23 CT 3158 MB

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

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

☐ Check if Supplement is Attached

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias

Juvenile: N

ADMINISTRATIVE

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number
	FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	0 6 -| 23037103 ( )

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: NONE

Multiple Clearance Indicator: 0 1

Location of Arrest (including Name of Business)	Location of Offense (Business Name, Address)
SOUTHERN BLVD & GEM LAKE DRIVE, WEST PALM BEACH, FL 33406	SOUTHERN BLVD & GEM LAKE DRIVE, WEST PALM BEACH, FL 33406

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
02/16/2023	01:52					SISTER'S TOWING

DEFENDANT

Name (Last, First, Middle): DA ROCHA, JEAN, MARIE

Alias (Name, DOB, Soc. Sec. #, Etc.):

Race (W - White, B - Black, I - American Indian, O -Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	1/18/1990	5'04"	125	BROWN	BLONDE	LIGHT	SMALL

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): TATTOOS - SPINE, BOTH WRISTS, RIGHT RIB, AND BEHIND RIGHT EAR

Marital Status: Married — Religion: CATHOLIC — Indication of: Alcohol Influence ☒ Y ☐ N ☐ Unk; Drug Influence ☐ Y ☒ N ☐ Unk

Local Address (Street, Apt. Number) (City) (State) (Zip)	Mobile Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State
524 NW 54TH STREET, BOCA RATON, FL 33487	(561) 235-6677	2

Permanent Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
,	( )	DEFENDANT - FL D/L

Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation
	( )	CONSTRUCTION

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
D620473905180, FL	[redacted]		NYACK, NY	U.S.

CO-DEF

Co-Defendant (Last, First, Middle)	Race	Sex	Date of Birth	1. Arrested 2. At Large	3. Felony 4. Misdemeanor 5. Juvenile
				☐ 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

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) 355-6511) informed of any change of address. ☐ Yes, by: (Name) ☐ No (Reason)

School Attended — Grade

Property Crime? ☐ Yes ☐ No — Description of Property — Value of Property

CODE

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/Denv., P. Paraphernalia/ Equipment, S. Synthetic, U. Unknown, Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
D.U.I.		☐ Y ☒ N	316.193(1)(a)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	N/A	23037103		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☒ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

NOTICE TO APPEAR

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 MARCH Day 9TH Year 2023 Time 08:30 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: 02/16/2023

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. Signature

ADMIN

HOLD for other agency

☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other:

Intake Deputy I.D. # Pouch #

Signature of Arresting Officer: X

Name of Arresting Officer (Print): INV. A. SENTMANAT I.D. #: 24968

Transporting Officer: INV. A. SENTMANAT I.D. #: 24968 Agency: PBSO

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X"

PAGE 1 OF 1

PBSO #0148 REV. 11/22 DISTRIBUTION: COURT COPY STATE ATTORNEY AGENCY AGENCY DEFENDANT (N.T.A.'s ONLY)

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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 16TH DAY OF FEBRUARY 20 23, AT 01:52 ✓AM PM

SUBJECT: DA ROCHA, JEAN, MARIE CASE NUMBER: 23037103

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 Thursday February 16, 2023 at approximately 0150hrs I was traveling east bound on Southern Boulevard passing Jog Road, West Palm Beach, FL 33406 when I observed a 2023 red Toyota bearing Florida tag #28BSLD accelerating to 65MPH and then slow down to the speed limit of 45MPH. The vehicle nearly struck the median as it the Haverhill Road exit. As the vehicle was approaching Kirk Rd it swerved into the left turn lane and returned into its lane. The vehicle then accelerated to 70MPH as it passed Congress Avenue then slowed to 45MPH again. I activated my overhead emergency lights to conduct a traffic stop. The vehicle came to a stop on Southern Blvd and Gem Lake Dr. I made contact with the driver (and sole occupant of the vehicle) and identified her by her Florida drivers license as W/F Jean Marie Da Rocha (01/18/90).

OBSERVATION OF DRIVER:

Upon making contact with the defendant who was seated in the driver seat of her vehicle. I immediately smelled an obvious odor of an unknown alcoholic beverage coming from within the vehicle. As the defendant spoke with me I immediately smelled an obvious odor of an unknown alcoholic beverage coming from her breath. 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 step out of her vehicle and speak with me in front of my patrol car, as she stepped out of her 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. It should be noted that after the defendant was placed into my vehicle it quickly had an obvious 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. She stated she is not taking any prescribed medications. She stated she were on their way to home, from South Palm. Then she explained that she was on I-95 north bound and she was supposed to be heading south bound. She exited I-95 and got lost because of the GPS on her phone. I explained to her that I was behind her vehicle since Jog Road and that was quite a distance from I-95. As she spoke she was slurring some of her words. She stated she had not smoked marijuana or used any illegal drugs today. She stated had not drank any alcohol.

ODORS:

An obvious odor of an unknown alcoholic beverage coming from HIS/HER breath which intensified as HE/SHE spoke with me.

GENERAL OBSERVATIONS

SPEECH: **Slow and slurred at times.**

ATTITUDE: **Cooperative in the beginning and not cooperative once at the B.A.T.**

CLOTHING: **No shoes, greenish top and skit.**

MEDICAL/OTHER: **None.**

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 16th day of FEBRUARY 20 23 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

Madelin Gonzalez (#40577)
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

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

NOT A CERTIFIED COPY

SUBJECT: DA ROCHA, JEAN, MARIE CASE NUMBER 23037103

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- [x] 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 not to move her head a couple of times. I did not observe any vertical nystagmus in neither eye. She swayed from side to side throughout this process.

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, she did not count two sets of nine steps but continuously counted (which I did not demonstrate), made an improper tun. 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 was unsteady leaning to the right and used her arms for balance, miss counted, and did not look down at her foot at times.

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, or the side of the nose. I had to remind her to drop the hand the moment she touches the tip of the nose. I had to remind her to keep her eyes closed.

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 recite the Alphabet in a slow steady pace as instructed.

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BREATH TEST RESULTS: | 1) REFUSED | 2) REFUSED | 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 16th day of FEBRUARY 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

Madelin Gonzalez (#40577)
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: 23037103

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: _____

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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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: DA ROCHA, JEAN M

CASE NUMBER: 23-037103

DATE: Feb 16, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 02:29

ENDING TIME: 02:40

BREATH TESTS RESULTS: 1) R TIME 02:38 A.M. ☒ P.M. ☐ 2) N/A TIME N/A 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 TECHNICAN: J. KARLECKE# 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: PRONOUNED

ATTITUDE: CALM, POLITE, QUIET

CLOTHING: GREY DRESS, NO SHOES

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

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COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 02:05 HRS.

SUBJECT: STATED SHE WAS NOT SURE IF SHE UNDERSTOOD FORMAT QUESTIONS.

A/O: READ I/C AND EXPLAINED TWO TIMES
SUBJECT: STATED SHE DID NOT FULLY UNDERSTAND I/C ASK IF SHE HAD THE RIGHT TO AN ATTORNEY

SUBJECT: REFUSED TO TAKE TEST

A/O: READ RIGHTS
SUBJECT: STATED SHE UNDERSTOOD RIGHTS.

A/O: NO Q & A
SUBJECT: INVOKED RIGHT TO COUNSEL

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)_____

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SUBJECT: _____ CASE NUMBER: _____

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHAT? _____ WHEN? _____

DO YOU HAVE:

EPILEPSY? _____
GLASS EYE? _____
FALSE TEETH? _____
EAR INFECTION? _____
INNER EAR TROUBLE? _____
DIABETES? _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

INTERVIEWER: _____

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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	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2023004408	**Date:** 2/17/2023
	Specialist Name/ID: T.Howard/7185