24 CT 17093 - NB

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

☐ Check if Supplement is Attached

ARREST / NOTICE TO APPEAR

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

1

Juvenile ☐

ADMINISTRATIVE

OBTS Number

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
0501700	Jupiter Police Department	54 24-003370

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 UNARMED

Multiple Clearance Indicator

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
LONGSHORE DR/N CENTRAL BLVD, JUPITER FL	1 LONGSHORE DR/N CENTRAL BLVD, JUPITER, FL 33458

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
09/03/2024	00:47					

DEFENDANT

Name (Last, First, Middle): CHAPMAN, MALLORY LEE

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

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	01/30/1999	5'06	120	BLUE	BLACK	FAIR	SMALL

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description)

Marital Status: S

Religion: OTHER

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
9020 SE YACHT CLUB CIR, HOBE SOUND, FL 33455		1

Permanent Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
9020 SE YACHT CLUB CIR, HOBE SOUND, FL 33455	(553) 314-7412	VERBAL

Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation
MILLER`S ALE HOUSE, 126 CENTER ST, JUPITER		Server

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
C155552995300 / FL	[redacted]		STUART, FL, United States	US

CO-DEF

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

Co-Defendant Name (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

01 08

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: ☐ No A. N/A B. Buy T. Traffic P. Possess S. Sell R. Smuggle O. Deliver E. Use K. Disperse/ 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 #
DUI - CAUSING PROPERTY DAMAGE/PERSONAL INJURY	1	☐ Y ☒ N	316.193(3)(C)1	

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

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
					SEP 3 AM 2002

NOTICE TO APPEAR

Location (Court, Room Number, Address): North County Government Center PALM BEACH GARD

Court Date and Time: Month October Day 2 Year 2024 Time 8:30 (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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian) Date Signed 9/3/24

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. Signature

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Retained Arrest ☐ Suicidal ☐ Other

Intake Deputy I.D. # Pouch #

Signature of Arresting Officer 1275

Name of Arresting Officer (Print) I.D. # NIEVES, JUAN 1275

Transporting Officer I.D. # Agency N.Neves, Juan 1275 Jupiter PD

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X"

PAGE 1 OF 1

PBSO 10148 REV. 10/22

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P. I. O. ☐ DEFENDANT

055 2058

1490

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PROBABLE CAUSE AFFIDAVIT

OBTS Number:

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

JUVENILE: N

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FL FL0501700	JUPITER POLICE DEPARTMENT	5 | 4 | 24-003370

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
CHAPMAN, MALLORY LEE		W	F	01/30/1999

CHARGES

Charge Description	Charge Description
316.193(3)(C)1 DUI - CAUSING PROPERTY DAMAGE/PERSONAL	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
TOWN OF JUPITER,			

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
210 MILITARY TRL, JUPITER, FL 33458	(561) 746-6201	
Business Address (Name, Street) (City) (State) (Zip)	**Phone**	**Occupation**

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.

The Person taken into custody . . .

☐ committed the below acts in my presence.

☐ confessed to _____ admitting to the below facts.

☐ was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.

☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 3 day of September, 2024 at 02:12 (Specifically include facts constituting cause for arrest.)

On Tuesday, September 3rd, 2024 at approximately 0026 hours, I responded to the intersection of Longshore Dr/N Central Blvd in reference a grey Ford (FL tag #06CGFK) that was in the grass on the side of the road. The driver of the vehicle was accelerating attempting to get out of the grass. The vehicle had damage on the driver`s side and the front bumper was on the ground according to the caller.

Prior to my arrival, Sergeant Brandt was the first officer on-scene and located the aforementioned vehicle in the grass with damage to the front and driver-side of the vehicle. Sergeant Brandt had the female driver, later identified as the registered owner by her FL DL as Mallory Chapman (W/F 01/30/1999), take the keys out of the ignition and shut off the vehicle.

I met with Chapman who was sitting in the front driver`s seat. She stated she was driving and hit a curb while she was trying to take her friend, Heath Hirsch (W/M 02/25/1999) home. I observed that Chapman had glossy eyes, slurred speech and the odor of an unknown alcoholic beverage emanating off of her breath that intensifies as she spoke. I requested Chapman to exit the vehicle and when she did, she immediately turned around and placed her hands behind her back and stated, "I`ve been through this before." I advised her that I just requested her to exit the vehicle to speak with her. Chapman stumbled and was swaying back and forth while standing in front of me. After completing my crash investigation, I informed Chapman that I found her to have caused the crash based on the damages to her vehicle and nearby damage to a pedestrian sign. I read her Miranda Warnings and advised her the crash investigation was completed and I would be changing hats to a criminal DUI investigation. I requested Chapman to walk towards the sidewalk and she was stumbling around and almost fell multiple times. Chapman admitted to having drank two Corona beers at Johnny Mangos (local bar). Officer Noble asked her if she believed she drank too much tonight and probably should not have drove, to which she agreed profusely. While speaking with her, she kept swaying back and forth and was

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOBLE, RILEY 1226
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

09/03/2024
DATE

1275
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

NIEVES, JUAN (1275)
NAME OF OFFICER (PLEASE PRINT)

09/03/2024
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

ADMIN

OBTS Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	JUVENILE N

Agency ORI Number	Agency Name	Agency Report Number
FL FL0501700	JUPITER POLICE DEPARTMENT	5 | 4 | 24-003370

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
CHAPMAN, MALLORY LEE		W	F	01/30/1999

PROBABLE CAUSE STATEMENT

very incoherent.

Based on the aforementioned events, I requested Chapman submit to Standardized Field Sobriety Tasks, to which she understood and agreed to participate.

I first began with the Horizontal Gaze Nystagmus task. I instructed Chapman to stand with her feet touching (heel & toes) and to keep her arms down at her side to which she did while swaying back and forth. I demonstrated to Chapman that she would be following my stimulus (red light) with her eyes and her eyes only and to keep her head still at all times. Chapman stated she understood the instructions and was ready for me to continue. Chapman eyes had no resting nystagmus in either eye and both eyes tracked together equally. I observed lack of smooth pursuit in both eyes, distinct and sustained nystagmus at maximum deviation in both eyes, and onset of nystagmus prior to 45 degrees in both eyes. She did have vertical Nystagmus in both eyes. Multiple times throughout this task Chapman, moved her head and she was reminded to keep her head still. She was also swaying back and forth.

The second task was the Walk & Turn task. I demonstrated and instructed Chapman to stand on the bright red tape line on the sidewalk and to place her left foot onto the line and her right foot touching her left foot heel to toe with her arms at her side. Chapman attempted multiple times to get in the starting position, however, was unable to maintain it by swaying back and forth and loosing her balance almost falling. Due to Chapman not being able to maintain the starting position and almost falling over, I made the determination for her safety to not continue the remaining tasks as I was afraid she would hurt herself due to her high level of impairment.

Based on my investigation, observations, and totality of circumstances, I had probable cause to believe that Chapman was in actual physical control of a vehicle while under the influence of an alcoholic beverage, chemical, or controlled substance, to the point where her normal faculties were impaired, contrary to F.S 316.193. She was placed into handcuffs that were properly spaced and double-locked per department policy and placed into the rear of my patrol car at 0047 hours.

I then transported Chapman to the Palm Beach County Breath Alcohol Testing Center arriving at 0126 hours. I then conducted a 20-minute observation period were Chapman did not consume or regurgitate anything. I went on camera with BAT Technician Gonzalez #40577. I requested that Chapman submit to a lawful test of her breath to which she agreed. She subsequently provided two breath samples of .342 and .341. Post Miranda, Chapman answered all of my questions on my questionnaire form admitting again to drinking and driving and that she had way too much to drink tonight. She was then transported to Jupiter Medical Center for medical clearance per Palm Beach County Jail policy. After being medically cleared, she was transported and booked into the Palm Beach County Jail.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOBLE, RILEY 1226
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

09/03/2024
DATE

1275
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

NIEVES, JUAN (1275)
NAME OF OFFICER (PLEASE PRINT)

09/03/2024
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL FL0501700	JUPITER POLICE DEPARTMENT	5 | 4 | 24-003370

Charge Type: Check as many as apply.
☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
CHAPMAN, MALLORY LEE		W	F	01/30/1999

PROBABLE CAUSE STATEMENT

She was given a criminal court date of 10/02/2024, 0830 hours.

Chapman`s vehicle was towed from the scene by East Coast towing.

The above incident was captured on BWC. This narrative is a summary of the events and not purported to be verbatim.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOBLE, RILEY
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

09/03/2024
DATE

1275
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

NIEVES, JUAN (1275)
NAME OF OFFICER (PLEASE PRINT)

09/03/2024
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

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: 80-006029 Software: 8100.27
Date of Test: 09/03/2024

Date of Last Agency Inspection: 08/16/2024
Observation Period Began: 01:26
Subject's Name: MALLORY L CHAPMAN DOB: 01/30/1999 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	01:56
Air Blank	0.000	01:57
Control Test	0.080	01:57
Air Blank	0.000	01:58
Subject Sample #1	0.342	01:59
Air Blank	0.000	01:59
Air Blank	0.000	02:01
Subject Sample #2	0.341	02:02
Air Blank	0.000	02:03
Control Test	0.078	02:03
Air Blank	0.000	02:04
Diagnostics Check	OK	02:04

Cylinder Lot: 14323080A3
Exp: 09/05/2025

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 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: 09/03/24
Signature

Sworn to (or affirmed) before me this 03 day of September 2024

1275 OFC. J. NIEVES
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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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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WHITE: STATE ATTY. YELLOW: DHSMV PINK: CENTRAL RECORDS GOLD: JAIL

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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WITNESS LIST

CASE NUMBER: 24003370

ARRESTING OFFICER: Nieves

ADDRESS: 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME): _____ (WORK) 561-746-6201

CAN TESTIFY TO: PC

NAME: Officer Noble

ADDRESS: 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME) _____ (WORK) 561-746-6201

CAN TESTIFY TO: PC

NAME: Officer Maldonado

ADDRESS 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME) _____ (WORK) 561-746-6201

CAN TESTIFY TO: back-up officer

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: _____

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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	
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	
	☐	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: 2024023756	**Date:** 9/4/2024
	Specialist Name/ID#: T. Howard/7185