

J#

50-2025 mm 001176AMB

D# 319

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

OBTS Number	Agency ORI Number FLO: 5 0 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 0 6 1- 25032417	
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	If Weapon Seized Enter Type	Multiple Clearance Indicator	
Location of Arrest (including Name of Business) 13418 SAND RIDGE RD			PALM BEACH GARDENS FL 33418		Location of Offense (Business Name, Address) 13418 SAND RIDGE RD Palm Beach Gardens, FL 33418	
Date of Arrest 02/09/25	Time of Arrest 0020	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle

Name (Last, First, Middle) Sievert Christina Ortiz	Alias (Name, DOB, Soc. Sec. #, Etc.)	
Race W - White B - Black	Sex F	Date of Birth 03/26/1964
Height 5'08	Weight 140	Eye Color BROWN
Hair Color BROWN	Complexion MEDIUM	Build MEDIUM
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status Single
Local Address (Street, Apt. Number) 13418 SAND RIDGE RD		Mobile Phone 832-306-2228
Permanent Address (Street, Apt. Number) SAME AS LOCAL		Address Source OTHER
Business Address (Name, Street)		Occupation N/A
D/L Number, State S163114646060, FL	Soc. Sec. Number	INS Number
Place of Birth (City, State) Tehuacan, Mexico		Citizenship US

Co-Defendant (Last, First, Middle) Steverson Elysia Kay	Race O	Sex F	Date of Birth 09/17/2004	<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 (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

<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other	Name (Last) (First) (Middle)	Residence Phone
Address (Street, Apt. Number) (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) 355-6511) informed of any change of address.

Yes, by: (Name) No (Reason)

Property Crime? Yes No

Description of Property

Value of Property

School Attended

Grade

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 Simple Battery (Domestic)		Counts 1	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 784.03(1a1)		Violation of ORD #				
Drug Activity UNK	Drug Type UNK	Amount / Unit	Offense # 25032417	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				

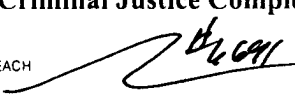
Location (Court, Room, Number, Address) **FILED PDC GUN CLUB '25 FEB 9 AM 6:55**

Court Date and Time	Month	Day	Year	Time	A.M.	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 02/09/25		

I consent to receive text reminders of court date(s) and times for this case by automated technology to the mobile number identified above. I understand that standard text message rates may apply, and that I may revoke this consent via the text message system if I choose.

HOLD for other agency	Signature of Arresting Officer X	Name Verification (Printed by Arrestee)
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	Name of Arresting Officer (Print) D/S J. ROSS	(PRINT) FEB 9 AM 3:27
<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other	I.D. # 6691	PAGE 1 OF 2
Witness Deputy Beardo	Transporting Officer D/S J. ROSS	Agency PBSO
I.D. # 1342	I.D. # 6691	Witness here if subject signed with an "X"

PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile
ADMIN	OBTS Number	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	
	Agency Report Number 06- 25032417	Special Notes			
DEF	Name (Last, First, Middle) Sievert Christina Ortiz		Alias	Race W	Sex F
	Date of Birth 03/26/1964				
CHARGES	Simple Battery (Domestic)		784.03(1a1)		
VICTIM	Victim's Name (Last, First, Middle) Dower Michael Joseph		Race W	Sex M	Date of Birth 11/02/1992
	Local Address (Street, Apt. Number) 13418 Sand Ridge Road		(City) West Palm Beach, FL 33418	(State) (zip) 33418	Phone 561-389-6648
	Business Address (Name Street) UNK		(City)	(State) (zip)	Phone UNK
<p>The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The Person taken into custody</p> <p><input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ <input type="checkbox"/> confessed to _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>08</u> day of <u>February</u>, 20<u>25</u> at <u>11:50</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p>					
<p><input type="checkbox"/> Marsy's Law CVI FL. Const. Art.1 § 16(b)</p> <p>On February 08, 2025 at approximately 11:50 pm I arrived a 13418 Sand Ridge Rd Palm Beach Gardens an unincorporated area of Palm Beach County in reference to a possible domestic dispute. Upon my arrival a witness met me at the front entry of the driveway and stated that her uncle and aunt were still fighting, she was later identified as Angelica Ortiz DOB 06-28-01. I hurried into the front door of the residence where I saw (DEF) Christina R. Sievert DOB 03/26/64 in the bedroom pushing the (VIC) Micheal J. Dower DOB 11/02/1992 with one hand and holding what appeared to be one of his fingers on his right hand, once the DEF noticed me standing inside the residence the physical contact stopped and the DEF walked out of the bedroom toward me stating that VIC needed to leave. I separated the individuals involved and spoke to the VIC first.</p> <p>Vic stated that he was involved in a verbal argument with the DEF, he asked her if DEF wanted to go look at the stars outside with him. VIC stated that the DEF asked him if he wanted to watch the stars with her Crackhead niece, VIC stated that DEF has a drinking issue and started yelling, that is when Cristina Ortiz DOB 10/30/02 and (DEF #2) Elysia K. Steverson DOB 9/17/2004 exited the bedroom and sat down at the table just outside of the kitchen area. VIC stated the verbal argument continued, he had a water bottle in his hand and slung water in the direction of Cristina Ortiz and the table area, VIC stated he had the bottle in his hand and on the back swing let go unintentionally hitting Cristina Ortiz about her person. VIC stated that he walked toward Cristina Ortiz and DEF#2 stood up from the table and got in between both parties. VIC stated that he walked into the living room area away from everyone, that is when DEF, DEF#2, Cristina Ortiz followed continuing the verbal argument. VIC stated that all three individuals came close enough to him and that is when DEF grabbed his right ring finger and stated twisting it in an attempt which he believed to break his finger. VIC stated while his finger was being twisted he was struck in the left side with three close fist strikes, which he saw DEF throw the punches. VIC stated that he was trying to get away from the situation at that same time DEF #2 struck him with close fists slaps about his head, forehead, face, neck, and back and pushed him several times. VIC stated he was struck several times between both defendants and felt as if he was cornered and attacked unable to get away.</p>					
ADMINISTRATIVE	<p>STATE OF FLORIDA COUNTY OF PALM BEACH D/S J. ROSS <i>[Signature]</i> (ID #) <u>6691</u> (Signature of Arresting/Investigative Officer)</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>09</u> day of <u>FEBRUARY</u>, 20<u>25</u> by <u>D/S J. ROSS</u> <u>6691</u> (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>KNOWN</u> <u>D/S E. DAVIS #8307</u></p> <p>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>				

		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile
ADMIN	OBTS Number	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06- 25032417			
	Agency ORI Number FLO 500000						
DEF	Charge Type Check as many as apply.	Special Notes					
	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other						
CHARGES	Name (Last, First, Middle) Sievert Christina Ortiz	Alias		Race W	Sex F	Date of Birth 03/26/1964	
	Simple Battery (Domestic)	784.03(1a1)					
VICTIM	Victim's Name (Last, First, Middle) Dower Michael Joseph	Race W		Sex M	Date of Birth 11/02/1992		
	Local Address (Street, Apt. Number) 13418 Sand Ridge Road	(City) West Palm Beach, FL 33418	(State) (zip)	Phone 561-389-6648	Address Source		
	Business Address (Name, Street) UNK	(City)	(State) (zip)	Phone	Occupation UNK		
	The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The Person taken into custody <input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.						
On the <u>08</u> day of <u>February</u> , 20 <u>25</u> at <u>11:50</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)							
PROBABLE CAUSE STATEMENT	<input type="checkbox"/> Marsy's Law CVI FL. Const. Art. 1 § 16(b)						
	<p>I spoke to DEF who stated that a verbal altercation between her, the VIC and her nieces was happening, VIC threw water at Cristina Ortiz and she was not going to let the disrespect continue. DEF stated that VIC needed to leave and summarized that her boyfriend of five years needed to leave and be more respectful. Then described past incidents of domestic battery where he was taken to jail.</p>						
	<p>I spoke to Cristina Ortiz who stated that she heard her Aunt and boyfriend arguing and came out of her room with DEF#2 and sat at the table that is when VIC tossed water in her direction because of the verbal exchange between each other. Ortiz said that the verbal argument continued and they followed the VIC into the living room where the incident became physical. Ortiz insisted that VIC tried to be a man and stand his ground but everyone was being physical, not providing specifics.</p>						
	<p>I spoke to DEF #2 who confirmed Cristina Ortiz's story and added that she involved herself to separate the issue and defend Ortiz and DEF, DEF#2 said that the VIC began to talk about her dead brother and the argument continued. DEF #2 stated that she did indeed push, slap and punch VIC during the incident in an attempt to protect Ortiz and the DEF.</p>						
	<p>I then spoke to Angelica Ortiz DOB 06/28/01 who first heard the verbal altercation and exited her bedroom where she witnessed the physical altercation and begged for the VIC to leave in concern for his safety because she knows her sister and DEF#2.</p>						
	<p>Based on my investigation DEF committed Domestic Simple Battery contrary to FSS 784.03 (1a1). DEF #2 committed Simple Battery contrary to FSS 784.03 (1a1). Both DEF and DEF#2 were taken into custody on scene, both were placed in handcuffs which were double locked and checked for tightness. DEF was placed in the rear of my issued marked green and white without incident, DEF#2 was placed in the rear of D/S Davis's #8307 marked green and white, both were seat belted in and transported to 3228 Gun Club Rd West Palm Beach, The Criminal Justice Complex. Both were turned over to corrections personnel without incident.</p>						
	STATE OF FLORIDA COUNTY OF PALM BEACH  D/S J. ROSS (ID#) 6691 (Signature of Arresting/Investigative Officer)						
ADMINISTRATIVE	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>09</u> day of <u>FEBRUARY</u> , 20 <u>25</u> by <u>D/S J. ROSS 6691</u> (Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced <u>KNOWN</u> <u>D/S E. DAVIS #8307</u>						
	Notary Public, Clerk of Court, Officer (F.S.S. 117.10)						

VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been committed:

- Homicide (Ch. 782)
- Attempted Murder
- Stalking (F.S. 784.048)
- Domestic Violence - (This includes any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking or any criminal offense resulting in physical injury or death of one family member or household member by another, who is or was residing in the same single dwelling.
- Sexual Offense (Ch. 794)
- Attempted Sexual Offense
- Dating Violence

Upon completion, this form must accompany the booking paperwork.
If applying for a warrant, attach this form to the filing packet.

1. Incident Report #: 25032417 Agency: PBSO
Offense: Simple Battery (Domestic)
Suspect/Offender: Name (Last) Sievert (First) Christina (Middle) Ortiz
D.O.B. 03/26/1964 Race: H Sex: F

2. Warrant #(s): _____
Name (Last, First)

3.a. Victim's name: Dower Michael D.O.B. 11/02/1992 Race: W Sex: M
Address: 13418 Sand Ridge Road
City: Palm Beach Gardens State: FL Zip: 33418
Home #: 561-389-6648 Work #: _____ Other: _____

b. Victim's next of kin, friend or neighbor: (Last) _____ (First) _____
Address: _____
City: Palm Beach Gardens State: FL Zip: 33418
Home #: _____ Work #: _____ Other: 561-542-4682

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY BE SUBJECT TO CONFIDENTIALITY.

Victim/Relation Notification Waiver and Confidential Information Request.

(check applicable boxes)

- Waiver:** I choose not to be notified when the arrestee is released from custody.
- Confidential:** I request the information on this form be kept confidential (applicable only to sexual battery, stalking, child abuse, harassment or domestic violence cases).

Signature of person waiving notification: _____
Printed name of person waiving notification: Name (Last, First) Dower Michael
Deputy's Name: D/S J. ROSS I.D. # 6691 Date: 02/09/25

White = Corrections or State Attorney (Warrant Application) Yellow = Warrants Section Pink = Central Records

SUSPECT/OFFENDER Sievert

Christina

Ortiz

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT #:

Palm Beach County Sheriff's Office
DOMESTIC VIOLENCE/DATING VIOLENCE SUPPLEMENTAL PROBABLE CAUSE FORM
 (Submit this form with the original Probable Cause affidavit)

Name (Last, First, Middle)
Suspect: Sievert Christina Ortiz **DOB:** 03/26/1964 **Case #:** 25032417

Name (Last, First)
Victim: Dower Michael **DOB:** 11/02/1992 **Race:** W **Sex:** M

Relationship between Victim and Defendant: Boyfriend / Girlfriend

Photographs: Scene Yes No **Victim** Yes No **Defendant** Yes No

911 Call: Yes No **Caller:** ANEGELICA ORTIZ

Weapon Used: Yes No **Type:** HANDS

Witness: Yes No **Name:** (Last) ORTIZ (First) ANGELICA (Middle)

Victim Pregnant: Yes No **If yes,** weeks months

Injuries: Yes No **Description:** REDNESS OS STRIKES

Medical Treatment: Yes No

At Scene: Yes No **Paramedics:** _____

At Hospital: Yes No **Hospital:** N/A **Doctor:** N/A

Are Children Living in Home? Yes No **DCF Notified?** Yes No

Name: _____ **DOB:** _____

Name: _____ **DOB:** _____

Name: _____ **DOB:** _____

Injunction Yes No **Case #:** _____

No Contact Order Yes No **Case #:** _____

Alcohol or Drugs Yes No Unknown

Prior History of Domestic/Dating Violence Yes No

Defendant's Statements Yes No **If yes, written** recorded oral

First words Defendant said when you responded to scene: MY BOYFRIEND HAS TO GO

Victim's Statements Yes No **If yes, written** recorded oral

First words Victim said when you responded to scene: THEY ALL ATTACKED ME

Did the Victim contact anyone other than police within an hour of the incident regarding the incident?

Yes No **If yes, name:** _____ **phone:** _____

Observations of Victim (Physical & Emotional) _____

Upset Crying Fearful Hysterical Afraid Calm Nervous

Complained of pain Other

Victim Contact Information: (Last) Dower (first) Michael

Local Address: 13418 Sand Ridge Road PALM BEACH GARDENS, FL 33418

Phone: 561-389-6648

Employer: (Name) UNK (Employer Address) UNK

Name of Relative: (Last) _____ (First) _____ **Phone:** _____

Address: _____

PALM BEACH COUNTY SHERIFF'S OFFICE (PBSO)		Date:	Time:	Case #:
CASE INFORMATION FORM		020925	0030	25032417
CHECK ONE:		<input checked="" type="checkbox"/> PERSON CRIME		<input type="checkbox"/> PROPERTY CRIME
<input type="checkbox"/> NON-CRIME CASE				
Deputy:	ID#:	Dist. / Div.:	Phone:	Case Type/Offense/Crime (do not use signal code):
J Ross	6691	3 RP	6883400	Domestic Battery
<input checked="" type="checkbox"/> Victim : <input type="checkbox"/> Witness • Name (Last, First, M.):	Race:	Sex:	D.O.B.:	Phone:
Michael J	W	M	110292	561 389 6648
Victim/Witness Address:	City/State/Zip			
13418 Sand Ridge Rd	WPC FL 33418			

DEPUTY TO VERIFY AND CHECK APPLICABLE BOX(ES) - VICTIM/WITNESS TO INITIAL APPLICABLE SECTIONS - WRITE LEGIBLY

A VICTIM / WITNESS RIGHTS BROCHURE - ACKNOWLEDGEMENT

BROCHURE TO BE PROVIDED TO ALL CRIME VICTIMS AND/OR WITNESSES (PBSO #0147)

I, [Initials: MJ], have received a copy of the Victim Rights Brochure and/or acknowledge I can view electronically via www.pbso.org.

B VICTIM NOTIFICATION (V.I.N.E.) - FOR CORRECTIONS TO CONTACT VICTIM UPON JAIL RELEASE

REQUIRED IF ARREST OR WARRANT FOR HOMICIDE, ATTEMPTED MURDER, SEXUAL OFFENSES, ATTEMPTED SEXUAL OFFENSES, STALKING, DOMESTIC/DATING VIOLENCE - TO INCLUDE ANY ASSAULT, AGG. ASSAULT, BATTERY, AGG. BATTERY, SEXUAL ASSAULT, SEXUAL BATTERY, STALKING, AGG. STALKING, VIOLATION OF NCO OR INJUNCTION, OR ANY CRIMINAL OFFENSE RESULTING IN PHYSICAL INJURY OR DEATH OF ONE FAMILY MEMBER OR HOUSEHOLD MEMBER BY ANOTHER, WHO IS OR WAS RESIDING IN THE SAME SINGLE DWELLING.

Suspect Name (Last, First, M.):	Race:	Sex:	D.O.B.:

I understand that I may be notified when the arrestee is released from PBSO custody at the phone number I provided above. I request the following person be notified if I was not contacted (optional):

Name: _____ Address: _____ Primary Phone: _____
(Next of Kin/Neighbor/Friend/etc.)

(optional) I choose **NOT** to be notified when the arrestee is released from custody. [Initial _____]

Deputy to check one: () ARREST or () WARRANT #

C MARSY'S LAW - CONFIDENTIAL VICTIM INFORMATION - FL Constitution, Article 1, §16(b)

CRIME REPORT ONLY - MUST BE LISTED AS A "VICTIM" IN AN OFFENSE REPORT (or next of kin); NOT A BUSINESS, COMPLAINANT OR OTHER

I, [Initials _____] request confidentiality pursuant to Marsy's Law, FL Constitution, Article 1, §16(b) as provided below: As a victim, I have the right under the Florida Constitution to prevent the disclosure of certain information or records that could be used to locate or harass me or my family, or which could disclose confidential or privileged information about me. I do hereby request that the email address, phone number and work and business addresses of me and my family be redacted from my records indefinitely, if my records are requested pursuant to a public records request.

D CONFIDENTIAL VICTIM INFORMATION - FS 960 - ONLY APPLIES TO SPECIFIC CRIMES LISTED BELOW

CRIME REPORT ONLY - MUST BE LISTED AS A "VICTIM" IN AN OFFENSE REPORT (or next of kin); NOT A BUSINESS, COMPLAINANT OR OTHER

I, [Initials _____], as a victim (or spouse/former spouse) of Harassment (FSS 784.048(1)(a)), Sexual Battery, Aggravated Child Abuse, Domestic Violence (live together, lived together or have a child in common), Aggravated Stalking (FSS 784.048 (3)(4)), or Aggravated Battery (FSS 784.045), I do hereby request that my home and employment telephone number, home and employment address and personal assets be redacted from my records requested pursuant to public records request for a period of five (5) years from the date noted on this form.

E AUTHORIZED RECORD EXEMPTION(S) - PUBLIC RECORDS ACT - FS 119.071(4)(d) - VERIFY EMPLOYMENT

CRIME OR NON CRIME REPORT - MUST FIT THE CRITERIA DESCRIBED

I, [Initials _____], attest that I am an individual exempt under FS 119.071(4)(d) (to include a spouse or child of), a current or former Law Enforcement Officer, Firefighter, Justice or Judge, General Magistrate, Code Enforcement Officer, Child Enforcement Hearing Officer, State Attorney, Public Defender, U.S. Attorney, U.S. Judge, U.S. Magistrate, or other authorized person and hereby request my information be redacted from public record.

CURRENT or FORMER exempt position: _____ Name of current or last agency: _____

FILED PBC - GUN CLUB
25 FEB 9 AM 6:56

SIGN BELOW

I have read and initialed the applicable section(s) and sign of my own free will (if a minor, a parent or guardian must sign):

Print Parent/Guardian/Next of Kin name (if applicable):

MY SIGNATURE: X [Signature] Date: 02/09/25

Deputy Signature: _____ ID#: 6691

If Criminal Case: _____
Scanned to Victim Advocate by ID#: _____



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: 2025003600	Date: 2/9/2025
	Specialist Name/ID#: Joe Kovach 44820