19CT20106 MB

| П | OBTS Number | | AR | | NOTICE 1 e Referral | | AR | | 1. Arrest 2. N.T.A. | _ | | t for Warrant t for Capias | 1 | Juv | enile N |
|----------|---|---|---------------------------------|-------------------------------|------------------------|--|--------------|-------------------------|------------------------|-------------------|-----------------------|--|----------------------|--|---------------------|
| ΨŽ | Agency ORI Number FLO 500000 | EACH COUNTY SHERIFF'S OFFICE | | | | Agency Report Number (N.T.A.'s only) 06- 19-131604 | | | | | | | | | |
| STRATI | ChargeType: 1. Felo check as many as apply. 2. Traffit | ny 🔲 | 3. Misdemear 4. Traffic Misc | or | 5. 0 | ordinance other | UE. | | leapon Se | ized / Ty | | | Mult | iple vance | 101 |
| DMINE | Location of Arrest (Including Name of 5985 PAPAYA RD W | of Rusiness\ | | | | Location | | nse (Busine AYA R | ess Name | | | ST PAL | Indi | cator | 01 |
| ľ | Date of Arrest | Time of Arrest | Booking Date | | oking Time | Jail Date | | Jail Time | La | | of Vehicle | | VI DE. | ACII, F | L 33413 |
| Н | Name (Last, First, Middle) LANKFORD | 1248 | COOPE | <u></u> | | | | Alias (N | lame, DO | | | DWING | | | |
| | Race | | of Birth | <u> </u> | HC Heigh | LLAN | LD Weight | - T | Eye Cok | or | Hair Col | or I Co | nolexion | Buil | d |
| | B - Black 0- Oriental/Asian Scars, Marks, Tatoos, Unique Physis | W M | Tura Danarink | 12/11/19 | 984 | 5-11 | | 225 | BROW | /N | BROV | WN LI | ĠĦŦ | | DIUM |
| | Local Address (Street, Apt, Number) | T COMMISS (LOCATION). | | | | | | Marital Stat. Single | | ONE | | Indication of Alcohol Influ Drug Influer | ence ce | è | 005 |
| Š | 593 MALCOLM CHANDLER | | WEST PA | LM B | EACH, | (Zip) FL 3340 | 1 | (703 |) 499-0 | 247 | | Residence To 1. City 2. County | 3. ₽ | lorida Out of State | 2 |
| DEFE | Permanent Address (Street, Apt. Num | iber) | (City) | | (State) | (Zip) | | Phone | i | | | Address Sou VERBAL | Ce | | |
| | Business Address (Name, Street) | | (City) | | (State) | (Zip) | 1 | Phone | ` | | | Occupation UNEMPI | OME | | |
| | D/L Number, State L-521-108-84-451-0 | Soc. | Sec. Number | | | INS N | umber | _![| | | ace of Birl | th (City, State |) | Cilize | nship |
| | Co-Defendant Name (Last, First, Midd | le) | | | | N/A Race | Sex | Date | of Birth | A | | DRIA, VA | | USA 3. Felony 4. Misdeme | |
| CO-DE | Co-Defendent Name (Last, First, Midd | le) | | | | Race | Sex | Date | of Birth | | □ 2. <i>1</i> | M Large | | 4. Misdeme 5. Juvenile 3. Felony | anor |
| 4 | _ Parent | | | | | <u> </u> | | Z | | | 2.4 | | 8 | i. Misdeme 5. Juvenile | enor |
| Ĺ | Legal Custodian Other: | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | (esiden | ce Pinone) | |
| | Address (Street, Apt. Number) | | ١ . | | | | | (State) | | (Z)p | o) | | usinesa ' | Phone | |
| MILE | Notified by: (Name) | | 7-7 | | Data | Tim | | Juver 1. Ha | nile Dispor | sition | within | 2. TOT HR | | | |
| JUVEN | Released To: (Name) | | | | Relationshi | | | Z 1 36 | nya. aitu ke | | | 3. Incarce | 2000 | Time | ,———— |
| | he above address provided by Lip keep the Juvenile Court Clerk (Pic | defendant and / or [one 365-2526) infor | defendant's p | arents The | child and / d | or parent wa | s told | Sci | hool Atten | ded | | | | Gra | de |
| H | Yes, by: (Name) roperty Crime? Description Yes No | | No: (R | eason) | | | | Val | lue of Prop | perty | | | | | |
| | rug Activity S. Sell R. S | imuggle K. Disp eliver Distr | | anufacture | / Z. Other | Drug Type N. N/A | | B. Barb | | н. н | affucinogs | in P.P | araphen | nelie/ U. | Unknown |
| ŭ | Possess T. Traffic E. U | ise List | | roduce/ ultivate Counts | Domestic | N. N/A A. Amphet Statute Vic | emine | C. Coce E. Hero | tine Hin | M. M O. O | lanjuana pium/Deri | v. S. S | quipmer inthetics | 1 | Other |
| <u> </u> | DRIVING UNDER THE INF | | Offense # | 01 | Violence □Y ■ N | 316.193 | (1)(4 | 5 | | | | | | olation of O | #D# |
| _ | N N N/A | Unit | 19-131604 | | | Warrant I (| apitas | Number | | | | | Bond | | |
| | harge Description | | | Counts | Domestic Violence | Statute Vic | plation | Number | | | | | V | iolation of (| ORD# |
| CHARGE | rug Activity Drug Type Amount / | Unit | Offense # 19- | | | Warrant / C | apias | Number | | | | | Bond | | |
| | narge Description | 7 | | Counts | Domestic Violence | Statute Vio | lation I | Number | | | | | Vi | plation of O | RD# |
| CHARGE | ug Activity Drug Type Amount I | Unit | Offense # | | OY ON | Warrant / C | apias I | Number . | | | | | Bond | | |
| ı c | narge Description | | 125- | Counts | Domestic Violence | Statute Vio | lation h | Number | | | | | ┰ | lolation of (| ORD# |
| | ug Activity Drug Type Amount / L | Jnit | Offense # | | DY DN | Warrant / C | Capias | Number | | | | | Bon | 4 | |
| I. | protion (Court Donn Number Address | · · | 19- | - | | <u> </u> | | <u> </u> | | | | | | | |
| | ALM BEACH COUNTY CO | URTHOUSE CR | IMINAL JU | STICE C | OMPLEX | , 3228 GU | IN CI | UB RD, | WEST | PALM | BEAC | H, FL 3340 | 6 - PH | I: (561) 3 | 55-2 996 |
| ŠM | outh Date and Time Onth NOVEMBER | Day 21 | Υ | _{'ear} 201 | 9 | | 8:30 | | | AM . | X | PI | vi | • | 1 |
| 2 P ' | GREE TO APPEAR AT THE TIME A | AS REQUIRED BY | THIS NOTICE | VER THE (| OFFENSE CH | HARGED OF AY BE HELD | TO P | AY THE FI | NE SUBS | CRIBED T AND A | . I UND WARRA | ERSTAND T | ARREST | OULD I WI | LLFULLY |
| 2 | Signature of Defendant (o | 221 r Juvenile and Parent | /Custodian) | | | | | 10, | /29/201 Det | 9 Signed | | | | 5 | 2016 |
| HC No | LD for other Agency | s | ignature of Arre | sting Office | <u> </u> | \geq | | Name | | • | | T°29 PM | 5:2 | | |
| | Dangerous Resisted Arres | | ame of Arrestin | g Officer (F | Print) | | D. # | PRIN | | | | | | | |
| Į, | Suicidal Other: | | S D'ANDR | | ID# | 29528 Ag | ency | _ | | | | | | J. | GE |
| J/5 | DISTRIBUTION: WHITE - CO | #7623 D | S D'ANDR | EA | 29528 | P LOW-AGEN | <u>BSO</u> | Witnes | - AGENCY | subject : | | th an -X" | (N.T. | | _{OF} 1 |
| 100 | M 1212 | | | 13 | | | S | SCA | M | ED | F | DEFENDANT | , | Ġ | |

D.U.I. PROBABLE CAUSE AFFIDAVIT

| ON THE 29 DAY OF | OCTOBER | _ 20 <u>19</u> , AT <u>12</u> | 16 | AM PM |
|--|---|--|---|-------------------------------|
| SUBJECT: LANKFORD | COOPER | HOLLAND | CASE NUME | BER:19-131604 |
| AGENCY: PALM BEACH COU | NTY SHERIFF'S OF | FFICE ARRESTII | | |
| | PER | SONAL CONTA | CT | |
| DRIVING PATTERN: <u>ACTUAL PH</u> | YSICAL CONTROL (PHYS | SICAL EVIDENCE OR ST | TATEMENTS PUTTIN | G DEF. BEHIND WHEEL OF VEHICL |
| THREE WITNESSES STATO MAINTAIN LANES, W STRIKING TWO MAIL BO | TED THAT HE HI ENT OVER SIDEN | T A CROSSWAL | K POLE, RAN | A RED LIGHT UNARIE |
| | | | <u></u> | O |
| OBSERVATION OF DRIVER: | | | | |
| Mr. Lankford appeared to be sometimes he would walk bath DRIVER'S STATEMENTS: I asked if the driver had bees smoke marijuana. I asked the | nckwards to maintai n drinking or used a ne driver what medic | in balance. any drugs, which lead problems and/ | ne stated that hi | s friend forced him to |
| stated none. I asked what me | edications he take a | nd he stated he tai | ces Lithium, Tri | leptal, and Zoloft. |
| NONE | | L OBSERVAT | ΓIONS | |
| SPEECH: slurred, thick, sl | | ···· | *************************************** | |
| ATTITUDE: calm, complian | | | | |
| CLOTHING: wearing green sho | orts and purple shirt | | | |
| EDICAL/OTHER: | | | • | , |
| TE OF FLORIDA | | · · · · · · · · · · · · · · · · · · · | | |
| UNTY OF PALM BEACH | | | | |
| D/S D'ANDREA ature of Arresting/Investigative Officer) | | | | |
| oregoing instrument was swom to or affirmed and subscri | bed before me this 29 day | OCTOBER | 20 19 by I | D/S D'ANDREA |
| name of Arresting/Investigative Officer), with its personal | y known to me and/or produced identif | fication. Type of identification prod | uced PBSO ID# 2952 | 8 |
| | BEVERLYSU | DE OWEN | | |
| y Public, Clerk of Court, Officer (F.S.S. 117.10) | MY COMMISSION EXPIRES: Ma | y 30, 2022 | | VINVED |
| Ŷ: | Bonded Thru Notary P | ublic Underwriters | | Office of the |

30 2019

ROADSIDE TASKS

| HORIZONTAL GAZE NYSTAGMUS: | |
|--|--|
| 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: | |
| Vertical Gaze Nystagmus lack of smooth pursuit in both e | |
| deviation, on set nystagmus prior to 45 degrees. would foll | low the tip of my index finger with entire head. |
| hands at his side and stay in this position until I instructed him to do otherwis watching his feet. On the ninth step he was to keep his front foot on the line a nine heel to toe steps the opposite direction counting out loud and watching hi way to complete the task. During the task, I observed the driver swayed while during entire exercise, stepped off the center line of the roadway and walked not turn properly(loses balance while turning(staggers or stumbles, turns other over and walk at the same time during the exercise, Could not perform task. ONE LEG STAND: I placed Mr. Lankford with his feet together and arms at his side. I dapproximately six inches off of the ground, point his toe towards D/S count out loud 1001, 1002, 1003 and so on until told to stop. I asked his After Mr. Lankford stated he understood my instructions, the task we observed he started too soon and swayed while standing stationary. W 30 seconds), would stumble backwards to maintain balance, could not FINGER TO NOSE: I placed Mr. Lankford with his feet together and arms at his side with light standing stationary. | in front of the left touching heel to toe. I instructed him that he was to keep his e. I instructed him to walk nine heel to toe steps counting out loud, while nd use his back foot, in a series of small steps, to turn around before walking s feet. I demonstrated the task while I was verbally instructing him in the proper balancing, started bo soon, stops walking to steady self, did not touch heel to toe parallel to the center of the roadway, Used arms to maintain balance (+6"), did er way than I explained.) Incorrect number of steps, he would crouch slouch demonstrated the task as I verbally instructed him to raise one of his feet Gubish's marked PBSO patrol vehicle, look at the raised foot, and im if he understood the instructions and demonstration I provided. as performed. While Mr. Lankford stood in the instructional position, I while raising his foot he swayed while balancing, put foot down (within the dottesk (put foot down three times). This index fingers pointed. I then instructed and demonstrated to Mr. explained to Mr. Lankford that when I tell him to bring the hand directly immediately bring his hand back down to his side. I then started the |
| touch the center of his nose and not the tip of his nose, opened eyes mul | ttiple times, would lean head forward instead of backwards. |
| ROMBERG ALPHABET: | |
| DID NOT PERFORM | |
| BREATH TEST RESULTS: 1) .000 2) .000 | 3) N/A 4) N/A |
| STATE OF FLORIDA COUNTY OF PALM BEACH | |
| D/S D'ANDREA (Signature of Arresting/Investigative Officer) | |
| The foregoing instrument was sworn to or affirmed and subscribed before me this 29 day of OCT | OBER 20 19 by D/S D'ANDREA |
| (Print name of Arresting/Investigative Offices), who is opening through the and the second of the se | EVERLY SUE OWEN |
| | MMISSION # GG 188278 PPIRES: May 30, 2022 |
| Materia Bublis / Plant of Court Offices (E.Q.S. 117.10) | hru Notary Public Underwriters SCANNED |
| | OCT 3 0, 2019 |

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

| NOTE: READ UNLY THE PARAGRAPH APPLICABLE TO THE TITE OF THE TOTAL TO THE TAREST TO THE PARAGRAPH APPLICABLE TO THE TITE OF THE TAREST TO THE TITE OF THE TAREST TO THE TITE OF THE TAREST TO THE TAREST TO THE TITE OF THE TAREST TO THE TAREST |
|---|
| I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol |
| contentOR- |
| I am now requesting that you submit to a lawful test of you URINE to 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 resul 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) 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. |
| You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning. |
| 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 |
| WHITE STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAÛ(T 3 () 2019 |

PBSO #0129B REV. 06/11

| 10 101 (NI |
|--|
| SUBJECT: Lankford, Cooper H CASE NUMBER: 19-13/604 |
| 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? ____

TESTING FACILITY TASK REPORT

AGENCY: PBSO CASE NUMBER 19-131604 SUBJECT LANKFORD, COOPER H DATE: 10/29/19 N/A VIDEO TAPE NUMBER ENDING TIME 1405 BEGINNING TIME: 1346 20.000 TIME 1354 TOME 1351 11 000 AM/PM BREATH TESTS RESULTS: N/A TIME XX TIME XX 30 N/A AM/PM BREATH OPERATOR: J. BELL #8656 MAINTENANCE TECHNICIAN: J. KARLECKE #6467 TESTING OFFICER'S OBSERVATIONS SPEECH: SLURRED, MUSHMOUTHED ATTITUDE: LETHARGIC, FIDGETY CLOTHING PURPLE TEE SHIRT, GREEN CARGO SHORTS, GREEN SNEAKERS MEDICAL CONDITIONS: MEDICATIONS: OTHER: PUPILS/EYES: DILATED, GLASSY SUBJECT KEPT STANDING DURING OBSERVATION, UNSTEADY ON HIS FEET COMMENTS: ARPIVED AT CENTER A/O BEGAN 20 MIN OBSERVATION AT 1319 HRS SUBJECT STATED HE WOULD TAKE BREATH TEST TECH READ BREATH TEST RESULTS AND EXPLAINED SUBJECT STATED HE UNDERSTOOD BREATH TEST RESULTS A/O REQUESTED A URINE SAMPLE SUBJECT ASKED WHAT WOULD HAPPEN IF HE REFUSED A/O READ I.C AND EXPLAINED SUBJECT AGREED TO PROVIDE URINE SAMPLE @1401 A/O READ RIGHTS SUBJECT STATED HE UNDERSTOOD HIS RIGHTS A/O CONDUCTED Q AND A SUBJECT ANSWERED QUESTIONS SUBJECT PROVIDED URINE SAMPLE @1407 SUBJECT AGREED TO SPEAK WITH A D.R.E. D.R.E. CONDUCTED BY DEPUTY WALTON PBSO WHITE SIXTE ALTY. OCT 3 0 2019 CHISSA SINCIPAL

WITNESS LIST

CASE NUMBER: 19-131604 ARRESTING OFFICER: D/S D'ANDREA ADDRESS: 3228 GUN CLUB RD WEST PALM BEACH, FL 33406 PHONE NUMBERS (HOME): ___ ____ (WORK) __(561)688-3000 CAN TESTIFY TO: FACTS OF CASE AND INVESTIGATING SUCH CASE **NAME: D/S WALTON #6942** ADDRESS: 3228 GUN CLUB RD WEST PALM BEACH, FL 33406 PHONE NUMBERS (HOME) _____ (WORK) <u>(561)688-3000</u> CAN TESTIFY TO: DRE SPECIALIST NAME: D/S GUBISH #32 ADDRESS 3228 GUN CLUB RD WEST PALM BEACH, FL 33406 PHONE NUMBERS (HOME) (WORK) <u>(561)688-3000</u> CAN TESTIFY TO: FACTS OF CASE AND TRANSPORTING NAME: EDWARD LYNCH ADDRESS 10269 TRIAYON PLACE WELLINGTON, FL 33449 PHONE NUMBERS (HOME) (561)445-3139 (WORK) CAN TESTIFY TO: WITNESS TO THE INCIDENT NAME: **JESSICA DORNBUASER** ADDRESS 136 MOHIGAN CIR BOCA RATON, FL 33487 PHONE NUMBERS (HOME) (561)302-2983 (WORK) (561)912-0410 CAN TESTIFY TO: WITNESS TO THE INCIDENT 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:



Palm Beach County Sheriff's Office - Arrests Only

| | х | Florida State Statute | Description | Page Number(s) |
|---|---|--|--|----------------|
| | | 119.071(2)(d) | Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations. | |
| ions | | 943.053, 943.0525 | NCIC/FCIC/FBI and in-state FDLE/DOC. | |
| L/E Exemptions | | 119.071(4)(c) | Undercover personnel. | |
| ι/E.E. | | 119.071(2)(f) | Confidential informants (CIs). | |
| | | 119.071(2)(e) | Confession. | |
| îns | | 985.04(1) | Juvenile offender records. | |
| mptio | | 119.071(h)(i) | Assets of a crime victim. | |
| Public Info. Exemptions | | 395.3025(7)(a), 456.057(7)(a) | Medical information. | 3,7 |
| blic In | | 394.4615(7) | Mental health information. | |
| Pu | | 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. | |
| | × | (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. | |
| of 23) | | (xii) 741.30(3)(b) | The victim's address in a domestic violence action on petitioner's request. | |
| (Rule | | (xiii) 119.071(2)(h), 119.0714(1)(h) | Protected information regarding victims of child abuse or sexual offenses. | |
| Florida Rules of Judicial Administration 2.420 (Rule of 23) | | er e | | |
| ıl Administr | | 71 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | | |
| es of Judicia | | and the second second | | |
| Florida Rul | | | | |
| | | | | |
| Ĕ | | | Other: | |
| Other | | | Other: | |

REVIEW COMPLETED BY

| Backing Number: 2010035147 | Date: 10/29/2019 |
|----------------------------|----------------------------------|
| Booking Number: 2019035147 | Specialist Name/ID: J. Beck/9007 |