0129760 50-2022-CT-012916-ASB PCH-3311

☐ 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**

OBTS Number:

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
FL0 5 0 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	0 6 1 - 22-095584

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): Colony Preserve Dr/Flavor Pict Rd, Boynton Beach FL 33436

Location of Offense (Business Name, Address): Colony Preserve Dr/Flavor Pict Rd, Boynton Beach, FL 33436

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
08/06/2022	1736					Big City Towing

DEFENDANT

Name (Last, First, Middle): Donovan, Patrick, Brian | 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	11/9/1960	5'09	228	BRO	GRY	Light	Large

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): Flag tattoo left wrist, heart tattoo right wrist

Marital Status: Divorced | Religion: LUTHERAN | Indication of: Alcohol Influence / Drug Influence — Y ☐ N ☐ Unk ☒

Local Address (Street, Apt. Number) (City) (State) (Zip): 2081 W Woolbright Rd I104, Boynton Beach, FL 33426 | Phone: (561) 810-9370 | Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip): | Phone: ( ) | Address Source: FL DL

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
D515662604090, FL	[redacted]		Chicago, IL	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) 355-8511) 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	1	☐Y ☒N	316.193(3C1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		22-095584		

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 September Day 6th Year 2022 Time 0830 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

Signature of Defendant (or Juvenile and Parent/Custodian) | Date Signed: 08/06/2022

ADMIN

HOLD for other agency: | Signature of Arresting Officer: x [signature] | Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other: | Name of Arresting Officer (Print): B. Branco 36178 | I.D. #: 16305

Intake Deputy | I.D. # | Pouch # | Transporting Officer: B. Branco 36178 | I.D. #: 36178 | Agency: PBSO | Witness here if subject signed with an "X"

PAGE 1 OF 1

PBSO #0146 REV. 04/22 DISTRIBUTION: WHITE-COURT COPY GREEN-STATE ATTORNEY YELLOW-AGENCY PINK-AGENCY GOLD-DEFENDANT (N.T.A.'s ONLY)

C. WARD

PROBABLE CAUSE AFFIDAVIT

OBTS Number | 1 Arrest, 2 NTA, 3 Request for Warrant, 4 Request for Capias: 1 | Juvenile: N

ADMIN

Agency ORI Number: FLO 5 0 0 0 0 0 | Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE | Agency Report Number: 22-095584

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
Donovan, Patrick, Brian		W	M	11/9/1960

CHARGES

Charge Description	Charge Description
Driving Under The Influence with Property Damage 316.193(3C1)	
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 I have just and reasonable grounds to believe, and do believe that the above named Defendant committed the listed violation(s) 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 6th day of August 20 22 at 1642 ☐ A.M ☒ P.M (Specifically include facts constituting cause for arrest.)

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

The defendant was transported to JFK Medical Center for medical clearance prior to transport to the jail. Once at the hospital the doctors had the subject complete a CT scan of his head. The doctors stated that the it would take approximately 1-2 hours prior to releasing the subject. Due to breath being impractical I requested a blood sample form the subject for the purposes of determining alcohol or chemical and controlled substance content. The defendant consented to the to the blood sample. A blood sample was taken by Registered Nurse Kaylan Satern using a provided blood sample kit (which expires April 2023). Two viles were taken. They were rotated 15-20 time and placed back into the blood test kit. The blood test kit was placed into a sealed evidence bag and placed into a evidence bag. It was placed on the front seat of my pbso patrol car with the AC turned on. The kit was then placed into a refrigerated evidence locker at the PBSO evidence building.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

B. Branco 36178
(Signature of Arresting /Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 6th day of August 20 22 by B. Branco
(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Known LEO

1635
Notary Public, Clerk of Court, Officer (F.S.S). 117.10)

DISTRIBUTION WHITE – Court Copy GREEN – State Attorney YELLOW – Agency PINK – Agency

PBSO #0004 REV. 04/22

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 6th DAY OF August 20 22, AT 1642 AM ✓PM

SUBJECT: Donovan, Patrick, Brian CASE NUMBER: 22-095584

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: B. Branco 36178

PERSONAL CONTACT

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

At approximately 1642 hrs, I was called to the scene of a traffic collision with property damage and injuries just east of the intersection of Colony Preserve Dr and Flavor Pict Rd, in unincorporated Palm Beach County, Florida.

I arrived at the scene at approximately 1650 hrs. My independent traffic collision investigation, based on physical evidence and witness statements, determined that, at approximately 1635 hrs, the defendant was traveling westbound on Flavor Pict Rd, left his designated lane of traffic and began to travel into oncoming traffic, side swiping two vehicles. (See PBSO crash case #22095579 for more detailed information about the crash).

Witness, Abraham Basilo and Jennifer Basilo, identified the defendant, Patrick Donovan, to me as the driver / sole occupant, of the defendant's vehicle at the time of the collision. (See the sworn videotaped interview for more detail).

While on scene, Patrick showed indicators of impairment, such as having difficulty standing on his own.

OBSERVATION OF DRIVER:

I made contact with the defendant, later identified by their Florida DL as, Patrick Donovan. The defendant had lethargic speech and had difficulties standing on his own. I asked the defendant if they had any medical problems or had taken any medications. Patrick advised he has vertigo and is prescribed Metoprolol and Adavan. I asked Donovan if he had any alcoholic beverages today, which he advised no.

I asked the defendant to perform voluntary roadside tasks, which he was willing to complete.

DRIVER'S STATEMENTS:

Pre Miranda/Sponetenous Utterance: Nothing

Post Miranda/Enroute to Bat: After completion of vehicle inventory, a unknown white substance was discovered in a tool bag that Patrick was observed holding throughout the duration of the time I was on scene. I asked Patrick what the white substance was, which he advised he did not know.

ODORS:

None

GENERAL OBSERVATIONS

SPEECH: **Low speech**

ATTITUDE: **Calm and cooperative, until attempting to place him in custody, in which he began to resist**

CLOTHING: **Purple/blue striped shirt, jeans, red shoes**

MEDICAL/OTHER: **I conducted the Standardized Field Sobriety Tasks (SFSTs) in front of my PBSO patrol vehicle (Asset # 71927) in car video system with the following results. The area appeared flat to the naked eye, and clear of any large debris. It was Hot and Not Windy. The area was dry. The defendant stated that he had no known medical conditions, except for occasional vertigo.**

STATE OF FLORIDA
COUNTY OF PALM BEACH

B. Branco 36178 B. Branco
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 6th day of August 20 22 by B. Branco 36178

(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 117.10)

SUBJECT: **Donovan, Patrick, Brian** CASE NUMBER 22-095584

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:

See PC for further

WALK & TURN:

Patrick was asked to complete the walk & turn on the white painted line of the road. I had the defendant place their left foot on the line with their right foot in front of the left, heel to toe. The defendant had difficulties placing his right heel to the toes on his left foot. I instructed the defendant to remain in said position throughout my instructions and demonstration. The defendant was instructed not to start the task prior to me telling them to begin. The defendant acknowledged and stated they understood my instructions. I attempted to demonstrate the exercise to the defendant, but he lost his balance multiple times. Due to this, I was unable to demonstrate the exercise and field sobriety exercises were concluded.

ONE LEG STAND:

Unable to perform

FINGER TO NOSE:

Unable to perform

ROMBERG ALPHABET:

Unable to perform

BREATH TEST RESULTS: 1) 2) 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

B. Branco 36178
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 6th day of August 20 22 by B. Branco 36178

(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 117.10)

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

PBSO CASE # 22-095584 PBSO ZONE 6-51

AGENCY CASE # _____ CRASH CASE # 22095579

TIME OF STOP/CRASH 1642 DATE 08/06/2022 DAY Saturday

SUBJECT'S NAME Donovan, Patrick, Brian RACE W SEX M

HGT 5'09 WGT 228 DOB 11/9/1960

LOCATION Colony Preserve Dr/Flavor Pict Rd

ARRESTING OFFICER'S NAME & ID B. Branco 36178 (16305) AGENCY Palm Beach County Sheriff's Office

DIVISION: Road Patrol-D6

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY _____

ARREST TIME 1736

BREATH RESULTS:

1) _____

2) _____

3) _____

4) _____

Blood

TESTING OFFICER'S ID _____ PBSO VIDEOTAPE # N/A

WITNESS LIST

CASE NUMBER: 22-095584

ARRESTING OFFICER: B. Branco 36178
ADDRESS: 3228 Gun Club Rd, West Palm Beach, FL 33406
PHONE NUMBERS (HOME): ______ (WORK) 561-688-3000
CAN TESTIFY TO: DUI investigation

NAME: D/S B. Branco
ADDRESS: 3228 Gun Club Rd, West Palm Beach, fL 33406
PHONE NUMBERS (HOME) ______ (WORK) 561-688-3000
CAN TESTIFY TO: Crash and Wheel Witness

NAME: Abraham Basilo
ADDRESS 5317 NE 14th Ave, Pompano Beach, FL 33064
PHONE NUMBERS (HOME) ______ (WORK) ______
CAN TESTIFY TO: Crash and Wheel Witness

NAME: Jennifer Basilo
ADDRESS 5317 NE 14th Ave, Pompano Beach, FL 33064
PHONE NUMBERS (HOME) 954-675-0607 (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: ______

SUBJECT: Donovan, Patrick CASE NUMBER: 22-095584

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 ***BLOOD*** for the purpose of detecting its alcohol content and the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am _____ of the **Palm Beach County Sheriff's Office**

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***. Refusal to submit to the test I have requested is admissible into evidence in any criminal proceeding.

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) DOT Refusal

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) DOT Refusal

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

PBSO #0129B REV. 04/22

PALM BEACH COUNTY
SHERIFF'S OFFICE
RIC L. BRADSHAW, SHERIFF

BLOOD, URINE, SALIVA CONSENT FORM

Date: 8/6/22 PBSO Case # 22-095584

I, , Patrick Donovan freely, knowingly and voluntarily give my consent for Doctor /Nurse / Paramedic / Phlebotomist to obtain a sample (s) of my blood, urine, saliva for DNA, ethanol and/or other analysis or comparison that the Palm Beach County Sheriff's Office may deem necessary.

I consent to the obtaining of sample(s) of my blood, urine or saliva with the full understanding *that the* results of any such analysis may be used against me in a court of law, and hereby attest that I am not submitting due to coercion, duress, or promises, that I am consenting to the aforementioned of my own free will.

Signature: , ,

Witness by:

Florida Department of Law Enforcement
Alcohol Testing Program

CERTIFICATION OF BLOOD WITHDRAWAL

I certify that as a physician, certified paramedic, registered nurse, licensed practical nurse, or other person authorized by a hospital to draw blood, or as a licensed clinical laboratory director, supervisor, technologist or technician, I am authorized by 316.1932, 316.1933, 322.63, 327.352 and 327.353, Florida Statutes, to withdraw blood at the request of a law enforcement officer. I certify that on 8/6/22 (Date) I withdrew blood from , , Donovan, Patrick (Driver) at the request of D/S B. Brave (Officer) The blood sample(s) were collected and labeled in accordance with the provisions of Rule 11D-8.012, Florida Administrative Code. Before collecting the blood sample(s), the skin was cleansed with an antiseptic that did not contain alcohol. The blood sample(s) were collected in glass evacuation tubes that contained a preservative and an anticoagulant. Immediately after collection, the tubes were inverted several times. The blood collection tubes were labeled with the name of the person tested, the date and time the sample(s) were collected and the initials of the person who collected the sample(s).

(Printed name of person withdrawing blood)

(Title) RN

(Signature) [signature] (Date) 8/6/22

May also be used in administrative proceedings pursuant to s. 322.2615, Florida Statutes. To be forwarded to the local Bureau of Driver Improvement Office, Division of Driver Licenses, Department of Highway Safety and Motor Vehicles.

FDLE/ATP Form 11-Revised August, 2001

Kaylyn Satem

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: 2022020319	**Date:** 8/7/2022
	Specialist Name/ID: Chantel Daniels/30347