 8100.27
Date of Test: 12/18/2022

Date of Last Agency Inspection: 11/18/2022
Observation Period Began: 22:57
Subject's Name: NATHAN J PASSOS DOB: 12/04/1987 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	23:23
Air Blank	0.000	23:23
Control Test	0.080	23:24
Air Blank	0.000	23:24
Subject Sample #1	0.201	23:25
Air Blank	0.000	23:26
Air Blank	0.000	23:27
Subject Sample #2	0.206	23:28
Air Blank	0.000	23:29
Control Test	0.079	23:29
Air Blank	0.000	23:30
Diagnostics Check	OK	23:30

Cylinder Lot: 29821080A4
Exp: 12/05/2023

State of Florida, County of Palm Beach,

Personally appeared before me the undersigned authority, who (✓) is personally known to me or (__) produced _____ as identification, and who after being placed under oath, states:

I JOSHUA J BELL, 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: 12/18/22
Signature

Sworn to (or affirmed) before me this 18 day of December, 2022

_____ Ofc. C. Vianueva #929
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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PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 22-141021 PBSO ZONE 1-32

AGENCY CASE # 64-22-005690 CRASH CASE # 64-22-005688

TIME OF STOP/CRASH 2043 hrs DATE 12/18/2022 DAY Sunday

SUBJECT'S NAME Nathan Jordan Passos RACE W SEX M

HGT 5'9" WGT 180lbs DOB 12/4/87

LOCATION W Lantana Rd / I95

ARRESTING OFFICER'S NAME & ID Ofc. B. Vianueva 929 AGENCY Lantana

DIVISION: Road Patrol

NOTIFIED BY COMMO 2043 hrs

ARRIVAL AT FACILITY 2257 hrs

Arrest Time 2135 hrs

BREATH RESULTS:

1. .201
2. .206
3. N/A
4. N/A

TESTING OFFICER'S ID 8656

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: LPD

SUBJECT: PASSOS, NATHAN JORDAN

CASE NUMBER: 22-141021

DATE: Dec 18, 2022

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 2320

ENDING TIME: 2338

BREATH TESTS RESULTS: 1) .201 TIME 2325 A.M.☐ P.M.☒ 2) .206 TIME 2328 A.M.☐ P.M.☒

3) XX TIME XX A.M.☐ P.M.☐ 4) XX TIME XX A.M.☐ P.M.☐

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: COOPERATIVE

CLOTHING: BLACK TEE SHIRT, GREY SHORTS, BLACK SHOES

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: GLASSY
SUBJECT STATED HE DRANK 2 BEERS Q AND A
ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

COMMENTS:

A/O ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 2257 HOURS

SUBJECT STATED HE WOULD TAKE BREATH TEST

BREATH TEST COMPLETED

TECH READ BREATH TEST RESULTS
SUBJECT ACKNOWLEDGED HE UNDERSTOOD BREATH TEST RESULTS

A/O READ RIGHTS
SUBJECT STATED HE UNDERSTOOD HIS RIGHTS

A/O CONDUCTED Q AND A
SUBJECT ANSWERED Q AND A

NOT A CERTIFIED COPY

SUBJECT: Ivess, Nathan Jordan 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) Read on camera

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WHITE: STATE ATTY. YELLOW: DHSMV PINK: CENTRAL RECORDS GOLD: JAIL

SUBJECT: [illegible], Nathan [illegible] CASE NUMBER: _____

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? Yes

WHERE WERE YOU GOING? home

WHAT STREET OR HIGHWAY WERE YOU ON? [illegible]

DIRECTION OF TRAVEL? [illegible] WHERE DID YOU START? [illegible]

WHAT TIME DID YOU START? [illegible] WHAT TIME IS IT NOW? 10[illegible]

WHAT IS TODAY'S DATE? 10[illegible] WHAT DAY OF THE WEEK IS IT? SUNDAY

WHAT COUNTY AND CITY ARE YOU IN NOW? [illegible]

WHEN DID YOU LAST EAT? [illegible] WHAT DID YOU EAT? [illegible]

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? [illegible]

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

HOW MUCH? [illegible] WHERE? [illegible] WITH WHOM? [illegible]

WHEN DID YOU HAVE YOUR FIRST DRINK? [illegible] AND YOUR LAST DRINK? [illegible]

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? [illegible]

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? No ARE YOU UNDER THE INFLUENCE? No

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? No HOW MUCH? -

WHAT? - WHERE? - WHEN? -

WHAT LINE OF WORK ARE YOU IN? [illegible] WHEN DID YOU LAST WORK? Friday

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? No WHAT? -

ARE YOU SICK OR INJURED? No WHAT'S WRONG? -

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

WERE YOU IN AN ACCIDENT TODAY? No

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN? -

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? No WHO? - WHY? -

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? No WHAT? - WHEN? -

DO YOU HAVE:

EPILEPSY?	No
GLASS EYE?	No
FALSE TEETH?	No
EAR INFECTION?	No
INNER EAR TROUBLE?	No
DIABETES?	No

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

DO YOU TAKE INSULIN? No IF SO, WHEN WAS YOUR LAST INJECTION? -

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? No WHERE? -

INTERVIEWER: Ofc. B. Vinovich #999

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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: 2022032666	**Date:** 12/19/2022
	Specialist Name/ID: M. Tooks #8557