50-2023-CT-015804 ASB

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

☐ Check if Supplement is Attached

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number

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

Juvenile: N

ADMINISTRATIVE

Agency ORI Number: FLO: 5 0 0 0 0 0

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 0 6 - 23-106505

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: n/a

Multiple Clearance Indicator: 01

Location of Arrest (including Name of Business): US 441 & OSPREY POND LN Boynton Beach, FL 33472

Location of Offense (Business Name, Address): US441 & OSPREY POND LN Boynton Beach, FL 33472

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
09/03/23	18:59 HRS					

DEFENDANT

Name (Last, First, Middle): Freeman Nathaniel Robert

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

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	07/15/1998	5'11	180	BROWN	BROWN	PALE	MEDIUM

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

Marital Status: Single — Religion: None

Indication of: Alcohol Influence Y ☒ N ☐ Unk ☐ — Drug Influence Y ☐ N ☒ Unk ☐

Local Address (Street, Apt. Number) (City) (State) (Zip): 10579 Regatta Ridge Rd Boynton Beach, FL 33473

Mobile Phone: 978-460-4889

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

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 10579 Regatta Ridge Rd Boynton Beach, FL 33473

Phone: 978-460-4889

Address Source: FL DL

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

Phone:

Occupation: IT TECH

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
F655636982550, FL	[redacted]		BOSTON, MASSACHUSETTS	USA

CO-DEF

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

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) 355-6511) 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: 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. Synthetic — U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
D.U.I.	1	☐ Y ☒ N	316.193(1)	

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

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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): South County Courthouse, Courtroom #1, 200 W. Atlantic Ave., Delray Beach, FL 33444 - Ph: (561) 355-2996

Court Date and Time: Month OCTOBER Day 5TH Year 2023 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: 09/03/23

FILED PBC - GUN CLUB - 23 SEP 4 AM 7:31

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 ☐ Suicidal ☐ Resisted Arrest ☐ Other:

Intake Deputy I.D. # Bench #

Signature of Arresting Officer: X

Name of Arresting Officer (Print): D/S K. BARRERAS I.D. # 36798

Transporting Officer: K. BARRERAS I.D. # 36798 Agency: PBSO

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X"

PAGE 1 OF 1

PBSO #0148 REV. 11/22 DISTRIBUTION: COURT COPY STATE ATTORNEY AGENCY AGENCY DEFENDANT (N.T.A.'s ONLY)

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1 of 1 CT

#1 of 1 CT

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 3rd DAY OF SEPTMEBER 20 23 , AT 18:49 ☐ AM ☒ PM

SUBJECT: Freeman Nathaniel Robert CASE NUMBER: 23-106505

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S K. BARRERAS 36798

PERSONAL CONTACT

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

I observed a white in color sedan traveling at a high rate of speed southbound on US441, just north of Osprey Pond Lane in the left lane. I visually estimated a speed of 80mph. I clocked the vehicle traveling 85mph in a 50mph zone using my stalker XLR Lidar laser (serial# 87027). I conducted a traffic stop and made contact with the driver, later identified as Nathaniel Freeman. Mr. Freeman was the sole occupant of the vehicle.

OBSERVATION OF DRIVER:

Upon making contact with Mr. Freeman, I immediately detected an obvious and strong odor of an unknown alcoholic beverage emitting from his vehicle. The odor intensified as I spoke to him. Mr. Freeman was agitated as to why I pulled him over. Mr. Freeman had Bloodshot, glassy, and watery eyes. Mr. Freeman

DRIVER'S STATEMENTS:

On scene Mr. Freeman advised he had a beer at the golf course.

Mr. Freeman consented to breath and after implied consent was read and explained, (suspect) advised (he/she) understood.

(suspect) (refused/consented) to participate in the Q&A.

ODORS:

Odor of unknown alcoholic beverage.

GENERAL OBSERVATIONS

SPEECH: **Loud and Fast. Rambling and Repetitive**

ATTITUDE: **Argumentative, Obnoxious**

CLOTHING: **Neat**

MEDICAL/OTHER: **Anxiety**

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STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S K. BARRERAS 36798
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this **3rd** day of **SEPTEMBER** 20 **23** by **D/S K. BARRERAS 36798**

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

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

MADELIN GONZALEZ
Notary Public
State of Florida
Comm# HH225716
Expires 2/7/2026

SUBJECT: Freeman Nathaniel **CASE NUMBER** 23-106505

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS / LIGHTED PEN STIMULUS TASK: SFST

☐ LT EYE-LACK OF SMOOTH PURSUIT

☐ RT EYE-LACK OF SMOOTH PURSUIT

☐ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

☐ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

☐ LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

☐ RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Red, glassy, watery.

WALK & TURN: REFUSED

Refused

ONE LEG STAND: REFUSED

Refused

FINGER TO NOSE: REFUSED

Refused

ROMBERG ALPHABET: REFUSED

Refused

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BREATH TEST RESULTS: 1) .025 | 2) .024 | 3) | 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S K. BARRER 36798
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 3rd day of SEPTEMBER 20 23 by D/S K. BARRER 36798

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

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

MADELIN GONZALEZ
Notary Public
State of Florida
Comm# HH225716
Expires 2/7/2026

WITNESS LIST

CASE NUMBER: 23-106505

ARRESTING OFFICER: D/S K BARRERAS #36798

ADDRESS: 3228 GUN CLUB RD, WEST PALM BEACH, FL, 33406

PHONE NUMBERS (HOME): _____ (WORK) 561-688-3400

CAN TESTIFY TO: TRAFFIC STOP, ARRESTING DEPUTY

NAME: D/S O. CHARELUS #39045

ADDRESS: 3228 GUN CLUB RD, WEST PALM BEACH, FL, 33406

PHONE NUMBERS (HOME) _____ (WORK) 561-688-3400

CAN TESTIFY TO: BACK-UP OFFICER

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

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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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TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: FREEMAN , NATHANIEL R

CASE NUMBER: 23-106505

DATE: Sep 3, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 20:21

ENDING TIME: 20:42

BREATH TESTS RESULTS: 1) .025 TIME 20:27 A.M. ☐ P.M. ☒ 2) .024 TIME 20:30 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: M. GONZALEZ #40577

MAINTENANCE TECHNICAN: J. KARLECKE# 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: PRONOUNCED

ATTITUDE: CALM, QUIET

CLOTHING: GREY SHORTS, BLUE SHIRT, WHITE SNEAKERS

MEDICAL CONDITIONS: ANXIETY

MEDICATIONS: EFFEXOR

OTHER:

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COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 19:40 HRS.

SUBJECT: AGREED TO TAKE TEST

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

A/O: ASK FOR URINE SAMPLE (20:32 HRS)
SUBJECT: AGREE TO PROVIDED URINE SAMPLE AT (20:33 HRS)

A/O: READ I/C
SUBJECT: STATED HE UNDERSTOOD I/C AND AGREED TO PROVIDE URINE SAMPLE (20:34 HRS)

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

A/O: CONDUCTED Q & A
SUBJECT: ANSWERED QUESTIONS

SUBJECT: PROVIDED A URINE SAMPLE AT 20:46 HRS
NO DRE CONDUCTED

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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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: 09/03/2023

Date of Last Agency Inspection: 08/11/2023
Observation Period Began: 19:40
Subject's Name: NATHANIEL R FREEMAN DOB: 07/15/1998 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	20:25
Air Blank	0.000	20:26
Control Test	0.078	20:26
Air Blank	0.000	20:26
Subject Sample #1	0.025	20:27
Air Blank	0.000	20:28
Air Blank	0.000	20:29
Subject Sample #2	0.024	20:30
Air Blank	0.000	20:31
Control Test	0.078	20:31
Air Blank	0.000	20:31
Diagnostics Check	OK	20:32

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 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: 09/03/23
Signature

Sworn to (or affirmed) before me this 03 day of September, 2023

_____ D/S K. BARRERAS
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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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	☒	316.650(b)	Other: Driver information contained in a uniform traffic citation.	10-11
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2023023208	**Date:** 9/4/2023
	Specialist Name/ID: R.Castro/40259