23CT 16150

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500400

Agency Name: Delray Beach Police Department

Agency Report Number (N.T.A.'s only): 4 0 23-011886

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: 3

Location of Arrest (Including Name of Business): 4999 W ATLANTIC AVE, DELRAY BEACH, FL

Location of Offense (Business Name, Address): 4999 W ATLANTIC AVE, DELRAY BEACH, FL 33445

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
09/07/2023	01:03	09/07/2023	01:13	09/07/2023	04:14	4999 W ATLANTIC AVE

DEFENDANT

Name (Last, First, Middle): CARBO, MARIA PATRICIA

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	06/03/1981	5'04	160	BROWN	BROWN	MEDIUM	MEDIUM

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

Marital Status: S

Religion: CHRISTIAN

Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. ☐ Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 14212 ENCLAVE PRESERVE CIR T2, DELRAY BEACH, FL 33486

Phone: (954) 899-5562

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

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 14212 ENCLAVE PRESERVE CIR T2, DELRAY BEACH, FL 33486

Phone: (954) 899-5562

Address Source: VERBAL

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

Phone:

Occupation:

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
C610555817030 / FL	[redacted]		GUAYAQUIL,ECUADO	EC

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 ☐ Other ☐ Legal Custodian — 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 Department and Released 2. TOT JAC 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 355-2526) informed of any change of address.

☐ Yes, by: ☐ No

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. Disperses/ 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 1

Charge Description: DUI BREATH ALCOHOL .08 OR MORE PER 210L

Statute Violation Number: 316.193(1)(C)

Violation of ORD #:

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE 2

Charge Description: VEH OPER/REVOKED/SUSP LICENSE 1ST OFFENSE

Statute Violation Number: 322.34(2A)

Violation of ORD #:

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE 3

Charge Description: DRIVING W/OUT INSURANCE

Statute Violation Number: 324.022

Violation of ORD #:

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

INTAKE

Health / Apparent Physical Condition of Defendant:

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries

Explain:

Check which applies: ☐ Released O.R. ☐ Posted Bond ☐ Released to Parent/Guardian ☐ South County Mental Health ☒ T.O.T. County Jail

PROPERTY - Received By: Released By: Released PBC - GUN CLUB

FILED 23 SEP 8 AM 7:44

Transported By: Date Transported: Time Transported: Other:

NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court

☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): South County 200 W Atlantic Ave Delray Beach, FL 33444

Court Date and Time: 10/05/2023 08:30:00

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

No Photo Available

ADMIN

HOLD for Other Agency:

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Signature of Arresting Officer:

Name of Arresting Officer (Print): WINDSOR, NICHOLAS I.D. #: 1029

Name Verification (Printed by Arrestee) (PRINT):

Intake Deputy: I.D. #: Pouch #:

Transporting Officer: WINDSOR I.D. #: 1029 Agency: DBPD

Witness here if subject signed with an "X".

PAGE 1 OF 1

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

SCANNED

NOT A CERTIFIED COPY

0543221

3055

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 7th DAY OF September 20 23, AT 0017 ☑AM ☐PM

SUBJECT: Carbo, Maria Patricia CASE NUMBER: 23-011886

AGENCY: DELRAY BEACH PD ARRESTING OFFICER: Windsor #1029

PERSONAL CONTACT

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

The following occurred in the City of Delray Beach, County of Palm Beach, FL.
On 09/07/23 at 0017hrs Ofc. Culberson #1135 DBPD observed a black 2022 Hyundai Tucson (FL Tag #QJXZ83) traveling westbound in the 4700 block of W. Atlantic Ave. without any lights illuminated. Ofc. Culberson activated his emergency lights and siren of his marked DBPD patrol vehicle. The Hyundai continued westbound on W. Atlantic Ave. not stopping for Ofc. Culberson. The Hyundai made a right turn (north) onto S. Military Trl. and made another left turn (east) into the parking lot of 4999 W. Atlantic Ave. Ofc. Culberson met with the white female driver and identified her by her FL DL as Maria Patricia Carbo. Carbo was sitting in the driver seat of the Hyundai with the vehicle engine running and had the vehicle key in her possession. There was nobody else inside the Hyundai. I arrived on scene to conduct a DUI investigation and confirmed Carbo's identity by her FL DL and DAVID record. Carbo's FL DL was currently suspended as of 03/30/23 for two financial responsibility cases. The Hyundai's registration was expired as of 06/03/23.

OBSERVATION OF DRIVER:

I smelled an odor of an unknown alcoholic beverage coming from Carbo. Carbo's eyes were red and had a glassy appearance. Carbo did not know the current time and was unaware she was driving without lights illuminated. Carbo spoke with an accent and her speech was slurred. Carbo was confused on the time frame for her night (arrival/departure times). After exiting the Hyundai, Carbo was unsteady on her feet and swayed in a circular motion while standing still.

DRIVER'S STATEMENTS:

Carbo denied having any medical conditions or taking any medications that would affect her ability to operate a motor vehicle. Carbo denied consuming any illegal drugs including marijuana. Carbo stated she consumed one vodka lemonade. Carbo initially stated she took her first drink between 2130hrs and 2200hrs. Carbo later stated she left her residence and arrived at Tin Roof (8 E. Atlantic Ave., Delray Beach, FL.) at 2230hrs. Carbo stated she finished her drink around 0010hrs and left Tin Roof twenty minutes prior to the traffic stop. Carbo stated her Hyundai had been in the shop for the past two weeks and tonight was the first time she drove the vehicle. Carbo stated she did not touch the headlight switch tonight since she left her residence to go to Tin Roof. Carbo stated she did not realize the Hyundai's lights were not illuminated while she was driving. Carbo stated she knew her FL DL was suspended because she was trying to pay her car insurance. Carbo stated she currently did not have any insurance on the Hyundai. I requested Carbo perform roadside tasks and she agreed to perform the roadside tasks.

ODORS:

I smelled an odor of an unknown alcoholic beverage coming from Carbo.

GENERAL OBSERVATIONS

SPEECH: Accent and Slurred

ATTITUDE: Polite and Cooperative

CLOTHING: Black Top and Blue Dress

MEDICAL/OTHER: None Stated

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 7th day of September 20 23 by Ofc. Windsor #1029

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Personally Known

Notary Public, Clerk of Court, Officer (F.S.S 117.10)

JOSHUA BELL
Notary Public - State of Florida
Commission # HH 418882
My Comm. Expires Jul 9, 2027
Bonded through National Notary Assn.

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SCANNED

SUBJECT: Carbo, Maria Patricia **CASE NUMBER** 23-011886

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:

Carbo had to be instructed to keep her head still several times.

WALK & TURN:

Carbo did not remain in the instructional phase position. Carbo used her arms for balance. Carbo did not touch heel to toe on several steps. Carbo stepped off the line to maintain her balance. Carbo took too many steps on each series of steps. Carbo did not turn around as instructed.

ONE LEG STAND:

Carbo used her arms for balance. Carbo did not count in the sequence I instructed. Carbo hopped up and down to aid in balance. Carbo put her foot down on the ground twice before the roadside tasks was completed.

FINGER TO NOSE:

Carbo missed the tip of her nose on several attempts. Carbo had to be instructed several times to bring her hand back down to her side after each attempt. Carbo raised her left hand when I instructed her to use her right hand. Carbo had to be instructed several times to keep her eyes closed.

ROMBERG ALPHABET:

Carbo could not perform a romberg alphabet or count a series of numbers due to a language barrier. Carbo performed a modified romberg roadside. Carbo stated 30 seconds had elapsed when the actual elapsed time was 21 seconds.

NOT A CERTIFIED COPY

BREATH TEST RESULTS: 1) .164 | 2) .167 | 3) | 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 7th day of September 20 23 by Ofc. Windsor #1029

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Personally Known

Notary Public, Clerk of Court, Officer (F.S.S 117.10)

JOSHUA BELL
Notary Public - State of Florida
Commission # HH 418882
My Comm. Expires Jul 9, 2027
Bonded through National Notary Assn.

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

PBSO CASE # 23-107651 PBSO ZONE 4-11

AGENCY CASE # 23-011886 CRASH CASE # N/A

TIME OF STOP/CRASH 0017 DATE 09/07/23 DAY THURSDAY

SUBJECT'S NAME CARBO, MARIA PATRICIA RACE W SEX F

HGT 5'04" WGT 160 DOB 06/03/81

LOCATION 4999 W ATLANTIC AVE, DELRAY BEACH, FL

ARRESTING OFFICER'S NAME & ID WINDSOR #1029 AGENCY DELRAY BEACH PD

DIVISION: CRD

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0129

ARREST TIME 0103

BREATH RESULTS:

1) .164
2) .167
3) —
4) —

TESTING OFFICER'S ID 8656 PBSO VIDEOTAPE # N/A

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: DBPD

SUBJECT: CARBO, MARIA PATRICIA

CASE NUMBER: 23-107651

DATE: Sep 7, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0153

ENDING TIME: 0204

BREATH TESTS RESULTS: 1) .164 TIME 0157 A.M. ☒ P.M. ☐ 2) .167 TIME 0200 A.M. ☒ P.M. ☐

3) XX TIME XX A.M. ☐ P.M. ☐ 4) XX TIME XX A.M. ☐ P.M. ☐

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: FAST

ATTITUDE: QUIET, COOPERATIVE

CLOTHING: BLACK SHIRT, BLACK SKIRT, NO SHOES

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: BLOODSHOT, GLASSY

COMMENTS:

A/O ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0129 HOURS

SUBJECT STATED SHE WOULD TAKE BREATH TEST

TECH READ BREATH TEST RESULTS
SUBJECT STATED SHE UNDERSTOOD BREATH TEST RESULTS

A/O READ RIGHTS
SUBJECT STATED SHE UNDERSTOOD HER RIGHTS

SUBJECT DECLINED TO ANSWER Q AND A

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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: 80-006029 Software: 8100.27
Date of Test: 09/07/2023

Date of Last Agency Inspection: 08/11/2023
Observation Period Began: 01:29
Subject's Name: MARIA P CARBO DOB: 06/03/1981 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	01:56
Control Test	0.079	01:56
Air Blank	0.000	01:57
Subject Sample #1	0.164	01:57
Air Blank	0.000	01:58
Air Blank	0.000	02:00
Subject Sample #2	0.167	02:00
Air Blank	0.000	02:01
Control Test	0.078	02:01
Air Blank	0.000	02:02
Diagnostics Check	OK	02:02

Cylinder Lot: 15922080A3
Exp: 08/05/2024

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: _____ Date: 09/07/23
Signature

Sworn to (or affirmed) before me this 07 day of September, 2023

_____ Ofc. N. Windsor #1029
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: 23-11866

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 ***BLOOD*** for the purpose of determining its alcohol content and/or 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***. 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: 93-11866

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: 23-011886

ARRESTING OFFICER: OFC. WINDSOR #1029 DBPD

ADDRESS: 300 W ATLANTIC AVE, DELRAY BEACH, FL 33444

PHONE NUMBERS (HOME): _____ (WORK) 561-243-7800

CAN TESTIFY TO: DUI PC

NAME: OFC CULBERSON #1135 DBPD

ADDRESS: 300 W ATLANTIC AVE, DELRAY BEACH, FL 33444

PHONE NUMBERS (HOME) _____ (WORK) 561-243-7800

CAN TESTIFY TO: TRAFFIC VIOLATION AND STOP

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: _____

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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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SCANNED

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	☐	FL CONNSTITUTION ARTICLE 1,16(b)	Other: MARSY'S LAW	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2023023529	**Date:** 9/8/2023
	Specialist Name/ID: Pinkneya/7796