

OBT Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		Agency Report Number 06-24052812	
Agency ORI Number FLO: 5 0 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06-24052812	
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	
Location of Arrest (Including Name of Business) 5580 PACIFIC BLVD		Location of Offense (Business Name, Address) BOCA RATON, FL 33433 5580 PACIFIC BLVD		BOCA RATON, FL 33433	
Date of Arrest 04/14/24	Time of Arrest 0038	Booking Date	Booking Time	Jail Date	Jail Time
Location of Vehicle					
Name (Last, First, Middle) ENOE					
Alias (Name, DOB, Soc. Sec. #, Etc.) ESPINOZA TAPIA					
Race W - White B - Black	1 - American Indian O - Oriental/Asian	Sex M F	Date of Birth 06/06/1982	Height 5-03	Weight 140
Eye Color BROWN		Hair Color BLACK		Complexion OLIVE	Build SMALL
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)			Marital Status Single	Religion Catholic	Indication of: Alcohol Influence Drug Influence Y ☐ N ☐ Unk ☐
Local Address (Street, Apt. Number) 5580 PACIFIC BLVD		(City) BOCA RATON, FL 33433	(State)	(Zip)	Mobile Phone 786-642-5684
Permanent Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone
D/L Number, State E215209827060, FL		Soc. Sec. Number		INS Number	Place of Birth (City, State) JINOTEPE, NICARAGUA
Citizenship USA					
Co-Defendant (Last, First, Middle)		Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
Co-Defendant (Last, First, Middle)		Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
☐ Parent ☐ Legal Custodian ☐ Other:		Name (Last) (First) (Middle)		Residence Phone	
Address (Street, Apt. Number)		(City)	(State)	(Zip)	Business Phone
Notified by: (Name)		Date	Time	Juvenile Disposition 1. Handled/Processed within Dept. and Released. 2. TOT HRS/DYS 3. Incarcerated	
Released To: (Name)		Relationship		Date	Time
The above address was provided by defendant and / or defendant's parents. The child and / or parent was told to keep the Juvenile Court Clerk's Office (Phone (561) 355-5511) informed of any change of address.				School Attended	
☐ Yes, by: (Name) ☐ No (Reason)				Grade	
Property Crime? ☐ Yes ☐ No		Description of Property		Value of Property	
Drug Activity N. Possess S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use	K. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other
Charge Description D.U.I.		Counts 1	Domestic Violence ☐ Y ☐ N	Statute Violation Number 316.193(1)	Violation of ORD #
Drug Activity N	Drug Type N	Amount / Unit	Offense #	Warrant / Capias Number	Bond 1,000
Charge Description		Counts	Domestic Violence ☐ Y ☐ N	Statute Violation Number	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
Charge Description		Counts	Domestic Violence ☐ Y ☐ N	Statute Violation Number	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
Charge Description		Counts	Domestic Violence ☐ Y ☐ N	Statute Violation Number	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
Location (Court, Room, Number, Address) South County Courthouse, Courtroom #1, 200 W. Atlantic Ave., Delray Beach, FL 33444 - Ph: (561) 355-2996					
Court Date and Time Month MAY Day 23 Year 2024 Time 0830 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 04/14/24	
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 D/S C. ABBOTT 36122		Name Verification (Printed by Arrestee) APR 14 AM 4:55	
☐ Dangerous ☐ Suicidal		Name of Arresting Officer (Print) D/S C. ABBOTT 36122		(PRINT)	
Initials Deputy D. J. 36122		Transporting Officer D/S C. ABBOTT 36122		Agency PBSO	
Witness here if subject signed with an "X"					

D.U.I. PROBABLE CAUSE AFFIDAVIT



ON THE 14 DAY OF APRIL 20 24 , AT 0018

SUBJECT: ENOE ESPINOZA TAPIA CASE NUMBER: 24052812

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S C. ABBOTT 36122

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

I made contact with Joanne Marchionne, Jaylen Basss, and Victor Marchionne who were in a vehicle following Enoe Espinoza Tapia as she was driving. Joanne advised she was traveling west on Sw 18th st when she observed a vehicle in front of her going in the exit side of different communities as she was driving. Joanne saw the vehicle sitting in the middle of the roadway and thought it broke down. Joanne then followed the vehicle where the vehicle then struck a curb as it was traveling. Joanne witnessed the vehicle Joanne then observed the vehicle pull into 5580 Pacific Blvd where the female driver wearing a white top and black hair get out of the driver seat and start walking towards the stairs of the apartments. Enoe then walked up the stairs and back down to the bottom where a Deputy then made contact with the driver.

I spoke to Jaylen Bass who stated as they were driving and observed the vehicle swerving as she was going west on Sw 18th. As they followed the vehicle it almost struck curbs and drove the wrong way down roads. They followed the vehicle where it then parked and he observed the female driver get out of the car and start walking towards the stairs. A short while later a Deputy then made contact with the driver.

OBSERVATION OF DRIVER:

Upon making contact with the driver, who was identified as Enoe Espinoza Tapia, I immediately detected an obvious and strong odor of an unknown alcoholic beverage emitting from her person and face area. The odor intensified as I spoke to her. Enoe had an unsteady gate while walking to my patrol vehicle and had difficulties following directions. Enoe had Bloodshot, glassy, watery eyes, Blank stare. Enoe was leaning on a car for balance.

DRIVER'S STATEMENTS:

On scene subject advised [REDACTED] and was coming from Mizner Park in the city of Boca.

Enoe consented to breath and after implied consent was read and explained, Enoe advised she understood.

Enoe refused to participate in the Q&A.

ODORS:

Odor of unknown alcoholic beverage

GENERAL OBSERVATIONS

SPEECH: Slurred, Thick, slow, Rambling, Repetitive

ATTITUDE: Crying, Calm, Argumentative,

CLOTHING: Disheveled clothing

MEDICAL/OTHER: None

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S C. ABBOTT
(Signature of Arresting/Investigative Officer)

D/S C. ABBOTT

36122

The foregoing instrument was sworn to or affirmed and subscribed before me this 14 day of APRIL 20 24 by D/S C. ABBOTT 36122

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

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



MADEIN GONZALEZ
Notary Public
State of Florida
Comm# HH225716
Expires 2/7/2026

SUBJECT: ENOE

CASE NUMBER 24052812

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS / LIGHTED PEN STIMULUS TASK: SFST

- | | |
|---|---|
| ☒ LT EYE-LACK OF SMOOTH PURSUIT | ☒ RT EYE-LACK OF SMOOTH PURSUIT |
| ☒ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | ☒ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| ☒ LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | ☒ RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

Enoe was swaying during the task in a side to side and front to back motion . Enoe had to be reminded numerous times to track the stimulus with her eyes only. Enoe did not keep hands at sides, did not keep head still.

WALK & TURN: SFST

I explained and demonstrated the instructions for the (Walk and Turn) Task for Enoe , whom advised she understood. During the task, Enoe was swaying in a side to side and front to back manner. Enoe was having trouble or could not maintain her balance while in instruction phase. Enoe Started too soon, performed an improper turn other than which was demonstrated, stepped off line multiple times, did not step heel to toe, did not keep arms at sides, used arms to balance by raising them over 6 inches.

ONE LEG STAND: SFST

I explained and demonstrated the instructions for the (One Leg Stand) Task for Enoe , whom advised she understood. During the task, Enoe was swaying in a side to side front to back manner. Enoe began hopping in an attempt to maintain balance. Enoe put her foot down numerous times to regain balance before the 30 second time period had elapsed. Enoe also did not keep feet together, started early, did not look at elevated foot, did not count in appropriate manner (1001,1002,1003,etc.).

FINGER TO NOSE:

I explained and demonstrated the instructions for the (Finger to Nose) Task for Enoe , whom advised she understood. During the task, Enoe was swaying in a side to side manner. Enoe did not touch the tip of nose with finger on (6) of 6 attempts, used incorrect hand, On L1, touched above the tip of the nose. On R1,L2,R2, R3, did not use the tip of finger to touch nose. L3 she touched the area nostril. The sequence used in this task was L,R,L,R,L.

NUMBER COUNT

BREATH TEST RESULTS: 1) .146 2) .143 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S C. ABBOTT
(Signature of Arresting/Investigative Officer)

D/S C. ABBOTT 36122

The foregoing instrument was sworn to or affirmed and subscribed before me this 14 day of APRIL, 2024 by D/S C. ABBOTT 36122

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

KNOWN

[Signature]
Notary Public, Clerk of Court, Officer F.S.S. 117.10



MADELIN GONZALEZ
Notary Public
State of Florida
Comm# HH225716
Expires 2/7/2026

WITNESS LIST

CASE NUMBER: 24 052 812

ARRESTING OFFICER: A12044

ADDRESS: 3228 Gun Club Rd, West Palm Beach, FL 33406

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: DUI PC

NAME: Jaylen Bass

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: Driving Pattern, Wheel Witness

NAME: Victor Marchionne

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: Wheel Witness, Driving Pattern

NAME: Joanne Marchionne

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: Driving Pattern, Wheel Witness

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

WITNESS LIST

CASE NUMBER: _____

ARRESTING OFFICER _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

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PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: ESPINOZA TAPIA, ENOE T

CASE NUMBER: 24-052812

DATE: Apr 14, 2024

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 01:37

ENDING TIME: 02:01

BREATH TESTS RESULTS: 1) .146 TIME 01:52 A.M. ☒ P.M. ☐ 2) .143 TIME 01:56 A.M. ☒ P.M. ☐
3) N/A TIME N/A A.M. ☐ P.M. ☐ 4) N/A TIME N/A A.M. ☐ P.M. ☐

BREATH OPERATOR: M. GONZALEZ #40577

MAINTENANCE TECHNICIAN: J. KARLECKE# 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SPANISH SPEAKER

ATTITUDE: CRYING, ANXIOUS,

CLOTHING: BLUE JEAN OVERALLS, GREY/WHITE TANK TOP, WHITE SNEAKERS

MEDICAL CONDITIONS: ANXIETY

MEDICATIONS: NONE

OTHER:

TRANSLATOR D/S C. GARCIA #21280

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 01:10 HRS.

SUBJECT: ASKED, WHAT WOULD HAPPEN IF SHE REFUSED TO TAKE TEST.

A/O: READ I/C AND EXPLAINED I/C TWO TIMES

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: ATTEMPTED Q & A

SUBJECT: REFUSED QUESTIONS

SUBJECT: Tony Lane I CASE NUMBER: 100-100000

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) _____

SUBJECT: _____ I _____ 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 CSO
Instrument Serial Number: 80-001741 Software: 8100.27
Date of Test: 04/14/2024

Date of Last Agency Inspection: 03/08/2024

Observation Period Began: 01:10

Subject's Name: ENOE I ESPINOZA TAPIA

DOB: 06/06/1982 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	01:48
	Air Blank	0.000	01:49
	Control Test	0.080	01:49
	Air Blank	0.000	01:50
	Subject Sample #1	0.146	01:52
	Air Blank	0.000	01:52
	Air Blank	0.000	01:54
	Subject Sample #2	0.143	01:56
	Air Blank	0.000	01:57
	Control Test	0.079	01:57
	Air Blank	0.000	01:58
	Diagnostics Check	OK	01:58

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 MADALIN GONZALEZ, 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: 04.14.24
Signature

Sworn to (or affirmed) before me this 14 day of APRIL, 2024

D/S C. ABBOTT 36122 D/S C. ABBOTT
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

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☒	119.071(2)(e)	Confession	3
Public Info. Exemptions	☒	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)	5
	☐	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	
	☐	119.0712(2)	Personal information contained in a motor vehicle record	
	☒	316.650(11)	Driver information contained in a uniform traffic citation	11
	☐	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	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	☐	(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	☐			
	☐			
	☐			
	☐			

REVIEW COMPLETED BY

Booking Number: 2024010040	Date: 4/15/2024
	Specialist Name/ID#: J. Gaines/ 44177