25CT10823AMB

TN#0557600

2629

☐ 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

Juvenile: 1 — N

ADMINISTRATIVE

OBTS Number

Agency ORI Number: FL0 5 0 0 0 0 0

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 06-25-076570 ( )

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): WOODLAKE CIRCLE / WEDGEWOOD BLVD, CITY OF GREENACRES/FL/33463

Location of Offense (Business Name, Address): WOODLAKE CIRCLE / WEDGEWOOD BLVD, CITY OF GREENACRES/FL/33463

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
07/06/2025	0425					Priority Towing, 7153 Southern Blvd. WPB 33413, (561) 533-5573

DEFENDANT

Name (Last, First, Middle): Escalante, Jennifer,

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	7/14/1998	5'03	155	BRO	BRO	MED	MED

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): RIGHT LEG AND STOMACH

Marital Status: Single — Religion: NONE

Indication of: Alcohol Influence ☐ Y ☐ N ☐ Unk; Drug Influence ☐ Y ☐ N ☐ Unk

Local Address (Street, Apt. Number) (City) (State) (Zip): 69 N Stuart Cir, Greenacres, FL 33463

Mobile Phone: (561) 215 2973

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 02

Permanent Address (Street, Apt. Number) (City) (State) (Zip): ,

Phone: ( )

Address Source: FL DL

Business Address (Name, Street) (City) (State) (Zip):

Phone: ( )

Occupation: THERAPIST

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
E245420987540, FL	[redacted]		WEST PALM BEACH, FL	USA

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

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DRIVING UNDER THE INFLUENCE	1	☐ Y ☒ N	316.193(1)(c)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		25-076570		1,000

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 AUGUST Day 5 Year 2025 Time 01:00 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: 07/06/2025 FILED PBC - GUN CLUB 25 JUL 7 AM 8:30

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 Inv W Amadon #9440

Name of Arresting Officer (Print) I.D. #: INV. W. AMADON 9440

Transporting Officer I.D. # Agency: INV. W. AMADON 9440 PBSO

Name Verification (Printed by Arrestee) (PRINT)

JUL 6 AM 6:51

SCANNED

Witness here if subject signed with an "X"

PAGE 1 OF 1

JUL 07 2025

FBSO 10148 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 6 DAY OF JULY 20 25, AT 0404 ✓ AM PM

SUBJECT: Escalante, Jennifer, CASE NUMBER: 25-076570

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV. W. AMADON

PERSONAL CONTACT

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

On Sunday July 6th, 2025 while conducting traffic enforcement along Lake Worth Road west of S. 57th Avenue, I observed a White Toyota four door bearing Florida Tag "426YW" that I visually estimated to be in excess of the posted speed limit. While attempting to close distance and gain a radar reading, the car turned north on Woodlake Blvd from Lake Worth Road. Woodlake Blvd is a curved, windy residential roadway with a posted speed limit of 25 miles per hour. I had to accelerate rapidly to maintain a visual of the defendant's vehicle. My activated in car radar gave a steady doppler tone consistent with the excessive speed, followed by my confirming the target speed on the digital display of 58 miles per hour in a posted 25 zone. I then overtook the violators speed to close distance and initiated a traffic stop. I approached on the driver side and observed the defendant seated in the driver seat. She produced Florida Driver License E245420987540, and informed me she is the registered owner. An additional female was seated in the right front passenger seat. I did not identify her. There were no rear occupants.

OBSERVATION OF DRIVER:

I observed the defendant to be unsteady on her feet. I observed the defendant to have a noticeable orbital sway as she stood. I observed the defendant's clothing was properly worn. She was not wearing shoes. The defendant's eyes were red, and bloodshot. The defendant weaved as she walked from their vehicle to the front of mine. The defendant's movements were uncoordinated and unbalanced.

DRIVER'S STATEMENTS:

The defendant [redacted] The defendant said she went to a doctor last week for back pain and took two Percocet's as prescribed. The defendant knew the approximate time, and said she last ate around 10PM.

ODORS:

I immediately detected the odor of an unknown alcoholic beverage emanating from the defendant's breath that intensified when the defendant spoke. She was chewing gum, however both scents were present.

GENERAL OBSERVATIONS

SPEECH: **slow**

ATTITUDE: **polite / respectful / quiet**

CLOTHING: **BLACK TOP / BLACK SHORTS / WHITE SHOES (HEELS)**

MEDICAL/OTHER: **back pain from a years old car crash, treated by doctor**

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STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. W. AMADON Inv W Amadon #9440
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 6 day of JULY 20 25 by INV. W. AMADON

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

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

SUBJECT: Escalante, Jennifer, CASE NUMBER 25-076570

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 had a noticeable orbital sway during this task.

WALK & TURN:

The defendant was placed into the instructional stance for the Walk and Turn Task, and told to remain in that position until I told her to move. The defendant was given instructions and a demonstration. The defendant moved from the instructional position prior to me telling her to move. The defendant missed heel to toe. The defendant stepped off the line. The defendant took an incorrect number of steps. The defendant stopped walking. The defendant did not count aloud. The defendant performed an improper turn. The defendant used her arms for balance. The defendant had a noticeable orbital sway during this task.

ONE LEG STAND:

The defendant was placed into the instructional stance for the One Leg Stand Task, and told to remain in that position until I told her to move. The defendant was given instructions and a demonstration. The defendant moved from the instructional position prior to me telling her to move. The defendant used her arms for balance. The defendant swayed trying to maintain balance. The defendant did not look at her raised foot as instructed. The defendant had a noticeable orbital sway during this task.

FINGER TO NOSE:

The defendant was placed into the instructional stance for the Finger to Nose Task, and told to remain in that position until I told her to move. The defendant was given instructions and a demonstration. The defendant did not touch tip to tip as instructed. The defendant searched for her own nose with their finger. The defendant had a noticeable orbital sway during this task.

ROMBERG ALPHABET:

The defendant was placed into the instructional stance for the Romberg Alphabet Task, and told to remain in that position until I told her to move. The defendant was given instructions and a demonstration. The defendant correctly recited the alphabet.

NOT A CERTIFIED COPY

BREATH TEST RESULTS: | 1) 0.140 | 2) 0.136 | 3) | 4) |

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV. W. AMADON Inv W Amadon #9440
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 6 day of JULY 2025 by INV. W. AMADON

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

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: 25-076570

ARRESTING OFFICER: INV. W. AMADON

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

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

CAN TESTIFY TO: DUI INVESTIGATION

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: ESCALANTE, JENNIFER

CASE NUMBER: 25-076570

DATE: Jul 6, 2025

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 05:05

ENDING TIME: 05:17

BREATH TESTS RESULTS: 1) .140 TIME 05:11 A.M. ☒ P.M. ☐ 2) .136 TIME 05:14 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: SLURRED

ATTITUDE: CALM, QUIET

CLOTHING: BLACK SHORTS, BLACK LACE TOP, WHITE HEEL SANDALS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 04:43 HRS.

SUBJECT: ASKED IF SHE HAD TO TAKE TEST.

A/O: READ I/C
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: NO Q & A CONDUCTED

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PALM BEACH COUNTY
SHERIFF'S OFFICE
SHERIFF RIC L. BRADSHAW

DUI Breath Implied Consent

NOT APPLICABLE WITH VOLUNTARY CONSENT

DEFENDANT'S NAME: [redacted] CASE NO: 25-[redacted]

DATE OF ARREST: [redacted] TIME OF ARREST: [redacted]

I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.

Will you take the test? YES____ NO ✓

NOTE: *READ ONLY IF THE ANSWER TO THE ABOVE IS "NO"*

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 ✓ NO____

Do you still refuse to submit to this test? YES____ NO ✓

NOTE: *IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER LICENSE (CDL), READ THE FOLLOWING, REGARDLESS OF WHETHER THE SUBJECT IS OPERATING A COMMERCIAL MOTOR VEHICLE (CMV)*

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____ NO____

Do you still refuse to submit to this test? YES____ NO____

Date read: [redacted] Time read: [redacted] Location read: [redacted]

LAW ENFORCEMENT OFFICER NAME (printed): [redacted] ID: [redacted]

LAW ENFORCEMENT OFFICER SIGNATURE: [redacted]

WHITE: STATE ATTY. YELLOW: DHSMV PINK: CENTRAL RECORDS GOLD: JAIL

FORM #01268R REV 08/24

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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: _____ = 1440

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FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH COUNTY SO
Instrument Serial Number: 80-006239 Software: 8100.27
Date of Test: 07/06/2025

Date of Last Agency Inspection: 06/20/2025
Observation Period Began: 04:43
Subject's Name: JENNIFER ESCALANTE DOB: 07/14/1998 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	05:08
Air Blank	0.000	05:09
Control Test	0.079	05:09
Air Blank	0.000	05:10
Subject Sample #1	0.140	05:11
Air Blank	0.000	05:11
Air Blank	0.000	05:13
Subject Sample #2	0.136	05:14
Air Blank	0.000	05:15
Control Test	0.079	05:15
Air Blank	0.000	05:16
Diagnostics Check	OK	05:16

Cylinder Lot: 10124080A2
Exp: 06/05/2026

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 MADELIN 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: _____ Date: 07-06-25
Signature

Sworn to (or affirmed) before me this 06 day of July, 2025

_____ INV. W. AMADON
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.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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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)	
	☐	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	10-11
	☐	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	☐			
	☐			
	☐			
	☐			

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REVIEW COMPLETED BY

Booking Number: 2025017813	**Date:** 7/7/2025
	Specialist Name/ID#: C.Daniels 30347