

J# 0536077

23CT 15794 SB

D# 3524

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

☐ Check if Supplement is Attached1. Arrest
2. N.T.A.
3. Request for Warrant
4. Request for Capias

1

Juvenile

N

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBT Number		Agency ORI Number FLO: 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 0 6 1 23-106293															
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 0 1													
Location of Arrest (Including Name of Business) 14711 Southern Blvd, Loxahatchee Groves, FL 33470						Location of Offense (Business Name, Address) 14711 Southern Blvd, Loxahatchee Groves, FL 33470															
Date of Arrest 09/03/2023		Time of Arrest 01:43		Booking Date 09/03/2023		Booking Time		Jail Date Jail Time		Location of Vehicle Gardens Towing, 1100 3rd Ave. N, Lake Worth, FL 33460, (561) 985-9272											
Name (Last, First, Middle) Williams, Eron, George											Alias (Name, DOB, Soc. Sec. #, Etc.)										
Race W - White B - Black		1 - American Indian O - Oriental/Asian		Sex B M		Date of Birth 1/30/1973		Height 5'11		Weight 220		Eye Color brown		Hair Color bald		Complexion dark		Build medium			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) None											Marital Status Single		Religion NONE		Indication of: Alcohol Influence Drug Influence		☐ Y ☐ N ☐ Unk				
Local Address (Street, Apt. Number) 144 Alcazar St, Royal Palm Beach, FL 33411						(City)		(State)		(Zip)		Mobile Phone (757) 630 6838		Residence Type: 1. City 2. County 3. Florida 4. Out of State							
Permanent Address (Street, Apt. Number)						(City)		(State)		(Zip)		Phone ()		Address Source DL							
Business Address (Name, Street)						(City)		(State)		(Zip)		Phone ()		Occupation Electrician							
D/L Number, State W452207730300, FL				Soc. Sec. Number				INS Number				Place of Birth (City, State) Jamaica				Citizenship US					
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) 355-8511) informed of any change of address. ☐ Yes, by: (Name) ☐ No (Reason)											School Attended		Grade								
Property Crime? ☐ Yes ☐ No				Description of Property				Value of Property													
Drug Activity M. 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 Driving Under the Influence with property damage				Counts 1		Domestic Violence ☐ Y ☐ N		Statute Violation Number 316.193(3)(c)(1)				Violation of ORD #									
Drug Activity N		Drug Type N		Amount / Unit		Offense # 23-106293		Warrant / Capias Number				Bond OR									
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											FILED PDC - GUN CLUB										
Court Date and Time Month October Day 5th Year 2023 Time 08:30 A.M. ☒ P.M. ☐											23 SEP 4 AM 7:24										
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) 09/03/2023 Date Signed																					
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) (PRINT)													
☐ Dangerous ☐ Substantial				☐ Resisted Arrest ☐ Other				Name of Arresting Officer (Print) Inv. POINTU P. 16032				I.D. # 16032									
Inv. Deputy D. M. (2)				I.D. # 16032				Agency PBSO				Witness here if subject signed with an "X"									
PAGE 1 OF 1																					

SUBJECT: Williams, Esron, George

CASE NUMBER 23-106293

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|---|
| ☒ 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:

Pupils round and equal. No resting nystagmus. Equal tracking. Onset of HGN at approximately 35 degrees. VGN present. LOC present. Swayed during the task.

WALK & TURN:

Williams could not maintain the instructional stance. Once asked to start he used his arms to balance.

ONE LEG STAND:

Williams raised his right leg. He swayed while balancing, used his arms to balance and put his foot down before the end of the task.

FINGER TO NOSE:

Williams used the pad of his finger instead of the tip on all tasks. On task 1 he touched the left side of his nose. He was very slow and deliberate in his movements.

ROMBERG ALPHABET:

Williams recited the alphabet properly but swayed during the task.

For the Romberg balance, he stopped the 30 seconds task at approximately 32 seconds. He swayed during the task.

BREATH TEST RESULTS: 0.137 0.137

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. POINTU P.

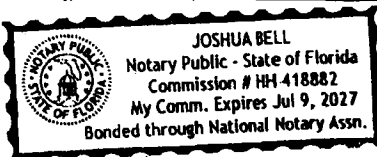
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 3rd day of September 2023 by Inv. POINTU P.

(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)



D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 3rd DAY OF September 20 23, AT 00:28 PM

SUBJECT: Williams, Esron, George CASE NUMBER: 23-106293

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. POINTU P.

PERSONAL CONTACT

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

Christopher Russell was exiting the Boonies Wild West Saloon located at 14555 Southern Boulevard, in Loxahatchee Groves, Palm Beach County, Florida and observed a BMW bearing Florida tag IQ41TY ahead of him exiting the parking lot and entering westbound Southern Boulevard, failing to yield to an a Mercedes bearing Florida tag IW70GX that was driving westbound also on Southern Boulevard. The Mercedes collided with the rear of the BMW. The driver of the Mercedes was identified by his Florida driver license as Donwon Cooley. Cooley sustained injuries in the crash and was transported by Palm Beach County Fire Rescue. The driver and only occupant of the BMW was identified by his Florida driver license as Esron Williams. Williams was also the registered owner of the BMW.

OBSERVATION OF DRIVER:

Williams had glassy and bloodshot eyes. An obvious odor of unknown alcoholic beverage was coming from his person and became stronger when he talked.

DRIVER'S STATEMENTS:

Williams, post Miranda, admitted drinking one Heineken beer at 6 PM at home, and another one at the Boonies Saloon approximately 15 minutes before the crash. He remembered entering into Southern Boulevard and then getting hit from behind. He denied having seen any incoming vehicle.

ODORS:

Obvious odor of unknown alcoholic beverage that became stronger when he talked.

GENERAL OBSERVATIONS

SPEECH: Low, slow

ATTITUDE: Cooperative

CLOTHING: White shirt, blue jeans, brown boots

MEDICAL/OTHER: None disclosed.

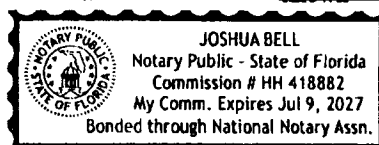
STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. POINTU P.
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 3rd day of September 20 23 by Inv. POINTU P.

(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. 417.10)





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

PBSO CASE # 23-106293 PBSO ZONE 17-11
AGENCY CASE # _____ CRASH CASE # 23-106283
TIME OF STOP/CRASH 00:28 DATE 09/03/2023 DAY Sunday
SUBJECT'S NAME Williams, Esron, George RACE B SEX M
HGT 5'11 WGT 220 DOB 1/30/1973
LOCATION 14711 Southern Blvd, Loxahatchee Groves, FL 33470
ARRESTING OFFICER'S NAME & ID Inv. POINTU P. (16032) AGENCY Palm Beach County Sheriff's Office
DIVISION: CID/DUI
NOTIFIED BY COMMO yes
ARRIVAL AT FACILITY 02:05
ARREST TIME 01:43

BREATH RESULTS:

.135 VNM
.137
.137

TESTING OFFICER'S ID 8656 PBSO VIDEOTAPE # _____

WITNESS LIST

CASE NUMBER: 23-106293

ARRESTING OFFICER: Inv. POINTU P.

ADDRESS: Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) (561) 688 3000

CAN TESTIFY TO: DUI Investigation, see PC

NAME: Russell, Christopher, C

ADDRESS: 540 Coop Rd, Bell Buckle, TN 37020

PHONE NUMBERS (HOME) (786) 391 9139 (WORK) 0

CAN TESTIFY TO: Wheel witness, see recorded statement

NAME: D/S Biastre (#6679)

ADDRESS Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

PHONE NUMBERS (HOME) _____ (WORK) (561) 688 3000

CAN TESTIFY TO: crash investigation

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) 0 (WORK) 0

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 _____

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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: PBSO

SUBJECT: WILLIAMS, ESRON GEORGE

CASE NUMBER: 23-106293

DATE: Sep 3, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0232

ENDING TIME: 0252

BREATH TESTS RESULTS: 1) .135vms TIME 0239 A.M. ☒ P.M. ☐ 2) .137 TIME 0244 A.M. ☒ P.M. ☐
3) .137 TIME 0249 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: SLOW, SLURRED

ATTITUDE: CAREFREE

CLOTHING: WHITE POLO SHIRT, BLUE JEANS, BROWN SHOES

MEDICAL CONDITIONS: UNKNOWN

MEDICATIONS: UNKNOWN

OTHER:

EYES: BLOODSHOT, GLASSY

ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

COMMENTS:

A/O ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0205 HOURS

SUBJECT STATED HE WOULD TAKE BREATH TEST

SUBJECT DID NOT FOLLOW BREATH TEST INSTRUCTIONS, SUBJECT DID NOT BLOW CONTINUOUSLY, SUBJECT KEPT PUTTING HIS TONGUE OVER TIP OF MOUTH PIECE

A/O READ I.C

SUBJECT STATED HE UNDERSTOOD I.C

SUBJECT STATED HE WOULD CONTINUE BREATH TEST

BREATH TEST COMPLETED

A/O READ RIGHTS

SUBJECT STATED HE UNDERSTOOD HIS RIGHTS

TECH READ BREATH TEST RESULTS

SUBJECT STATED HE UNDERSTOOD BREATH TEST RESULTS

SUBJECT DECLINED TO ANSWER Q AND A

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) _____

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 INIURED? 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: Insp. P. P. 100 # 11-54

**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: 09/03/2023

Date of Last Agency Inspection: 08/11/2023

Observation Period Began: 02:05

Subject's Name: ESRON G WILLIAMS

DOB: 01/30/1973 Sex: M

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:	Test	g/210L	Time
	Diagnostics Check	OK	02:35
	Air Blank	0.000	02:35
	Control Test	0.079	02:36
	Air Blank	0.000	02:36
	Subject Sample #1	VNM*	02:39
	Air Blank	0.000	02:40
	Air Blank	0.000	02:42
	Subject Sample #2	0.137	02:44
	Air Blank	0.000	02:45
	Air Blank	0.000	02:47
	Subject Sample #3	0.137	02:49
	Air Blank	0.000	02:50
	Control Test	0.075	02:50
	Air Blank	0.000	02:50
	Diagnostics Check	OK	02:51

*Volume Not Met (0.135 - Breath Sample Not Reliable to Determine Breath Alcohol Level)

Cylinder Lot: 08622080A1
Exp: 06/05/2024

State of Florida, County of Palm Beach

Personally appeared before me the undersigned authority, who (☒) is personally known to me or (☐) produced _____ as identification, and who after being placed under oath, states:

I 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: 09/03/23

Sworn to (or affirmed) before me this 03 day of September, 2023

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.

Florida

DRIVER LICENSE



USA



NOT A CERTIFICATE



**PALM BEACH COUNTY
SHERIFF'S OFFICE**
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☒	119.0712(2)	Other: Personal information contained in a motor vehicle record	13
	☒	316.650(b)	Other: Driver information contained in a uniform traffic citation	5, 6

REVIEW COMPLETED BY

Booking Number: 2023023155	Date: 9/3/2023
	Specialist Name/ID: M. Tooks #8557