0506462 PCF3814 NH 1316

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Juvenile

OBTS Number

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 19051474

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) NONE

Multiple Clearance Indicator: 01

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
LAKE WORTH RD & PINEHURST DR, GREENACRES, FL 33467	LAKE WORTH RD & PINEHURST DR, GREENACRES, FL 33467

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
03/24/2019	03:08					PALM BEACH FINEST TOWING

DEFENDANT

Name (Last, First, Middle): RAY, ANGELICA, DEANN

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

Race (W - White I - American Indian B - Black O- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	03/16/1990	5'03"	100	BROWN	BLUE	LIGHT	SMALL

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description): NONE

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): 9762 QUINN COURT, WELLINGTON, FL 33414

Phone: (405) 513-4973

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

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 9762 QUINN COURT, WELLINGTON, FL 33414

Phone: (405) 513-4973

Address Source: DEFENDANT - VERBAL

Business Address (Name, Street) (City) (State) (Zip): N/A

Phone: ( ) N/A

Occupation: COCKTAIL WAITRESS

D/L Number, State: J[redacted], OK

Soc. Sec. Number: [redacted]

INS Number:

Place of Birth (City, State): SHAWNEE, OKLAHOMA

Citizenship: 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
				☐ 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 ( )

FOR

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

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
D.U.I.	01	☐Y ☑N	316.193(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant I Capias Number	Bond
N	N	N/A	19051474		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
& Controlled Substance POSSESSION OF ALPRAZOLAM	01	☐Y ☑N	893.13(6)(A)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
P	O	2 PILLS	19051474		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

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

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): CRIMINAL JUSTICE COMPLEX 3228 GUN CLUB ROAD, WEST PALM BEACH, FL 33406

Court Date and Time: Month APRIL Day 18TH Year 2019 Time 8:30 AM ✓ 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

Signature of Defendant (or Juvenile and Parent /Custodian) — Date Signed 03/24/19

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) I.D. #: D/S A. SENTMANAT 24968

Transporting Officer: A. SENTMANAT ID # 24968 Agency PBSO

Name Verification (Printed by Arrestee) (PRINT)

MAR 24 AM 8:39

Witness here if subject signed with an -X-

PAGE 1 OF 1

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PBSO #148 REV. 8/97

ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT

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

Juvenile

Agency ORI Number	Agency Name	Agency Report Number
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 19051474

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
RAY, ANGELICA, DEANN		W	F	03/16/1990

CHARGES

Charge Description		Charge Description	
D.U.I.	316.193(1)	POSSESSION OF ALPRAZOLAM	893.13(6)(A)
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 reasonable 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.
- ☐ confessed to _____ admitting to the below facts.
- ☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
- ☑ was found to have commited the below acts, resulting from my (described) investigation.

On the 24TH day of MARCH 20 19 at 02:49 ☑ A.M. ☐ P.M. (Specifically include facts constituting cause for arrest.)

SUPPLEMENTAL PROBABLE CAUSE AFFIDAVIT

After Angelica Ray (03/16/90) was arrested and provided two valid breath samples (0.170 and 0.174) she was secured in a holding cell. I completed the arrest paperwork and began inventorying the content of her wallet for the prisoner's personal property form. In the front part of her wallet were two peach colored oval pills imprinted with Xanax 0.5. I verified that the pill was a Xanax using Drugs.com.

Ray advised that she had a prescription for it but she did not have it with her. I explained to her that I as also arresting her for Possession of Alprazolam pursuant to 893.13(6)(a).

The pills were later placed into PBSO evidence.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

A. SENTMANAT #24968
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 24th day of March 20 19 by A. SENTMANAT #24968

(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced: SHARI J. O'NEAL

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

Notary Public - State of Florida
Commission # FF 966854
My Comm. Expires Jun 25, 2020
Bonded through National Notary Ass...

PAGE ____ OF ____

PBSO 90004 REV. 04/01 DISTRIBUTION: WHITE - COURT COPY GREEN - [illegible] PINK - AGENCY

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 24TH DAY OF MARCH 20 19, AT 02:49 ✓ AM PM

SUBJECT: RAY, ANGELICA, DEANN CASE NUMBER: 19051474

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: A. SENTMANAT #24968

PERSONAL CONTACT

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

On Sunday March 24, 2019 at approximately 0248hrs I was about to make a left hand turn from south bound Jog Road to easst bound Lake Worth Road in Greenacres, FL 33463 when a silver Jeep ran through the red light heading west bound on Lake Worth Road. I quickly caught up to the 2015 silver Jeep bearing Florida tag #KZMA24 and I activated my overhead emergency light to conduct a traffic stop. The vehicle came to a stop on Lake Worth Rd and Pinehurst Dr. Greenacres, FL 33467.

OBSERVATION OF DRIVER:

I made contact with the driver W/F Angelica Deann Ray (03/16/90). I immediately odor that Ray's eyes were glassy and watery. I smelled a strong odor of an unknown alcoholic beverage coming from her breath. In the center console of the vehicle in the cup holder was a "cooler" cup that had a clear/golden liquid inside of it. Later while doing the vehicle inventory I observed that the liquid had a strong odor of an unknown alcoholic beverage coming from it.

DRIVER'S STATEMENTS:

Ray advised that she had drank two martinis and later she stated that she had drank an unknown amount of vodka.

ODORS:

Ray had a strong odor of an unknown alcoholic beverage coming from her breath.

GENERAL OBSERVATIONS

SPEECH: **At times it was slow**

ATTITUDE: **Cooperative**

CLOTHING: **White slip dress**

MEDICAL/OTHER: **Partially deaf in the right ear and takes xanax**

STATE OF FLORIDA
COUNTY OF PALM BEACH

A. SENTMANAT #24968 A. Sent
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 24th day of March 20 19 by A. Sentmanat #24968

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

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

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # FF 956054
My Comm. Expires Jun 26, 2021
Bonded through National Notary

SUBJECT: RAY, ANGELICA, DEANN **CASE NUMBER** 19051474

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:

While checking Ray's HGN I observed her swaying side to side.

WALK & TURN:

While in the starting position Ray stumbled twice to the left and three times to right. She took eleven steps instead of the nine she was instructed to do so. On step four she stumbled slightly to the right. Ray did not take any heel to toe steps. Each step had a two to three inch separation and I explained again that I needed her heel to touch her toes. Ray then Slowly placed her foot in front of the other and briefly touched heel to toe than slid her foot forward.

ONE LEG STAND:

While explaining to Ray she was told not to start until she was told to and she said she understood. As I was demonstrating the task Ray lifted her leg. She lowered her left foot twice.

FINGER TO NOSE:

Ray started this task after being told not to start once. She missed twice with her left and right hands.

ROMBERG ALPHABET:

After giving Ray instructions for this task and her stating she understood she was told to start. As she recited the Alphabet she began walking heel to toe and at times walking normal. She reached H and said, I, I, and started again. When she got to T she said, U, N, and C.

BREATH TEST RESULTS: **0.170** **0.174**

STATE OF FLORIDA
COUNTY OF PALM BEACH

A. SENTMANAT #24968
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 24th day of March 2019 by A. Sentmanat #24968

(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)

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # FF 963954
My Comm. Expires Jun 28, 20[illegible]
Bonded through National [illegible]

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: 80-006240 Software: 8100.27
Date of Test: 03/24/2019

Date of Last Agency Inspection: 03/15/2019
Observation Period Began: 03:35
Subject's Name: ANGELICA D RAY DOB: 03/16/1990 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	04:00
Air Blank	0.000	04:01
Control Test	0.081	04:01
Air Blank	0.000	04:01
Subject Sample #1	0.170	04:02
Air Blank	0.000	04:02
Air Blank	0.000	04:04
Subject Sample #2	0.174	04:05
Air Blank	0.000	04:05
Control Test	0.081	04:06
Air Blank	0.000	04:06
Diagnostics Check	OK	04:06

Cylinder Lot: 00919080A3
Exp: 03/05/2021

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 SHARI L O'NEAL, 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: S. O'Neal Date: 03-24-19
Signature

Sworn to (or affirmed) before me this 24 day of March, 2019

C. S.
Signature of Notary Public-State of Florida

D/S Sentmanat #24968
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

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

PBSO CASE # 19051474 PBSO ZONE 16-11

AGENCY CASE # _____ CRASH CASE # _____

TIME OF STOP/CRASH 02:49 DATE 03/24/2019 DAY 07

SUBJECT'S NAME RAY, ANGELICA, DEANN RACE W SEX F

HGT 5'03" WGT 100 DOB 03/16/1990

LOCATION LAKE WORTH RD & PINEHURST DR, GREENACRES, FL 33467

ARRESTING OFFICER'S NAME & ID A. SENTMANAT #24968 AGENCY PBSO

DIVISION: 16

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 03:35

ARREST TIME 03:08

BREATH RESULTS: .170/.174

TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # N/A

WITNESS LIST

CASE NUMBER: 19051474

ARRESTING OFFICER: A. SENTMANAT #24968

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

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

CAN TESTIFY TO: DRIVING PATTERN, ROADSIDE TASKS, AND THE B.A.T.

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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PHONE NUMBERS (HOME) ____ (WORK) ____

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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: ____

TESTING FACILITY TASK REPORT

AGENCY: [illegible]

SUBJECT: [illegible] CASE NUMBER: [illegible]

DATE: [illegible] VIDEO TAPE NUMBER: [illegible]

BEGINNING TIME: [illegible] ENDING TIME: [illegible]

BREATH TESTS RESULTS: 1) [illegible] TIME [illegible] A.M./P.M. 2) [illegible] TIME [illegible] A.M./P.M.

3) _____ TIME _____ A.M./P.M. 4) _____ TIME _____ A.M./P.M.

BREATH OPERATOR: [illegible]

MAINTENANCE TECHNICIAN: [illegible]

TESTING OFFICER'S OBSERVATIONS

SPEECH: —

ATTITUDE: [illegible]

CLOTHING: [illegible]

MEDICAL CONDITIONS: [illegible]

MEDICATIONS: [illegible]

OTHER: [illegible]

COMMENTS: [illegible]

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

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 detecting the presence of chemical or controlled substances.

-OR-

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and 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 fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S 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)_____

SUBJECT: [illegible] CASE NUMBER: 19-[illegible]

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? Yes

WHERE WERE YOU GOING? Home

WHAT STREET OR HIGHWAY WERE YOU ON? No not familar with area

DIRECTION OF TRAVEL? — WHERE DID YOU START? —

WHAT TIME DID YOU START? — WHAT TIME IS IT NOW? —

WHAT IS TODAY'S DATE? Don't Know WHAT DAY OF THE WEEK IS IT? Sat. / Sun

WHAT COUNTY AND CITY ARE YOU IN NOW? Palm Beach

WHEN DID YOU LAST EAT? several hours ago WHAT DID YOU EAT? Brudo

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? —

HOW MUCH DO YOU WEIGH? 100 HAVE YOU BEEN DRINKING? yes WHAT? Vodka

HOW MUCH? Don't Know WHERE? 4 Seasons WITH WHOM? Friends

WHEN DID YOU HAVE YOUR FIRST DRINK? Don't Know AND YOUR LAST DRINK? Don't Know

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? —

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? NO ARE YOU UNDER THE INFLUENCE? NO

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? — HOW MUCH? —

WHAT? — WHERE? — WHEN? —

WHAT LINE OF WORK ARE YOU IN? Cocktail Waitress WHEN DID YOU LAST WORK? Fri

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? Yes WHAT? Partial Deaf right ear

ARE YOU SICK OR INJURED? NO WHAT'S WRONG? —

DO YOU LIMP? NO DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? NO

WERE YOU IN AN ACCIDENT TODAY? NO

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? NO WHEN? —

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? NO WHO? — WHY? —

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? Yes WHAT? Xanax WHEN? several hours ago

DO YOU HAVE:
- EPILEPSY? N
- GLASS EYE? N
- FALSE TEETH? N
- EAR INFECTION? N
- INNER EAR TROUBLE? Y
- DIABETES? N

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? NO

DO YOU TAKE INSULIN? NO IF SO, WHEN WAS YOUR LAST INJECTION? —

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? ~~Yes~~ OK WHERE? OK

INTERVIEWER: DS A. Spitfiniart 24968

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

PBSO #0129C REV. 9/93

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.	4
	☐	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	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2019009856	**Date:** 03/25/2019
	Specialist Name/ID: AM/31562