0550345
0441165

24CT12932

244

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

1 Juvenile N

ADMINISTRATION

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number
	FL0500300	BOYNTON BEACH POLICE DEPT.	34-24-010074

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)
100 N CONGRESS AVE, BOYNTON BEACH, FL 33436	100 N CONGRESS AVE, BOYNTON BEACH, FL 33436

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
07/11/2024	01:50					BECK'S TOWING

DEFENDANT

Name (Last, First, Middle): MOLL, MATTHEW SAM
Alias (Name, DOB, Soc. Sec. #, Etc)

W - White I - American Indian B - Black O - Oriental / Asian	Race	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
	W	M	10/25/1987	5'8	165	GREEN	BROWN	FAIR	MEDIUM

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) | Marital Status: Married | Religion: UNK. | Indication of: Alcohol Influence ☒ Y ☐ N ☐ Unk. Drug Influence ☐ Y ☒ N ☐ Unk.

Local Address (Street, Apt. Number) (City) (State) (Zip) | Phone ( ) - | Residence Type 1. City 3. Florida 2. County 4. Out of State: 3

Permanent Address (Street, Apt. Number): 4900 SW 188TH AVE SOUTHWEST RANCHES, FL 33332 (City) (State) (Zip) | Phone: (954)559-9877 | Address Source: FL DL

Business Address (Street, Apt. Number) (City) (State) (Zip) | Phone ( ) - | Occupation: RESTAURANT

DL Number, State	Soc. Sec. Number	INS Number	Place of Birth	Citizenship
M400-557-87-385-0 / FL	[redacted]		MIAMI, FL	YES

CO-DEF

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

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 561-355-2526) 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: S. Sell R. Smuggle K. Dispense/Distribute M. Manufacture Produce/Cultivate Z. Other | N. N/A B. Buy D. Deliver T. Traffic E. Use P. Possess

Drug Type: B. Barbituate H. Hallucinogen P. Paraphernalia/Equipment U. Unknown | N. N/A C. Cocaine M. Marijuana Z. Other | A. Amphetamine E. Heroin O. Opium/Deriv. S. Synthetic

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
DUI	1	☐ Yes ☒ No	316.193.1C	

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
-	-	-	24-010074		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐ Yes ☐ No		

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐ Yes ☐ No		

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐ Yes ☐ No		

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

NOTICE TO APPEAR

☐ Instruction No. 1 Mandatory Appearance in Court
☐ Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side.

Location (Court, Room Number, Address): South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444

Court Date and Time: Month JULY Day 22 Year 2024 Time 08:30 ☒ 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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian) | Date Signed

ADMIN.

HOLD for other Agency Name: | Signature of Arresting Officer | Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other: | Name of Arresting Officer (Print): ALEXIS | I.D. # 1105 | BU#

Intake Deputy I.D. # | Pouch # | Transporting Officer: ALEXIS | I.D. # 1105 | Agency BBPD | Witness here is subject Signed with an "X".

Page 1 OF 1

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FILED PBC - CIR CLUB
24 JUL 11 PM 03

JUL 11 AM 4:15

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 11 **DAY OF** July **2024 AT** 01:26 ☒ **A.M** ☐ **P.M.**

CASE #: 24-010074 **DEFENDANT:** MOLL, MATTHEW SAM

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATION OF DRIVER:

On the above date and time, I responded to the 100 block of N Congress Ave, Boynton Beach, Palm Beach County, FL, 33436, to assist BBPD Officer Colon ID 1156 on a traffic stop. Ofc Colon contacted and advised that he conducted the traffic stop on a white Toyota Avalon bearing FL tag I75AW, and the driver was showing signs of impairment.

On Arrival, I met with Ofc Colon, who advised that he was in the 4500 block of N Congress Ave, City of Boynton Beach, when he observed the above vehicle traveling southbound on Congress Ave at a high rate of speed. Ofc Colon advised that he caught up with the vehicle at the intersection of Gateway and Congress, at which time he started pacing the vehicle with his marked BBPD patrol vehicle, 4042. Ofc Colon advised that he paced the above vehicle traveling at 78 MPH in an area with a posted speed limit of 45 MPH. Ofc Colon advised that the vehicle came to a final stop at the 100 block of N Congress Ave, at which time he made contact with the driver, later identified via his FL DI as Matthew Moll, and a male front seat passenger. Ofc Colon advised that, upon speaking with the driver, he said he was on his way home after leaving a local bar. Ofc Colon advised that he noticed the driver had glassy eyes and slurred speech, then asked for my assistance with a DUI investigation.

I walked up to the driver's side of the vehicle when I immediately detected the odor of an unknown alcoholic beverage coming from the vehicle. I approached Moll when I noticed his eyes were red and glassy. Moll stated that he came from a local bar somewhere in Boynton Beach and was going to drop off the front passenger in Delray before heading home to Broward County. Moll was slurring his words and was reluctant to say which bar he was coming from. he eventually said that he came from a bar named "SCORES," which is a gentleman's club located in West Palm Beach.

Based on my suspicions that Moll was under the influence of an unknown alcoholic beverage, I asked him to exit the vehicle. When speaking to Moll outside the vehicle, I detected the strong odor of an unknown alcoholic beverage emanating from his breath. Moll stated that he had two alcoholic drinks, a drink mixed with vodka, and that his friend had more than him. Moll was asked on a scale of "1-10", "1" is sober, and "10" is highly intoxicated, which number he was, and he answered a "3." I then asked if he would agree to

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do the Standardized Field Sobriety Exercise (SFST) to dispel my suspicion that he was impaired, and he agreed. Moll stated he had no medical condition or disabilities.

SFST:

HGN: Moll was swaying side to side during the pen exercise and put his hand behind his hand, contrary to what was instructed.

HORIZONTAL GAZE NYSTAGMUS:

- ☒ Left eye does not follow smoothly
- ☒ Left eye prior to 45 degrees
- ☒ Distinct jerking in left eye at maximum deviation
- ☐ Vertical Nystagmus in left eye
- ☒ Right eye does not follow smoothly
- ☒ Right eye prior to 45 degrees
- ☐ Distinct jerking in right eye at maximum deviation
- ☐ Vertical Nystagmus in right eye

WALK AND TURN:

Instruction was provided and demonstrated to Moll, who stated he understood. Moll could not stand as instructed or hold his balance during the instruction phase. During the performance phase, Moll:

- Missed heel to toe on all but three steps
- took an incorrect number of steps after starting by counting from 2
- made an improper turn
- stepped off the line.

ONE LEG STAND:

Instruction was provided and demonstrated to Moll, who stated he understood. During the performance phase, Moll:

- was swaying while balancing
- put his foot down twice

Moll did not raise his foot at the height instructed.

FINGER TO NOSE:

Instruction was provided and demonstrated to Moll, who stated he understood. During the performance phase, Moll:

- Moll did not touch the tip of his nose as instructed
- and never return his hands to his side as instructed.

ROMBERG/ALPHABET:

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During this exercise, Moll estimated 18 seconds instead of 30.

Based on my investigation, Moll was arrested (handcuffed D/L and checked for spacing) for driving under the influence of alcohol. Moll was transported to the Palm Beach County BAT in my vehicle (905).

At the BAT, I conducted a 20-minute observation from 02:25 to 02:45 hours. Once completed, Moll was asked to provide a breath sample to determine the alcohol content, and he agreed.

Moll provided the first breath sample at 02:53 hours; the result was .135 g/210 L of breath. He provided the second breath sample at 02:56 hours; the result was .132 g/210 L of breath. Moll declined the Q/A's.

Moll, Matthew Sam was charged with DUI according to FSS 316.193.1C. Moll was processed and booked at the Palm Beach County Jail.

The following instrument was sworn to before me this 11 day of July 2024

By: Ofc V Alexis, 1105

Notary/Police Officer (F.S.S. 117.10)

1105

Signature of Arresting Officer

THOMASINA MILLER
Notary Public - State of Florida
Commission # HH 339641
My Comm. Expires Dec 7, 2026
Bonded through National Notary Assn.

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

PBSO CASE # 24-079563 PBSO ZONE 632

AGENCY CASE # 24-010074 CRASH CASE #

TIME OF STOP/CRASH 01:26 DATE 07/11/2024 DAY Thursday

SUBJECT'S NAME MOLL (LAST) MATTHEW (FIRST) SAM (MID)

DOB 10/25/1987 HGT 5'8" WGT 165 LBS RACE W SEX M

LOCATION 100 N CONGRESS AVE Boynton Beach, FL 33436

ARRESTING OFFICER'S NAME & ID Vladimir Alexis 1105 BBPD (AGENCY)

NOTIFIED BY COMMO yes

ARRIVAL AT FACILITY 02:25

ARREST TIME 01:50

BREATH RESULTS:

1) .135
2) .132
3) N/A
4) N/A

Thomasina Miller #41017

BAT TECH. OFFICER NAME & ID

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TESTING FACILITY TASK REPORT

AGENCY: BBPD

SUBJECT: MOLL, MATTHEW .S.

CASE NUMBER: 24-079563

DATE: Jul 11, 2024

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 02:48

ENDING TIME: 02:59

BREATH TESTS RESULTS: 1) .135 TIME 02:53 A.M. ☒ P.M. ☐ 2) .132 TIME 02:56 A.M. ☒ P.M. ☐

3) N/A TIME N/A A.M. ☐ P.M. ☐ 4) N/A TIME N/A A.M. ☐ P.M. ☐

BREATH OPERATOR: T. MILLER #41017

MAINTENANCE TECHNICAN: J. KARLECKE# 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: CALM

CLOTHING: BLACK SUIT JACKET, BLACK SUIT PANTS, BLACK LOAFERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: RED & GLASSY

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 02:25 HRS.

SUBJECT: AGREED TO TAKE TEST.

A/O: READ RIGHTS.
SUBJECT: STATED HE UNDERSTOOD RIGHTS.

TECH: READ TEST RESULTS.
SUBJECT: STATED HE UNDERSTOOD TEST RESULTS.

A/O: ATTEMPTED Q & A.
SUBJECT: REFUSED 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 CSO
Instrument Serial Number: 80-001741 Software: 8100.27
Date of Test: 07/11/2024

Date of Last Agency Inspection: 06/14/2024
Observation Period Began: 02:25
Subject's Name: MATTHEW S MOLL DOB: 10/25/1987 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	02:52
Air Blank	0.000	02:52
Control Test	0.079	02:52
Air Blank	0.000	02:53
Subject Sample #1	0.135	02:53
Air Blank	0.000	02:54
Air Blank	0.000	02:56
Subject Sample #2	0.132	02:56
Air Blank	0.000	02:57
Control Test	0.080	02:57
Air Blank	0.000	02:58
Diagnostics Check	OK	02:58

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

State of Florida, County of Palm Beach,

Personally appeared before me the undersigned authority, who (X) ~~is~~ personally known to me or (__) produced _____ as identification, and who after being placed under oath, states:

I THOMASINA E MILLER, 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: Thomasina Miller Date: 07/11/24
Signature

Sworn to (or affirmed) before me this 11 day of July, 2024

Signature of Notary Public-State of Florida

C.J.C. V. Alexis
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? _____

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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CASE #: 24-010074 **DEFENDANT:** MOLL, MATTHEW SAM

Arresting Officer: V. Alexis
Address: 2100 HIGH RIDGE ROAD, BOYNTON BEACH, FL 33426
Phone Numbers: Home: _____ **Work:** (561) 742-6100

Name: Ofc V. Colon
Address: Boynton Beach PD
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: _____
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: _____
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: 2024018653	**Date:** 7/11/2024
	Specialist Name/ID#: MTooks #8557