24CT2874 SB

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: 0502000	Agency Name: Lantana Police Department	Agency Report Number (N.T.A.'s only): 6 4 24-000760

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: 1

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
2000-BLK W LANTANA RD LANTANA FL, 2100 W LANTANA	2100 W LANTANA RD/INTERSTATE 95, LANTANA, FL 33462

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
02/15/2024	23:50	02/16/2024	00:00			PRIORITY TOWING

DEFENDANT

Name (Last, First, Middle): MENNINGMANN, MICHAEL N — 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	M	02/15/1981	6'00	235	BLUE	BLACK	LIGHT	Large

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description) — Martial Status: S — Religion — Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk; Drug Influence

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type (1 City 2 County 3 Florida 4 Out of State)
4327 EMERALD VIS, LAKE WORTH, FL 33461				(561) 460-2981	

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
4327 EMERALD VIS, LAKE WORTH, FL 33461				(561) 460-2981	

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

D/L Number, State	INS Number	Place of Birth (City, State)	Citizenship
M552554810550 / FL [redacted]		WEST PALM BEACH,	US

CO-DEF

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

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 O. Opium/Deriv M. Marijuana S. Synthetic P. Paraphernalia/ Equipment U. Unknown Z. Other

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
DUI-DRIVING UNDER THE INFLUENCE	316.193(1)(a	

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

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

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

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ 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. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By — Released By — Released To

Transported By — Date Transported — Time Transported — Other

FILED PBC - GUN CLUB--
'24 FEB 16 AM 5:32

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): 200 W Atlantic Ave, DELRAY BEACH
Court Date and Time: 03/11/2024 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 — Signature of Arresting Officer — Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Name of Arresting Officer (Print): TUANG, NGIN SIAN — I.D. #: 839

Intake Deputy — I.D. # — Pouch # — Transporting Officer: TUANG — I.D. #: 839 — Agency: LPD

Witness here if subject signed with an "X"

SCANNED

PAGE 1 OF 1

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

FEB 16 2024

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D.U.I. PROBABLE CAUSE AFFIDAVIT

On the 15th day of February 2024 at 2320 ☐ AM ☑ PM

Subject: Menningmann, Michael, Nicholas Case Number: Lantana PD 24-000760

Agency: *Lantana PD* Arresting Officer: N. Tuang 839

PERSONAL CONTACT

DRIVING PATTERN: (Actual Physical Control; Physical Evidence or Statements Putting Defendant Behind Wheel of Vehicle)

Ofc observed a vehicle, 2017 Sil Cadillac bearing FL tag# KDSN68 ran a red light at the intersection of W Lantana Rd/ Interstate 95, almost colliding with a vehicle directly in front of me. The vehicle the accelerated to 58 mph in 45 mph zone. I then initiated a traffic stop and made contact with the driver/ sole occupant of the vehicle, Michael Menningmann (DOB 02/15/81)

OBSERVATION OF DRIVER:

Upon contact I could smell strong odor of alcohol emitting from Menningmann. I also observed glassy eyes and noticed that he had slurred speech as well.

DRIVER STATEMENTS:

Menningmann denied wearing contacts, having diabetic and any other notable injuries. Menningmann advised he had head injury a long time ago.

ODORS: Unknown alcoholic beverages.

GENERAL OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Calm, argumentative.

CLOTHING: Black shirt, blue pants, gry shoes.

MEDICAL/OTHER:

STATE OF FLORIDA
COUNTY OF PALM BEACH

SIGNATURE OF ATTESTING OFFICER

The forgoing instrument was sworn to or affirmed and subscribed before me this 15th day of February 20 24 by N. Tuang 839 who is ☐ personally known to me or ☐ produced _____.

Notary Public, Clerk of Court, Officer (FSS 117.10)

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

SCANNED
STAMP FEB 16 2024

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D.U.I. PROBABLE CAUSE AFFIDAVIT Cont.

Subject: **Menningmann, Michael, Nicholas** Case Number: **Lantana PD 24-000760**

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

LEFT EYE	*RIGHT EYE*
☑ Lack of Smooth Pursuit	☑ Lack of Smooth Pursuit
☑ Distinct & Sust. Nystag. at Max. Deviation	☑ Distinct & Sust. Nystag. at Max. Deviation
☑ Onset of Nystagmus Prior to 45 Degrees	☑ Onset of Nystagmus Prior to 45 Degrees

Other Observations:

Sways during instructions and exercise.

Walk and Turn ☑

Menningmann refused to follow instructions during this exercise. Menningmann attempted to stand as instructed for a brief moment but became argumentative and refused to follow instruction. After multiple attempts, refusal was called.

One Leg Stand ☑

Refused.

Rhomberg ☑

Refused.

Finger to Nose ☑

Refused.

BREATH RESULTS: 1) Refused @ 0004 **2)** _____ @ _____ **3)** _____ @ _____ **4)** _____ @ _____

STATE OF FLORIDA
COUNTY OF PALM BEACH

SIGNATURE OF ATTESTING OFFICER

The forgoing instrument was sworn to or affirmed and subscribed before me this 15th day of February 20 24 by N. Tuang 839 who is ☐ personally known to me or ☐ produced _____.

Notary Public, Clerk of Court, Officer (FSS 117.10)

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

STAMP

SCANNED
FEB 16 2024

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STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST

I, **N. Tuang** (Name of Officer reading Implied Consent Warning), a duly certified Law Enforcement or Correctional Officer, am a member of **Lantana PD** (Name of Law Enforcement Agency), and I do swear or affirm that on or about the **15th** day of **February**, 20**24**, at **23:50** ☐P.M. ☐A.M.

DRIVER **Michael** (FIRST NAME) **Nicholas** (MIDDLE OR MAIDEN NAME) **Menningmann** (LAST NAME),

DL # **M552-554-81-055-0**, state of **Florida**, was placed under lawful arrest for the offense of **DUI** by **N. Tuang** (Name of Arresting Officer) and issued citation # **AHU9BCE**.

That on or about the **16th** day of **February**, 20**24**, at **0034** ☐P.M. ☐A.M.

in **PALM BEACH** County,

I requested that the driver submit to a **BREATH** test for the purpose of determining its alcohol content. I informed the driver that the refusal to submit to such test would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended, or if he or she had been previously fined under s. 327.35215, F.S., for refusing to submit to a breath, urine, or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended, or if he or she has been previously fined under s. 327.35215, F.S., for refusal to submit to a lawful test of his or her breath, urine, or blood. Nonetheless, the driver refused to submit to the test requested.

Signature of Law Enforcement Officer or Correctional Officer

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

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (s. 117.10, F.S.)

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title

Date

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this 15th day of **February**, 20**24**, by **N. Tuang**, who is personally known to me or who has produced KNOWN as identification.

Notary Public

Note: Mail or hand deliver to the designated Bureau of Administrative Reviews office, Department of Highway Safety and Motor Vehicles, with the driver's license, the appropriate copy of the UTC, and the probable cause affidavit.

EFFECTIVE OCTOBER 1, 2021

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SCANNED
FEB 16 2024

SUBJECT: Menningmann, Michael N 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) Read On Camera

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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SCANNED
FEB 16 2024

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

Lantana PD

DUI TESTING FACILITY INFORMATION SHEET

PBSO Case #: 24-034984 PBSO Zone: 4-11

Agency Case #: **Lantana PD 24-000760** Crash Case #: _____

Incident Information:

Time of Stop/Crash: **2320** Date of Incident: **02/15/2024** Day: **Thursday**

Location of Incident: **W Lantana Rd/ Interstate 95, Lantana FL**

Arrest Information:

Time of Arrest: **23:50** Date of Arrest: **02/15/2024** Day: **Thursday**

Location of Arrest: **2000-blk W Lantana Rd, Lantana FL 33462**

Subject's Name: (L) **Menningmann**, (F) **Michael**, (M) **Nicholas**

DOB: **02/15/81** Race: **W** Sex: **M** Height: **600** Weight: **235** Hair **Blk** Eye **Blu**

Address: **4327 Emerald Vis Lake Worth FL 33461** Phone: **(561) 460-2981**

Arresting Officer's Name: **N. Tuang** ID#: **839**

Agency: **Lantana PD** Division: **Road Patrol**

Breath Results

1) _____ at _____ hrs.
2) _____ at _____ hrs.
3) _____ at _____ hrs.
4) _____ at _____ hrs.

NOT USED

---BAT Use---

BAT Notified:	**2350**
Arrival Time at BAT:	**0009**
Subject Arrest Time:	**23:50**

Breath Test Operator: 8656

PBSO

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SCANNED
FEB 16 2024

SUBJECT: Memmingmann, Michael Nicholas 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. N. Tuong #839

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FEB 16 2024

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

PBSO #0129C REV. 9/93

TESTING FACILITY TASK REPORT

AGENCY: LPD

SUBJECT: MENNINGMANN, MICHAEL NICHOLAS

CASE NUMBER: 24-034984

DATE: Feb 16, 2024

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0034

ENDING TIME: 0040

BREATH TESTS RESULTS: 1) R TIME 0038 A.M. ☒ P.M. ☐ 2) XX TIME XX 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: SLURRED

ATTITUDE: ARGUMENTATIVE

CLOTHING: BLUE PLAID JACKET, BLACK TEE SHIRT, BLUE JEANS, GREY SHOES

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES:GLASSY

COMMENTS:

ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0009 HOURS

SUBJECT STATED HE WOULD NOT TAKE BREATH TEST

A/O READ I.C AND EXPLAINED
SUBJECT STATED HE UNDERSTOOD I.C
SUBJECT AGAIN STATED HE WOULD NOT TAKE BREAT TEST

REFUSAL TIME 0034

A/O READ RIGHTS
SUBJECT STATED HE UNDERSTOOD HIS RIGHTS

SUBJECT DECLINED TO ANSWER Q AND A

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FEB 16 2024

DUI WITNESS LIST

Lantana PD 24-000760

Arresting Officer: N. Tuang 839 Email: ntuang@lantana.org
Agency Address: 901 N 8th St Lantana, FL 33462 Phone: (561) 540-5701
Can Testify To: Facts of the case

Backup Officers: L. Murdock
Agency Address: 901 N 8th St, Lantana, FL 33462 Phone: (561) 540-5701
Can Testify To: Facts of the case

Crash Investigator: _____ Email: _____
Agency Address: _____ Phone: _____

Breathalyzer Technician: _____ ID: _____ Agency: PBSO

DRE: _____ ID# _____ Agency Case #: _____
Agency Address: _____ Phone: _____ Email: _____

Name: A. Morris Involvement: Back Up Officer
Address: 901 N 8th St Lantana FL 33462 Phone: (561) 540-5701
Can Testify To: Facts of the case. ☑ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____
Address: _____ Phone: _____
Can Testify To: _____ ☐ Wheel Witness

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FEB 16 2024

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: 2024004322	**Date:** 2/16/2024
	Specialist Name/ID#: A. Paniagua/42769

SCANNED
FEB 16 2024