50-2023-CT-011956 AMB

JH-0541749

P# 3423

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

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	Agency Name	Agency Report Number
FLO 5 0 2 6 0 0	PALM BEACH GARDENS POLICE DEPARTMENT	78 - 23003491

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

Weapon Seized / Type: 2 (1. Yes 2. No)

Multiple Clearance Indicator:

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
SUNSET DR/NORTHLAKE BLVD, PALM BEACH GARDENS, FL, 33410	N MILITARY TRL/NORTHLAKE BLVD, PALM BEACH GARDENS, FL, 33410

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
07/07/2023	23:51					KAUFF'S TOWING AND RECOVERY 4701 EAST AVENUE, WPB, FL 33407

DEFENDANT

Name (Last, First, Middle): STAFFORD, MARK, ANTHONY

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

Race (W - White I - American Indian, B - Black 0- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	02/09/1967	6'1	150	BLU	GRY	LGT	MED

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

Marital Status: SINGLE | Religion: NOT STATED | Indication of: Alcohol Influence Y ☑ N ☐ Unk. ☐; Drug Influence Y ☐ N ☐ Unk. ☑

Local Address (Street, Apt. Number) (City) (State) (Zip): 1514 WEST RD, LAKE PARK, FL 33403 | Phone: (561) 444-5829 | Residence Type. 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 1514 WEST RD, LAKE PARK, FL 33403 | Phone: | 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
S-316-541-67-049-0 FL	[redacted]		FORT LAUDERDALE, FL	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:

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 provided by ☐ defendant and / or ☐ defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) 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. Synthetics U. Unknown Z. Other

CHARGE 1

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DRIVING UNDER THE INFLUENCE OVER .08	1	☐Y ☒N	316.193(1)(C)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant I Capias Number	Bond
N	N	.188			O R

CHARGE 2

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DUI OVER .15	1	☐Y ☒N	316.193(4)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	.188			

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

FILED PBC - CLK CIR CT
23 JUL 24 P 12:21

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): NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700

Court Date and Time: Month AUGUST Day 9 Year 2023 Time 1000 AM X PM

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.

Mark Stafford — Signature of Defendant / Juvenile and Parent /Custodian | Date Signed: 07/07/2023

ADMIN

HOLD for other Agency Name:

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Intake Deputy I.D. # Pouch #

Signature of Arresting Officer X

Name of Arresting Officer (Print): A. FLINK | I.D. #: 514

Transporting Officer: OFC. FLINK | ID #: 514 | Agency: PBGPD

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an -X"

PAGE 1 OF 1

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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:

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FL FL0502600	Palm Beach Gardens Police Department	7 | 8 23-003491

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
SCOTFORD, MARK ANTHONY		W	M	04/14/1966

CHARGES

Charge Description	Charge Description
316.193(1)(C) DUI - BREATH .08 OR ABOVE	316.193(4) DUI - BRAC ABOVE .15
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
State Of Florida			

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source

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.

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

☐ confessed to _____ admitting to the below facts.

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

On the 7 day of July, 2023 at 23:35 (Specifically include facts constituting cause for arrest.)

On 07/07/2023 at approximately 2335 hours, this Officer arrived in the area of Sunset Dr and Northlake Blvd, PBG, FL, to assist Ofc Bitz 540 on a traffic stop. Body worn camera and in car video were used.

Ofc Bitz said he first observed the vehicle, a Honda Odessey (38ANLM/FL), in the area of N Military Trl and Northlake Blvd, PBG, FL, disobey a stop bar. Ofc Bitz advised he was in the inside left-hand turn lane of south bound N Military Trl to go east bound on Northlake Blvd, when the vehicle stopped well past the stop bar, in the outside left-hand turn lane. Ofc Bitz said the vehicle was passed the crosswalk and in the intersection. Ofc Bitz further stated when the light changed to green, the vehicle swung a wide left-hand turn and almost struck the outside curb. Ofc Bitz initiated a traffic stop on same at the location.

This Officer approached the open driver door, and made contact with the driver and sole occupant, identified via Florida Driver License photo, Mark Stafford (OF). This Officer observed Stafford to have red watery eyes, low heavy eyelids, flushed red face, slurred speech and the very strong obvious odor of an unknown alcoholic beverage emanating from his breath at conversational distance. Stafford said he was coming from "Patty Macs" and was on his way home. This Officer asked Stafford how much he had to drink this night, to which he replied "three Guinness". Stafford denied consuming narcotics and/or Cannabis on this night.

This Officer informed Stafford of the concern he was driving under the influence and asked him to exit the vehicle to participate in Standardized Field Sobriety Exercises, to which he complied. Stafford appeared uneasy on his feet and walked with an unsteady gait. Stafford said he did not have any medical conditions which would affect the exercises performed, aside from "bad balance".

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICIAL TITLE

07/08/2023
DATE

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

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

FLINK, ANDREW S (514)
NAME OF OFFICER (PLEASE PRINT)

07/08/2023
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 FL0502600	Palm Beach Gardens Police Department	7 | 8 | 23-003491

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
SCOTFORD, MARK ANTHONY		W	M	04/14/1966

PROBABLE CAUSE STATEMENT

The first exercise conducted, was the Horizontal Gaze Nystagmus. The stimulus used was a Streamlight Stylus with an illuminated red tip. Stafford had a lack of smooth pursuit in both eyes. Stafford was swaying back and forth and did not follow instructions. During each pass he would either not follow the stimulus all the way or he would move his head or lead the stimulus.

The second exercise conducted, was the Walk and Turn. The line used was a strip of yellow tape placed upon the pavement by this Officer. Stafford was unable to get into and maintain the starting position. He frequently lost his balance and almost fell to the ground. Out of a concern for Stafford`s safety, this Officer discontinued the exercise.

The third exercise conducted, was the Finger to Nose. During the exercise, the following was observed: The first command of Left, he missed his nose to the right side. The second command of Left, he pressed the left side of his nose. The second command of Right, he pressed the right side of his nose. The third command of Right, he missed to the right then pressed the right side of his nose. The third command of Left, he pressed the left side of his nose.

The fourth exercise conducted, was the Modified Rhomberg Balance. Stafford swayed back and forth and estimated the passage of 30 seconds in approximately 41 seconds.

The final exercise conducted, was the Rhomberg Alphabet. Stafford recited the alphabet A through I, paused then started over. Stafford recited the alphabet A through I then G, then started over again. Stafford recited the alphabet A through P, then said he could not remember the rest.

Based on this Officer`s observations, Stafford was placed under arrest at 2351 hours. At PBSO BAT this Officer requested Stafford provide a breath sample for the purpose of determining its alcohol content, to which he consented. At 0039 hours he blew .179 and at 0042 hours he blew .188.

Based on the results of the investigation, this Officer has probable cause to charge Mark Stafford with driving under the influence to the extent his normal faculties were impaired, with an unlawful breath alcohol content in violation of FSS 316.193(1)(C). The degree to which Stafford was impaired by alcohol was in violation of FSS 316.193(4).

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER PER F.S. 117.10

07/08/2023
DATE

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

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

FLINK, ANDREW S (514)
NAME OF OFFICER (PLEASE PRINT)

07/08/2023
DATE

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

PALM BEACH GARDENS POLICE DEPARTMENT
DUI TESTING FACILITY INFORMATION SHEET

PBSO Case #: 23-086766 PBSO Zone: 3-13

Agency Case #: 23003491 Crash Case #: _____

Incident Information:

Time of Stop/Crash: 2326 Date of Incident: 07/07/2023 Day: FRIDAY

Location of Incident: N MILITARY TRL/NORTHLAKE BLVD, PALM BEACH GARDENS, FL, 33410

Arrest Information:

Time of Arrest: 23:51 Date of Arrest: 07/07/2023 Day: FRIDAY

Location of Arrest: SUNSET DR/NORTHLAKE BLVD, PALM BEACH GARDENS, FL, 33410

Subject's Name: (L) STAFFORD, (F) MARK, (M) ANTHONY

DOB: 02/09/1967 Race: W Sex: M Height: 6'1 Weight: 150 Hair GRY Eye BLU

Address: 1514 WEST RD, LAKE PARK, FL 33403 Phone: (561) 444-5829

Arresting Officer's Name: A. FLINK ID#: 514

Agency: PBGPD Division: TRAFFIC UNIT ☐ **Marcy's Law CVI** FL. Const. Art. 1 § 16(b)

Breath Results

1) .179 at 0039 hrs.
2) .188 at 0042 hrs.
3) — at — hrs.
4) — at — hrs.

---BAT Use---

BAT Notified:	YES
Arrival Time at BAT:	0012
Subject Arrest Time:	23:51

Breath Test Operator: LEAHEY 19183
PBSO

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TESTING FACILITY TASK REPORT

AGENCY: PBG

SUBJECT: Stafford, Mark A

CASE NUMBER: 23-086766

DATE: Jul 8, 2023

VIDEO DVD NUMBER: n/a

BEGINNING TIME: 0035

ENDING TIME: 0042

BREATH TESTS RESULTS: 1) .179 TIME 0039 A.M. ☒ P.M. ☐ 2) .188 TIME 0042 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: calm, cooperative

CLOTHING: blue jeans, blue/red plaid s/s shirt, white sneakers

MEDICAL CONDITIONS: none

MEDICATIONS: none

OTHER:

eyes were glassy & bloodshot
odor of unknown alcoholic beverage on breath

COMMENTS:

arrived at center A/O conducted 20 observation period at 0012 hrs

subject agreed to perform breath test

subject completed breath test

A/O read rights & subject understood rights

tech read breath test results & subject understood breath test results

A/O did not conduct Q&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: 80-006477 Software: 8100.27
Date of Test: 07/08/2023

Date of Last Agency Inspection: 06/23/2023
Observation Period Began: 00:12
Subject's Name: MARK A STAFFORD DOB: 02/09/1967 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	00:37
Air Blank	0.000	00:38
Control Test	0.078	00:38
Air Blank	0.000	00:38
Subject Sample #1	0.179	00:39
Air Blank	0.000	00:40
Air Blank	0.000	00:41
Subject Sample #2	0.188	00:42
Air Blank	0.000	00:43
Control Test	0.078	00:43
Air Blank	0.000	00:44
Diagnostics Check	OK	00:44

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 THOMAS H LEAHEY, 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 Leahey Date: 07/08/2023
Signature

Sworn to ~~affirmed~~ before me this 08 day of July, 2023

Signature of Notary Public-State of Florida

Ofc A Flink #574
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: Stafford, Mark A 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: Ofc Flink 514

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SUBJECT: Stafford, Mark A 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 OFC FLINK of the PBGPD

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) Read on camera

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

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

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REVIEW COMPLETED BY

Booking Number: 2023017736	**Date:** 7/8/2023
	Specialist Name/ID: Pinkneya/7796