24 CT 1377mb 00098406 915

☐ Marsy's Law CVI FL. Const. Art.1 § 16(b) ☐ Check if Supplement is Attached

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number | 1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias: 1 | Juvenile ☐

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number
FL0 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	0 6 - 24-028009

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)	Location of Offense (Business Name, Address)
2549 FLYING COW RANCH RD WELLINGTON FL 33414	2549 FLYING COW RANCH RD WELLINGTON FL 33414

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
01/24/24	1152					TOWED BY ROTATION

DEFENDANT

Name (Last, First, Middle): ~~KEITH~~ LAMOUREUX ~~PAUL~~ Keith PAUL ~~LAMOUREUX~~ — 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	M	10/05/1962	5'09"	215	BROWN	BROWN	FAIR	MEDIUM

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): None

Marital Status: Married — Religion: Catholic — Indication of: Alcohol Influence [Y] Drug Influence [N]

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Mobile Phone	Residence Type (1. City 2. County 3. Florida 4. Out of State)
5558 LAKE GENEVA DR	LAKE WORTH	FL	33461	561-507-3330	2

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
5558 LAKE GENEVA DR	LAKE WORTH	FL	33461	561-507-3330	DAVID

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
L562-515-62-365-0, FL	[redacted]		ATTLEBORO, MA	US

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)
				☐ 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 #	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
D.U.I.	1	☐ Y ☒ N	316.193(1) A		N	N		24-028009		$1000

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
		☐ Y ☐ N								

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
		☐ Y ☐ N								

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
		☐ Y ☐ N								

FILED PBC - GUN CLUB
'24 JAN 25 AM 7:18

NOTICE TO APPEAR

Location (Court, Room Number, Address): Criminal Justice Complex - 3228 Gun Club Road, West Palm Beach FL. 33406

Court Date and Time: Month 02 Day 22 Year 2024 Time 08:00 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

K P Lamoureux — 01/24/24
Signature of Defendant (or Juvenile and Parent/Custodian) — 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. Signature

ADMIN

HOLD for other agency: NONE

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Intake Deputy: [illegible] I.D. # [illegible] Bench #: [illegible]

Signature of Arresting Officer: X

Name of Arresting Officer (Print): HANNIGAN I.D. # 9674

Transporting Officer: HANNIGAN I.D. # 9674 Agency: PBSO

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X"

PAGE 1 OF 1

PBSO #0148 REV. 01/23 DISTRIBUTION: COURT COPY STATE ATTORNEY AGENCY AGENCY DEFENDANT (N.T.A.'s ONLY)

NOT A CERTIFIED COPY

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 24TH DAY OF JANUARY 20 24 , AT 1050 ☒ AM ☐ PM

SUBJECT: KEITH PAUL LAMOUREUX CASE NUMBER: 24-028009

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: HANNIGAN 9674

PERSONAL CONTACT

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

I observed a white ford pickup truck traveling south in the 2300 block of Flying Cow Ranch Rd. I visually estimated the ford truck to be traveling at 45 mph in a posted 30 mph zone. Using my LIDAR hand held device, I got a true vehicle speed of 47 MPH. I initiated my emergency lights in my marked green and white PBSO ford explorer to conducted a traffic stop. The white ford stopped in the 2500 block and pulled off the roadway and onto the grass shoulder. I walked to the drivers door and through the down window, I met with the sole occupant, the driver, who was identified by his FL drivers license as Keith P. Lamoureux 10/05/1962.

OBSERVATION OF DRIVER:

While speaking with Mr. Lamoureux and informing him of the reason for the stop, I asked him for his drivers license vehicle registration and insurance. He fumbled with his documents while trying to gather them. He had a difficult time retrieving his license from the inside of his wallet. with his license, he handed me his personal medical insurance card. I noticed his eyes were glassed over and red. While he was speaking to me, he kept belching in my face. Each time he belched, the smell of an unknown alcoholic beverage grew stronger.

DRIVER'S STATEMENTS:

He initially refused to perform roadside tasks, I reiterated to him that it could be used against him. after that he complied. He stated [redacted] He stated [redacted] He told me that [redacted] He said [redacted] While in the back seat of my car headed to the BAT, he said [redacted]

ODORS:

strong odor of a unknown alcoholic beverage emitting from his breath.

GENERAL OBSERVATIONS

SPEECH: **slurred, mumbled, spitting slight while speaking**

ATTITUDE: **cooperative but sometimes not**

CLOTHING: **white t shirt, blue jeans, brown boots above ankle**

MEDICAL/OTHER: **no medical issues, no hospital visits in the last 48 hours, no eye problems, no head injuries, no diabetes, no back issues.**

TATE OF FLORIDA
'OUNTY OF PALM BEACH

HANNIGAN 9674
ignature of Arresting/Investigative Officer)

ne foregoing instrument was sworn to or affirmed and subscribed before me this 24th day of January 20 24 by HANNIGAN 9674

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

otary Public, Clerk of Court, Officer (F S S 117 10

THOMAS HENRY LEAHEY
Notary Public - State of Florida
Commission # HH 408332
My Comm. Expires Jun 20, 2027
Bonded through National Notary Assn.

NOT A CERTIFIED COPY

SUBJECT: KEITH PAUL CASE NUMBER 24-028009

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:

he said he understood my directions but kept moving his head to track my pen multiple times. I informed him many times to stop moving his head. he had a slight sway back and forth and side to side. he only tracked to one side and wouldn't follow pen back to center without me having to remind him

WALK & TURN: SFST

I explained and demonstrated the instructions for the Walk and Turn Task for Mr. Lamoureux, whom advised he understood. During the task, Mr. Lamoureux was swaying in a side to side and in a front to back manner. Mr. Lamoureux was having trouble and could not maintain his balance. Mr. Lamoureux 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), performed an improper turn other than which was demonstrated, and stopped early before walking the second set of 9 steps. he had to be reminded that he was not finished.

ONE LEG STAND: SFST

I explained and demonstrated the instructions for the One Leg Stand Task for Mr. Lamoureux , whom advised he understood. During the task, Mr. Lamoureux was swaying in a side to side and front to back manner. Mr. Lamoureux used arms to balance by raising them over 6 inches. Mr. Lamoureux began hopping in an attempt to maintain balance. Mr. Lamoureux put his foot down numerous times to regain balance before the 30 seco time period had elapsed. Mr. Lamoureux also did not keep feet together, did not raise foot 6 inches above ground and sometimes higher. He did not point foot out, did not keep legs straight, did not look at elevated foot, did not count in appropriate manner (1001,1002,1003,etc.). Mr. Lamoureux stopped the task all together and refused to continue any further. Because Mr. Lamoureux was unstable on his feet i thought that In the best interest o Mr. Lamoureux I allowed him to sit on the tail gate of his vehicle to collect himself while i called for an additional unit before proceding again with the

FINGER TO NOSE: REFUSED

Once Mr. Lamoureux Refused the remaining tasks, D/S Ficarra 8368 explained Mr. Lamoureux Taylor Warnings which he stated he understood however still refused.

ROMBERG ALPHABET: REFUSED

Refused

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BREATH TEST RESULTS: 0.189 0.191

STATE OF FLORIDA
COUNTY OF PALM BEACH

HANNIGAN 9674
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 24th day of January 20 24 by HANNIGAN 9674

(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)

THOMAS HENRY LEAHEY
Notary Public - State of Florida
Commission # HH 408332
My Comm. Expires Jun 20, 2027
Bonded through National Notary Assn.

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

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PBSO CASE # **24-028009** PBSO ZONE **8-32**

AGENCY CASE # **N/A** CRASH CASE # **N/A**

TIME OF STOP/CRASH **1050** DATE **01/24/2024** DAY **Wednesday**

SUBJECT'S NAME **keith** (LAST) **PAUL** (FIRST) **LAMOUREUX** (MID)

DOB **10/05/1962** HGT **5'09"** WGT _____ RACE **W** SEX **M**

LOCATION **2549 FLYING COW RANCH RD** **WELLINGTON FL 33414**

ARRESTING OFFICER'S NAME & ID **HANNIGAN** **9674** **Palm Beach County Sheriff's Office** (AGENCY)

DIVISION: **Road Patrol**

NOTIFIED BY COMMO **1152**

BREATH RESULTS:

ARRIVAL AT FACILITY **1236**

ARREST TIME **1152**

1 .189
2 .191
3 N/A
4 N/A

Thomas Leahey **#19183**
BAT TECH. OFFICER NAME & ID

N/A
PBSO VIDEOTAPE #

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: Lamoureux, Keith P

CASE NUMBER: 24-028009

DATE: Jan 24, 2024

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 1259

ENDING TIME: 1320

BREATH TESTS RESULTS: 1) .189 TIME 1305 A.M.☐ P.M.☒ 2) .191 TIME 1308 A.M.☐ P.M.☒

3) n/a TIME 0 A.M.☐ P.M.☐ 4) n/a TIME 0 A.M.☐ P.M.☐

BREATH OPERATOR: Thomas H Leahey #19183

MAINTENANCE TECHNICAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: slurred, thick

ATTITUDE: talkative

CLOTHING: black jeans, white t-shirt, brown boots

MEDICAL CONDITIONS: none

MEDICATIONS: none

OTHER:

eyes are glassy & bloodshot
unknown odor of alcoholic beverage on breath
subject stated he drank 10 oz mixers - Q&A

COMMENTS:

arrived at center A/O conducted 20 minute observation period 1236 hrs

subject refused to perform breath test - I want a doctor present - what if i say no

A/O read I/C & CDL I/C & subject understood I/C

subject agreed to perform breath test

subject completed breath test

A/O read rights & subject understood rights

A/O conducted Q&A

subject answered questions

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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 CO SO
Instrument Serial Number: 80-006477 Software: 8100.27
Date of Test: 01/24/2024

Date of Last Agency Inspection: 01/12/2024
Observation Period Began: 12:36
Subject's Name: KEITH P LAMOUREUX DOB: 10/05/1962 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	13:03
Air Blank	0.000	13:04
Control Test	0.079	13:04
Air Blank	0.000	13:04
Subject Sample #1	0.189	13:05
Air Blank	0.000	13:06
Air Blank	0.000	13:08
Subject Sample #2	0.191	13:08
Air Blank	0.000	13:09
Control Test	0.078	13:09
Air Blank	0.000	13:10
Diagnostics Check	OK	13:10

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 THOMAS J ISAHEY, 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: T Isahey Date: 01/24/2024
Signature

Sworn to (or affirmed) before me this 24 day of January, 2024.

Signature of Notary Public-State of Florida

D/S T Hannigan # 9674
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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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? N/A

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? S 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? NO 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? NO

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? NO WHAT'S WRONG? /

DO YOU LIMP? NO DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? NO

WERE YOU IN AN ACCIDENT TODAY? NO

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? NO WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? NO WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? NO WHAT? _____ WHEN? _____

DO YOU HAVE:

EPILEPSY?	NO
GLASS EYE?	NO
FALSE TEETH?	NO
EAR INFECTION?	NO
INNER EAR TROUBLE?	NO
DIABETES?	NO

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? N/A

DO YOU TAKE INSULIN? NO IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? NO WHERE? MAD when 16

INTERVIEWER: J/C T Harrison #1624

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WITNESS LIST

CASE NUMBER: **24-028009**

ARRESTING OFFICER: **HANNIGAN**

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

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

CAN TESTIFY TO: **road side task, breath test and paper work.**

NAME: **D/S Ficarra**

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

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

CAN TESTIFY TO: **Taylor warnings, indicators of impairment**

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: _____

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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	5-6
	☐	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	☐			
	☐			
	☐			
	☐			

NOT A CERTIFIED COPY

REVIEW COMPLETED BY

Booking Number: 2024002219	**Date:** 1/25/2024
	Specialist Name/ID#: T.HOWARD/7185