

0499644

180912298

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-18094989	
Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 1. Yes 2. No NONE	
Location of Arrest (Including Name of Business) ROBERTS WAY & GINGER WAY, LAKE WORTH, FL 33463		Location of Offense (Business Name, Address) ROBERTS WAY & GINGER WAY, LAKE WORTH, FL 33463					
Date of Arrest 07/09/2018	Time of Arrest 03:22	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle CAMEL TOWING	
Name (Last, First, Middle) MENDEZ GALINDO, DAINELYS				Alias (Name, DOB, Soc. Sec. #, Etc.):			
Race W - White I - American Indian B - Black O - Oriental/Asian W	Sex F	Date of Birth 08/31/1979	Height 5'05"	Weight 168	Eye Color BROWN	Hair Color BLACK	Complexion TAN
Build MEDIUM				Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATTOOS - BACK		Marital Status SINGLE	
Local Address (Street, Apt. Number) 4380 NW 10TH ST APT 29		(City) MIAMI, FL 33126		(State) FL		(Zip) 33126	
Permanent Address (Street, Apt. Number) 4380 NW 10TH ST APT 29		(City) MIAMI, FL 33126		(State) FL		(Zip) 33126	
Business Address (Name, Street) N/A		(City) N/A		(State) N/A		(Zip) N/A	
DL Number, State M-532-160-79-811-0, FL		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) LA CENFUEGO, CUBA	
Citizenship CUBAN		Co-Defendant Name (Last, First, Middle)		Race		Sex	
Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile			
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth	
<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile					
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other:		Name (Last)		(First)		(Middle)	
Address (Street, Apt. Number)		(City)		(State)		(Zip)	
Residence Phone () () ()		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 provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> 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. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No. (Reason)				School Attended		Grade	
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property		Value of Property			
Drug Activity S. Sell N. N/A P. Possess		R. Smuggle D. Deliver E. Use		K. Dispense/ Distribute		M. Manufacture/ Product/Cultivate	
Z. Other		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 Description D.U.I.		Counts 01		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 316.193(1)	
Drug Activity N		Drug Type N		Amount / Unit N/A		Offense # 18094989	
Warrant / Capias Number		Bond					
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
Drug Activity		Drug Type		Amount / Unit		Offense #	
Warrant / Capias Number		Bond					
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
Drug Activity		Drug Type		Amount / Unit		Offense #	
Warrant / Capias Number		Bond					
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
Drug Activity		Drug Type		Amount / Unit		Offense #	
Warrant / Capias Number		Bond					
Location (Court, Room Number, Address) CRIMINAL JUSTICE COMPLEX 3228 GUN CLUB RD, WEST PALM BEACH, FL 33406							
Court Date and Time Month AUGUST Day 9TH Year 2018 Time 8:30 AM <input checked="" type="checkbox"/> 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] 7/9/18 Date Signed							
HOLD for other Agency Name:		Signature of Arresting Officer [Signature]		Name Verification (Printed by Arrestee) Dainelys Gomez			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) D/S A. SENTMANAT		I.D.# 24968	
Intake Deputy DSC/okis 2622		I.D.#		Pouch #		Transporting Officer A. SENTMANAT	
I.D.#		Agency PBSO		Witness here if subject signed with an -X- 1 OF 1			

0499694

13

SCANNED
JUL 17 2018

PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 NTA	3 Request for Warrant 4 Request for Copies	1	Juvenile	
ADMIN	OBTS Number	Agency ORI Number FLO 5 0 0 0 0 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 18094989		
DEF	Charge Type Check as many as apply: <input type="checkbox"/> 1 Felony <input type="checkbox"/> 2 Traffic Felony	<input type="checkbox"/> 3 Misdemeanor <input checked="" type="checkbox"/> 4 Traffic Misdemeanor	<input type="checkbox"/> 5 Ordinance <input type="checkbox"/> 6 Other	Special Notes SUPPLEMENT		
CHARGES	Name (Last, First, Middle) MENDEZ GALINDO, DAINELYS		Alias	Race W	Sex F	Date of Birth 08/31/1979
VICTIM	Charge Description DUI		Charge Description			
VICTIM	Victim's Name (Last, First, Middle) State of Florida		Race	Sex	Date of Birth	
VICTIM	Local Address (Street, Apt Number)		(City)	(State)	(Zip)	Phone
VICTIM	Business Address (Name, Street)		(City)	(State)	(Zip)	Phone
PROBABLE CAUSE STATEMENT	<p>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</p> <p><input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____</p> <p><input type="checkbox"/> confessed to _____ <input checked="" type="checkbox"/> that he/she saw the arrested person commit the below acts.</p> <p>admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>9th</u> day of <u>JULY</u> 20<u>18</u> at <u>0300</u> <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specify include facts constituting cause for arrest.)</p> <p>On 07/09/2018 at approximately 0258 hrs I observed a black four door vehicle traveling west on Lake Worth Rd and make a u turn at S 57th Ave. The vehicle was a black Chrysler 300 bearing Florida tag ITHW02. I followed the vehicle as it traveled east on Lake Worth Rd attempting to make stops at a few intersections. The vehicle made a right onto Roberts Way and Lake Worth Rd, Greenacres, FL 33463.</p> <p>I initiated my red and blue lights in my marked patrol vehicle at the intersection where the vehicle failed to stop for approximately 1/8 of a mile then came to rest at Ginger Way and Roberts Way. The driver was identified as W/F DAINELYS MENDEZ GALINDO 08/31/1979. Do to the language barrier, I contacted D/S Sentmanat 24968 for translation and assumed a Dui investigation.</p> <p>This ended my involvement in the case.</p>					
ADMINISTRATIVE	<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p>(Signature of Arresting/Investigative Officer) <u>[Signature]</u> 24984</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>9th</u> day of <u>JULY</u> 20<u>18</u> by <u>D/S NORRIS 24996</u></p> <p>(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>known</u></p> <p>Notary Public, Clerk of Court, or Notary (F.S. 117.10) <u>[Signature]</u> 24968</p>					
PAGE 1 OF 1						

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JUL 17 2018

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 9TH DAY OF JULY 20 18 AT 02:58 AM PM

SUBJECT: MELENDEZ GALINDO, DAINELYS CASE NUMBER: 18094989

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

PERSONAL CONTACT

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

On Monday July 9, 2018 at approximately 0258hrs I responded to Roberts Way and Ginger Way, Lake Worth, FL 33463 as a back-up deputy to a traffic stop. D/S A Norris had observed the driving pattern and conducted the traffic stop (see attached Supplemental Probable Cause Affidavit).

OBSERVATION OF DRIVER:

I approached the driver W/F Dainelys Mendez Galindo (08/31/79) and asked her where she was coming from. As Mendez was explaining that she was coming from a bar I immediately smelled a strong odor of an unknown alcoholic beverage coming from her breath as she spoke. I observed Mendez's eyes were watery and red. I asked her to exit the vehicle and she tried to turn off the ignition but activated the wipers. She attempted to open the door but lowered the window.

DRIVER'S STATEMENTS:

Mendez advised that she was returning from a bar but that she only had drank four beers and that she felt fine to drive.

ODORS:

Mendez had a strong odor of an unknown alcoholic beverage coming from her breath/person.

GENERAL OBSERVATIONS

SPEECH: Slightly slurred

ATTITUDE: Cooperative

CLOTHING: Blue tank top, blue jeans, and white sandals

MEDICAL/OTHER: None

STATE OF FLORIDA
COUNTY OF PALM BEACH

A. SENTMANAT

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 9th day of July 20 18 by A. Sentmanat

(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)



Samantha Palmer
Commission # FF172377
Expires: OCT 28, 2018
BONDED THRU
1ST FLORIDA NOTARY, LLC

SCANNED
JUL 17 2018

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|---|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT |
| <input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input checked="" type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input checked="" type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

Mendez kept moving her head to follow the pen after being told just to follow it with her eyes.

WALK & TURN:

Mendez stumbled out of the starting position several times and used the side of her vehicle to help her balance herself. On several steps she did not walk heel to toe. Mendez made an improper turn and was using her arms for balance. She also started this task once without being told to start.

ONE LEG STAND:

Mendez lifted her left leg and lowered it on counts one, seven, and again on one. After a couple of time of attempts she said that she could not do it.

FINGER TO NOSE:

Mendez started this task after being told not to start until she was instructed to. Mendez missed the tip of her nose on all attempt with her left and her right hand.

ROMBERG ALPHABET:

Mendez began reciting the Alphabet as such when she got to H she said J, K, J, and k.

BREATH TEST RESULTS: 1) 0.103 2) 0.098 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

A. SENTMANAT

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 9th day of July, 2018, by A. Sentmanat

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

Samantha Palmer
Notary Public, Clerk of Court, Officer (F.S.S. 1173)
Commission # FF172377
Expires: OCT 28, 2018
BONDED THRU
1ST FLORIDA NOTARY, LLC



SCANNED
JUL 17 2018

WITNESS LIST

CASE NUMBER: 18094989

ARRESTING OFFICER: A. SENTMANAT

ADDRESS: 3229 GUN CLUB ROAD, WPB, FL 33406

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

CAN TESTIFY TO: ROAD SIDES, AND BAT

NAME: D/S A, NORRIS

ADDRESS: 3229 GUN CLUB ROAD, WPB, FL 33406

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

CAN TESTIFY TO: DRIVING PATTERN AND TRAFFIC STOP

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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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: _____

SCANNED
JUL 17 2018

TESTING FACILITY TASK REPORT

AGENCY: PBSO/SENTMANAT

SUBJECT: MENDEZ GALINDO, DAINELYS

CASE NUMBER: 18-094989

DATE: Jul 9, 2018

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0431

ENDING TIME: 0442

BREATH TESTS RESULTS: 1) .103 TIME 0436 A.M. P.M. 2) .098 TIME 0439 A.M. P.M.
3) XX TIME XX A.M. P.M. 4) XX TIME XX A.M. P.M.

BREATH OPERATOR: S. PALMER #24520

MAINTENANCE TECHNICAN: J Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SPANISH SPEAKER

ATTITUDE: UPSET, CRYING, COOPERATIVE

CLOTHING: RED TANK TOP, BLUE JEANS, WHITE SANDALS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES GLASSY AND BLOODSHOT,

COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0405
SUBJECT AGREED TO TAKE BREATH TEST
AND PROVIDED TWO ADEQUATE BREATH SAMPLES SUCCESSFULLY
A/O READ RIGHTS
SUBJECT STATED SHE UNDERSTOOD RIGHTS
A/O READ TEST RESULTS
SUBJECT STATED SHE UNDERSTOOD RESULTS
A/O ATTEMPTED Q&A
SUBJECT REFUSED QUESTIONING

SCANNED
JUL 17 2018

SUBJECT: Mario J. Sanchez, Sheriff CASE NUMBER: 16-11142-1

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) Read on Camera **SCANNED**

JUL 17 2018

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

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: 80-006239 Software: 8100.27
Date of Test: 07/09/2018

Date of Last Agency Inspection: 06/22/2018
Observation Period Began: 04:05
Subject's Name: DAINELYS MENDEZ GALINDO DOB: 08/31/1979 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	04:34
	Air Blank	0.000	04:34
	Control Test	0.079	04:35
	Air Blank	0.000	04:35
	Subject Sample #1	0.103	04:36
	Air Blank	0.000	04:36
	Air Blank	0.000	04:38
	Subject Sample #2	0.098	04:39
	Air Blank	0.000	04:39
	Control Test	0.080	04:40
	Air Blank	0.000	04:40
	Diagnostics Check	OK	04:40

Cylinder Lot: 05218080A3
Exp: 05/05/2020

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 SAMANTHA M PALMER, 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 110-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____ Date: 7/9/18
Signature

Sworn to (or affirmed) before me this 9 day of July, 2018
Signature of Notary Public-State of Florida D/S Sentmanat
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.



Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential Informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2018022739	Date: 7/9/2018
	Specialist Name/ID: J. Beck/9007

SCANNED
JUL 17 2018