

22CT 12924 ASB

710

0533604

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile		N	
Agency ORI Number FL 0500300		Agency Name BOYNTON BEACH POLICE DEPT.				Agency Report Number 34-22-008837							
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		01							
Location of Arrest (Including Name of Business) 200 S. Federal Hwy, Boynton Beach FL 33435						Location of Offense (Business Name, Address) 200 S. Federal Hwy, Boynton Beach FL 33435							
Date of Arrest 08/07/2022		Time of Arrest 2234		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle	
Name (Last, First, Middle) SIEGEL, PETER													
Alias (Name, DOB, Soc. Sec. #, Etc)													
W - White B - Black		I - American Indian O - Oriental / Asian		Race W		Sex M		Date of Birth 01/21/1957		Height 508		Weight 188	
Eye Color HAZEL		Hair Color GREY		Complexion LIGHT		Build MED							
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status SINGLE		Religion N/A		Indication of: Alcohol Influence ☐ Y ☐ N ☐ Unk. ☐ Drug Influence ☐ Y ☐ N ☐ Unk. ☐			
Local Address (Street, Apt. Number) 7204 Pinehurst Dr		(City) Boynton Beach		(State) FL		(Zip) 33426		Phone (917)741-7777		Residence Type 1. City 3. Florida 2. County 4. Out of State 1			
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		Address Source Defendant			
Business Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		Occupation Retired			
D/L Number, State 462719520/ NY		Place of Birth Brooklyn, NY		Citizenship USA									
Co-Defendant Name (Last, First, Middle)		Date of Birth		Sex		1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile ☐							
Co-Defendant Name (Last, First, Middle)		Date of Birth		Sex		1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile ☐							
☐ Parent Name (Last) (First) (Middle)		Residence Phone											
☐ Legal Custodian		Address (Street, Apt. Number) (City) (State) (Zip)		Business Phone									
☐ Other		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 561-355-2526) informed of any change of address. ☐ Yes, By: (Name) ☐ No (Reason)		School Attended		Grade									
Property Crime? ☐ Yes ☐ No		Description of Property		Value of Property									
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 Description DUI		Counts 1		Domestic Violence ☐ Yes ☒ No		Statute Violation Number 316.193(1)A		Violation of ORD#					
Drug Activity N		Drug Type N		Amount/Unit BAC 0.106/0.117		Offense # 22-008837		Warrant/Capias Number		Bond			
Charge Description		Counts		Domestic Violence ☐ Yes ☐ No		Statute Violation Number		Violation of ORD#					
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond			
Charge Description		Counts		Domestic Violence ☐ Yes ☐ No		Statute Violation Number		Violation of ORD#					
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond			
Charge Description		Counts		Domestic Violence ☐ Yes ☐ No		Statute Violation Number		Violation of ORD#					
Drug Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond			
Instruction No. 1 Mandatory Appearance in Court		Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side.		Location (Court, Room Number, Address) South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444									
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.		Court Date and Time Month SEPTEMBER Day 12TH Year 2022 Time 0830		☒ A.M. ☐ P.M.									
Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed											
HOLD for other Agency Name		Signature of Arresting Officer D. JENNINGS		Name Verification (Printed by Arrestee) (PRINT)									
☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other		ID # 1000		Agency BBPD		Witness here is subject Signed with an "X"		Page 1 OF 1					

AUG 08 2022

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 7th DAY OF August 2022 AT 2146 ☐ A.M. ☒ P.M.

CASE #: 22-008837

DEFENDANT: PETER SIEGEL

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATION OF DRIVER:

On August 7th 2022 at approximately 2146 hours, I was traveling Northbound near the 1700 block of S Federal Highway in marked BBPD patrol vehicle 4038. When I observed a Silver Jeep bearing NJtag W69KWT traveling Northbound in traffic on Federal Highway. I observed the Jeep being unable to maintain its lane by swerving between the two traveling lanes on Federal Highway. I also paced the vehicle speeds at 46mph in a 35mph zone. Due to the above mentioned traffic infractions I conducted a traffic stop on the Jeep at the 1200 block of S Federal Highway.

Upon the Jeep coming to a stop at the 200 of S Federal Highway, I observed the W/M driver put something into his mouth. I made contact with the W/M driver who had immediately opened the driver-side door as his vehicle came to a stop. Upon making contact with the Driver who was currently sitting in the driver seat of the previously mentioned vehicle, I smelled the odor of an unknown alcoholic beverage emanating from the interior cabin of the vehicle. I asked the driver what he had put into his mouth and he stated that it was a breath mint (My belief is to hide his breath). He was later identified as PETER SIEGEL (01/21/1957) by his New York driver license. I asked SIEGEL for their license, registration and proof of insurance. As he retrieved these items I noticed his eyes were red, watery and glossy. His cheeks were flushed, mouth dry and his movements were slow and calculated. While still standing in a close proximity to SIEGEL, I could still smell a strong odor of an unknown alcoholic beverage emanating from the inside of his vehicle. While gathering the requested documents, SIEGEL was showed difficulty in locating his insurance and registration. SIEGEL was later able to confirm the correct insurance after providing me with multiple copies. I assisted SIEGEL in locating his vehicle's registration, due to cycling through the same pile of papers several times. Ultimately SIEGEL did not have his vehicles registration. I informed SIEGEL that I stopped him for being unable to maintain his lane and for his speeds. SIEGEL stated that he was on his phone. SIEGEL stated that he was coming from Bar/Restaurant called the Wine Room located in Delray Beach, FL. SIEGEL stated that he is heading to his home located in the area of Woolbright RD and SW 8th ST. SIEGEL stated that he is traveling Northbound on Federal Highway (City of Boynton). Due to SIEGEL already passing Woolbright Rd, I had asked him what route does he take to his residence. SIEGEL pointed north to Boynton Beach Blvd and stated that he turns left onto Woolbright Rd and take it down to his house. I informed SIEGEL that he already passed Woolbright Rd; SIEGEL recanted his statement and stated that he is actually traveling to the store 7-11 either on Woolbright Rd & Seacrest Blvd (already passed) or Boynton Beach Blvd and SW 8th ST. I asked SIEGEL if he had been drinking alcoholic beverages. SIEGEL stated that he had two half glasses of Red Cabernet Wine (alcoholic beverage) called Desert 8. SIEGEL stated that he was drinking with his friends and his last drink was at approximately 2115 hours.

Based on my suspicion, I asked SIEGEL if he would consent to performing Standardized Field Sobriety Evaluations (SFSTs) for the purpose of determining if he was impaired while operating a motor vehicle.

Prior to his performance, I asked if he had any physical problems with their body that would inhibit them from performing light physical exercises and SIEGEL stated that he does not have injuries or disabilities. I escorted him to a level surface that was smooth and free from obstructions and debris. I could now smell a strong odor of an unknown alcoholic beverage emanating from SIEGEL breath that intensified when he

spoke. I pointed out a White strip on the surface that formed a line. SIEGEL identified the line by giving its color and placing his left foot on it when prompt to do so.

The following SFSTs were explained, demonstrated and acknowledged by him prior to his performance: HGN, The Walk and Turn, The One Leg Stand, The Finger to Nose and The Romberg Alphabet Recitation. His deficiencies were recorded on another form in this work sheet. At the conclusion of the SFSTs, coupled with my observation of the defendant's vehicle in motion and my observation of personal indicators of impairment exhibited by the defendant, probable cause was established for DUI. I told the defendant he was being placed under lawful arrest for suspicion of DUI pursuant to FSS 316.193(1). SIEGEL was searched and handcuffed (double locked and checked for tightness) prior to being seated into the rear of my patrol car (Vehicle 4038). Back up Officers arranged for the defendant's vehicle to be towed by Beck's Towing.

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|--|
| ☒ Left eye does not follow smoothly | ☒ Right eye does not follow smoothly |
| ☒ Left eye prior to 45 degrees | ☒ Right eye prior to 45 degrees |
| ☒ Distinct jerking in left eye at maximum deviation | ☒ Distinct jerking in right eye at maximum deviation |
| ☐ Vertical Nystagmus in left eye | ☐ Vertical Nystagmus in right eye |

WALK AND TURN:

I attempted to explained and demonstrated the task to SIEGEL several times, but he showed great difficulty in getting into the starting position. SIEGEL was unable to stand with his feet on the line and arms down by his side. SIEGEL was unable to maintain his balance, stepped off the line and used his arms for balance. SIEGEL was giving several attempts but ultimately concluded in the same result. I determined that SIEGEL was unable to perform the task and SIEGEL wanted to forego this task.

ONE LEG STAND:

This task was explained and demonstrated to SIEGEL several times, which he stated he understood. While performing the task put his foot down several times, used his arms for balance, swayed, stumbled and almost fell. Due to SIEGEL almost falling I believed that he was not in the right state to safely perform the above task. SIEGEL agreed to forego this task.

FINGER TO NOSE:

This task was explained and demonstrated to SIEGEL several times, which he stated he understood. SIEGEL started to soon while I was demonstrating the task. While performing the task SIEGEL's finger tip missed the tip of his nose and landed under his eyelid. SIEGEL would land on his nostril but reposition to the tip of his nose.

ROMBERG/ALPHABET:

This task was explained and demonstrated to SIEGEL, which he stated he understood. Task performed.

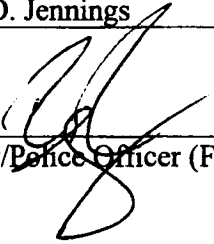
I then transported SIEGEL to Palm Beach County Breathalyzer. Upon my arrival at 2254 hours, I completed the required 20-minute observation. I then requested SIEGEL provide a sample of his/her breath for the purpose of determining the alcohol content. SIEGEL complied and provided the requested breath samples. The results are: 0.106(First Breath) & 0.117(Second Breath). SIEGEL initially agreed but didn't initially cooperate, at which time I read him Implied Consent, which he stated he understood.

At this time, due to the above mentioned information I have established probable cause to charge SIEGEL with one count of DUI pursuant to FSS 316.193(1). I issued SIEGEL the following citations: AG4J4CE, AG4J4DE, AG4J4EE, AE1578E(DUI)

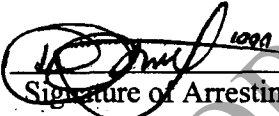
Upon completion of the booking process, SIEGEL was turned over to Palm Beach County Jail

The following instrument was sworn to before me this 8 day of August 2022

By: D. Jennings


Notary/Police Officer (F.S.S.)




Signature of Arresting Officer

TESTING FACILITY TASK REPORT

AGENCY: BBPD

SUBJECT: Siegel, Peter J. CASE NUMBER: 22-095963

DATE: Aug 7, 2022 VIDEO DVD NUMBER: N/A

BEGINNING TIME: 23:19 ENDING TIME: 23:43

BREATH TESTS RESULTS: 1) VNM TIME 23:26 A.M. ☐ P.M. ☒ 2) .106 TIME 23:29 A.M. ☐ P.M. ☒
3) .117 TIME 23:32 A.M. ☐ P.M. ☒ 4) N/A TIME ----- A.M. ☐ P.M. ☐

BREATH OPERATOR: R. Ragin #16877

MAINTENANCE TECHNICIAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Thick

ATTITUDE: Talkative, fidgety

CLOTHING: Blue jeans, yellow polo shirt, yellow sneakers

MEDICAL CONDITIONS: None

MEDICATIONS: A lot

OTHER:

Eyes are glassy & bloodshot
Odor of unknown alcoholic beverage on breath
Subject stated in Q&A he had 2 1/2 glasses of wine.

COMMENTS:

Arrived at center A/O started 20 minute observation period at 22:54 hrs.

Subject agreed to perform breath test.

Subject was not following Tech. instructions.

A/O read I/C 2X and explained I/C.

Subject stated he understood I/C and agreed to take test.

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

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

A/O conducted Q&A.
Subject answered Q&A.

SUBJECT: SIEGEL, Peter J 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 ☒ 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) Read on Camera

SUBJECT: SUGEL, Peter J 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? g

WHERE WERE YOU GOING? 7-11

WHAT STREET OR HIGHWAY WERE YOU ON? 1

DIRECTION OF TRAVEL? 1 WHERE DID YOU START? 1

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? 1

WHAT COUNTY AND CITY ARE YOU IN NOW? 1

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? 1 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? 1

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? 1 ARE YOU UNDER THE INFLUENCE? 1

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? 1 WHAT? _____

ARE YOU SICK OR INJURED? 1 WHAT'S WRONG? _____

DO YOU LIMP? 1 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? 1 WHERE? 1

INTERVIEWER: _____

**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: 80-006478 Software: 8100.27
Date of Test: 08/07/2022

Date of Last Agency Inspection: 07/15/2022

Observation Period Began: 22:54

Subject's Name: PETER J SIEGEL

DOB: 01/21/1957 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	23:21
	Air Blank	0.000	23:22
	Control Test	0.079	23:22
	Air Blank	0.000	23:23
	Subject Sample #1	VNM*	23:26
	Air Blank	0.000	23:26
	Air Blank	0.000	23:28
	Subject Sample #2	0.106	23:29
	Air Blank	0.000	23:29
	Air Blank	0.000	23:31
	Subject Sample #3	0.117	23:32
	Air Blank	0.000	23:33
	Control Test	0.078	23:33
	Air Blank	0.000	23:34
	Diagnostics Check	OK	23:34

*Volume Not Met (0.094 - Breath Sample Not Reliable to Determine Breath Alcohol Level)

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: _____

Signature

Date: 08/07/22

Sworn to (or affirmed) before me this 07 day of Aug, 2022

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.



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

PBSO CASE # 22-095963 PBSO ZONE 3-12

AGENCY CASE # 22-008837 CRASH CASE # _____

TIME OF STOP/CRASH 2146 DATE Aug 7th, 2022 DAY Sunday

SUBJECT'S NAME Siegel, Peter J RACE W SEX M

HGT 5'08" WGT 188 DOB 01/21/1987

LOCATION 1500 S. Federal Hwy Boynton Beach FL 33435

ARRESTING OFFICER'S NAME & ID D. Jennings 1000 AGENCY B3BPD

DIVISION: _____

NOTIFIED BY COMMO Y

ARRIVAL AT FACILITY 2284

BREATH RESULTS:

Arrest Time 2234

1. .106
2. .117
3. N/A
4. N/A

TESTING OFFICER'S ID 16877



**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: 2022020402

Date: 08/08/2022

Specialist Name/ID: T.Howard/7185