

23 CT14761M3

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

Check If Supplement is Attached

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Copies [1] Juvenile [N]

OBTS Number	ARREST / NOTICE TO APPEAR Juvenile Referral Report	
Agency ORI Number FLO: 5, 0, 0, 0, 0, 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 0 6 1-23101052
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
Location of Arrest (Including Name of Business) BOYNTON BEACH BLVD & S. MILITARY TRAIL, BOYNTON BEACH, FL 33437		Location of Offense (Business Name, Address) BOYNTON BEACH BLVD & S. MILITARY TRAIL, BOYNTON BEACH, FL 33437
Date of Arrest 08/18/2023	Time of Arrest 21:11	Booking Date, Booking Time, Jail Date, Jail Time, Location of Vehicle

Name (Last, First, Middle) RICKARDS, COLLEEN, MARIE		Alias (Name, DOB, Soc. Sec. #, Etc.)	
Race W - White B - Black	Sex W F	Date of Birth 2/19/1968	Height 5'07"
Weight 200	Eye Color BROWN	Hair Color BLONDE	Complexion LIGHT
Build LARGE	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE		
Local Address (Street, Apt. Number) 14160 NESTING WAY APT A, DELRAY BEACH, FL 33484	City DELRAY BEACH	State FL	Zip 33484
Permanent Address (Street, Apt. Number)	City	State	Zip
Business Address (Name, Street)	City	State	Zip
D/L Number, State R263113685590, FL	Soc. Sec. Number	INS Number	Place of Birth (City, State) BOYNTON BEACH, FL
Citizenship U.S.		Marital Status Married	
Religion CATHOLIC		Indication of Alcohol Influence Drug Influence Y N Unk	
Residence Type: 1. City 2. County 3. Florida 4. Out of State		2	
Address Source DEFENDANT - VERBAL		Occupation TEACHER	

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
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) (City) (State) (Zip)		Business Phone () () ()
Notified by: (Name)	Date	Time
Released to: (Name)	Relationship	Date
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 (561) 355-8511) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No (Reason)		School Attended
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No	Description of Property	Value of Property

Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	F. 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 D.U.I.	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)(C)	Violation of ORD #						
Drug Activity N	Drug Type N	Amount / Unit	Offense # 23101052	Warrant / Capias Number	Bond					
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" 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 checked="" 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 checked="" 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) Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600
Court Date and Time Month SEPTEMBER Day 14TH Year 2023 Time 08:30 A.M. <input checked="" type="checkbox"/> P.M. <input type="checkbox"/>

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 08/18/2023

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 AUG 19 2023	Signature of Arresting Officer X [Signature]	Name Verification (Printed by Arrestee) (PRINT)
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	Name of Arresting Officer (Print) INV. A. SENTMANAT	I.D. # 24968
<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other	Transporting Officer INV. A. SENTMANAT	I.D. # 24968
Agency PBSO	Witness here if subject signed with an "X"	PAGE 1 OF 1

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 18TH DAY OF AUGUST 2023, AT 19:56 AM PM

SUBJECT: RICKARDS, COLLEEN, MARIE CASE NUMBER: 23101052

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV. A. SENTMANAT

PERSONAL CONTACT

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

On Friday August 18, 2023 at approximately 2039hrs I responded to Boynton Beach Blvd and S. Military Trail, Boynton Beach, FL 33437 to a traffic crash (PISO case #23101031) in reference to a D.U.I. investigation for a possible impaired driver. Upon arrival I made contact with D/S K. Neal #7660 and he advised the following: On August 18th, 2023 at approximately 8:00 p.m., I was traveling along Boynton Beach Blvd and rolled up on a three vehicle in line collision traffic crash on Boynton Beach Blvd along the westbound lanes of travel just west of South Military Trail located in unincorporated Boynton Beach, Florida, Palm Beach County. I then learned the following upon completing the traffic crash investigation, PISO case number 23-101031: A red in color Mitsu/Lancer FL tag "EF84DZ" attached and a black in color Toyota/ Tacoma FL tag "IY77F1" attached had been traveling westbound along the outside lane of travel on Boynton Beach Blvd; A silver Volvo Jetta FL tag "BZ12EM" attached was also traveling westbound along the outside lane of travel just ahead of the Mitsu/ Lancer and the Toyota/ Tacoma. The Volvo had come to a sudden stop; due to a possible vehicle defect while still in the outside lane. A chain reaction traffic crash occurred between the Toyota and the Mitsu, in which the Toyota subsequently impacted the rear driver's side corner bumper area of the Volvo, as it appeared the Toyota was trying to avoid collision with the Volvo. I observed the driver of the Volvo/ Jetta Colleen to be seated in the driver's seat of the vehicle; determined to be the current registered owner and was the sole occupant, as well. I asked the driver for her license and registration paperwork and observed Colleen to be very slow in her movements; slowly fumbling through various cards and only providing a registration. Colleen had also been drinking liquid from a starbucks cup while speaking to me. I continued on with my crash investigation completing the on scene required documentation for the driver's exchange. I again made contact with Colleen; still seated in the driver's seat asking her if she found her license yet. I then observed the drivers license laying in plain view right in front of her on the center console next to her purse; I then pointed this out to Colleen. Colleen stated that she had already given the license to my partner, D/S K. Thomas ID 41476, which did not occur. I then asked Colleen if she had been drinking, which she replied "no." I asked Colleen to exit the vehicle where I observed her to be very unsteady on her feet; unable to maintain her balance and had to continuously hold the door and roof. Colleen explained that she has not been drinking, but takes Anxiety medication. I was unable to observe any odors; however, I had concerns due to the above mentioned.

OBSERVATION OF DRIVER:

Upon making contact with the defendant who was standing next to her vehicle. I immediately smelled an obvious odor of an unknown alcoholic beverage coming from her breath as we spoke. I observed the defendant's eyes to be glassy, watery, and red. I also observed the defendant to have a slow and slurred speech. The defendant had a pale and flushed face. The defendant was asked to speak with me in front of my patrol car, as she stepped towards my car she staggered to the side and had an unstable balance. I also observed the defendant to have a sway as she stood normally without walking. After a short while sitting in the backseat of my vehicle the interior had an odor of an unknown alcoholic beverage.

DRIVER'S STATEMENTS:

The defendant stated she has no physical defects or injuries. She stated she has no medical conditions except for Anxiety. She stated the only prescription medication she was taking was for anxiety; but did not know the name of it. She stated she has not smoked marijuana or used any illegal drugs today. She stated she had nothing to drink. While in my vehicle on the way to the B.A.T. she spontaneously uttered, "This makes me want to drink more."

ODORS:

An obvious odor of an unknown alcoholic beverage coming from his breath which intensified as he spoke with me.

GENERAL OBSERVATIONS

SPEECH: Slow, slurred some words.

ATTITUDE: Cooperative

CLOTHING: Blue shirt, blue leggings, and gray sneaker.

MEDICAL/OTHER: Medicine for anxiety.

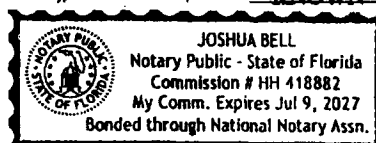
STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. A. SENTMANAT
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 18th day of AUGUST 2023 by INV. A. SENTMANAT

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

Joshua Bell (#8650)
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



SUBJECT: RICKARDS, COLLEEN, MARIE CASE NUMBER 23101052

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|---|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT |
| <input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input checked="" type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input checked="" type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

The defendant was placed into the instructional stance for Horizontal Gaze Nystagmus. She verbally identified the red stimulus that I was holding up. She was told to follow the stimulus with her eyes only and not to move her head. I checked her eyes for equal pupil size, equal tracking, and resting nystagmus. I observed a lack of smooth pursuit in both eyes. I observed distinct and sustained nystagmus at maximum deviation in both eyes. I observed onset of nystagmus prior to 45 degrees in both eyes. She was reminded several times not to move her head. I did not observe any vertical nystagmus in neither eye. She swayed from side to side throughout this process and kept separating her feet to steady herself.

WALK & TURN:

I explained and demonstrated the instructions for the Walk & Turn to her. She stated she understood the instructions and had no questions for me. She failed to maintain the instructional stance by separating her feet help steady herself. She swayed from side to side. She did not walk heel to toe, stepped off the line, stopped to steady herself, took more than nine steps, did not count the steps out loud, made an improper turn. She used her arms to assist in balance.

ONE LEG STAND:

I explained and demonstrated the instructions for the One Leg Stand to her. She stated she understood the instructions and had no questions for me. She failed to maintain the instructional stance by separating her feet to help steady herself. She swayed from side to side. She lowered the foot several time, did not count out loud, and did not look down at her foot.

FINGER TO NOSE:

I explained and demonstrated the instructions for the Finger to Nose task to her. She stated she understood the instructions and had no questions for me. She failed to maintain the instructional stance by separating her feet to help steady herself. She missed all attempts with both the right and left hand. She used the pad of his fingers, touched under the nose and to the side of the nose. I had to remind her several times to drop the hand the moment she touches the tip of the nose. She started this task without being told to start and raised her left arm and I had not said anything.

ROMBERG ALPHABET:

I explained and demonstrated the instructions for the Rhomberg Alphabet task to her. She stated she understood the instructions and had no questions for me. She failed to maintain the instructional stance by separating her feet to help steady herself. She swayed from side to side. She did not properly recite the Alphabet as instructed.

BREATH TEST RESULTS: 1) .187 2) .187 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. A. SENTMANAT

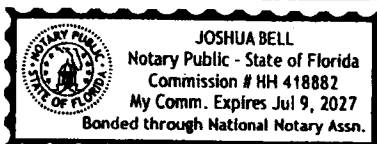
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 18th day of AUGUST 2023 by INV. A. SENTMANAT

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

Joshua Bell (#8656)

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





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

PBSO CASE # 23101052 PBSO ZONE 6-41

AGENCY CASE # _____ CRASH CASE # 23101031

TIME OF STOP/CRASH 19:56 DATE 08/18/2023 DAY Friday

SUBJECT'S NAME RICKARDS, COLLEEN, MARIE RACE W SEX F

HGT 5'07" WGT 200 DOB 2/19/1968

LOCATION BOYNTON BEACH BLVD & S. MILITARY TRAIL, BOYNTON BEACH, FL 33437

ARRESTING OFFICER'S NAME & ID INV. A. SENTMANAT (24968) AGENCY Palm Beach County Sheriff's Office

DIVISION: CID/DUI

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 21:42

ARREST TIME 21:11

BREATH RESULTS:

- 1) .187
- 2) .187
- 3) —
- 4) —

TESTING OFFICER'S ID 8656 PBSO VIDEOTAPE # _____

NOT A CERTIFIED COPY

WITNESS LIST

CASE NUMBER: 23101052

ARRESTING OFFICER: INV. A. SENTMANAT

ADDRESS: CID/DUI

PHONE NUMBERS (HOME): _____ (WORK) 561-688-3400

CAN TESTIFY TO: FACTS OF THE CASE AND DUI INVESTIGATION.

NAME: D/S K. NOEL #7660

ADDRESS: 3228 GUN CLUB ROAD, WEST PALM BEACH, FL 33406

PHONE NUMBERS (HOME) _____ (WORK) 561-688-3400

CAN TESTIFY TO: INVESTIGATED THE TRAFFIC CRASH/REPORT, AND SIGNS OF DRIVERS IMPAIRMENT.

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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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: _____

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: RICKARDS, COLLEEN MARIE CASE NUMBER: 23-101052

DATE: Aug 18, 2023 VIDEO DVD NUMBER: N/A

BEGINNING TIME: 2209 ENDING TIME: 2228

BREATH TESTS RESULTS: 1) .187 TIME 2221 A.M. P.M. 2) .187 TIME 2224 A.M. P.M.

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

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: EMOTIONAL, MAKING JOKES, ARGUMENTATIVE

CLOTHING: GREY LONG SLEEVE SHIRT, BLUE PANTS, GREY SHOES

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: BLOODSHOT, WATERY

COMMENTS:

A/O ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 2142 HOURS

SUBJECT STATED SHE WOULD NOT TAKE BREATH TEST

A/O READ I.C WITH CDL I.C 2 TIMES AND EXPLAINED

SUBJECT STATED SHE UNDERSTOOD I.C

SUBJECT STATED SHE WOULD TAKE BREATH TEST

BREATH TEST COMPLETED

A/O READ RIGHTS

SUBJECT STATED SHE UNDERSTOOD HER RIGHTS

TECH READ BREATH TEST RESULTS

SUBJECT STATED SHE UNDERSTOOD BREATH TEST RESULTS

SUBJECT DECLINED TO ANSWER Q AND A

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: 08/18/2023

Date of Last Agency Inspection: 08/11/2023
Observation Period Began: 21:42
Subject's Name: COLLEEN M RICKARDS DOB: 02/19/1968 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	22:18
	Air Blank	0.000	22:19
	Control Test	0.079	22:19
	Air Blank	0.000	22:20
	Subject Sample #1	0.187	22:21
	Air Blank	0.000	22:22
	Air Blank	0.000	22:24
	Subject Sample #2	0.187	22:24
	Air Blank	0.000	22:25
	Control Test	0.075	22:25
	Air Blank	0.000	22:26
	Diagnostics Check	OK	22:26

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 JOSHUA J BELL, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____

Signature

Date: 08/18/23

Sworn to (or affirmed) before me this 18 day of August, 2023

Inv. A. Self 24968
Signature of Notary Public-State of Florida

INV. A. Sentmanat #24968
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.

SUBJECT: Black ... CASE NUMBER: 72-111052

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: J.V.V. A. S. ... + # 24108



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	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<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"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<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"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input checked="" type="checkbox"/>	316.650(b)	Other: Driver information contained in a uniform traffic citation	6
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2023021657	Date: 8/19/2023
	Specialist Name/ID: Chantel Daniels/30347