

0545769

23 CT 22614

214

ARREST / NOTICE TO APPEAR

ADMI NIST RATI ON	OBT's Number		Agency ORI Number 0500400		Agency Name Delray Beach Police Department		Agency Report Number (N.T.A.'s only) 4, 0 23-016563		1 Arrest 2 N.T.A. 3 Request for Warrant 4 Request for Capias 1		JUVENILE							
D E F E N D A N T	Charge Type Check as many as apply		Location of Arrest (Including Name of Business)		Location of Offense (Business Name, Address)		If Weapon Seized		Multiple Clearance Indicator		1							
	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		1999 W LINTON BLVD/S CONGRESS AVE, DELRAY		1999 W LINTON BLVD/S CONGRESS AVE, DELRAY BEACH, FL		UNARMED											
	Date of Arrest 12/19/2023		Time of Arrest 22:24		Booking Date 12/19/2023		Booking Time 22:34		Jail Date 12/19/2023		Jail Time 22:33							
J U V E N I L E	Name (Last, First, Middle) TRADER, BROOKE LEANN																	
	Alias:																	
	Race W - White B - Black		Sex F		Date of Birth 08/14/1987		Height 5'09		Weight 170		Eye Color BROWN		Hair Color BLOND OR		Complexion FAIR		Build MED THIN	
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)																	
	Marital Status S																	
C O D E F	Local Address (Street, Apt. Number) 100 NW 69TH CIRCLE UNIT 92, BOCA RATON, FL 33487				Phone (404) 245-1975				Residence Type: 1 City 2 County 3 Florida 4 Out of State 2									
	Permanent Address (Street, Apt. Number) 100 NW 69TH CIRCLE UNIT 92, BOCA RATON, FL 33487				Phone (404) 245-1975				Address Source VERBAL									
	Business Address (Name, Street)				Phone				Occupation									
	D/L Number, State T636072877940 / FL		Sec. Sec. Number		INS Number		Place of Birth (City, State) BOCA RATON, FL		Citizenship US									
C O D E F	Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile							
	Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile							
J U V E N I L E	<input type="checkbox"/> Parent <input type="checkbox"/> Other _____ Name (Last, First, Middle)																	
	<input type="checkbox"/> Legal Custodian																	
	Address (Street, Apt. Number) (City) (State) (Zip)																	
	Notified by: (Name) Date Time																	
	Released To: (Name) Relationship Date Time																	
C H A R G E	The above address was provided by <input type="checkbox"/> defendant and/or <input type="checkbox"/> 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.																	
	Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																	
	Description of Property Value of Property																	
C H A R G E	Drug Activity S Sell N N/A P Possess R Smuggle B Buy T Traffic 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																	
C H A R G E	Charge Description DUI BAL .15 OR MORE / DUI-UNDER 18YOA PASSENGER																	
	Statute Violation Number 316.193(4)																	
	Violation of ORD #																	
C H A R G E	Drug Activity Drug Type Amount / Unit Offense # Counts Domestic Violence Warrant / Capias Number Bond																	
C H A R G E	Charge Description																	
	Statute Violation Number																	
	Violation of ORD #																	
C H A R G E	Drug Activity Drug Type Amount / Unit Offense # Counts Domestic Violence Warrant / Capias Number Bond																	
I N T A K E	Health / Apparent Physical Condition of Defendant																	
	Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries																	
N O T I C E	Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail																	
	PROPERTY - Received By Released By																	
T O A P P E A R	Transported By: OFC. CUSHNIE																	
	Date Transported: 12/19/2023 Time Transported: 22:33																	
T O A P P E A R	<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court																	
	<input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.																	
T O A P P E A R	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																	
A D M I N	HOLD for Other Agency																	
	Name Verification (Printed by Arrestee)																	
A D M I N	Name of Arresting Officer (Print) CUSHNIE, MEAGHAN																	
	I.D.# 1259																	
A D M I N	Name of Deputy OFC. CUSHNIE																	
	I.D.# Agency 1259 DBPD																	
Witness here if subject signed with an "X"																		

FILED PDC - CIVIL CLERK
28 DEC 20 08:25

COURT STATE ATTORNEY AGENCY CENTRAL RECORDS JAIL CRIME ANALYSIS P.T.O. DEFENDANT

AD



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

PBSO CASE # 23-139559 PBSO ZONE 4-11

AGENCY CASE # 23-06563 CRASH CASE # _____

TIME OF STOP/CRASH 1915 DATE 12/19/23 DAY Tuesday

SUBJECT'S NAME Trader Broche Leann RACE W SEX F
LAST FIRST MID

HGT 509 WGT 170 DOB 08/14/87

LOCATION W Linton Blvd / S Congress Ave

ARRESTING OFFICER'S NAME & ID Cushman 1259 AGENCY DBPD

DIVISION: Patrol

NOTIFIED BY COMMO WALK IN

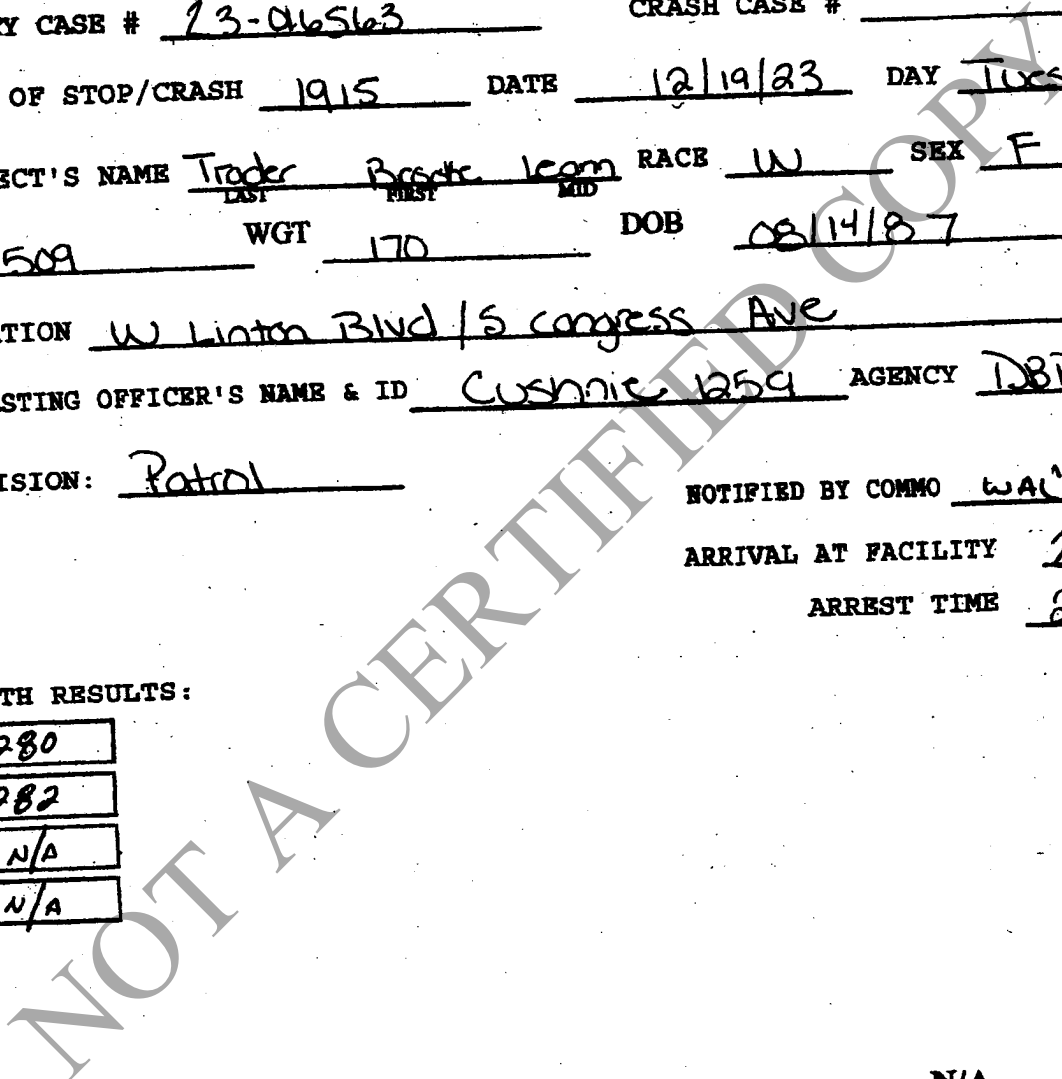
ARRIVAL AT FACILITY 20:36

ARREST TIME 20:06

BREATH RESULTS:

- 1) 280
- 2) 282
- 3) N/A
- 4) N/A

TESTING OFFICER'S ID 24639 PBSO VIDEOTAPE # N/A



D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 19th DAY OF December, 2023 AT 1915 AM PM
IN THE CITY OF DELRAY BEACH, COUNTY OF PALM BEACH, STATE OF FLORIDA

Case No: 23-016563 Defendant: Brooke Leann Trader
Agency: Delray Beach Police Arresting Ofc: Ofc. Cushnie

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATIONS OF DRIVER:

On December 19, 2023, at approximately 1915 hours, I responded to the area of W Linton Blvd and S Congress Ave in reference to a female subject asleep behind the wheel, of a white in color Cadillac bearing FL tag # BVYV82 blocking the northbound lane.

Upon my arrival at the scene of the accident, I spoke with W/F Ximena Moscoso (DOB: 12/21/1999), later identified by her FL DL, Moscoso advised that W/F Brooke Lean Trader (DOB: 08/14/1987), later identified by her FL DL, was asleep behind the wheel of her vehicle. Moscoso stated that Trader just left the scene and drove off northbound on S Congress after backing into her vehicle. Moscoso stated that while Trader was in her vehicle, she seemed very confused.

Ofc. Culberson advised over the radio that he had visual on the vehicle at I-95 / W Linton Blvd. Ofc. Culberson then activated his lights and sirens in his marked Delray Beach Patrol vehicle and pulled the defendant Ms. Trader over (who is registered owner of the vehicle and sole occupant). Ofc. Culberson advised that Trader did not initially want to exit the vehicle but was able to get her out of the vehicle.

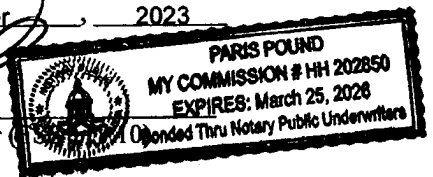
I then made contact with Ofc. Culberson and Trader (who was detained and standing in front of officers marked police vehicle). I noticed that Trader was very confused, and her speech was slurred. I informed Trader of the situation and asked her how many alcoholic beverages did she have to drink? Trader admitted that he had been drinking but she stated that she barely had any alcohol.

Based on the circumstances, I requested Trader submit to the roadside Standardized Field Sobriety Tasks to dispel my suspicion that she may be impaired. Trader then responded "Yes".

The foregoing instrument was sworn to before me this 19th day of December, 2023
by Officer Ofc. Cushnie

[Signature]
Arresting Officer

[Signature]
Notary/Police Officer



ROADSIDE TASKS

Case No: 23-016563 Defendant: Brooke Leann Trader

HORIZONTAL GAZE NYSTAGMUS:

6 of 6 clues

Left Eye:

- Lack of smooth pursuit
- Distinct & sustained nystagmus at maximum deviation
- Onset prior to 45 degrees

Right Eye:

- Lack of smooth pursuit
- Distinct & sustained nystagmus at maximum deviation
- Onset prior to 45 degrees

Notes:

WALK AND TURN: 8 of 8 clues

Trader could not follow instructions after multiple attempts to explain the task. Trader could not stay on the white line and proceeded to start before she was asked to do so. When Trader was performing the task, she could not place her left foot on the line, nor could she place her right foot on the line.

ONE LEG STAND: 3 of 4 clues

Trader could not stay balanced while performing this task. Trader's speech was very slurred and could not count out loud. When Trader put out her foot, she continued to bend her knee and could not keep her leg extended.

FINGER TO NOSE: 0 of 4 clues

When Trader was being instructed to do this task, she could not keep her hands at her side and stated she understood the task. Trader was asked repeatedly if she understood the task and said she did, but she continued to not remain in the ready position. Trader refused to perform the task and said she was refusing to complete this task.

ROMBERG/ALPHABET: 0 of 4 clues

Refused

The defendant (Brooke Trader) was handcuffed and taken into custody. Ofc. Culberson conducted a inventory of the vehicle incident to arrest, for the purpose of impounding the vehicle. While looking through the glove box of the vehicle Ofc. Culberson discovered a Walgreens bag with (5) Smirnoff Vodka mini bottles, two of which were empty and (3) of which were not open.

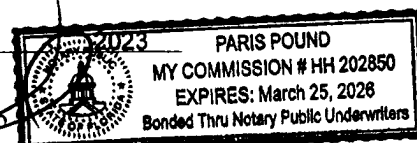
Trader was then transported to the Breath Alcohol Testing facility at the Palm Beach County Jail. Upon my arrival at 2036 hours, I completed the required 20-minute observation. I then requested DEFENDANT to provide a sample of her breath for the purpose of determining the alcohol content. The DEFENDANT blew twice resulting in an initial blow of .280 and a final blow of .282.

Based on the above facts, probable cause does exist to charge DEFENDANT with one count of DUI pursuant to FSS 316.193(1) A. I issued the DEFENDANT the following citations: DUI.

The foregoing instrument was sworn to before me this 19th day of December 2023
by Officer Ofc. Cushnie

Arresting Officer

Notary/Police Officer (FSS 117.10)



SUBJECT: _____ 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) _____

WHITE: STATE ATTY.

YELLOW: DHSMV

PINK: CENTRAL RECORDS

GOLD: JAIL

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: _____

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

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: 80-006239 Software: 8100.27
Date of Test: 12/19/2023

Date of Last Agency Inspection: 12/08/2023
Observation Period Began: 20:36
Subject's Name: BROOKE L TRADER

DOB: 08/14/1987 Sex: F

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	21:10
	Air Blank	0.000	21:10
	Control Test	0.080	21:11
	Air Blank	0.000	21:11
	Subject Sample #1	0.280	21:13
	Air Blank	0.000	21:14
	Air Blank	0.000	21:16
	Subject Sample #2	0.282	21:16
	Air Blank	0.000	21:17
	Control Test	0.078	21:17
	Air Blank	0.000	21:18
	Diagnostics Check	OK	21:18

Cylinder Lot: 06723080A5
Exp: 04/05/2025

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 PARIS D POUND, 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: 12/19/2023
Signature

Sworn to (or affirmed) before me this 19 day of December, 2023
Signature of Notary Public-State of Florida [Signature] Printed Name of Notary Public-State of Florida OFF. M. CUSHNIE

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.

WITNESS LIST

Case No: 23-016563 Defendant: Brooke Leann Trader

Arresting Officer: Ofc. Cushnie
Address: Delray Beach Police Department
Phone Numbers: Home: 561-243-7800 Work: _____

Name: Ofc. Culberson
Address: Delray Beach Police Department
Phone Numbers: Home: 561-243-7800 Work: _____
Can testify to: Physical control of the vehicle & Tow

Name: Ximena Moscoso
Address: 3775 Fieldstone Blvd, Unit 1403, Naples, FL, 34109
Phone Numbers: Home: 239-821-0027 Work: _____
Can testify to: Physical control of the vehicle

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: _____

TESTING FACILITY TASK REPORT

AGENCY:
SUBJECT:
CASE NUMBER:
DATE:
VIDEO DVD NUMBER:
BEGINNING TIME:
ENDING TIME:

BREATH TESTS RESULTS: 1) TIME A.M. P.M. 2) TIME A.M. P.M.
3) TIME A.M. P.M. 4) TIME A.M. P.M.

BREATH OPERATOR:

MAINTENANCE TECHNICAN:

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE:

CLOTHING:

MEDICAL CONDITIONS:

MEDICATIONS:

OTHER:

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 20:36 HRS.
SUBJECT: REFUSED TO TAKE TEST
A/O: READ I/C
SUBJECT: STATED SHE UNDERSTOOD I/C AND AGREED TO TAKE TEST
A/O: READ RIGHTS
SUBJECT: STATED SHE UNDERSTOOD RIGHTS
TECH: READ TEST RESULTS
SUBJECT: STATED SHE UNDERSTOOD TEST RESULTS
A/O: CONDUCTED Q&A
SUBJECT: ANSWER QUESTIONS



Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel	
	<input type="checkbox"/>	119.071(2)(e)	Confession	
Public Info. Exemptions	<input type="checkbox"/>	FL Const. Art. I, s. 16(b)(5)	Marsy's Law – victim information shall be redacted. The term "victim" also includes the victim's lawful representative, the parent or guardian of a minor, or the next of kin of a homicide victim. The term "victim" does not include the accused (ref. page 99 of the CRTM for additional information)	
	<input type="checkbox"/>	119.071(2)(j)	Home/employment telephone number, home/employment address, or personal assets of a person who has been the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence	
	<input type="checkbox"/>	119.0712(2)	Personal information contained in a motor vehicle record	
	<input type="checkbox"/>	316.650(11)	Driver information contained in a uniform traffic citation	
	<input type="checkbox"/>	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
Florida Rules of Judicial Administration 2.420	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses	
	<input type="checkbox"/>			
Other	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			

REVIEW COMPLETED BY

Booking Number: 2023033232	Date: 12/20/2023
	Specialist Name/ID#: MTools #8557